

#### Republika e Kosovës

Republika Kosova - Republic of Kosovo Qeveria - Vlada - Government

Ministria e Shëndëtesisë Ministarstvo Zdravsta - Ministry of Health

# Primary Health Care in Kosovo

## SUMMARY REPORT

## JUNIK MUNICIPALITY

# Quality of Care Study 2018





Accessible Quality Healthcare

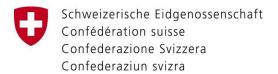
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SDC project implemented by Swiss TPH and Save the Children

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# **Quality of Care Study 2018**

Summary Report Junik Municipality



Swiss Agency for Development and Cooperation SDC



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## 1 Background & Objectives

The Accessible Quality Healthcare (AQH) project in Kosovo is funded by the Swiss Agency for Development and Cooperation (SDC) and implemented by a Consortium comprising Swiss Tropical and Public Health Institute (Swiss TPH) and Save the Children. The overall goal of the AQH project is to ensure that the health of the population of Kosovo has improved, with strengthened healthcare providers and managers able to meet the needs of the patients (especially vulnerable groups), who are more aware of their rights and needs.

At the request of the Ministry of Health, the AQH project conducted the first national **facility-based Quality of Care (QoC) study** from August to October 2018.

The objective of the study was to measure the quality of care related to structural and procedural aspects, as well as selected outcomes, in Primary Health Care (PHC) in all 38 municipalities in Kosovo.

The specific objectives of this study were to provide PHC service providers with information to:

- Assess the quality of health services provided in several PHC centres in each municipality, including specific structural and procedural aspects.
- Allow comparison of different aspects of quality of care between all municipalities.
- Determine to what degree health providers have infrastructure and consumables available as outlined in the national PHC norms or, where these are unavailable, those outlined in WHO standards.
- Assess patient satisfaction with the services provided at PHC centres.

For this study we considered an operational definition of the quality of health services based on the concept of quality of care presented by Donabedian (1988, 1990), which has frequently been used in similar studies (Boller and Wyss et al., 2003; Matthys, 2013; Kiefer and Kadesha, 2015; Lechthaler, 2015; AQH, 2016). This is characterized by three dimensions:

- 1) <u>Structural attributes</u> relate to the setting where health care is provided. These attributes mostly refer to the organizational structure, human and financial resources, as well as availability of technical resources such as clinical protocols and guidelines.
- <u>2) Process attributes</u> relate to the provider-client interaction, for example professional conduct and technical competence, as well as interpersonal relations/client satisfaction.
- 3) Outcome attributes relate to the effect of care delivery on the health status of populations. Outcomes result from the structural and process attributes, for example, survival and recovery of patients or, more indirectly, patient satisfaction.

This operational definition is based on the assumption that the three dimensions are connected to each other and ultimately to service quality: good structure increases the likelihood of good processes and good process increases the likelihood of good outcomes, although outcomes are a consequence rather than a component of the quality of services.

## 2 Methodology

#### 2.1 Study design

The QoC study is designed as a facility-based cross sectional survey to measure aspects of the quality of care of PHC service. It captures the overall quality of the facility infrastructure (structural aspects), the quality of provider-patient interactions (process aspects) and patient satisfaction after consultation (outcome). The study assesses quality of care provided to all patient groups but particularly focuses on patients with diabetes and hypertension.

The modules for the QoC survey are based on a mix of indicators from the WHO Service Availability and Readiness Assessment (SARA) and the "Tool to Improve Quality of Health Care" within the "ACCESS" program supported by the Novartis Foundation for Sustainable Development (2014), as relevant. The modules were adapted to the Kosovo local context thereby taking into consideration the national PHC norms or, where these are unavailable, the WHO norms established in the Package of Essential Non Communicable Diseases (NCDs) Interventions.

#### 2.2 Study area & target population

The survey was implemented in all municipalities. The QoC survey targets PHC facilities in both rural and urban areas. During the survey data was collected at three different levels: 1) the health facility, 2) the health provider and 3) the patients.

#### Inclusion criteria for the baseline assessment

Inclusion criteria for the health facilities were as follows:

- Main Family Medicine Centre (MFMC) or Family Medicine Centre (FMC)
- At least one medical doctor assigned to the facility for at least one day per week

Inclusion criteria for <u>health providers</u> of the selected facilities for provider-patient observations were:

- Doctors providing PHC services
- Patients (18 years or older, or children accompanied by a legal representative) accessing the facility and receiving a consultation from a health provider
- Oral informed consent provided by the provider
- Oral informed consent provided by the patient or his/her legal representative (mother/father/caretaker)

Inclusion criteria for patients accessing the selected facilities and receiving consultation were:

- Patients (18 years or older, or children accompanied by a legal representative) accessing the facility and receiving a consultation from a health provider
- Oral informed consent provided by the patient or his/her legal representative (mother/father/caretaker)
- Accessing the facility to receive services either for themselves or their accompanying minors.

### 2.3 Sample size and sampling strategy

#### Sampling of health facilities

We applied a random proportional-to-size sampling procedure for each of the domains assuming that the facilities will be allocated to urban and rural areas proportional to the size of

urban and rural populations in the region. The number of daily visits in June 2018 is considered a proxy of daily attendances.

#### Sampling of providers for provider-client observations

<u>All</u> provider-patient consultations, for which informed consent could be obtained from the patient or their legal representative, were observed in each health facility "Provider" hereby only refers to medical doctors (see inclusion criteria). A healthcare provider could but did not have to be observed repeatedly.

#### Sampling of patients for exit interviews

For the exit interviews, <u>all</u> patients that received care for themselves, or for a child in their care, at the facility were interviewed for the exit interview, provided they gave consent<sup>1</sup>. The patients included for exit interviews did not necessarily need to be the same as for the provider-patient observation (see inclusion criteria).

#### 2.4 Data collection and analysis

#### Data collection

Before data collection, relevant authorities, specifically Directors for Health and Social Welfare (DHSW), mayors as well as managers of all selected facilities in all surveyed Municipalities were informed about the study, its purpose and its schedule at a meeting hosted by the Ministry of Health on 5<sup>th</sup> July 2018.

The data collection team consisted of 23 data collectors, divided into 10 sub-teams. Most data collectors had a background in medical training and public health and previous survey experience. Each data collection team was assigned to a set of designated facilities where they conducted the assessments. The data collection teams were closely monitored by the local study coordinator and supervisors. Data collection in the field took place from 10 September 2018 until 05 October 2018.

The following procedures were followed at each facility:

- 1) Introduction of purpose and procedures of the survey to the targeted service providers.
- 2) Data collection
  - Starting with provider-patient observations and exit interviews with patients conducted at the facility.
  - Exit interviews with clients were conducted in an appropriate location ensuring privacy and confidentiality.
  - Structural attributes related to infrastructure and management were assessed after the consultation hours in the afternoon.

Data collection was performed electronically using the Open Data Kit (ODK)<sup>2</sup> software on tablets. During and after each day of data collection, the local study coordinator and the supervisors conducted quality assurance.

#### Data analysis

During the analysis of the obtained data, full confidentiality of respondents was assured. Data was analysed using Stata Statistical Software/SE v15.0.

**Additive index**: The overall scores were calculated as additive indices to indicate the achieved percentage score. For a certain set of questions, e.g. infection prevention and control measures the additive index counts the answers/criteria which were fulfilled or not fulfilled. Questions/criteria which are not applicable were not considered. The number of positive

<sup>&</sup>lt;sup>1</sup> Depending on the capacity of the data collectors.

<sup>&</sup>lt;sup>2</sup> Open Data Kit (ODK) is a free and open-source set of tools for mobile data collection solutions. https://opendatakit.org/

answers is then divided by the total of valid answers (ratio). This way a percentage score is obtained for **each patient**.

Example: For infection prevention and control measures we measured five different aspects. For the first patient none of the aspects we measured was relevant, e.g. no examinations were done.

For the second patient only two of the five aspects were relevant: hand washing before and after the examination. Both actions were not observed. Hence this person had two valid answers but did not achieve any score. So the percentage score achieved for this person was 0.

For the third patient all five actions related to infection prevention and control measures were relevant. However, none of the five actions were observed. So the percentage score is yet once more 0.

The fourth patient was examined and instruments were used. Thus three aspects were relevant, but only one aspect (disinfection of instruments) observed. Hence 1 out of 3 were achieved, translating to a percentage score of 33%.

For the fifth patient all five aspects were considered relevant and all were also adhered to by the doctor. Hence for this person a percentage score of 100% was achieved.

The average index **for the facility** for infection and prevention measures would be calculated as 133/4=33%

Patient	Washed hands before	Washed hands after	Disinfected instruments	used gloves as required	used mask as required	Number of valid answers	Number of positive answers	Ratio (positive/valid answers)
1	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a
2	no	no	n/a	n/a	n/a	2	0	0
3	no	no	no	no	no	5	0	0
4	no	no	yes	n/a	n/a	3	1	33
5	yes	yes	yes	yes	yes	5	5	100
						Facil	ity Score	133/4=33

Yes/no: as observed; n/a: action was not needed, e.g. no examination conducted

**95% - CI**: A 95% confidence interval (CI) is used to analyse the data presented in Tables 15 - 20 whereby the average is a range with an upper and lower number calculated from a sample. Because the true population average is unknown, this range describes possible values that the mean could be. If multiple samples were drawn from the same population and a 95% CI calculated for each sample, we would expect the population mean to be found within 95% of these CIs. CIs are sensitive to variability in the population (spread of values) and sample size. We could say: we are confident that the real value lies somewhere within this value range. A confidence interval cannot be estimated if there is only one observation or if there is no variation of values.

**n**: number of observations in the sample

**Rank**: The rank provides an indication on the position of the municipality related to certain aspects. In other words: how does the municipality perform in comparison to the other 37 municipalities. In case of ties (=municipalities achieving the same score) the average rank is calculated and assigned, e.g. achievement scores are for two facilities 90, then their potential ranks 8 and 9 and are taken together and divided by 2. This results in the rank 8.5. Hence there is no rank 8 or 9 assigned and the next municipality would be assigned the rank 10.

#### 2.5 Limitations

#### Sample size

The study was designed as a nationwide survey. Hence, in comparison to a census, only randomly selected facilities were included in the study. Due to the different sizes of the municipalities, but also the different utilization patterns in the different municipalities, some municipalities had more facilities included than others. Some of the municipalities had only the MFMC and 1 FMC included. This limits our ability to show possible wider variations in these municipalities.

In addition some facilities had only a few visits from patients on the day(s) of the survey. Thus the numbers of observations or exit interviews varies substantially between the facilities.

#### Interviewer bias

Interviewers were trained and received clear instructions on the data collection, nevertheless variations between interviewers cannot be completely ruled-out.

#### Clinical observations

The observations protocols for diabetic and hypertensive patients were very detailed in comparison to other illnesses. Hence, this might partially explain achievement differences between those illnesses and all other.

#### 2.6 Ethical considerations

Before the interviews and observations, participants were given an information leaflet and asked for their consent. For this, participants were informed that a) their participation is voluntary, b) they can withdraw from participation at any time without any consequences, c) non-participation will not have any negative effects. Participants were also informed how the data will be used and that confidentiality is ensured as no names or other identifying aspects will be collected.

Ethical clearance was obtained from the Kosovo Medical Chamber on 3<sup>rd</sup> of August, 2018 (Reference Number: 04/2018).

#### 3 Results

#### 3.1 Summary of results for municipality Junik

#### 3.1.1 Infrastructure

- One facility is included in the study.
- While only selected services were offered in the MFMC facility it scored well for infrastructure, cleanliness and hygiene.
- Information about opening hours, phone numbers and tariffs were on display in addition to contact numbers for patient feedback and complaints.
- Not all guidelines were available.
- A number of basic equipment items were not available.
- All advanced equipment was available although the X-ray was not functional.
- No equipment for assessing and monitoring child growth was available and only few items of gynaecological equipment were available..
- Several medications were unavailable, including oxygen, and there were no needles for syringes.
- Consumables for patient testing were not available.

#### 3.1.2 Clinical observation

- A total of 8 clinical observations were conducted.
- The main reasons for the visits were unspecified medical problems
- One patient presented for hypertension and 1 for referral
- The facility achieved a score of 73% concerning the adherence to principles of patient history taking and physical examination.
- Infection prevention and control was not satisfactory. The infection prevention and control scores indicate that in cases where infection prevention and control measures were needed, they were often not performed by the medical doctor.
- The overall score of the treatment of patients with medical problems other than hypertension and diabetes was 39% with better achievements in questioning the patient.

#### 3.1.3 Exit Interviews

- 5 patients were interviewed, 2 being women.
- 4 of the patients had been to the health care facility at least once in the last three months.
- 4 of the 5 patients were either satisfied or very satisfied with their consultation.
- All patients who had to pay for services received a receipt.

## 3.2 Detailed information on results

## 3.2.1 Overall assessment of municipalities

Table 1 Overview rank of all municipalities in Kosovo, 2018

		Infrastructure		Clinical Consultation		Exit Interview	
Municipaliti es	Number of facilities	Infrastruct ure Score (%)	Infrastruct ure Rank	Clinical Consultatio n Score (%)	Clinical Consultatio n rank	Exit Interview Score (%)	Exit Interview rank
Partes/Pasj ane	1	85	1	84	1	97	1.5
Mitrovica North	1	80	2	68	20	77	34.5
Zvecan	1	78	3	54	34	73	38
Prishtinë	5	77	4	59	30.5	88	21
Strpce	1	76	5	78	8.5	94	5
Zubin Potok	1	73	6	67	22	79	32.5
Mamusha	1	68	7.5	77	10	89	18
Leposavic	1	68	7.5	61	29	75	36
Istog	2	65	10	78	8.5	97	1.5
Kaçanik	2	65	10	75	12	92	10
Gracanica	3	65	10	55	33	79	32.5
Prizren	8	64	13	83	2.5	91	14
Mitrovicë	6	64	13	81	4	87	23
Fushë Kosovë	3	64	13	70	18.5	84	28.5
Obiliq	2	63	15.5	83	2.5	85	26.5
Viti	2	63	15.5	67	22	88	21
Dardanë	2	62	19	79	6.5	93	7.5
Peja	3	62	19	72	17	94	5
Hani I Elezit	1	62	19	67	22	91	14
Rahovec	3	62	19	52	35	93	7.5
Gjakovë	5	62	19	46	36	89	18
Junik	1	61	22	42	37	88	21
Ranilug	1	60	24	75	12	86	24.5
Novo Brdo	2	60	24	75	12	77	34.5
Shtime	2	60	24	74	14.5	89	18
Ferizaj	4	59	26.5	74	14.5	85	26.5
Gjilan	5	59	26.5	64	25	82	30
Dragash	2	58	28	73	16	91	14
Skenderaj	3	57	29.5	80	5	94	5
Therandë	3	57	29.5	65	24	80	31
Klinë	2	56	31	79	6.5	92	10
Drenas	3	55	32.5	63	27	91	14
Vushtrri	3	55	32.5	59	30.5	74	37
Malishevë	3	53	34	63	27	91	14
Podujevë	2	51	35	56	32	84	28.5
, Lipjan	5	49	36.5	70	18.5	86	24.5
Deçan	2	49	36.5	41	38	95	3
Klokot	1	44	38	63	27	92	10

#### 3.2.2 Number of observations and overall assessment

Table 2 Number of observations and overall assessment in Junik Municipality

	Name of the facility	No. of clinical observations	No. of Exit interviews
1	MFMC	8	5

#### Table 3 Overall quality scores for Junik Municipality

	MFMC
Infrastructure score (structural quality)	61%
Clinical score (process quality)	42 %
Exit score (outcome quality)	88%

#### 3.2.3 Infrastructure

#### Table 4 Services offered

	MFMC
Family planning	yes
Antenatal care	no
Obstetric and newborn care	no
Immunization	yes
Child care	yes
Adolescent health	yes
STI services	yes
Tuberculosis services	no
NCD services	no
Surgery	no
Outreach activities (mother, newborn and child health)	yes
Lab services	yes
X-ray	no
Physician present.	5 or more days per week

Table 5 Facility infrastructure and overall cleanliness and maintenance

Facility	MFMC
The facility and immediate surroundings (facility yard, waiting area outside) are free from long grass, paper debris and solid waste.	yes
The facility has a rubbish bin which is properly used and not overflowing.	yes
There is a designated waiting room for patients.	yes
The current waiting area is mopped, free of dust, trash; dirt, spider webs, and generally tidy.	yes
There is at least one designated consulting room for women.	no
There is at least one designated consulting room for children.	no
All examination room(s) ensure(s) privacy/confidentiality (door, window blind, curtain).	yes
All examination rooms are mopped, free of dust, trash; dirt, spider webs, and the rooms are generally tidy.	yes
All examination rooms are well illuminated.	yes
The facility has electricity	yes
During the past 7 working days, did you have any power cuts of more than 1 hour during opening hours.	yes
Is there routinely a time of year when this facility has a severe shortage or lack of power?	yes
If yes, specify:	Ndonjeher
The facility has a functional generator	yes
If the health facility has a functional generator: is fuel available today for the generator?	yes
The facility has a functional heating system.	yes
If yes, specify:	Me nxemje qendrore
Has the facility a functional communication equipment (functional landline telephone or cell phone) available (either private phone or facility phone)?	yes
What type of phone do you have available?	Landline of facility
The facility has functional computer.	yes
The facility has a functional printer.	yes
The facility has internet access.	no
During the past 7 working days did you have internet for at least 1 hour every day?	not applicable
The administration shelf is filed and in order.	yes
Does the facility have a patient record system?	yes
In which year was the patient record system introduced?	2018
Are there sufficient empty patient record cards available?	yes

#### Table 6 Hygiene

	MFMC
There is running water in the facility (out of the tap).	yes
There is warm water available (out of the tap).	yes
Is there routinely a time of year when this facility has a severe shortage or lack of water (out of the tap)?	no
If yes, SPECIFY when:	not applicable
If yes: In case there is a severe shortage or lack of water (out of the tap), where do you fetch water?	not applicable
Functional washing points exist in examination rooms and/or entrance hall, and soap or hand disinfectants and water are available.	yes
Labelled containers for medical waste disposal are available in all required areas (e.g. examination rooms).	no
The facility has adequate and safe disposal of sharps (sharps box/container).	yes
The facility has adequate and safe disposal of infectious waste.	yes
Sharps waste is temporary stored at a protected place.	yes
There is regular and appropriate collection for infectious waste.	yes
There is regular and appropriate collection for sharps waste.	yes
The facility has essential disinfectants and antiseptics.	no
The facility has chlorine solution or other disinfectants to disinfect contaminated instruments in all required areas (e.g. in examination rooms).	yes
The facility has at least one accessible and functional toilet for patients.	yes
The facility has at least one accessible and functional toilet for staff.	yes
The toilet(s) or latrine is clean.	yes
A washing point is available near the toilet or latrine.	yes
Soap and water are available at the washing point near toilet or latrine.	yes

#### Table 7 Public accountability items

	MFMC
Facility visibly displayed	no
Opening hours visible	yes
Phone number displayed	yes
Tariffs displayed	yes
Ministry of Health (MoH) complaints number displayed	yes
Flyer about MoH complaints number available	no
Tobacco laws displayed	yes
Patient's rights and responsibilities displayed	yes
Logos of pharmaceutical industries showing	no
Mechanisms to give public opinion on the service	yes
Mechanisms for referrals available	yes
Year of last quality inspection by the Ministry	2018

Table 8 Availability of guidelines and information materials

	MFMC
Therapeutic standard guideline for PHC	no
List of essential drugs	yes
Calendar for health promotion	no
Vaccination calendar	yes
Are awareness materials based on standard package info	yes

Table 9 Availability of general medical equipment

Facility	MFMC
Microsurgery	available, functional
Nebulizer	available, functional
Ambu mask	available, functional
Strong source of light in good condition (portable)	available, functional
Nasal speculum	not available
Otoscope	not available
Ophthalmoscope	not available
Doppler	not available
Glucometer	not available
Peak flow meter	not available
Tape measure	not available
Pen light	not available
Head light	not available
Neurological hammer	not available
Weight scale for adults	available, functional
Weight scale for children (over 2 years old)	available, functional
Weight scale for infants and toddlers (up to 2 years old)	available, functional
Sphygmomanometer for children	not available
Sphygmomanometer for adults	not available
Stethoscope for children	not available
Stethoscope for adults	available, functional
Obstetrical stethoscope/Fetoscope	not available
Pelvimeter	not available
Sterilization equipment and anti-septical protocol	available, functional
Pulse oximeter	not available
Refrigerator	available, functional
Vaccine refrigerator/portable	available, functional
Height meter board for children (up to two years old)	not available
Meter for height measuring ( children over 2 years old)	available, functional

Facility	MFMC
Tuning fork	not available
Table for vision testing	available, functional
Ear syringe	available, functional
Scissors	available, functional
Timer	available, functional
Snellen eye chart	available
Children growth chart	not available
Tongue depressor	available

#### Table 10 Availability of Gynaecological service equipment

	MFMC
Gynaecological bed	not available
Gynaecological instruments	not available
Oxygen tank (tube)	available, functional
Vaginal speculum, small size	not available
Vaginal speculum, medium size	not available
Vaginal speculum, large size	not available
Pap smear materials: (brush, spatula, holder)	not available
Gloves (latex)	available
Masks for doctors	available

#### Table 11 Availability of advanced equipment

	MFMC
EKG machine	available, functional
Sterilizer/Autoclave	available, functional
Photometer	available, functional
Centrifuge	available, functional
X-ray	available, not functional
Defibrillator	available, functional
Ultrasound machine	available, functional
Microscope	available, functional

Table 12 Availability of equipment to assess and monitor child growth

	MFMC
Box of blocks in different colours	no
Rattle, small red ball hung in a piece of thread	no
Book with simple illustrations or some sheets of colour paper with illustrations, i.e. a flower, a girl, a car, a cat, etc.	no
Large and thin pencils, sheets of paper for drawings	no
Doll	no
Hairbrush	no
Small plate and spoon	no
Cups	no
Simple puzzles with 2-3 pieces	no
Sheet with stripes and shapes	no

Table 13 Availability of medical products

Facility	MFMC
Vaccines	yes
Water for injections	yes
Atropine sulphate	no
Dextrose solution	yes
Manitol solution	no
Diazepam	yes
Adrenaline / epinephrine	yes
Furosemid	yes
Natrium chloride solution	yes
Glyceryl trinitrate/nitroglycerin	no
Dexamethason	yes
Antitetanus serum	yes
Antivenom imunoglobulin/antivipera serum	no
Oral rehydratation salt/tresol (o.r.s)	no
Benzylpenicillin/ bipenicillin	no
Metoclopramide/ methochopramid	yes
Paracetamol/acetaminophen	yes
Morphine sulphate	yes
Diclofenac	yes
Salbutamol (nebulizer)	yes
Hydrocortisone	no
Contraceptives: oral (COC, POP), Injectables, DIU, Condoms	no
Emergency conceptive pill/levonorgestrel	no
Plastic syringes	yes
Needles for syringes	no

Facility	MFMC
Povidon jod/iodine solution	yes
Surgical gloves	yes
Amoxicillin/erythromycin	yes
Chloropiramine/chlorfeniramin (oral antihistamine)	yes
Acid acetylsalicylic/aspirin	yes
Atenolol/metoprolol	no
Sol. glucose	yes
Hyoscine butylbromide/buscopan	no
Folic acid	no
Oxygen	no
Bandages	yes
Gauze	yes
Hydrogen peroxide	yes
Hydrophilic cotton	yes
Plastic perfusion system	yes
Spiritus aethylicus 70% (alcohol)	yes
Ranitidine	yes
Magnesium sulphate	no
Suture/thread for stitching wounds	no
Kalium (potassium) iodine	yes
Test strips for Glucometer	no
Urine protein test strips	no
Urine ketones test strips	no
Urine microalbuminuria test strips	no
Fluorescein strips	no
Blood cholesterol assay	yes
Lipid profile	yes
Serum creatinine assay	yes

#### 3.2.4 Clinical Observations

Table 14 Clinical observations overview table

	MFMC % (n=8)
Number of observations (patients)	100%
- women	25% (2)
Observations by type of doctors	
- Family Medical Specialist	100% (8)
- General Practitioner	0% (0)
- Other Specialist	0% (0)
Age of patient	
- <5	0% (0)
- 5 - 18	0% (0)
- 19 - 49	38% (3)
- 50 - 65	63% (5)
- >65	0% (0)
Reason for visit	
- Hypertension	13% (1)
- Diabetes	0% (0)
- Other	75% (6)
-Referral	13% (1)

Table 15 Adherence to principles of history and physical examination

	MFMC (n=8)
The medical doctor adheres to principles of history and physical examination, i.e  Greets the client Sees the client in privacy/confidentiality Makes the client comfortable (e.g. Seat offered) Asks the client about concerns, allows client to explain his/her health issue Has the patient record Uses the patient record during consultation Documents consultation in patient record (of all who have the patient record) Closed politely the consultation	73% (67% - 79%)

#### Table 16 Infection prevention and control

	MFMC (n=8)
The medical doctor pays attention to infection prevention and control, i.e  - Washes hands before the procedure  - Washes hands after procedure  - Applied proper decontamination procedures  - Puts on gloves where required  - Puts on a mask where required	0% (Not available)

#### Table 17 Patients with diabetes

Diabetes	MFMC (n=0)
The medical doctor	
Asks questions, about  - Any specific health complaints  - General weakness  - Urine discharge  - Vulvovaginitis or pruritus  - Appetite  - Eye-sight  - Visit to opthalmalogist  - Alcohol  - Smoking  - Using other medicine  - Sedentary way of life  - Adherence with diabetes treatment (if applicable)	Not applicable
Conducts examinations, i.e  - Checks blood pressure  - Weight measurement / calculation of body-mass index  - Of skin, mucus membranes, nodes of lymph, ears, nose, thyroid glands  - Of eyes  - Of chest, auscultation of lungs  - Auscultation of heart  - Of abdomen, palpation of liver and signs of percussion  - Perfusion of legs (veins and feeling of legs)  - And gives clear explanations to the client concerning the purpose of tests and procedures.	Not applicable
Advices, explains and instructs, about  Results of examinations  The situation and diagnosis  The prognosis  About needed examinations - Nutrition, i.e. Food intake and weight decrease  On the prevention and treatment of hypoglycaemia and other acute and chronic complications of diabetes  On self-monitoring - glycemia control and prevention of hypoglycaemia  About alcohol  About smoking  About physical exercise  Right ways of care of legs  Potential complication of the illness  Potential risks if illness is not treated  Importance of adherence to treatment  About follow-up visit  About the referral (if applicable)  On prescribed medicines/treatment (if applicable)	Not applicable
Overall Score	Not applicable

Table 18 Patients with hypertension

Arterial hypertension	MFMC (n=1)
The medical doctor	
Asks questions, about  - Any specific health complaints  - Headache  - The use of medicine other than for hypertension  - The use of contraceptives  - Eye-sight  - Visit to ophthalmologist  - Alcohol  - Smoking  - Sedentary way of life  - High blood pressure (if applicable)  - Adherence with hypertension treatment (if applicable)	0% (Not available)
Conducts examinations, i.e  - Checks blood pressure  - Weight measurement / calculation of body-mass index  - Of skin, mucus membranes, nodes of lymph, ears, nose, thyroid glands  - Of eyes  - Of chest, auscultation of lungs  - Auscultation of heart  - Of abdomen, palpation of liver and signs of percussion, palpation of kidneys  - Perfusion of legs (pulse and perfusion of legs)  - And gives clear explanations to the client concerning the purpose of tests and procedures. Checks blood pressure	11% (Not available)
Advices, explains and instructs, about  Results of examinations  The situation and diagnosis  The prognosis  About needed examinations  About signs of extreme hypertension  About what to do when signs of extreme hypertension occur  Nutrition, i.e. food intake  About alcohol  About smoking  About physical exercise  About oral contraceptives  Potential complication of the illness  Potential risks if illness is not treated  Importance of adherence to treatment  About follow-up visit  About the referral (if applicable)  On prescribed medicines/treatment (if applicable)	0% (Not available)
Overall Score	3% (Not available)

Table 19 Patients consulting for other reasons than diabetes or hypertension

Other diseases	MFMC (n=6)
The medical doctor	
Asks questions, about  - Takes patient history (general history, specific to disease)  - Asks open ended questions during history taking  - Asks about any prescriptions the client is currently taking.  - Listens to the client and responds to client questions.	75% (57% - 93%)
Conducts examinations, i.e Performs medical examinations and other investigations as individually required Gives clear explanations to the patient concerning the purpose of medical examinations and other investigations.	50% (25% - 75%)
Advices, explains and instructs, about  Results of examinations  The situation and diagnosis  The prognosis  About needed examinations  About follow-up visit  About the referral (if applicable)  On prescribed medicines/treatment (if applicable)  On risks factors/health education (if applicable)	17% (0% - 35%)
Overall Score	39% (22% - 55%)

#### Table 20 Patients consulting for referrals

Referrals	MFMC (n=1)
The medical doctor	
Asks questions, about  - Takes patient history (general history, specific to disease)  - Asks open ended questions during history taking  - Asks about any prescriptions the client is currently taking.  - Listens to the client and responds to client questions.	100% (Not available)
Conducts examinations, i.e Performs medical examinations and other investigations as individually required Gives clear explanations to the patient concerning the purpose of medical examinations and other investigations.	0% (Not available)
Advices, explains and instructs, about  Results of examinations  The situation and diagnosis  The prognosis  About needed examinations  About follow-up visit  About the referral (if applicable)  On prescribed medicines/treatment (if applicable)  On risks factors/health education (if applicable)	71% (Not available)
Overall Score	75% (Not available)

#### 3.2.5 Exit Interviews

Table 21 Socio-demographic attributes among respondents of exit interviews

	MFMC % (n=5)
Number of interviews	100%
- Women	40% (2)
Education	
- Never attended school	20% (1)
- Completed lower primary school	0% (0)
- Completed primary school	0% (0)
- Completed high school	20% (1)
- Completed college / university	20% (1)
- Other	40% (2)
Occupation	, in the second
- Farmer	0% (0)
- Employed	20% (1)
- Self-employed	0% (0)
- Housewife	20% (1)
- Governmental employee	0% (0)
- Unemployed	40% (2)
- Pensioner	20% (1)
- Pupil/Student	0% (0)
- Other	0% (0)
Economic or social aid	20% (1)

Table 22 Frequency and reason of visit of exit interviews

	MFMC % (n=5)	
Excluding today: how often did you access this HC over the past 3 month?		
- Did not access this HC in the past 3 months	20% (1)	
- 1-3 times	40% (2)	
- More than 3 times	40% (2)	
What was the reason for your consultation today?		
- Chronic condition	40% (2)	
- Antenatal care	0% (0)	
- Child health	0% (0)	
- Immunisation	0% (0)	
- Other	60% (3)	

Table 23 Overall satisfaction with health services - exit interviews

	MFMC % (n=5)
Overall: How satisfied were you with the services you received today	
Very unsatisfied	0% (0)
Unsatisfied	20% (1)
Satisfied	60% (3)
Very satisfied	20% (1)

Table 24 Satisfaction with different aspects of health service - exit interviews

	MFMC % (n=5)
Patient was given the opportunity to explain the health problem	100% (5)
Patients privacy was ensured	60% (3)
Doctor explained the questioning and physical examinations and the health problem*	67% (2)
Doctor explained the intake of prescribed medicine**	100% (5)
Doctor asked if patient currently takes prescriptions	80% (4)
Patient was given chance to ask questions about the investigation, health problem and treatment	80% (4)
Doctor listened carefully to patients concerns and questions and gave satisfactory answers	100% (5)
Patient got advice on health problem	100% (5)
Medical doctor was polite during consultation	100% (5)

<sup>\*</sup> relevant only when examination was conducted; \*\* only relevant if medicine were prescribed

Table 25 Payment for health service - exit interviews

	MFMC % (n=5)
Did you pay today for your health consultation?	20% (1)
Did you get a receipt for your payment?	100% (1)

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## **Appendix A: Abbreviations**

AQH Accessible Quality Healthcare

CI Confidence interval

DHSW Directors of Health and Social Welfare

FM Family Medicine

FMC Family Medicine Centre GP General Practitioner

MFMC Main Family Medicine Centre

MoH Ministry of Health ODK Open Data Kit

PHC Primary Health Care QoC Quality of Care

SARA Service Availability and Readiness Assessment (SARA)

SDC Swiss Agency for Development and Cooperation

Swiss TPH Swiss Tropical and Public Health Institute

WHO World Health Organisation

# **Appendix B: Questionnaire**

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Daniel View faillife 0	T
Do you have X-ray facilities?	yes
	no
How many days of the working week is at least one doctor present to provide general primary health care services?	1-2 days per week
	3-4 days per week
	5 or more days per week
Facility infrastructure and overall cleanliness and maintenance	
The facility and immediate surroundings (facility yard, waiting area	yes
outside) are free from long grass, paper debris and solid waste.	no
The facility has a rubbish bin which is properly used and not overflowing.	yes
The radiity had a rabbion bin which to properly accarding to eveniewing.	no
There is a designated waiting room for patients.	yes
	no
The current waiting area is mopped, free of dust, trash; dirt, spider webs,	yes
and generally tidy.	no
There is at least one designated consulting room for women.	yes
	no
There is at least one designated consulting room for children.	yes
	no
All examination room(s) ensure(s) privacy/confidentiality (door, window	yes
blind, curtain).	no
All examination rooms are mopped, free of dust, trash; dirt, spider webs,	yes
and the rooms are generally tidy.	no
All examination rooms are well illuminated.	yes
	no
The facility has electricity	yes
	no
During the past 7 working days, did you have any power cuts of more	yes
than 1 hour during opening hours.	no
Is there routinely a time of year when this facility has a severe shortage	yes
or lack of power?	no
If yes, SPECIFY:	
The facility has a functional generator	yes
, 0	no
If the health facility has a functional generator: is fuel available today for	yes
the generator?	no
The facility has a functional heating system.	yes
· · · · · · · · · · · · · · · · · · ·	no

If yes, SPECIFY:	T
i i yes, or Loii i.	
Has the facility a functional communication equipment (functional landline telephone or cell phone) available (either private phone or facility phone)?	yes no
What type of phone do you have available?	private cell phone of staff
	cell phone of facility
	landline of facility
The facility has functional computer.	yes no
The facility has a functional printer.	yes no
The facility has internet access.	yes no
During the past 7 working days did you have internet for at least 1 hour every day?	yes no
The administration shelf is filed and in order.	yes no
Does the facility have a patient record system?	yes no
In which year was the patient record system introduced?	
Are there sufficient empty patient record cards available?	yes no
Are minimum hygiene and safety standards in the facility ensured?	
There is running water in the facility (out of the tap).	yes no
There is warm water available (out of the tap).	yes no
Is there routinely a time of year when this facility has a severe shortage or lack of water (out of the tap)?	yes no
If yes: In case there is a severe shortage or lack of water (out of the tap), where do you fetch water?	well (protected)
	bottled water
	water tank/storage
	other
If other, please SPECIFY:	
	· · · · · · · · · · · · · · · · · · ·

Functional washing points exist in examination rooms and/or entrance	yes
hall, and soap or hand disinfectants and water are available.	no
Labelled containers for medical waste disposal are available in all	yes
required areas (e.g. examination rooms).	no
The facility has adequate and safe disposal of sharps (sharps	V00
	yes
box/container).	no
The facility has adequate and safe disposal of infectious waste.	yes
	no
Infectious waste is temporary stored at a protected place.	yes
inicollous waste is temporary stored at a protected place.	
	no
Sharps waste is temporary stored at a protected place.	Ves
onalps waste is temporally stored at a protected place.	yes
	no
There is regular and appropriate collection for infactions waste	1400
There is regular and appropriate collection for infectious waste.	yes
	no
There is regular and appropriate callection for the second	1,400
There is regular and appropriate collection for sharps waste.	yes
	no
The facility has essential disinfectants and antiseptics.	yes
	no
The facility has chlorine solution or other disinfectants to disinfect	yes
contaminated instruments in all required areas (e.g. in examination	no
rooms).	
The facility has at least one accessible and functional toilet for patients.	yes
The facility has at least one accessible and functional tollet for patients.	no
	110
The facility has at least one accessible and functional toilet for staff.	yes
The facility has at least one accessible and functional tollet for stall.	
	no
The toilet(s) or latrine is clean.	VAS
THE WHELES OF ALL HE IS CHEAT.	yes
	no
A waching point is available poor the tailet or latrice	Voc
A washing point is available near the toilet or latrine.	yes
	no
Coop and water are evallable at the weekly a mainting at the life.	1,,,,,
Soap and water are available at the washing point near toilet or latrine.	yes
	no
Dublic coccuptability	
Public accountability	
Le the facility legation visible displayed in public?	1400
Is the facility location visible displayed in public?	yes
	no
And the feelile, anguing house shell to display to the C.	1,,,,,
Are the facility opening hours visibly displayed to the public?	yes
	no
Is a contact phone number visibly displayed to the public?	yes
	no
	1

Г	1
Are the tariffs visibly displayed to the public/patients?	yes
	no
Are the contact details of the Ministry of Health helpline for citizen	yes
complaints publicly displayed?	no
Are information leaflets about the Ministry of Health helpline for citizens	yes
complaints available at the heath facility?	no
la information on the violation of the Macaua law against takens	
Is information on the violation of the Kosovo law against tobacco displayed to the public?	yes no
Is the Charter of Patient's Rights and Responsibilities visibly displayed in	yes
the waiting area?	no
Do any of the leaflets/posters at the facility have a logo/trademark from a	yes
pharmaceutical company?	no
Does the facility have a box/book to get public opinion on the quality of	yes
services?	no
Does the facility have mechanisms to facilitate referral of emergency	yes
patients to the next level?	no
When was the last quality inspection by the health inspectors from the Ministry of Health?	
Is there a document or copy available of the following essential treatment / management guidelines for different common conditions treated in your health facility?	
Is the booklet on Therapeutic standard guideline for PHC available at	yes
the facility?	no
Is the list of essential drugs available at the facility?	yes
is the list of essential drugs available at the lacinty:	no
Are the following IEC materials visibly displayed to patients?	
The Calendar of health promotion developed by MOH or IPH	yes no
The Calendar of Vaccination/Immunization	yes
The Galeridal of Vaccination/Illinianization	no
Awareness materials (posters, leaflets) (when counseling) based on	yes
standard package info (children, adults, women and reproductive health, seniors, mental health)	no
Does the facility have the following basic/essential medical equipment and supplies and are they functional?	
General medical equipment	
Microsurgery	available, functional

	available, NOT functional
	not available
Nebulizer	available, functional
	available, NOT functional
	not available
Ambu mask	available, functional
	available, NOT functional
	not available
Strong source of light in good condition (portable)	available, functional
	available, NOT functional
	not available
Nasal speculum	available, functional
	available, NOT functional
	not available
Otoscope	available, functional
	available, NOT functional
	not available
Ophtalmoscope	available, functional
	available, NOT functional
	not available
Doppler	available, functional
	available, NOT functional
	not available
Glucometer	available, functional
	available, NOT functional
	not available
Peak flow meter	available, functional
	available, NOT functional
	not available
Tape measure	available, functional
	available, NOT functional
	not available

available, NOT functional not available  Head light  available, functional available, NOT functional not available, NOT functional not available, functional available, functional available, functional not available, NOT functional not available  Weight scale for adults  weight scale for children (over 2 years old)  available, NOT functional available, functional not available, NOT functional available, NOT functional not available, NOT functional not available, NOT functional
Head light  available, functional available, NOT functional not available  Neurological hammer  available, functional available, NOT functional not available  Weight scale for adults  available, functional available, functional available, NOT functional available  Weight scale for children (over 2 years old)  available, NOT functional available, functional available, functional
available, NOT functional not available  Neurological hammer  available, functional available, NOT functional not available  Weight scale for adults  available, functional available, NOT functional available, NOT functional available, NOT functional available, NOT functional available, functional
Neurological hammer  available, functional available, NOT functional not available  Weight scale for adults  available, functional available, functional available, NOT functional not available  weight scale for children (over 2 years old)  available, functional available, functional available, NOT functional
Neurological hammer  available, functional available, NOT functional not available  Weight scale for adults  available, NOT functional available, NOT functional not available  Weight scale for children (over 2 years old)  available, functional available, functional available, functional
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Weight scale for adults  available, functional available, NOT functional not available  Weight scale for children (over 2 years old)  available, functional available, functional
weight scale for children (over 2 years old)  available, NOT functional available, functional available, NOT functional
Weight scale for children (over 2 years old)  available, functional  available, NOT functional
Weight scale for children (over 2 years old)  available, functional  available, NOT functional
available, NOT functional
not available
Weight scale for infants and toddlers (up to 2 yers old) available, functional
available, NOT functional
not available
Sphygmomanometer for children available, functional
available, NOT functional
not available
Sphygmomanometer for adults available, functional
available, NOT functional
not available
Stethoscope for children available, functional
available, NOT functional
not available
Stethoscope for adults available, functional
available, NOT functional
not available
Obstetrical stethoscope/Fetoscope available, functional
available, NOT functional

	not available
Pelvimeter	available, functional
	available, NOT functional
	not available
Sterilization equipment and anti-septical protocol	available, functional
	available, NOT functional
	not available
Pulse oximeter	available, functional
	available, NOT functional
	not available
Refrigerator	available, functional
	available, NOT functional
	not available
Vaccine refrigerator/portable	available, functional
	available, NOT functional
	not available
Hight meter board for children (up to two years old)	available, functional
	available, NOT functional
	not available
Meter for height measuring ( children over two years of age)	available, functional
	available, NOT functional
	not available
Thermometer	available, functional
	available, NOT functional
	not available
Tuning fork	available, functional
	available, NOT functional
	not available
Table for vision testing	available, functional
	available, NOT functional
	not available
Ear syringe	available, functional

	available, NOT functional
	not available
Scissors	available, functional
	available, NOT functional
	not available
Timer	available, functional
	available, NOT functional
	not available
Snellen eye chart	available
	not available
Children growth chart	available
	not available
Tongue depressor	available
	not available
Gynacological service equipment	
Gynecological bed	available, functional
	available, NOT functional
	not available
Gynecological instruments	available, functional
	available, NOT functional
	not available
Oxygen tank (tube)	available, functional
	available, NOT functional
	not available
Vaginal speculum, small size	available
	not available
Vaginal speculum, medium size	available
	not available
Vaginal speculum, large size	available
	not available
Pap smear materials: (brush, spatula, holder)	available
	not available

Clayes (later)	available
Gloves (latex)	
	not available
Masks for doctors	available
	not available
Delivery set: available?	yes
	no
	not applicable
Delivery set: sterile	yes
	no
Does the delivery set contain	
Haemostatic pincette	available, functional
	available, NOT functional
	not available
Obstetrical forceps	available, functional
	available, NOT functional
	not available
Scissors	available, functional
	available, NOT functional
	not available
Sterile cat gut	available, functional
	available, NOT functional
	not available
Sterile gauze	available, functional
	available, NOT functional
	not available
Umbilical cordon clip	available
	not available
Needles and needle bearer	available
	not available
Anatomic pincette	available
	not available
Sterile surgical gloves (two pairs)	available
	not available
	1

Surgical coat	available
	not available
Oxytocin ampoule (one) + metergine ampoule (one)	available
	not available
Syringes	available
	not available
Plastic aspiration tubes for newborns	available
	not available
Lydocain (One vial)	available
	not available
Betadine solution (vials)	available
	not available
Oxytocin (vials)	available
	not available
Advanced equipment	
EKG machine	available, functional
	available, NOT functional
	not available
Sterilizer/Autoclave	available, functional
	available, NOT functional
	not available
Photometer	available, functional
	available, NOT functional
	not available
Centrifuge	available, functional
	available, NOT functional
	not available
X-ray	available, functional
	available, NOT functional
	not available
Defibrillator	available, functional
	available, NOT functional

	not available
Ultrasound machine	available, functional
	available, NOT functional
	not available
Microsope	available, functional
	available, NOT functional
	not available
Necessary tools/materials to assess and monitor child growth	
Box of blocks in different colors	yes
DOX OF BIOCKS III different colors	no
Rattle, small red ball hung in a piece of thread	yes
	no
Book with simple illustrations or some sheets of color paper with	yes
illustrations, i.e. a flower, a girl, a car, a cat, etc.	no
Large and thin pencils, sheets of paper for drawings	yes
	no
Doll	yes
	no
Hairbrush	yes
	no
Small plate and spoon	yes
	no
Cups	yes
	no
Simple puzzles with 2-3 pieces	yes
	no
Sheet with stripes and shapes	yes
	no
Were the following products available the day of the visit?	
Do you have all vaccines available today as foreseen by the calendar of	yes
vaccinations?	no
Water for injections	yes
	no
Atropin sulphat	yes
	no

Dextrose solution	yes
	no
Manitol solution	yes
Walled Science	no
Diazepam	yes
	no
ADRENALINE / Epinephrine	yes
	no
Furosemid	yes
	no
Natrium chloride solution	yes
	no
GLYCERYL TRINITRATE/Nitroglycerin	yes
	no
Dexamethason	yes
	no
Antitetanus serum	yes
	no
ANTIVENOM IMUNOGLOBULIN/Antivipera serum	yes
	no
ORAL REHIDRATATION SALT/Tresol (O.R.S)	yes
	no
BENZYLPENICILLIN/ Bipenicillin	yes
	no
METOCLOPRAMIDE/ Methochopramid	yes
	no
PARACETAMOL/Acetaminophen	yes
	no
Morphin sulphate	yes
	no
Diclofenac	yes
	110
Salbutamol (nebulizer)	yes
Hydrocortison	yes
	TIO
Contraceptives: oral (COC, POP), Injectables, DIU, Condoms	yes
Emergency conceptive pill / LEVONORGESTREL	yes no
Plastic syringes	yes

Needles for syringes	yes
1100alou for syninges	no
	110
POVIDON JOD/lodine solution	yes
	no
Surgical gloves	yes
	no
A 1997 / d	
Amoxicillin/erythromycin	yes
	no
CHLOROPIRAMINE/Chlorfeniramin (oral antihistaminic)	yes
on Earton no anni Eronono marian (oral antimotalimino)	no
ACID ACETYLSALICYLIC/Aspirin	yes
	no
Atomolollos atomostol	
Atenolol/metoprolol	yes
	no
Sol.Glucose	yes
	no
HYOSCINE BUTYLBROMIDE/Buscopan	yes
	no
Folic acid	yes
	no
Oxygen	yes
олудон	no
Bandages	yes
	no
Gauze	yes
	no
Hydrogen peroxide	yes
, unagan paramua	no
Hydrophilic cotton	yes
	no
Plastic perfusion system	yes
	no
Spiritus aethylicus 70% ( alcohol)	yes
-1	no
Ranitidin	yes
	no
Magnesium Sulphate	yes
	no
SUTURE/Thread for stitching wounds	yes
55.51.27 Fillodd for olllorning wouldo	no
Kalium (potassium) iodine	yes
	no

	I
Test strips for Glucometer	yes
	no
Urine protein test strips	yes
	no
Urine ketones test strips	yes
	no
Urine microalbuminuria test strips	yes
	no
Fluorescein strips	yes
	no
Blood cholesterol assay	yes
	no
Lipid profile	yes
	no
Serum creatinine assay	yes
	no
Thank you very much for the interview.	
Interviewer comments	
Do you have any indication of cigarette smoke within the premises of the	yes
health facility?	no
End time of interview	
End time of interview  Quality of Care Assessment - Clinical observation	Answers
	Answers
Quality of Care Assessment - Clinical observation	Answers
Quality of Care Assessment - Clinical observation Interviewer_ID	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  IMEI (International Mobile Equipment Identity)	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview	Answers
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interested in your disease or disease history but want to observe some aspects on the care that the doctor provides to you. You are free to decide whether or not you participate in this study. If you decide not to do it, there will be no negative effect.	
Do I have your agreement to observe your consultation?	yes no
Is the patient during the consultation present?	yes no
Patient profile	
Patients' gender	female male
Patients' year of birth	
Mother/father/caretaker with child (child is patient)	yes no
Profile of health staff	
Staff name	
Doctors' gender	female male
Doctors' year of birth	
Type of doctor that is observed	family doctor general doctor specialist
Please specify:	
Adherence of medical doctor to principles of clinical history and physical examination	
The medical doctor	yes no
greets the client.	yes no
sees the client in privacy/confidentiality.	yes no

makes the client comfortable (e.g. seat offered)	yes
	no
asks the client about concerns, allows client to explain his/her health	yes
issue.	no
has the patient medical record	yes
	no
uses the patient card for anamnesis	yes
	no
For which illness is the patient seen?	arterial hypertension
	diabetes
	referral
	other
Assessment of an adult diabetes mellitus patient - Does the medical	
doctor follow the clinical assessment procedures, investigations	
and treatment guidelines?	
Asks questions on the illness about	yes
	no
any specific health complaints	yes
	no
general weakness	yes
	no
urine discharge	yes
	no
vulvovaginitis or pruritus	yes
	no
appetite	yes
	no
eye-sight	yes
	no
visit to opthalmalogist	yes
	no
alcohol	yes
	no
smoking	yes
	no
using other medicine	yes
	no
sedentary way of life	Yes
	no

adherence with diabetes treatment	yes
	no
Conducts examination	yes
	no not applicable
	not applicable
checks blood pressure	yes
	no
weight measurement / calculation of body-mass index	yes
weight measurement / earealation of body mass mass	no
of skin, mucus membranes, nodes of lymph, ears, nose, thyroid	yes
glands	no
of eyes	yes
·	no
of chest, auscultation of lungs	yes
	no
auscultation of heart	yes
	no
of abdomen, palpation of liver and signs of percussion	Voc
of abdomen, parpation of liver and signs of percussion	yes
perfusion of legs (veines and feeling of legs)	yes
	no
and gives clear explanations to the client concerning the purpose of	yes
tests and procedures.	no
Advices, explains, instructs	yes
	no
results of examinations	yes
	no
the situation and diagnosis	Voc
the situation and diagnosis	yes
	112
the prognosis	yes
	no
about needed examinations	yes
	no
nutrition, i.e. food intake and weight decrease	yes
	no
on the prevention and treatment of hypoglycemia and other acute and	yes
chronic complications of diabetes	no
on selfmonitoring - glycemia control and prevention of hypoglycaemia	VAS
on seminoring - grycernia control and prevention of hypogrycaethia	yes
about alcohol	yes
	no
	1

also de amarida a	T.,,
about smoking	yes
	no
about physical exercise	yes
about physical exclose	no
	TIO .
right ways of care of legs	yes
	no
potential complication of the illness	yesno
potential risks if illness is not treated	yes
	no
importance of adherence to treatment	yes
	no
about follow-up visit	yes
	no
Advises explains instructs	LV00
Advices, explains, instructs	yes no
	not applicable
about the referral	yes
	no
	not applicable
on prescribed medicines/treatment	yes
	no
	not applicable
	not applicable
Assessment of an adult patient with arterial hypertension - Does the	not applicable
medical doctor follow the assessment procedures, investigations	not applicable
	not applicable
medical doctor follow the assessment procedures, investigations and treatment guidelines?	
medical doctor follow the assessment procedures, investigations	yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?	
medical doctor follow the assessment procedures, investigations and treatment guidelines?	yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints	yes no yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about	yes no yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints	yes no yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache	yes no yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints	yes no yes no yes no yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache	yes no yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension	yes no yes no yes no yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache	yes no  yes no  yes no  yes no  yes no  yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension	yes no yes no yes no yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives	yes no  yes no  yes no  yes no  yes no  yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension	yes no  yes no  yes no  yes no  yes no  yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight  visit to opthalmalogist	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight  visit to opthalmalogist	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight  visit to opthalmalogist  alcohol	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight  visit to opthalmalogist	yes no  yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints  headache  the use of medicine other than for hypertension  the use of contraceptives  eye-sight  visit to opthalmalogist  alcohol	yes no

sedentary way of life	yes
obdortally way of mo	no
Asks questions on the illness about	yes
	no
	not applicable
high blood progguro	Voc
high blood pressure	yes
	not applicable
	Tiot applicable
adherence with hypertension treatment	yes
	no
	not applicable
Conducts examination	yes
	no
checks blood pressure	yes
55.10 81000 p1000010	, , , ,
	no
weight measurement / calculation of body-mass index	yes
	no
of skin, mucus membranes, nodes of lymph, ears, nose, thyroid	yes
glands	no
of eyes	yes
	no
of chest, auscultation of lungs	VOC
of chest, auscultation of lungs	yes no
	110
auscultation of heart	yes
	no
of abdoman polantian of lives and signs of a security and signs of	Lyon
of abdomen, palpation of liver and signs of percussion, palpation of	yes
kidneys	no
perfusion of legs (pulse and perfusion of legs)	yes
	no
and gives clear explanations to the client concerning the purpose of	yes
tests and procedures.	no
Advices, explains, instructs	yes
	no
results of examinations	yes
	no
the situation and dispuse:	
the situation and diagnosis	yes
	no
the prognosis	yes
	no
about needed examinations	yes
	no

about signs of extreme hypertension	
	yes
r	no
about what to do when signs of extreme hypertension occur	yes
r	no
nutrition, i.e. food intake	yes
r	no
	yes
l r	no
about smoking	yes
l l	no .
about physical exercise	yes
	no
about oral contraceptives	yes
	no
potential complication of the illness	yes
	no
potential risks if illness is not treated	yes
r	no
importance of adherence to treatment	yes
r	no
about follow-up visit	yes
r	no
Advisos explains instructs	Yes
Advices, explains, instructs	res
,	no
ı	not applicable
about the referral	yes
	no
r	not applicable
	yes
	no 
	not applicable
Assessment of a patient with other condition than diabetes or	
arterial hypertension.	
arteriai nypertension.	
Asks questions on the illness about	yes
	no
takes patient history (general history, specific to disease)	yes
	no
asks open ended questions during history taking	yes
	no
asks about any prescriptions the client is currently taking.	yes
l l	no

listens to the client and responds to client questions.	yes
listeris to the dient and responds to dient questions.	no
	110
Conducts examination	yes
	no
	not applicable
performs medical examinations and other investigations as	yes
individually required.	no
	not applicable
gives clear explanations to the patient concerning the purpose of	yes
medical examinations and other investigations.	no
	not applicable
Advices, explains, instructs	yes
	no
results of examinations	
results of examinations	yes
	no
the situation and diagnosis	yes
the olderion and diagnosis	no
the prognosis	yes
we progresse	no
about needed examinations	yes
	no
about follow-up visit	yes
	no
Advices, explains, instructs	yes
	no
	not applicable
about the referral	yes
about the folding	no
	not applicable
	The applicable
on prescribed medicines/treatment	yes
	no
	not applicable
on risks factors/health education	yes
	no
	no
	not applicable
Did the medical dector apply infection provention and central	
Did the medical doctor apply infection prevention and control	
Did the medical doctor apply infection prevention and control measures?	
measures?	
The doctor	
measures?	
measures? The doctor	not applicable  yes no
measures? The doctor	not applicable  yes

washed hands after the procedure (including use of soap).	yes
	no
	not applicable
applied proper decontamination procedures (e.g. soaking	yes
contaminated instruments into a bucket with chlorine or any other	no
disinfectant)	not applicable
put on gloves where required.	yes
	no
	not applicable
put on a mask where required.	yes
	no
	not applicable
closed the consultation politely.	yes
	no
	not applicable
Does the doctor document the consultation in the patient card?	yes
	no
Thank you very much for the interview.	
Thank you very maon for the interview.	
Interviewer comments	
End time of interview	
Quality of Care Assessment - Exit Interview	Answers
Interviewer_ID	
Interviewer_ID IMEI (International Mobile Equipment Identity)	
IMEI (International Mobile Equipment Identity)	
IMEI (International Mobile Equipment Identity)  Date of interview	
IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview	
IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview  Name of municipality	
IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview  Name of municipality  Name of facility  Good morning! My name is [NAME]. We are here on behalf of the Accessible Quality Healthcare Project funded by the Swiss Development Cooperation to conduct a survey of health facilities in our project area. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and the ethical review	
IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview  Name of municipality  Name of facility  Good morning! My name is [NAME]. We are here on behalf of the Accessible Quality Healthcare Project funded by the Swiss Development Cooperation to conduct a survey of health facilities in our project area. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and the ethical review board has approved this study.  We would like to interview people who have today consulted the medical doctor for their own health issues or for a child. Your experiences are very important to improve aspects related to quality of care. Information collected from this interview/questionnaire will be used by Accessible Quality Healthcare Project. Summaries of findings	

Have you been here today for issues related to your own health or the	yes
one of a child (child must be with the person)?	no
Socio-demographic information	
Patients' gender	female
	male
Year of birth	
Mother/father/caretaker older 18 with child (child is patient)	yes no
Satisfaction with health service	
	very unsatisfied
Overall: How satisfied were you with the services you received today?	unsatisfied
Overall. Flow Satisfied were you with the Services you received today:	satisfied
	very satisfied
Received services	
Excluding today: How often did you over the past 3 month access this	did not access this HC in the past 3 months
HC?	1-3 times
	more than 3 times
	chronic condition
	antenatal care
What was the reason for your consultation today?	child health
	immunisation
	other
	conduct an examination
 	write you a prescription
Did the medical doctor	Other
Aspects of todays consultation	
At the beginning of the consultation, were you given the opportunity to	yes
explain your health problem?	no
During your visit today, did the medical doctor ensure your privacy?	yes no
Did the medical doctor explain the questioning and physical examinations and your health problem?	yes no
Did the medical doctor clearly explain the intake of prescribed medicines to you?	yes no
Did the medical doctor ask if you are currently taking any (other)	yes
prescriptions?	no
During consultation were you given a chance to ask questions about the	yes
investigations and your health problem and treatment?	no
Did the medical doctor listen carefully to your concerns and questions and	yes
did he/she give satisfactory answers?	no
During consultation, did you get any advice on your health problem?	yes no
Was the medical doctor polite in general during consultation?	yes no
We would now also like to ask you a few questions on your knowledge and opinion on health. Are you willing to continue the interview with me for some more questions?	yes no
Knowledge, Attitude and Practice	
	cough

	alifficult on foot laws of this se
	difficult or fast breathing
	fever
	chest in drawing
	chest pain especially when breathing deeply
	blue lips and nail beds (cyanosis)
	seizures
	inability to swallow
In your opinion, what are symptoms that children with Acute Respiratory	inability to drink or breastfeed
Infections (ARI) have?	vomiting after each drinking or
	breastfeeding
	irritation
	dehydration
	comorbidities/polyorganic
	deficiency
	blood streaked sputum
	don't know
DI EACE ODECIEV	other
PLEASE SPECIFY	sir desplate
	air droplets
	fomites
In your opinion, how do people get infected with ARI?	dirty hands
	other
	don't know
PLEASE SPECIFY	
	every day
	several days a week
How often do people smoke in the same room where your child is	several days a month
present?	once a month or less
	never
	don't know
	strongly agree
Knowing the symptoms and warning signs of ARI will help to visit the	agree
doctor in time.	neither agree, nor disagree
	disagree
	strongly disagree
	strongly agree
Smaky curroundings (due to tobacco smaking, fires, etc) have no effect	agree
Smoky surroundings (due to tobacco smoking, fires, etc) have no effect on whether a baby catches pneumonia.	neither agree, nor disagree
	disagree
	strongly disagree
	drinking dirty water
	eating contaminated food by
	unwashed hands after defecation
What do you think are causes of diarrhea?	eating contaminated food
	food allergies
	other
	don't know
PLEASE SPECIFY	
	drinking clean water
How can you prevent diarrhea?	protect drinking water from
	contamination
	washing hands before preparing and eating food

	safe disposal feces by using safe
	latrine
	other
	don't know
PLEASE SPECIFY	
	visited doctor/family medicine center
What did you do when your child last had diarrhea?	tried applying traditional therapy at home
What did you do when your child last had diannea?	nothing specific
	other
	don't know
PLEASE SPECIFY	
Do you give liquids to your child when he or she has diarrhea?	yes no
	medical prescription
	your own decision
How do you get the medication to treat diarrhea?	pharmacist recommendation
	other
PLEASE SPECIFY	0.101
PLEASE SPECIFY	Any infant formula (baby food) [CERELAC, HIPP, NAN, VINNY, NESTOGENE] Any bread, rice, noodles, biscuits,
	cookies, or any other foods made from grains?  Any dark green, leafy vegetables like parsley, spinach, or
	coriander? Any vegetables/ cucumbers,
Child's food diversity during the last 24 hours: Did you child eat any of the	eggplant, onion, tomato, pumpkins, carrots, potatoes?
following food items within the last 24 hours?	Any fruits/ apricot, apples, strawberry, bananas?
	Any meat/ beef, pork, lamb, chicken, fish?
	Any eggs?
	Any foods made from beans,
	peas, or lentils? Any cheese, yogurt or cottage
	cheese? Any food made with oil, fat, or butter?
	Any other food?
PLEASE SPECIFY	<b>y</b>
	strongly agree
	agree
How much do you agree with the following statement: Unsafe water, poor	neither agree, nor disagree
sanitation and hygiene can cause the diarrhea but not ARI	disagree
Non-communicable diseases	strongly disagree
NOII-COMMUNICADIC VISCASES	diabatas
	diabetes
Which risk factors for cardiovascular disease do you know?	high blood pressure
	obesity
	smoking/tobacco use (Nos)
	high cholesterol/high blood fat
	unhealthy diet
	physical inactivity
	family history/genetics

	age
	stress
	other
	don't know
	none
	left-sided chest pain
	headache
Which of the following is a typical symptom of a heart attack?	feeling thirsty
Which of the following is a typical symptom of a heart attack?	pain in the legs
	don't know
	frequent need to urinate
NA/high of the fallowing is not a typical average according disherence	lower back pain
Which of the following is not a typical symptom caused by diabetes?	tiredness
	unexplained weight loss
	don't know
	strongly agree
How much do you agree with the following statement: Overweight people	agree
are healthier.	neither agree, nor disagree
	disagree
	strongly disagree
	strongly agree
Harry was been as a sure a with the fall as in a statement One alice a decrease	agree
How much do you agree with the following statement: Smoking does not effect the health.	neither agree, nor disagree
onost the riodith.	disagree
	strongly disagree
	strongly agree
	agree
How much do you agree with the following statement: Changing my	neither agree, nor disagree
lifestyle today will not affect my health later.	disagree
	strongly disagree
	strongly agree
	agree
How much do you agree with the following statement: I cannot influence my health because it depends on the doctors.	neither agree, nor disagree
Thy fleath because it depends on the doctors.	disagree
	strongly disagree
	no, not at the moment
	I am trying from time to time
Are you currently taking measures to have a healthy lifestyle?	yes, sometimes
	yes frequently
	not motivated
	rather not motivated
How motivated are you to change your lifestlye?	rather motivated
	motivated
	do more physical exercise
	lose weight
	eat less fat
What have you already changed in your life to decrease your risk of getting cardiovascular disease? (do not read responses)	eat less sugar
	eat more fruits and vegetables
	stop smoking /stop using Nos
	control my diabetes more actively
	(if applicable)
	control my high blood pressure
	more actively (if applicable)

	I have never tried
Now a few last questions	
Basic information	
Did you pay today for your health consultation?	yes no
If no, why not?	benefitting from any economic or social aid scheme
	health insurance
	other
Please, SPECIFY	
Did you get a receipt for your payment?	yes no
Are you benefitting from any economic or social aid scheme?	yes no
This following questions concern the person who answered	
	never attended school
	completed lower primary school (max 5 years)
What school level did you complete?	completed primary school (9 years)
	completed high school (12 years)
	completed college/university
	other
PLEASE SPECIFY	f
	farmer
	employed
	self-employed business housewife
What is your current occupation?	governmental employee, teacher, administrative / professional,
	unemployed
	pensioner
	Other
PLEASE SPECIFY	
Thank you very much for the interview.	
Interviewer comments	
End time of interview	
	i

