

Tajikistan Health Sector PETS 2006 Staff Questionnaire

Section 0: Preliminary information

	Name	Code
1. Enumerator		_ _ _
2. Supervisor		_ _ _
3. Data entry Operator		_ _ _
4. Oblast		_ _ _ _
5. Rayon		_ _ _ _
6. Jamoat		_ _ _ _
7. Name of the facility		_ _ _
8. Type of facility	Medical house/FAP = 1 SVA = 2 CRH = 3 Sub local clinic = 4 Polyclinic = 5 Oblast Hospital = 6 Maternity Hospital = 9 Other: _____ = 10	_
9. Name of Health Worker		_ _ _

	Date of Visit	Day	Month	Year	Time at start of Interview hh: mm	Result
10. First Visit	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ : _ _ _	_
11. Second Visit	_ _ _	_ _ _	_ _ _	_ _ _	_ _ _ : _ _ _	_

	Supervision	Day	Month	Result	Survey Results
12. Confirmation	_ _ _	_ _ _	_ _ _	_	Questionnaire completed = 1 Incomplete questionnaire = 2 Temporary Absence = 3
13. Completion of interview	_ _ _	_ _ _	_ _ _	_	
	Data Entry Section	Day	Month	Result	Prolonged absence = 4 Unavailability = 5 Refusal to answer = 6
14. Date of data entry	_ _ _	_ _ _	_ _ _	_	

Section I : Information on you, your formation and your family

1.	Gender of staff? (DO NOT ASK THE QUESTION)		Male = 1 Female = 2	_	
2.	What is your current age?			_ _	
3.	What is your marital status?	Married=1 Divorced=2 Widow= 3 Single = 4		_	
4.	Do you have children?	Yes = 1 No = 2	_		If No → 6
5.	How many children do you have?			_ _	
6.	What is your primary position in this facility?	Head Physician = 1 Deputy Head Physician = 2 Head of Department = 3 Doctor = 4 Administrative in-charge = 5 Nurse = 6 Feldsher = 7 Technician = 8 Administrative staff = 9 Other (Specify) _____ = 10		_	
7.	What is the highest level of education that you attained?	Primary education = 1 Basic education = 2 Secondary general education = 3 Vocational college = 4 Unfinished higher education institution = 5 Higher education institution = 6 Scientific Degree = 7 Other (Specify) _____ = 8		_	
8.	Did you receive any medical education?	Yes = 1 No = 2	_		If No → 12
9.	How many years of medical education did you receive?			_ _ _	
10.	In which year you did finish your medical education?			_ _ _ _	
11.	Which qualification did you obtain?	General Doctor = 1 Medical Specialist = 2 Pharmacist = 3 Laboratory personnel with higher education = 4 Laboratory technician = 5 Nurse = 6 Feldsher = 7 Other (Specify) _____ = 8		_	

12.	When did you start working in the health sector?	(a)	Year	_ _ _ _
		(b)	Month	_ _
13.	When did you join this facility?	(a)	Year	_ _ _ _
		(b)	Month	_ _
14.	Who hired you for this facility?	MoH = 1 Oblast Administration = 2 Rayon Administration = 3 Jamoat Administration = 4 CRH head doctor = 5 Head Doctor of facility = 6 Other (Specify) _____ = 7 Don't Know = 8		_ _
15.	What are the main reasons you chose to become a health professional?	Good employment opportunities = 1 Good income opportunities = 2 Desire to help people = 3 Not a choice/just happened = 4 Other (specify) _____ = 5		_ _
16.	Were you born in this area?	Yes = 1		_ _
17.	Does your family live in this area?	No = 2		_ _

Section II: Information on your work and your habitat

Wages and other sources of income.

1.	Who pays your salary?	Ministry of Health = 1 Oblast Administration = 2 Rayon Administration = 3 Jamoat Administration = 4 CRH head doctor = 5 Head Doctor of facility = 6 Accountant = 7 Other (Specify) _____ = 8 Don't Know = 9	<input type="text"/>	
2.	Which job category are you in?	Highest Category = 1 First Category = 2 Second Category = 3 No Category = 4 Don't Know = 5	<input type="text"/>	
3.	Do you hold more than one stavka in this facility?	Yes = 1 No = 2	<input type="text"/>	If No → 7
4.	How many stavkas do you hold in this facility?	<input type="text"/> • <input type="text"/>		
5.	Did you receive the salary for all your stavkas?	Yes = 1 No = 2	<input type="text"/>	
6.	Who allocated you extra stavkas?	Ministry of Health = 1 Oblast Administration = 2 Rayon Administration = 3 Jamoat Administration = 4 CRH head doctor = 5 Head Doctor of facility = 6 Other (Specify) _____ = 8 Don't Know = 9	<input type="text"/>	
7.	Who normally allocates extra stavkas to the staff?	Ministry of Health = 1 Oblast Administration = 2 Rayon Administration = 3 Jamoat Administration = 4 CRH head doctor = 5 Head Doctor of facility = 6 Other (Specify) _____ = 8 Don't Know = 9	<input type="text"/>	
8.	Do you feel like extra stavkas are equitably distributed in this facility?	Yes = 1 No = 2	<input type="text"/>	
9.	For 2005, could you please tell us what was your base salary after taxes? (in Somoni)	<input type="text"/> <input type="text"/> <input type="text"/>		

10.	For 2005, could you please tell us the total annual amount of allowances, you were entitled to? (in Somoni)		_ _ _ _ _ _ _	
11.	For 2005, could you please tell us the amount of supplements (<i>single mother, hardship, other</i>) you were entitled to? (in Somoni)		_ _ _ _ _ _ _	
12.	For the last three months of 2005, could you please tell us the total salary you received including all benefits (allowances, supplements, bonuses)? (<i>Somoni</i>)	(a) October	_ _ _ _ _ _ _	
		(b) November	_ _ _ _ _ _ _	
		(c) December	_ _ _ _ _ _ _	
13.	What is the monthly salary you would consider to be fair for your work in this facility?		_ _ _ _ _ _ _	
14.	Do you usually receive your salary on time?	Always or most of time = 1 Sometimes = 2 Rarely or very rarely = 3	_ _	
15.	Do you usually receive your salary on its entirety?	Yes = 1 No = 2	_ _	
16.	Did you receive the totality of all 12 months salary in 2005?	Yes = 1 No = 2	_ _	If Yes → 19
17.	How many months of salary did you receive in 2005?		_ _ _ _	
18.	If you did not receive your salary entirely in 2005, did you receive it for the months in arrear?	Yes = 1 No = 2	_ _	
19.	How much did you receive, on average per month, from the following sources in 2005?		(Somoni)	
(a)	Subsidies/per-diems for missions		_ _ _ _ _ _ _	
(b)	Performance bonuses from facility management		_ _ _ _ _ _ _	
(c)	Gifts in-kind (food and drugs) from the facility		_ _ _ _ _ _ _	
(d)	Gifts in-kind and other direct payments from patients		_ _ _ _ _ _ _	
(e)	Subsidies from NGOs		_ _ _ _ _ _ _	
(f)	Subsidies from external Donors		_ _ _ _ _ _ _	
(g)	Subsidies from the Community		_ _ _ _ _ _ _	
(g)	Other_(Specify) _____		_ _ _ _ _ _ _	
20.	For the last three months of 2005, could you please tell us approximately how many hours you worked on average for the facility each week?		_ _ _ _ _ _ _	
21.	Did you treat patients during the last three months of 2005?	Yes = 1 No = 2	_ _	If No → 23
22.	For the last three months of 2005, could you please tell us approximately how many patients you treated on average each month?		_ _ _ _ _ _ _	
23.	Do you think patients should pay for the health care services that are provided to them?	Yes = 1 No = 2	_ _	If No → 25

24.	How much do you think a patient must pay for the following services	(in Somoni)		
(a)	Immunizations	_	_	_
(b)	Family Planning	_	_	_
(c)	Treatment of Cold/Flu	_	_	_
(d)	Deliveries	_	_	_
(e)	Pediatric Care	_	_	_
(f)	First Degree Burn Treatment	_	_	_
25.	Do you live in a house that belongs to the facility?	Yes = 1 No = 2	_	If No → 27
26.	If not, which amount do you pay for rent? (Somoni) <i>Write 0 if no rent is paid.</i>	_ _ _		
27.	As a facility staff, are you entitled to the any of the following?	Yes = 1 No = 2		
(a)	Free basic health care	_		
(b)	Free drugs (available in the facility)	_		
(c)	Free food	_		
(d)	Other_(Specify) _____	_		
28.	Do you supplement your income by activities outside the facility?	Yes = 1 No = 2	_	If No → 32
29.	Which kind of work do you perform outside the facility?	Yes = 1 No = 2		
(a)	Paid agricultural employment	_		
(b)	Work for another private health care provider	_		
(c)	Privately provide health care	_		
(d)	Sells drugs (medicines)	_		
(e)	Other_(Specify) _____	_		
30.	Approximately how many hours per week do you work outside the facility?	_ _		
31.	At how much would approximately evaluate your annual income from all these activities? (Somoni)	_ _ _ _		
32.	Do you personally have any other source of income (e.g. remittances, revenue from house rental or own agricultural produces)?	Yes = 1 No = 2	_	If No → 34
33.	At how much would approximately evaluate your monthly income from all these sources? (Somoni)	_ _ _ _		

34.	Does any other member of your household earn income?	Yes = 1 No = 2	<input type="text"/>	If No → 36
35.	At how much would approximately evaluate the monthly income of all the other members of your household? (Somon)	<input type="text"/>		If DK 88888 8
36.	Did you use your income for providing health care services in 2005?	Yes = 1 No = 2	<input type="text"/>	If No → 38
37.	How much on average per month did you spend in 2005 (Somon)?	<input type="text"/>		

Training classes

38.	Did you receive any training related to your work in 2005?	Yes = 1 No = 2	<input type="text"/>	If No → 44
39.	How many training courses did you receive in 2005?	<input type="text"/>		
40.	On which topics have you been trained in 2005?	Yes = 1 No = 2		
(a)	Immunization/Management of the cold chain	<input type="text"/>		
(b)	Treatment/diagnosis of the Acute Respiratory Infections	<input type="text"/>		
(c)	Treatment/diagnosis of diarrhea	<input type="text"/>		
(d)	Nutrition	<input type="text"/>		
(e)	Child and maternal care	<input type="text"/>		
(f)	Family planning	<input type="text"/>		
(g)	Family Medicine	<input type="text"/>		
(h)	STIs or HIV/AIDS	<input type="text"/>		
(i)	Other_(Specify)	<input type="text"/>		
41.	Who paid for the most recent training you received in 2005?	MoH = 1 Oblast = 2 CRH = 3 Jaomat = 4 Donor = 5 NGO = 6 Other _____ = 7 Do not know = 8	<input type="text"/>	
42.	Where did you receive this training?	In this facility = 1 At the CRH = 2 In regional capital = 3 In Dushanbe = 4 In a foreign country = 5	<input type="text"/>	

43.	Who decided this training?	Own Initiative	= 1	_ _
		Head of facility	= 2	
		CRH chief doctor	= 3	
		Oblast Administration	= 4	
		Rayon Administration	= 5	
		Jamoat Administration	= 6	
		RegCI	= 7	
		Other _____	= 8	
		DK does not know	= 9	

Perceptions and Morale

44.	How satisfied are you working in this facility?	Very satisfied	= 1	_	
		Satisfied	= 2		
		Indifferent	= 3		
		Dissatisfied	= 4		
		Very dissatisfied	= 5		
45.	If you could, would you leave for another facility within the health sector?	Yes	= 1	_	If No → END
		No	= 2		
46.	Would the following reason be sufficiently important to justify your desire for leaving?	Important	= 1	_	
		Not important at all	= 2		
(a)	I do not like my work environment (colleagues, manager, etc.)			_	
(b)	I do not get along with people in the Community			_	
(c)	Lack of adequate services (schools, water, electricity, etc.)			_	
(d)	Dilapidated habitat			_	
(e)	Wants to live close to family and friends			_	
(f)	Wish to have better income opportunities			_	
(g)	Wish to have better training opportunities			_	
(h)	Wants to live closer to the city			_	
(i)	Other_(Specify) _____			_	

THANK YOU FOR YOUR KIND COOPERATION

	Date of Visit	Day	Month	Time at end of interview hh: mm	Result
1.	First Visit	_ _	_ _	_ _ : _ _	_
2.	Second Visit	_ _	_ _	_ _ : _ _	_