R4S
Assessment of the Scale, Reach, Quality, and Cost
of Service Delivery High Impact Practices for Family Planning
Readiness Assessment for PAFP: Health Facility Questionnaire

Eligibility Criteria:

- Participant is at least 18 years old
- In-charge or manager of the health facility or the ward of the health facility that provides contraceptive services to postabortion care clients
- Participant has provided their consent to participate in this interview

Remember:

- ***Ask one question at a time***
- ***Do NOT read the response options, unless otherwise instructed.***
- ***Circle or record only one response to each question, unless otherwise instructed.***

Okay, thanks. First I will ask you a few questions to make sure you are eligible to participate.

Read the following questions to the potential participants and have them respond. If any responses lead to '→ STOP', the provider is not eligible to participate. Do not proceed with the survey. Thank the provider for his/her time. Let him/her know that he/she has done nothing wrong.

Section A. Eligibility

NO.	QUESTIONS	RESPONSE	CODE		SKIP/ Relevance
e1	How old were you on your last birthday?	Age in years	[___|___]		**STOP if <18**
e3	Which of the following maternal health services are provided at this facility? ***Read response options.***		Yes	No	
		Antenatal care (a)	1	0	
		Delivery (b)	1	0	
		Postnatal care (c)	1	0	
		Postabortion care (d)	1	0	**If d=0 →STOP**
		Family planning (e)	1	0	
		No response (f)	1	0	

ADMINISTER INFORMED CONSENT, THEN PROCEED

e4	Did the participant consent to participate in this survey?	Yes	1	
		No	0	**→ STOP**

Section B. Identifying information

NO.	QUESTION	RESPONSE	CODE	SKIP
id1.	PROVINCE CODE	Pre-assigned province code	[__|__]	
id2.	FACILITY CODE	Pre-assigned facility code	[____|____]	
id3	INTERVIEWER CODE	Pre-assigned interviewer code	[___|___]	
id4	UNIQUE HEALTH FACILITY ID: ***Calculated field, based on id1-id3***	[___] - [___|___] - [___|___] ***Province Facility interviewer***		
id5.	FACILITY TYPE	Regional Hospital District Hospital Health Center Health Post	1 2 3	
id6.	MANAGING AUTHORITY supporting PAFP service	Ministry of Health/Government International non-governmental organization Local non-governmental organization Private for profit	1 2 3 4	

Read: To start, I would like to ask you a few questions about this facility.

NO.	QUESTION	RESPONSE	CODE		SKIP
001.	What is the managing authority of this facility? By this, I mean the organization or institution that runs this site and/or is primarily responsible.	Government/public Ngo/private not-for profit Private-for-profit Mission/faith-based Don't know No response	1 2 3 4 88 99		
002.	How many medical staff does this facility have who provide post-abortion care services? ***Enter 88 for don't know, 99 for no response.***	Number of staff	[____|____]		
004.	Where are abortion and post abortion care services provided? ***Select all that apply.***		Y	N	
		Operating theater (a)	1	0	
		Gynecological / women's ward	1	0	
		maternity ward (b)	1	0	
		Antenatal care area (c)	1	0	
		Other (specify):_____ (d)	1	0	
		No response (e)			
005.	How long have you been in the in-charge/ manager at this facility or at this ward? ***Select 1 for months, 2 for years. Only select months if <1 year*** ***If don't know, record 88, If refused, record 99***	Number Unit Months Years	[__|__] 1 2		

1. SUPPLIES, EQUIPMENT, AND METHODS

READ: Thank you. Now I would like to ask about the contraceptive products, equipment and supplies at this facility.

NO.	QUESTION	RESPONSE	CODE		SKIP/ Relevance
101.	Are any of the following FP services provided to post abortion clients as part of the services offered by this facility? READ OPTIONS AND SELECT THE APPROPRIATE RESPONSE FOR EACH *Note:* ***multiple responses allowed***		**YES**	**NO**	
		Intrauterine device (IUD) (a)	1	0	
		Implants (b)	1	0	
		Injectables – Depo Provera (c)	1	0	
		Injectables – Sayana Press (d)	1	0	
		Pill – progestin only (e)	1	0	
		Pill – combined oral contraceptives (f)	1	0	
		Emergency contraception (g)	1	0	
		Male condom (h)	1	0	
		Female condoms (i)	1	0	
		Standard days/Cycle Beads (j)	1	0	
		Female sterilization (k)	1	0	
		Male sterilization (l)	1	0	

READ: Can you show me where you keep your commodities and equipment for family planning associated with post abortion services?

NO.	QUESTION	RESPONSE		CODE		SKIP/ RELEVANCE
102.	Are any of the following contraceptive commodities available today associated with post abortion services? ASK TO OBSERVE. ***Select all that apply***	**Observed**		**Not observed**		
		At least one non-expired	Available, all expired	Reported available	Provided, not available today/DK	Not provided
	Intrauterine device (IUD) (a)	1	2	3	4	5
	Implants (b)	1	2	3	4	5
	Injectables – Depo Provera (c)	1	2	3	4	5
	Injectables – Sayana Press (d)	1	2	3	4	5
	Pill – progestin only (e)	1	2	3	4	5
	Pill – combined oral contraceptives (f)	1	2	3	4	5
	Emergency contraception (g)	1	2	3	4	5
	Male condom (h)	1	2	3	4	5
	Female condom (i)	1	2	3	4	5
	Standard days/Cycle Beads (j)	1	2	3	4	5

NO.	QUESTION	RESPONSE	CODE			SKIP/ RELEVANCE
103.	For each method, have you experienced any stock outs in the past 3 months? *Note: question will be adjusted for country method mix.* ***IF THEY DO NOT PROVIDE THE METHOD, SELECT NA***		Yes	No	NA	
		Intrauterine device (IUD) (a)	1	2	9	
		Implants (b)	1	2	9	
		Injectables – Depo Provera (c)	1	2	9	
		Injectables – Sayana Press (d)	1	2	9	
		Pill – progestin only (e)	1	2	9	
		Pill – combined oral contraceptives (f)	1	2	9	
		Emergency contraception (g)	1	2	9	
		Male condom (h)	1	2	9	
		Standard days/Cycle Beads (i)	1	2	9	
104.	If the IUD is out of stock or not offered at this facility, is there another facility where women who want the IUD could be referred?	Yes	1			
		No	0			
		Don't know	88			
		No response	99			
105.	If the implant is out of stock or not offered at this facility, is there another facility where women who want the implant could be referred?	Yes	1			
		No	0			
		Don't know	88			
		No response	99			

NO.	QUESTION	RESPONSE	CODE			RELEVANCE
			Yes, Obs	Yes, not obs	No	
106.	Does this facility have the following supplies and equipment for inserting implants and IUDs available to the post abortion care providers?	**Consumables**				**If 101(c)=1 OR 101(d)=1 OR 101(e)=1**
		Antiseptic such as iodine (a)	1	2	0	
		Cotton balls (b)	1	2	0	
		Sterile gloves (c)	1	2	0	
		3 to 5ml syringe (d)	1	2	0	
		25-gauge needle or filter needle (if local anesthetic supplied in glass ampule) (e)	1	2	0	
		Local anesthetic (1-2% lidocaine or equivalent) (f)	1	2	0	
		Sterile gauze (g)	1	2	0	
		Sterile band-aid/Elastoplast (h)	1	2	0	
		Clean gloves (i)	1	2	0	
		Equipment				
		Examination table (j)	1	2	0	
		Light source (k)	1	2	0	
		Sterile dry surgical drape (l)	1	2	0	
		High-level disinfected tray for instruments (m)	1	2	0	
		Clean dish for antiseptic (n)	1	2	0	
		Ringed forceps (or any other holding forceps to hold cotton balls when applying antiseptic) (o)	1	2	0	
		Uterine sound (p)	1	2	0	
		Tenaculum (q)	1	2	0	
		Large surgical scissors (r)	1	2	0	
		Bivalve speculum (Sims or Cusco or Graves) (s)	1	2	0	

2. **HEALTH FACILITY STAFF**

READ: Thank you. Now, I would like to ask you some questions about the staff at this facility.

NO.	QUESTION	RESPONSE	CODE	SKIP/ Relevance
201.	Does this facility have personnel trained to offer family planning counseling as part of post-abortion care?	Yes	1	
		No	0	**→203**
		Don't Know	88	**→203**
		No response	99	**→203**

202.	Has at least one person from each of the following cadres been trained? ***If cadre is not at this facility, select NA***		Yes	No	NA	
		Doctor(s)	1	0	9	
		Nurse(s)	1	0	9	
		Midwife(ves)	1	0	9	
		Medical Technician	1	0	9	
		Other (specify):_____	1	0	9	
		No response				
203.	Does this facility have personnel trained to offer contraceptive methods as part of the post-abortion services and before discharge from the facility?	Yes	1			
		No	0			**→205**
		Don't Know	88			**→205**
		No response	99			**→205**
204.	Which personnel have been trained? ***If cadre is not at this facility, select NA***		Yes	No	NA	
		Doctor(s)	1	0	9	
		Nurse(s)	1	0	9	
		Midwife(ves)	1	0	9	
		Medical Technician	1	0	9	
		Other (specify):_____	1	0	9	
		No response				
205.	As far as you know, is there a national training curriculum used for training on post-abortion family planning counseling and service provision?	Yes	1			
		No	0			
		No response	99			

3. SERVICE DELIVERY

READ: Thank you. Now, I would like to ask you a few questions about how services are organized at this facility.

NO.	QUESTION	RESPONSE	CODE	SKIP/ Relevance
301.	During normal operating hours for the facility, how often is there a staff member available (either on-site or on-call) to provide abortion and post-abortion care services?	Always	1	
		Sometimes	2	
		Rarely	3	
		Never	4	
		Don't know	88	
		No response	99	
302.	Outside of normal operating hours for the facility, how often is there a staff member available (either on-site or on-call) to provide post-abortion care services?	Always	1	
		Sometimes	2	
		Rarely	3	
		Never	4	
		Don't know	88	
		No response	99	
303.	During hours when PAC services are offered, how frequently is a staff member available (either on-site or on-call) to provide family planning services as part of post-abortion care?	Always	1	
		Sometimes	2	
		Rarely	3	
		Never	4	
		Don't know	88	
		No response	99	

NO.	QUESTION	RESPONSE	CODE	SKIP/ Relevance
304.	Are there standard operating procedures (SOPs) and/or guidelines available at this facility for the provision of family planning during post-abortion care?	Yes No Don't know No Response	1 0 88 99	 →306 →306 →306
305.				
306.	Do job descriptions for staff member providing abortion and post abortion care include FP counseling and provision?	Yes No Don't know No Response	1 0 88 99	
307.	Which of the following are discussed with the woman during post-abortion care? ***Read responses and select all that apply***		YES / NO / DK	
		Return to fertility (a)	1 / 0 / 88	
		Healthy spacing and timing of pregnancy (b)	1 / 0 / 88	
		Long-acting FP method options (c)	1 / 0 / 88	
		Short-acting FP methods (d)	1 / 0 / 88	
		No response (e)	1 / 0 / 88	
308.	For which of the following health topics do providers screen, offer services onsite, or refer clients to services off-site (another agency or organization)? ***Read responses and select all that apply***		Screen / Offer onsite / Refer offsite	
		a. mental health	1 / 2 / 3	
		b. Gender based violence	1 / 2 / 3	
		c. STI screening/treatment	1 / 2 / 3	
		d. HIV testing	1 / 2 / 3	
309.	Are women offered a family planning method as part of post abortion services?	Yes, always Yes, sometimes No Don't know No response	1 2 0 88 99	 →401 →401 →401
310.	Are these FP services (counseling and method provision) offered to post-abortion clients: ***Read responses***	In the same place and at the same time as other post-abortion care (prior to discharge) At the same time (prior to discharge), but in a different place in the facility Don't know No response	1 2 88 99	

NO.	QUESTION	RESPONSE	CODE			SKIP/ Relevance
311.	Which methods can women obtain as part of the post abortion care service? ***Multiple options allowed***		**YES**	**NO**	**DK**	
		Intrauterine device (IUD) (a)	1	0	88	
		Implants (b)	1	0	88	
		Injectables – Depo Provera (c)	1	0	88	
		Injectables – Sayana Press (d)	1	0	88	
		Pill – progestin only (e)	1	0	88	
		Pill – combined oral contraceptives (f)	1	0	88	
		Emergency contraception (g)	1	0	88	
		Male condom (h)	1	0	88	
		Female condoms (i)	1	0	88	
		Female sterilization (j)	1	0	88	
312.	Which FP methods require a referral somewhere else for a post-abortion client?		**YES**	**NO**	**DK**	
		Intrauterine device (IUD) (a)	1	0	88	
		Implants (b)	1	0	88	
		Injectables – Depo Provera (c)	1	0	88	
		Injectables – Sayana Press (d)	1	0	88	
		Pill – progestin only (e)	1	0	88	
		Pill – combined oral contraceptives (f)	1	0	88	
		Emergency contraception (g)	1	0	88	
		Male condom (h)	1	0	88	
		Female condoms (i)	1	0	88	
		Female sterilization (j)	1	0	88	

4. **SUPPORT FOR PAFP**

READ: I will now ask about other aspects of PAFP in the facility.

NO.	QUESTION	RESPONSE	CODE	SKIP
401.	Does this facility advertise availability of contraception within the post-abortion care service? This can be through posters, signs, etc.	Yes	1	
		No	0	
		Don't know	88	
		No response	99	
402.	Does the facility have additional financial support from any source to specifically enhance provision of postabortion family planning?	Yes	1	
		No	2	
		Don't Know	88	
		No response	99	

5. FACILITY RECORDS

READ: Now, I will ask you about the facility records. Can you please show me where you keep your registers?
For each, check the relevant document for the last completed month (do not check client cards, but only relevant facility registers)

NO.	QUESTION	RESPONSE	CODE		SKIP
501.	Does this facility document numbers of PAC clients counseled on FP separately from total clients counseled on FP?	Yes No Not able to check	1 0 9		 →**503** →**503**
502.	In which tool are the number of PAC clients counseled on FP documented?		Yes	No	
		PAC register (a)	1	0	
		FP register (b)	1	0	
		Gynecological / women's ward	1	0	
		register ( )	1	0	
		Other (specify):_____ (c)			
		Not able to check (e)			
503.	Does this facility document numbers of clients who receive an FP method during a PAC visit separately from total FP clients?	Yes No Not able to check	1 0 9		 →**505** →**505**
504.	In which tool are numbers of PAC clients receiving FP documented?		Yes	No	
		PAC register (a)	1	0	
		FP register (b)	1	0	
		Gynecological / women's ward	1	0	
		register ( )	1	0	
		Other (specify):_____ (c)			
		Not able to check (d)			
505.	Does the documentation of clients who receive contraception as part of post abortion services include the method received?	Yes No Not able to check	1 0 9		
506.	Does this facility document a PAC clients' intention to return at a later date for FP uptake?	Yes No Not able to check	1 0 9		

Thank you for your time. We appreciate the information you have given us.