EngenderHealth
for a better life

COPE for Contraceptive Security in Malawi
Facility Assessment Questionnaire
ENDLINE

Facility Name:_____

District_____

Region_____

Facility Type

Dispensary..... **2**
Health Center..... **3**
District Hospital..... **4**
CHAM Hospital..... **5**
Community Hospital..... **6**

Locality of Facility

Rural..... **1**
Urban **2**

Interviewer's Name_____

Today's Date

Day	Month	Year

Interviewer's Signature

Interviewer:	**FIND THE PERSON PRESENT AT THE FACILITY WHO IS IN CHARGE. EVERY PERSON WHO YOU INTERVIEW MUST PROVIDE THEIR INFORMED CONSENT BEFORE PARTICIPATION. READ THAT PERSON THE MESSAGE SHOWN BELOW:**		
	Hello, My name is ..... I am representing EngenderHealth, an International NGO conducting a project to improve contraceptive security in your region. I would like to ask you to participate in research about the contraceptive security situation in your facility. This information will be used to develop the COPE for Contraceptive Security activity in this facility and others and will be used as a baseline and endline for comparison after the activity is complete. Your participation is voluntary, and there is no penalty if you choose not to participate. If you agree to participate, I will ask questions about the practices related to contraceptive security in this facility, and I will ask to see certain contraceptives, commodities, equipment, and supplies. You will not be compensated in any way for your participation in this interview. Participating in this interview does not pose any risk to you. All the information that you give to me will be kept confidential; your name will not be used and you will not be identified in any way. The questionnaire used during this interview will only be accessible to EngenderHealth researchers and program staff. This information gathered may be presented in the form of a report or a PowerPoint presentation, but the names of individuals or individual facilities will not be used. This interview should take approximately one hour to complete. You may refuse to be in this study; you may refuse to answer any question in the interview; and you may stop the interview at any point without any penalty. If you have any questions, please contact Siti Kachingwe at 265 995658610. Do you have any questions? Do I have your agreement to participate? If the respondent agrees, then you may begin the interview.		
	_____ Interviewer's Signature (Indicates Respondent's willingness to participate)	_____/_____/_____ **Date**	
101	May I begin the interview?	Yes ☐ No ☐ **If NO then STOP**	

NUMBER	PROVIDER INFORMATION			
102	How many total staff does this facility have?			
103	How many staff of this facility have received training in: *Write the number in the column marked "Number", or tick "Don't know" if the respondent does not know.*		**Number**	**Don't know**
		a. Completion and submission of LMIS reports		
		b. Proper storage of health products		
		c. Determining order quantities		
		d. Maintaining proper stock levels		
		e. Determining issue quantities		
		f. Estimating quarterly needs		
		g. Reviewing reports and records		

104	How would you describe the funding for each of the following:		Less than adequate	Adequate	More than adequate	Don't know
		a. Products				
		b. Storage of contraceptive products				
		c. LMIS Tools(ledgers, stationery etc)				
		d. Transportation				
		e. Logistics staff development				
		f. Logistics staff additional income				
		g. Waste management				

LOGISTICS MANAGEMENT		
105	Does the facility have a logistics officer or a designated staff member responsible for management and procurement of contraceptives and commodities?	Yes ☐ No ☐ Don't Know ☐
If the facility <u>does</u> have a logistics officer or staff member designated as responsible for management and procurement of contraceptives and commodities, ask to meet that staff member, obtain their informed consent, and complete most of the remaining questions with that staff member. **If the facility <u>does not</u> have a logistics officer** or other staff member that is responsible for commodities and supplies, ask the staff who would be the best person present to support most of the remainder of the facility checklist, which will primarily consist of checking stock levels.		

General Supplies: Verify whether the below items are in stock at the time of the visit by observing the items yourself. Tick the column to the right if the supplies are in stock *at any location* at the facility. If they are out of stock at the *entire* facility, leave this column blank.

106	**COMMON EXPENDABLE MEDICAL SUPPLIES**	**✓ in stock?**
a.	Soap or antiseptic agents (for surgical scrub)	
b.	Small sterile towel (for hand drying)	
c.	Alcohol-based hand rub	
d.	Sterile gloves	
e.	Iodine	
f.	Sterile gauze	
g.	Surgical Adhesive Tape	
h.	Local anesthetic – 1% or 2% lidocaine without epinephrine,	
i.	Distilled water to dilute lidocaine, if 2%	
j.	5 ml syringe with 1.5 inch (3.8 cm), 27-gauge needle	
k.	10-12 ml syringe with 1.5 inch (3.81 cm), 27 gauge needle	
l.	Scalpel blade (#10)	
m.	Scalpel blade (#11)	
n.	Chromic catgut or non-absorbable silk or cotton suture for ligation	
o.	Absorbable suture (on an atraumatic needle)	
p.	Scrotal support (optional)	
q.	Sterile surgical drapes	
r.	Sterile fenestrated surgical drapes	
s.	Drapes to cover surgical cushion table	
t.	Drapes for packing instruments	
u.	Sterile small drape	
v.	Client's gown	
w.	Sterile surgeon's and surgeon's assistant gowns	
x.	Cap and face mask	
y.	Sanitary pads	
z.	Band-aid	
aa.	Arm bandage	

107	**COMMON MEDICAL INSTRUMENTS**	✓ **in stock?**
a.	Cup/bowl/gallipot	
b.	Forceps, Rampley, sponge-holding, straight, 5.5 inches (13.8 cm)	
c.	Scissors, operating, Mayo, straight, 5.5 inches (13.8 cm)	
d.	Forceps, intestinal, Allis, delicate, (5X6 teeth) 6 inches (2) (15.2 cm)	
e.	Forceps, intestinal, baby Babcock, 5.5 inches (2) (13.9 cm)	
f.	Artery Forceps, Kelly, straight, 5.5 inches (2) (13.9 cm)	
g.	Vaginal retractor, Jackson, (deep blade) 1.5 inches (3.8 cm) x 3 inches (7.6 cm) or Vaginal Speculum, Graves, medium (1.38 in X 4 in) or (3.5 cm x 10.2cm)	
h.	Forceps, Schroeder-Braun, uterine tenaculum, 9.5 inches (24.1 cm)	
i.	Forceps, dressing, standard pattern, 5 inches (12.7 cm)	
j.	Forceps, tissue, delicate pattern, 5.5 inches (13.8 cm)	
k.	Needle holder, Mayo Hegar, 7 inches (17.8 cm)	
l.	Scissors, tonsil, Metzenbaum, curved, 7 inches (17.8 cm)	
m.	Scissors, operating, Mayo, curved 6.75 inches (17.1 cm)	
n.	Scalpel handle, # 3	
o.	Forceps, sponge, Foerster, straight, 9.5 inches (24.1 cm) (2)	
p.	Forceps, Rampley, sponge-holding, straight, long	

108	**MEDICAL EQUIPMENT**	✓ **in stock?**
a.	Adjustable Operating table	
b.	Step Stool	
c.	Operating Light (fixed, or portable with stand)	
d.	Instrument tray on a Mayo Table	
e.	Auxiliary Table	
f.	IV Stand	
g.	Waste Bucket	
h.	Plastic bucket (for instrument decontamination)	
i.	Sphygomonometer (one in each area- operating theater, recovery, etc)	
j.	Stethoscope	
k.	Medicine Cabinet	
l.	Stretcher with wheels and sides, or a wheelchair	
m.	Examination table	
n.	Support for arm (if implants are offered)	

109	PAIN MANAGEMENT DRUGS	✓ in stock?
Analgesic, non-narcotic		
a.	Diclofenac	
b.	Ibuprofen	
c.	Paracetamol	
Pre-Medication		
d.	Atropine Sulfate Injection	
e.	Promethazine injections	
Sedative		
f.	Diazepam	
g.	Midazolam (alternative to diazepam)	
Analgesic, narcotic		
h.	Fentanyl Injection	
i.	Pentazocine Injection	
j.	Meperidine (Pethidine) Injection	
k.	Nalbuphine Injection	

Method-Specific Supply Questions

Interviewer: Along with the designated staff member, first identify whether the facility has a trained provider for each method. A trained provider is defined as someone who has completed *both* didactic/classroom training *and* a clinical practicum in the particular method. Then identify whether the necessary items are available at the time of the visit.

Male Sterilization via No-Scalpel Vasectomy[1]			
201	Does this facility have a provider trained in vasectomy?	Yes ☐ No ☐ Don't Know ☐	
202	Does this facility offer no-scalpel vasectomy (NSV)?	Yes ☐ No ☐ Don't Know ☐	
			✓ in stock?
203a	NSV Ringed clamp (forceps), 4mm		
203b	NSV dissecting forceps		

Female Sterilization via Minilaparotomy		
204	Does this facility have a provider trained in female sterilization?	Yes ☐ No ☐ Don't Know ☐

[1] All items are listed separately although the may be supplied in a kit.

Female Sterilization via Minilaparotomy					
205	What female sterilization techniques are used in this facility?		**Yes**	**No**	**DK**
		a. Minilap suprapubic			
		b. Minilap subumbilical			
		c. Tubal occlusion during c-section			
		d. Tubectomy			
		e. Traditional laparotomy			
		f. Laparoscopy			
		g. Other: ____ _____			

			✓ in stock?
206a	Unique Instruments and Contraceptive Devices	Tubal hook*	
206b		Uterine elevator, Ramathibodi*	
206c	Indispensable Instruments for the procedure†	Abdominal retractor, Richardson-Eastman (2 piece set) or Army-Navy retractor (2 piece set) double ended	

* The tubal hook and the uterine elevator, though not indispensible to a tubal ligation procedure on a regular basis, they prove to be indispensible in certain situations, e.g. obese clients, clients with high level of anxiety, or clients with acutely retroverted uterus.

† A Minilaparotomy kit should have all of the listed instruments

Intrauterine Device (IUD)			
207	Does this facility have a provider trained in IUD insertion?	Yes ☐ No ☐ Don't Know ☐	
208	Does this facility have a provider trained in IUD removal?	Yes ☐ No ☐ Don't Know ☐	

			✓ in stock?	**Record number in stock**
209a		IUD (TCu 380A, Multi-load, or LNG-IUS)		*If not in stock ➔ 209b*

209a-1	Unique Contraceptive Devices	If IUD is in stock, what is the total number of unique devices in stock (sum any units of TCu 380A, Multi-load, or LNG-IUS together)?		
209b	Indispensable Instruments for Insertion	Uterine sound, Sims, 13 inches (33 cm)		
209c		Forceps, Schroeder-Braun, uterine tenaculum, 9.5 inches (24.1 cm)		
209d		Speculum, vaginal, Graves, medium (1.38 in X 4 in) (3.5 cm x 10.2 cm)		
209e		Scissors, Mayo, curved, 6.75 inches (17.1 cm)		
209f	Indispensable Instruments for Removal	Speculum, vaginal, Graves, medium (1.38 in X 4 in) (3.5 cm x 10.2 cm)		
209g		Forceps, Bozeman, uterine dressing, straight, 10.5 inches (26.7 cm)		
209h		IUD removal forceps, alligator jaw, 8 inches* (20.3 cm)		
209i		IUD string retriever*		

* Alligator jaw IUD removal forceps and IUD string retriever only needed if the IUD string not visible and IUD cannot be removed with Bozeman forceps alone.

Hormonal Implants		
210	Does this facility have a provider trained in implant insertion?	Yes ☐ No ☐ Don't Know ☐
211	Does this facility have a provider trained in implant removal?	Yes ☐ No ☐ Don't Know ☐

			✓ in stock?	**Record number in stock**
212a	Unique Instruments and Contraceptive Devices	Contraceptive Implant (Jadelle, Sino-Implant II, Implanon)		*If not in stock ➔ 212b*
212a-1		If contraceptive implant is in stock, what is the total number of unique devices in stock (sum any units of Jadelle, Sino-Implant II, or Implanon together)?		
212b		Trocar and Cannula *[required separately if implant does not come pre-loaded, in a kit]*		
212c	Indispensable Instruments for Removal	Scalpel-handle (#3)		
212d		Forceps, mosquito, straight, 5 inches (12.7 cm)		

			✓ in stock?	Record number in stock
212e		Forceps, mosquito, curved, 5 inches (12.7 cm)		

General Family Planning		
213	Does this facility have a provider trained in family planning counseling?	Yes ☐ No ☐ Don't Know ☐

214	Method	✓ in stock?	Record number in stock (if applicable)
a.	Male condoms		*If not in stock ➔ 214b*
a-1.	If male condoms are in stock, what is the total number of unique condoms in stock?		☐☐☐☐☐☐☐☐
b.	Female condoms		*If not in stock ➔ 214c*
b-1.	If female condoms are in stock, what is the total number of unique condoms in stock?		☐☐☐☐☐☐☐☐
c.	Fertility Awareness Beads/Cycle Beads		*If not in stock ➔ 214d*
c-1.	If Fertility Awareness Beads/Cycle Beads are in stock, what is the total unique number in stock?		☐☐☐☐☐☐☐☐
d.	Vaginal Contraceptive Ring (i.e. NuvaRing)		*If not in stock ➔ 214e*
d-1.	If the Vaginal Contraceptive Ring (i.e. NuvaRing) is in stock, what is the total number of unique devices in stock?		☐☐☐☐☐☐☐☐
e.	Progestin only pills		*If not in stock ➔ 214f*
e-1.	If Progestin only pills are in stock, what is the total number of unique pill cycles in stock?		☐☐☐☐☐☐☐☐
f.	Combined Oral Contraceptive Pills		*If not in stock ➔ 214g*
f-1.	If Combined Oral Contraceptive Pills are in stock, what is the total number of unique pill cycles in stock?		☐☐☐☐☐☐☐☐
g.	Depo-Provera DMPA-IM 150 mg/1 ml		*If not in stock ➔ 215*
g-1.	If Depo-Provera DMPA-IM 150 mg/1 ml is in stock, what is the total number of unique doses in stock?		☐☐☐☐☐☐☐☐

215: Supply requirements for providing quality LA/PM services			✓ in stock?
The following products should already be available for proper service provision:			
a.	**Infection Prevention Expendable Supplies** 2	Alcohol	
b.		Cotton	
c.		Hand brush for cleaning equipment	
d.		Chlorine bleach, detergent or disinfectants	
e.		Safety box	
f.		Utility gloves	
g.	**Infection Prevention Equipment**	Autoclave (sterilizer)	
h.		Steam-cooker/ portable steam cooker‡	
i.		Drums	
j.		Metal pans and metal covers	
k.		Plastic buckets, different colors	
l.		Garbage buckets	
m.	**Infection Prevention Infrastructure**	Clean running water source	
n.		Electricity source	
o.		Generator	
p.		Fuel or solar power	
q.	**Emergency Management Drugs**	Adrenaline	
r.		Aminophylline	
s.		Hydrocortisone	
t.		Intravenous solutions (normal saline and 5% dextrose in water)	
u.	**Emergency Resuscitation Equipment**	Adult Ambu bag (self-inflating breathing bags with masks)	
v.		Oxygen cylinder	

NUMBER	LOGISTICS MANAGEMENT INFORMATION SYSTEM				
300	Does the facility have in-stock:		**Yes**	**No**	**DK**
		a. Stock-keeping records?			
		b. Records of the arrival of new commodities and supplies?			

[2] These are basic equipment, supplies and infrastructure which are not listed in the method specific checklist

NUMBER	LOGISTICS MANAGEMENT INFORMATION SYSTEM				
		c. Requisition/request forms?			
		d. Inventory record books/control cards?			
		e. Bin cards?			
		f. Issue vouchers?			
301	How many staff of this facility are responsible for: *Write the number in the "Number" column, or put a tick in the "Don't know" column if the respondent does not know.*		**Number**	**Don't Know**	
		a. Managing and using the logistics management information system			
		b. Calculating quantities needed and filling out request forms			
		c. Signing for contraceptives/commodities when they arrive			
		d. Inventory management, storage and distribution			
		e. Organization of inventory storage			
		f. Supervision of stocks and inventory levels			
		g. Communicating regularly with the district			
302	Have you had a supervisory visit from the district in which logistics and commodity issues were discussed in the last three months?	Yes ☐ No ☐ Don't Know ☐			
303	How many emergency orders for contraception have been placed in the last three months?	*Write the number in the boxes or tick "Don't know" if the respondent does not know.* ☐☐ Don't Know ☐			
304	Does the facility have the means to transport supplies from the district if needed?	Yes ☐ No ☐ ➔ 400 Don't Know ☐ ➔ 400			
305	What means does the facility have to transport supplies from the district when needed?	*Check all that apply :* a. Bicycle ☐			
		b. Personal vehicle ☐			
		c. Commercial vehicle ☐			
		d. Public transportation ☐			
		e. Public sector vehicle ☐			

NUMBER	LOGISTICS MANAGEMENT INFORMATION SYSTEM	
		f. Donor-provided vehicle ☐
		g. Other *(specify) :*_____

ACCEPTABLE STORAGE CONDITIONS[3]		
400	All products are arranged so that identification labels and expiry dates and/or manufacturing dates are visible.	Yes ☐ No ☐
401	All products are stored and organized in a manner accessible for first-to-expire, first-out (FEFO).	Yes ☐ No ☐
402	Cartons and products are in good condition, not crushed. If cartons are open, determine if products are wet or cracked due to heat/radiation (fluorescent lights in the case of condoms; cartons right-side up for all products).	Yes ☐ No ☐
403	The facility has separated damaged and/or expired products from usable products and removed them from inventory.	Yes ☐ No ☐
404	All products are protected from direct sunlight.	Yes ☐ No ☐
405	Storage area is visually free from harmful insects and rodents. (Check the storage area for traces of rodents [droppings or insects].)	Yes ☐ No ☐
406	Storage area is secured with a lock and key.	Yes ☐ No ☐
407	Products are stored at the appropriate room temperature.	Yes ☐ No ☐
408	Roof is maintained in good condition to avoid sunlight and water penetration.	Yes ☐ No ☐
409	Storeroom is maintained in good condition (clean, all trash removed, sturdy shelves, organized boxes).	Yes ☐ No ☐
410	The current space and organization is sufficient for existing products and reasonable expansion (i.e., receipt of expected product deliveries for foreseeable future).	Yes ☐ No ☐
411	Products are stored separately from insecticides and chemicals.	Yes ☐ No ☐
412	Products are stacked at least 10 cm off the floor.	Yes ☐ No ☐
413	Products are stacked at least 30 cm away from the walls and other stacks.	Yes ☐ No ☐
414	Products are stacked no more than 2.5 meters high.	Yes ☐ No ☐

[3] Adapted from Kolapo, Usman, Elizabeth Bunde, Erika Ronnow and Elizabeth Igharo. 2007. *Nigeria: Contraceptive Logistics Management System Report.* Arlington, Va.: USAID | DELIVER PROJECT, Task Order 1.

Comments or other observations:

_____

_____

_____

Supplemental questions to be collected during *Endline Assessment* visit only:

LOGISTICS RECORDS					
Interviewer: For questions 501a-508c, ask the logistics officer or other staff member that is responsible for commodities and supplies to physically review, in front of you, the facility's stock cards for the dates specified. (If stock cards are not used at the facility, but another form that is routinely used to document and report stock levels is available *and* has data for the specific dates listed below, that is acceptable). *While reviewing the stock cards, tick "yes" if the method was in stock on the date listed. Tick "no" if the method was not in stock on the date listed. Tick "data not available" if no one at the facility is able to check such records or if the relevant data for the date specified was not actually recorded.*					
			Yes	**No**	**Data not available**
501a	**Intrauterine device (IUD)**	31 October 2015			
501b		30 November 2015			
501c		31 December 2015			
502a	**Contraceptive Implant (Jadelle, Sino-Implant II, Implanon)**	31 October 2015			
502b		30 November 2015			
502c		31 December 2015			
503a	**Male condoms**	31 October 2015			
503b		30 November 2015			
503c		31 December 2015			
504a	**Female condoms**	31 October 2015			
504b		30 November 2015			
504c		31 December 2015			
505a	**Fertility Awareness Beads/Cycle Beads**	31 October 2015			
505b		30 November 2015			
505c		31 December 2015			
506a	**Progestin only pills**	31 October 2015			
506b		30 November 2015			
506c		31 December 2015			
507a	**Combined Oral Contraceptive Pills**	31 October 2015			
507b		30 November 2015			
507c		31 December 2015			
508a	**Depo-Provera DMPA-IM 150mg/1ml**	31 October 2015			
508b		30 November 2015			
508c		31 December 2015			
509a	**Vaginal ring**	31 October 2015			
509b		30 November 2015			
509c		31 December 2015			

Interviewer: Ask which staff member at the facility would be best able to respond to questions regarding implementation of the COPE for CS methodology and the COPE for CS action plan at the facility. Ask to meet that staff member, obtain their informed consent, and complete the remaining questions with that staff member.

IMPLEMENTATION OF COPE FOR CS					
601	What was the start date of the initial COPE for CS orientation implemented at this facility under the current project (2015)	**Day**	**Month**	**Year**	**Don't Know**
		☐☐	☐☐	2015	
602	How much *time* (in days) was actually used to implement the initial COPE for CS orientation? *(For example, it is possible the orientation was implemented over the course of 3 days but only 2.5 days' worth of time was actually spent on the orientation - such as the afternoon of day 1, and all day on days 2-3. In such an example, the answer to this question would be 2.5. Responses can be rounded to the nearest half day).*	*Write the number of days in the boxes or tick "Don't know" if the respondent does not know.* *If the number includes a half day, such as "2.5", fill the boxes like this:* ☐2☐.☐5 Number ☐☐☐ Don't Know ☐			
603	Does this facility have a COPE for CS committee?	Yes ☐ No ☐ ➔ 605 Don't Know ☐ ➔ 605			
604	Excluding the initial COPE for CS orientation at this facility under this project, how many times has the COPE for CS committee met?	*Write the number in the boxes or tick "Don't know" if the respondent does not know.* ☐☐ Don't Know ☐			
605	Excluding the initial COPE for CS orientation at this facility under this project, approximately how frequently has there been *any* group discussion of the COPE for CS action plan? This could include staff meetings or other gatherings.	*Tick the box that applies :* a. Weekly ☐ b. Twice per month ☐ c. Monthly ☐ d. Every other month ☐ e. Quarterly ☐ f. Has not been discussed in a group since it was created ☐			

IMPLEMENTATION OF COPE FOR CS		
Interviewer: Ask to see the facility's COPE for CS action plan. The following questions are based on i*nterviewer observation* as well as discussion with interviewee.		
606	*Observe:* Is the facility's COPE for CS action plan displayed on a wall or bulletin where staff can see it?	Yes ☐ No ☐
607	When was the facility's COPE for CS action plan most recently updated?	*Tick the box that applies :* a. Within the past month ☐ b. Within the past 2-3 months ☐ c. More than 3 months ago ☐ d. Has not been updated since it was created ☐
608	Has the facility completed *all* of the action items in its original COPE for CS action plan developed during this project?	Yes ☐ No ☐ ➔ 610 Don't Know ☐ ➔ 610
609	If the facility has completed *all* of the action items in the original COPE for CS plan developed during this project, has it since developed a *new* COPE for CS plan?	Yes ☐ No ☐ Don't Know ☐
610	Has this facility used the COPE methodology to develop an action plan to improve quality on issues *other than* contraceptive security?	Yes ☐ No ☐ ➔ next section Don't Know ☐ ➔ next section
611	If the facility has used the COPE methodology to develop an action plan to improve quality on issues *other than* contraceptive security, what issues do/does the other action plan(s) address?	*Specify (write in response):* _____ _____
Interviewer: Take out your printed copy of <u>this facility's</u> COPE for CS action plan (provided to you by COPE for CS project staff). *Review the action plan the facility currently has displayed or on file, and record any information not already listed on your printed copy. This would include noting status updates, any edits to the action items (if they appear differently in the facility's file), and any new action items which may have been added).* When recording updates on your printed copy, confirm the status of each action item, especially for items that do not have information in the "completed" column, or for which such information is not informative (IE, if an item was "discussed" but no additional information has been provided, probe further).		