

#### 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

# MALISHEVË MUNICIPALITY

# Quality of Care Study 2018





Accessible Quality Healthcare

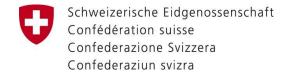
Kujdesi Shëndetësor i Qasshëm dhe Cilësor Kvalitetna i Dostupna Zdravstvena Zaštita

SDC project implemented by Swiss TPH and Save the Children

## Primary Health Care in Kosovo

# **Quality of Care Study 2018**

Summary Report Malishevë Municipality



Swiss Agency for Development and Cooperation SDC



#### **Contacts**



Debra Stevenson Team Leader Accessible Quality Healthcare Project (AQH) debra.stevenson@aqhproject.org http://www.aqhproject.org/



Swiss Tropical and Public Health Institute Schweizerisches Tropen- und Public Health-Institut Institut Tropical et de Santé Publique Suisse

Associated Institute of the University of Basel

Swiss Tropical and Public Health Institute Socinstrasse 57 4002 Basel, Switzerland www.swisstph.ch

Manfred Zahorka Project Director Accessibly Quality Healthcare Project (AQH) Swiss Centre for International Health manfred.zahorka@swisstphl.ch

Consortium partner:



Save the Children Schweiz Sihlquai 253 8005 Zürich, Switzerland www.savethechildren.ch

## **Acknowledgements**

We are very thankful to Ms. Debra Stevenson, Dr. Qamile Ramadani and Dr. Merita Shehu and all the AQH staff for providing overall support to the study. We warmly thank our local study coordinator Dr. Pranvera Krasniqi and Dr. Myvedete Tershnjaku from the National Institute of Public Health Kosovo for their commitment and support in the implementation and quality assurance of the study. We would also like to thank Ms. Fetije Huruglica, Ms. Fekrije Hasani and Mr. Srdjan Simonović who supported in collecting the data relevant for the sampling of the study. Further, we are grateful to Applicable Research Solutions and its staff for ensuring a smooth implementation of data collection and field supervision. Specifically we would like to highlight the excellent work from our data collectors. Lastly we would like to express our gratitude to all participants in our survey including facility managers, doctors and patients.

## **Table of Contents**

1	Bac	kground	a & Objectives	5
2	Meth	nodolog	у	6
	2.1	Study o	design	6
	2.2	Study a	area & target population	6
	2.3	Sample	e size and sampling strategy	6
	2.4	Data co	ollection and analysis	7
	2.5	Limitati	ions	9
	2.6	Ethical	considerations	9
3	Res	ults		10
	3.1	Summa	ary of results for municipality Malishevë	10
		3.1.1	Infrastructure	10
		3.1.2	Most medications were available in all facilities, however rehad all items of medication and medical products <b>Clinical</b>	,
		0.4.0	observation	10
		3.1.3	Exit Interviews	10
	3.2		d information on results	11
		3.2.1	Overall assessment of municipalities	11
		3.2.2	Number of observations and overall assessment	12
		3.2.3	Infrastructure	12
		3.2.4	Clinical Observations	21
		3.2.5	Exit Interviews	27
4	Refe	erences		29
App	endix	A: Abbı	reviations	30
App	endix	B: Que	stionnaire	31

## **Overview on tables**

Table 1 Overview rank of all municipalities in Kosovo, 2018	11
Table 2 Number of observations and overall assessment in Malishevë Municipality.	12
Table 3 Overall quality scores for Malishevë Municipality	12
Table 4 Services offered	12
Table 5 Facility infrastructure and overall cleanliness and maintenance	13
Table 6 Hygiene	14
Table 7 Public accountability items	15
Table 8 Availability of guidelines and information materials	15
Table 9 Availability of general medical equipment	16
Table 10 Availability of Gynaecological service equipment	17
Table 11 Availability of advanced equipment	18
Table 12 Availability of equipment to assess and monitor child growth	18
Table 13 Availability of medical products	19
Table 14 Clinical observations overview table	21
Table 15 Adherence to principles of history and physical examination	21
Table 16 Infection prevention and control	22
Table 17 Patients with diabetes	23
Table 18 Patients with hypertension	24
Table 19 Patients consulting for other reasons than diabetes or hypertension	25
Table 20 Patients consulting for referrals	26
Table 21 Socio-demographic attributes among respondents of exit interviews	27
Table 22 Frequency and reason of visit of exit interviews	27
Table 23 Overall satisfaction with health services - exit interviews	28
Table 24 Satisfaction with different aspects of health service - exit interviews	28
Table 25 Payment for health service - exit interviews	28

## 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 Malishevë

#### 3.1.1 Infrastructure

- Three facilities were part of this study (MFMC; FMC Kijevë, FMC Panorc).
- Most services were available the MFMC, however services were very limited at both FMCs.
- The facility infrastructure, the overall cleanliness and the maintenance were generally poor, though better at the MFMC. No running water was available at either FMCs.
- The situation concerning the hygiene, the public accountability and the availability of information material and guidelines was similarly poor.
- Many items of medical equipment were either not available or not functional.
- Some gynecological equipment was present at the MFMC, whereas the other two facilities either did not have gynecological equipment, or it was not functional.
- None of the health care facilities had equipment to monitor and assess child growth.

# **3.1.2** Most medications were available in all facilities, however no facility had all items of medication and medical products **Clinical observation**

- A total of 141 patient observations were conducted (98 at the MFMC 43 at the FMC Kijevë, no patients attended FMC – Panorc).
- 84 patients were women.
- Both facilities had a score around 83% for the adherence to principles of history and physical examination.
- Infection prevention and control was not very satisfactory. The scores indicate that in cases where infection prevention and control measures were needed, they were often not performed. The confidence interval shows that there was little variation between the observations concerning the performance.
- Both facilities had an average score concerning the treatment of patients with diabetes.
   Both achieved higher scores in questioning the patient and giving advice than they did on conducting an examination. The same applies to the treatment of patients with hypertension.
- The treatment of patients with illnesses other than hypertension and diabetes was quite satisfactory. Here both facilities had very high scores for questioning the patients but this time they were slightly better at conducting an examination than they were at giving advice.

#### 3.1.3 Exit Interviews

- A total of 80 patients were interviewed, 34 being women (51 at the MFMC, 28 at the FMC – Kijevë, 1 at FMC – Panorc).
- Across all facilities, the majority of patients had visited the health care facilities at least once in the last three months.
- The main reasons for the consultations were either chronic conditions or unspecified medical problems.
- Overall the majority were either satisfied or very satisfied with the services received.
- 16 patients were unsatisfied or very unsatisfied with the services at the MFMC. The aspects with the lowest scores were the questions concerning the current intake of medication and the advice they received about their health problem.
- All patients who had to pay for serviced 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	
Municipalit ies	Number of facilities	Infrastruct ure Score (%)	Infrastruct ure Rank	Clinical Consultati on Score (%)	Clinical Consultati on 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 Malishevë Municipality

	Name of the facility	No. of clinical observations	No. of Exit interviews
1	MFMC	98	51
2	FMC - Kijevë	43	28
3	FMC - Panorc	0*	1

<sup>\*</sup>No doctor was available at the day of data collection

Table 3 Overall quality scores for Malishevë Municipality

	MFMC	FMC - Kijevë	FMC - Panorc
Infrastructure score (structural quality)	62%	52%	46%
Clinical score (process quality)	63%	62%	not applicable
Exit score (outcome quality)	87%	98%	100%

#### 3.2.3 Infrastructure

Table 4 Services offered

	MFMC	FMC - Kijevë	FMC - Panorc
Family planning	no	no	no
Antenatal care	no	no	no
Obstetric and newborn care	no	no	no
Immunization	yes	yes	no
Child care	yes	no	no
Adolescent health	no	no	no
STI services	no	no	no
Tuberculosis services	no	no	no
NCD services	yes	yes	yes
Surgery	no	no	no
Outreach actiMalishevëes (mother, newborn and child health)	yes	no	no
Lab services	yes	no	no
X-ray	yes	no	no
Physician present.	5 or more days per week	5 or more days per week	1-2 days per week

Table 5 Facility infrastructure and overall cleanliness and maintenance

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

## Table 6 Hygiene

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

Table 7 Public accountability items

	MFMC	FMC - Kijevë	FMC - Panorc
Facility visibly displayed	yes	yes	yes
Opening hours visible	yes	yes	yes
Phone number displayed	no	no	no
Tariffs displayed	no	yes	yes
Ministry of Health (MoH) complaints number displayed	yes	yes	no
Flyer about MoH complaints number available	yes	yes	no
Tobacco laws displayed	yes	no	no
Patient's rights and responsibilities displayed	yes	no	yes
Logos of pharmaceutical industries showing	no	yes	no
Mechanisms to give public opinion on the service	yes	yes	yes
Mechanisms for referrals available	yes	no	no
Year of last quality inspection by the Ministry	2018	2017	2016

Table 8 Availability of guidelines and information materials

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

Table 9 Availability of general medical equipment

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

Facility	MFMC	FMC - Kijevë	FMC - Panorc
Pulse oximeter	not available	available, functional	available, functional
Refrigerator	available, functional	available, functional	available, not functional
Vaccine refrigerator/portable	available, functional	available, functional	available, not functional
Height meter board for children (up to two years old)	not available	available, functional	available, functional
Meter for height measuring ( children over two years of age)	available, functional	available, functional	available, functional
Thermometer	available, functional	available, functional	available, functional
Tuning fork	not available	not available	available, not functional
Table for vision testing	available, functional	available, functional	available, functional
Ear syringe	not available	not available	available, not functional
Scissors	available, functional	available, functional	available, functional
Timer	available, functional	available, functional	available, functional
Snellen eye chart	available	available	available
Children growth chart	not available	not available	not available
Tongue depressor	available	available	available

## Table 10 Availability of Gynaecological service equipment

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

Table 11 Availability of advanced equipment

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

Table 12 Availability of equipment to assess and monitor child growth

	•		
	MFMC	FMC - Kijevë	FMC - Panorc
Box of blocks in different colours	no	no	no
Rattle, small red ball hung in a piece of thread	no	no	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	no	no
Large and thin pencils, sheets of paper for drawings	no	no	no
Doll	no	no	no
Hairbrush	no	no	no
Small plate and spoon	no	no	no
Cups	no	no	no
Simple puzzles with 2-3 pieces	no	no	no
Sheet with stripes and shapes	no	no	no

Table 13 Availability of medical products

Facility	MFMC	FMC - Kijevë	FMC - Panorc
Vaccines	yes	yes	no
Water for injections	no	no	yes
Atropine sulphate	yes	no	no
Dextrose solution	yes	no	yes
Manitol solution	no	no	no
Diazepam	yes	yes	yes
Adrenaline / epinephrine	yes	yes	yes
Furosemid	yes	yes	yes
Natrium chloride solution	yes	no	yes
Glyceryl trinitrate/nitroglycerin	no	no	no
Dexamethason	yes	yes	yes
Antitetanus serum	yes	yes	no
Antivenom imunoglobulin/antivipera serum	no	no	no
Oral rehydratation salt/tresol (o.r.s)	no	yes	no
Benzylpenicillin/ bipenicillin	no	no	no
Metoclopramide/ methochopramid	yes	yes	yes
Paracetamol/acetaminophen	yes	no	no
Morphine sulphate	no	no	no
Diclofenac	yes	yes	yes
Salbutamol (nebulizer)	yes	no	no
Hydrocortisone	no	yes	no
Contraceptives: oral (COC, POP), Injectables, DIU, Condoms	no	no	no
Emergency conceptive pill/levonorgestrel	no	no	no
Plastic syringes	yes	yes	yes
Needles for syringes	yes	yes	yes
Povidon jod/iodine solution	yes	yes	yes
Surgical gloves	yes	yes	yes
Amoxicillin/erythromycin	yes	no	no
Chloropiramine/chlorfeniramin (oral antihistamine)	yes	yes	no
Acid acetylsalicylic/aspirin	yes	no	no
Atenolol/metoprolol	yes	no	no
Sol. glucose	yes	yes	yes
Hyoscine butylbromide/buscopan	no	yes	yes
Folic acid	no	no	no
Oxygen	yes	yes	no
Bandages	yes	yes	yes
Gauze	yes	yes	yes
Hydrogen peroxide	no	yes	no

Facility	MFMC	FMC - Kijevë	FMC - Panorc
Hydrophilic cotton	yes	yes	yes
Plastic perfusion system	yes	yes	yes
Spiritus aethylicus 70% (alcohol)	yes	yes	yes
Ranitidine	yes	yes	yes
Magnesium sulphate	no	no	no
Suture/thread for stitching wounds	no	no	no
Kalium (potassium) iodine	no	no	no
Test strips for Glucometer	yes	no	yes
Urine protein test strips	yes	no	no
Urine ketones test strips	yes	no	no
Urine microalbuminuria test strips	no	no	no
Fluorescein strips	no	no	no
Blood cholesterol assay	yes	no	no
Lipid profile	no	no	no
Serum creatinine assay	yes	no	no

## 3.2.4 Clinical Observations

Table 14 Clinical observations overview table

	MFMC % (n=98)	FMC - Kijevë % (n=43)	FMC – Panorc % (n=0)
Number of observations (patients)	100%	100%	
- women	63% (62)	51% (22)	
Observations by type of doctors		,	•
- Family Medical Specialist	28% (27)	100% (43)	
- General Practitioner	72% (71)	0% (0)	
- Other Specialist	0% (0)	0% (0)	
Age of patient			
- <5	0% (0)	7% (3)	
- 5 - 18	14% (14)	11% (5)	
- 19 - 49	56% (55)	23% (10)	
- 50 - 65	18% (18)	37% (16)	
- >65	11% (11)	21% (9)	
Reason for visit		,	•
- Hypertension	13% (13)	28% (12)	
- Diabetes	4% (4)	7% (3)	
- Other	59% (58)	56% (24)	
-Referral	23% (23)	9% (4)	

Table 15 Adherence to principles of history and physical examination

	MFMC	FMC – Kijevë	FMC – Panorc
	% (n=98)	% (n=43)	% (n=0)
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	82% (82% - 83%)	83%	

#### Table 16 Infection prevention and control

	MFMC	FMC – Kijevë	FMC – Panorc
	% (n=98)	% (n=43)	% (n=0)
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	3% (1% - 5%)	1% (0% - 3%)	

Table 17 Patients with diabetes

Diabetes	MFMC % (n=98)	FMC – Kijevë % (n=43)	FMC – Panorc % (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)	51% (47% - 56%)	70% (57% - 84%)	
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.	25% (14% - 36%)	41% (33% - 48%)	
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)	53% (49% - 57%)	56% (53% - 59%)	
Overall Score	46% (42% - 49%)	56% (52% - 61%)	

Table 18 Patients with hypertension

MFMC FMC - Kijevë FMC - Panorc				
Hypertension	% (n=98)	% (n=43)	% (n=0)	
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)	53% (45% - 61%)	50% (41% - 59%)		
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	28% (22% - 34%)	32% (26% - 39%)		
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)	46% (37% - 54%)	48% (36% - 61%)		
Overall Score	44% (37% - 50%)	45% (36% - 53%)		

Table 19 Patients consulting for other reasons than diabetes or hypertension

Other diseases	MFMC % (n=98)	FMC – Kijevë % (n=43)	FMC – Panorc % (n=0)
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.	97% (94% - 99%)	96% (92% - 100%)	
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.	74% (65% - 84%)	70% (55% - 84%)	
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)	73% (68% - 78%)	70% (60% - 80%)	
Overall Score	81% (77% - 84%)	78% (72% - 84%)	

Table 20 Patients consulting for referrals

Referrals	MFMC % (n=98)	FMC – Kijevë % (n=43)	FMC – Panorc % (n=0)
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.	69% (52% - 86%)	75% (47% - 100%)	
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.	100% (Not available)	Not applicable	
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)	37% (26% - 48%)	41% (23% - 58%)	
Overall Score	47% (36% - 59%)	55% (37% - 74%)	

## 3.2.5 Exit Interviews

Table 21 Socio-demographic attributes among respondents of exit interviews

	MFMC % (n=51)	FMC – Kijevë % (n=28)	FMC – Panorc % (n=1)
Number of interviews	100%	100%	100%
- Women	35% (18)	57% (16)	0% (0)
Education		•	
- Never attended school	4% (2)	0% (0)	0% (0)
- Completed lower primary school	4% (2)	11% (3)	0% (0)
- Completed primary school	18% (9)	15% (4)	0% (0)
- Completed high school	63% (32)	52% (14)	100% (1)
- Completed college / university	10% (5)	22% (6)	0% (0)
- Other	2% (1)	0% (0)	0% (0)
Occupation		•	
- Farmer	2% (1)	4% (1)	0% (0)
- Employed	18% (9)	15% (4)	0% (0)
- Self-employed	4% (2)	7% (2)	0% (0)
- Housewife	8% (4)	11% (3)	0% (0)
- Governmental employee	0% (0)	11% (3)	0% (0)
- Unemployed	39% (20)	41% (11)	100% (1)
- Pensioner	10% (5)	7% (2)	0% (0)
- Pupil/Student	0% (0)	0% (0)	0% (0)
- Other	20% (10)	4% (1)	0% (0)
Economic or social aid	14% (7)	29% (8)	0% (0)

Table 22 Frequency and reason of visit of exit interviews

	MFMC % (n=51)	FMC – Kijevë % (n=28)	FMC – Panorc % (n=1)
Excluding today: how often did you access this HC over the past 3 month?			
- Did not access this HC in the past 3 months	6% (3)	29% (8)	0% (0)
- 1-3 times	63% (32)	46% (13)	100% (1)
- More than 3 times	31% (16)	25% (7)	0% (0)
What was the reason for your consultation today?		•	
- Chronic condition	35% (18)	39% (11)	0% (0)
- Antenatal care	2% (1)	0% (0)	0% (0)
- Child health	12% (6)	14% (4)	0% (0)
- Immunisation	2% (1)	4% (1)	0% (0)
- Other	49% (25)	43% (12)	100% (1)

Table 23 Overall satisfaction with health services - exit interviews

	MFMC % (n=51)	FMC – Kijevë % (n=28)	FMC – Panorc % (n=1)
Overall: How satisfied were you with the services you received today			
Very unsatisfied	2% (1)	0% (0)	0% (0)
Unsatisfied	29% (15)	0% (0)	0% (0)
Satisfied	67% (34)	61% (17)	0% (0)
Very satisfied	2% (1)	39% (11)	100% (1)

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

	MFMC % (n=51)	FMC – Kijevë % (n=28)	FMC – Panorc % (n=1)
Patient was given the opportunity to explain the health problem	98% (50)	100% (28)	100% (1)
Patients privacy was ensured	94% (48)	100% (28)	100% (1)
Doctor explained the questioning and physical examinations and the health problem*	98% (41)	100% (23)	100% (1)
Doctor explained the intake of prescribed medicine**	100% (47)	100% (25)	100% (1)
Doctor asked if patient currently takes prescriptions	88% (45)	93% (26)	100% (1)
Patient was given chance to ask questions about the investigation, health problem and treatment	71% (36)	100% (28)	100% (1)
Doctor listened carefully to patients concerns and questions and gave satisfactory answers	84% (43)	100% (28)	100% (1)
Patient got advice on health problem	57% (29)	89% (25)	100% (1)
Medical doctor was polite during consultation	100% (51)	100% (28)	100% (1)

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

Table 25 Payment for health service - exit interviews

	MFMC % (n=51)	FMC – Kijevë % (n=28)	FMC – Panorc % (n=1)
Did you pay today for your health consultation?	51% (26)	57% (16)	0% (0)
Did you get a receipt for your payment?	100% (26)	100% (16)	Not applicable

### 4 References

Accessible Quality Healthcare (AQH) (2016). "Quality of Care Study 2016 – Technical Report of the Baseline Study." Swiss Tropical and Public Health Institute, Basel.

Boller, C., Wyss, K., et al. (2003). "Quality and comparison of antenatal care in public and private providers in the United Republic of Tanzania." Bull World Health Organization 81(2): 116-122.

Donabedian, A. (1988). "The quality of care. How can it be assessed?" JAMA 260(12): 1743-1748.

Donabedian, A. (1990). "The seven pillars of quality." Archives of pathology & laboratory medicine 114 (November): 1115-1118.

Foundation for Sustainable Development (2014). Quality as the missing link between access to healthcare and improved patient outcomes. Express Newsletter 3/14, URL: http://www.novartisfoundation.org/\_file/205/newsletter-3-14.pdf (Access: 11 February 2015).

Kiefer, S. and Kadesha, B. (2015). Report on the Assessment of Quality of Care in Primary Health Care Facilities in the two Pilot Regions, Health for All project, Albania. Study report. Basel: Swiss TPH.

Lechthaler, F. (2015). Study Protocol on the Quality of Care Study in Chad. Unpublished.

Matthys, B. (2013). Assessment of quality of care in primary health care facilities in two pilot rayons of project Sino. Study report. Basel: Swiss TPH.

World Health Organization (2010). Package of Essential Noncommunicable (PEN) Disease Interventions for Primary Health Care in Low-Resource Settings. Geneva: WHO.

World Health Organization (2015). Service Availability and Readiness Survey (SARA). An annual monitoring system for service delivery. Version 2.2. Geneva: WHO.

## **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**

Quality of Care Assessment - Infrastructure Assessment	Answers
Interviewer_ID	
IMEI (International Mobile Equipment Identity)	
Date of interview	
Start time of interview	
Name of municipality	
Name of facility	
Oral consent given by interviewee	yes
Oral Consent given by interviewee	no
Which services do you provide at this facility?	
Family planning	yes
	no
Antenatal care	yes no
Obstetric and newborn care	yes no
Immunization	yes no
Child preventative and curative care	yes
Child preventative and curative care	no
Adolescent health	yes
	no
Sexually transmitted infections	yes
	no
Tuberculosis	yes
	no
Non-communicable diseases	yes
	no
Surgery	yes
	no
Do you provide any outreach activities?	yes no
	110
If yes, SPECIFY	
Do you have laboratory services?	yes
	no

Da very have V year facilities?	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 facility has a rubbish bill which is properly used and not overhowing.	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
g g	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
	no
If the health facility has a functional generator: is fuel available today for	yes
	no
the generator?	
The facility has a functional heating system.	yes

If yes, SPECIFY:	
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)
more do you rotori mator.	bottled water
	water tank/storage
	other
If other, please SPECIFY:	

	T
Functional washing points exist in examination rooms and/or entrance	yes
hall, and soap or hand disinfectants and water are available.	no
Than, and soap of hand distributants and water are available.	110
Labelled containers for medical waste disposal are available in all	yes
required areas (e.g. examination rooms).	no
required areas (e.g. examination rooms).	110
The facility has adequate and cofe disposal of sharps (sharps	1,400
The facility has adequate and safe disposal of sharps (sharps	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
	no
Sharps wasto is temporary stared at a protected place	VOS
Sharps waste is temporary stored at a protected place.	yes
	no
There is regular and appropriate collection for infectious waste.	yes
There is regular and appropriate collection for infectious waste.	
	no
There is regular and appropriate collection for sharps waste.	yes
	no
	110
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
The facility has at least one accessible and functional toilet for staff.	yes
	no
The toilet(s) or latrine is clean.	yes
	no
A washing point is available pear the toilet or letring	Ves
A washing point is available near the toilet or latrine.	yes
	no
Soap and water are available at the washing point near toilet or latrine.	yes
222 mail in the analysis at the maching point float tollot of latillo.	
	no
Public accountability	
Is the facility location visible displayed in public?	yes
12 112 121111, 100011011 1101110 alleptary out its publics	
	no
Are the facility opening hours visibly displayed to the public?	yes
	no
Is a contact phone number visibly displayed to the public?	yes
and the state of the state of the passion	*
	no

	T
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?	*
complaints available at the neath facility?	no
Is information on the violation of the Kosovo law against tobacco	yes
displayed to the public?	no
Is the Charter of Patient's Rights and Responsibilities visibly displayed in	yes
the waiting area?	*
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
COLVIDOR.	
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?	
William of Floater.	
Is there a document or copy available of the following essential	
treatment / management guidelines for different common	
conditions treated in your health facility?	
conditions dedica in your nealth facility !	
Is the booklet on Therapeutic standard guideline for PHC available at	yes
the facility?	no
the radiity:	110
Is the list of essential drugs available at the facility?	yes
	no
Are the fellowing IFO metal-datable distribution in C	
Are the following IEC materials visibly displayed to patients?	
The Calendar of health promotion developed by MOH or IPH	VAC
The Calendar of Health proffiction developed by MOH of IPH	yes
	no
The Calendar of Vaccination/Immunization	VAS
The Calendar of Vaccination/Immunization	yes
The Calendar of Vaccination/Immunization	yes no
	no
Awareness materials (posters, leaflets) (when counseling) based on	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health,	no
Awareness materials (posters, leaflets) (when counseling) based on	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)  Does the facility have the following basic/essential medical	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)  Does the facility have the following basic/essential medical equipment and supplies and are they functional?	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)  Does the facility have the following basic/essential medical	no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)  Does the facility have the following basic/essential medical equipment and supplies and are they functional?  General medical equipment	no yes no
Awareness materials (posters, leaflets) (when counseling) based on standard package info (children, adults, women and reproductive health, seniors, mental health)  Does the facility have the following basic/essential medical equipment and supplies and are they functional?	no

	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

Pen light	available, functional
	available, NOT functional
	not available
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, NOT functional
	not available
Weight scale for children (over 2 years old)	available, 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

Gloves (latex)	available
	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	110
	aveileble functional
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

Curainal anat	available
Surgical coat	
	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
Manager Lands and	
Manitol solution	yes
	no
Diazepam	yes
Біагераііі	
	no
ADRENALINE / Epinephrine	yes
/ ABINETY Epinephinio	no
	110
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
ODAL DELUDRATATION OALTS. LOOP O	
ORAL REHIDRATATION SALT/Tresol (O.R.S)	yes
	no
BENZYLPENICILLIN/ Bipenicillin	
DENZTERENICIELIN/ DIPENICIIIII	yes
	no
METOCLOPRAMIDE/ Methochopramid	yes
INET OCEOT TO WINDE, MOUNCOINOPIANNA	no
PARACETAMOL/Acetaminophen	yes
'	no
Morphin sulphate	yes
	no
Diclofenac	yes
	no
Salbutamol (nebulizer)	yes
	no
Hydrocortison	yes
	no
Controportivos oral (COC DOD) Inicatables DIII Condens	Lyon
Contraceptives: oral (COC, POP), Injectables, DIU, Condoms	yes
	no
Emorganov concentive pill / LEVONORCESTRE	Voc
Emergency conceptive pill / LEVONORGESTREL	yes
	no
Plastic syringes	yes
i idolio dynnigod	no
	L

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
олудоп	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
Quality of Care Assessment - Clinical observation  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview  Name of municipality	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview  Name of municipality	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical review board has approved this study.	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical review board has approved this study.  Your experiences are very important to improve aspects related to	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical review board has approved this study.  Your experiences are very important to improve aspects related to quality of care. Information collected from this interview/questionnaire will	Answers
Quality of Care Assessment - Clinical observation  Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical review board has approved this study.  Your experiences are very important to improve aspects related to quality of care. Information collected from this interview/questionnaire will be used by the Accessible Quality Healthcare Project. Summaries of	Answers
Interviewer_ID  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 selected health facilities of the project. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and ethical review board has approved this study.  Your experiences are very important to improve aspects related to quality of care. Information collected from this interview/questionnaire will be used by the Accessible Quality Healthcare Project. Summaries of findings might also be shared with municipal or national authorities.	Answers

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
uses the patient oard for analimosis	no
For which illness is the patient seen?	arterial hypertension
	diabetes
	ulabeles
	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
Actor questions on the infloor about	no
any specific health complaints	yes
	no
general weakness	yes
	no
urine discharge	yes
dille distrialge	no
vulvovoginitio or prurituo	LVO.
vulvovaginitis or pruritus	yes
	TIO TIO
appetite	yes
	no
ava alaht	
eye-sight	yes no
	110
visit to opthalmalogist	yes
	no
alaahal	
alcohol	yes
	no
smoking	yes
-	no
using other medicine	yes
	no
sedentary way of life	Yes
	no
	l

adherence with diabetes treatment	yes no
Conducts examination	yes
Oction Communication	no
	not applicable
checks blood pressure	yes
	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	yes
	no
auscultation of heart	yes
	no
of abdomen, palpation of liver and signs of percussion	yes
	no
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	yes
	no
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	yes
	no
about alcohol	yes

about smoking	yes
	no
about physical exercise	yes
about physical exercise	no
right ways of care of legs	yes
right ways of sails of rogs	no
potential complication of the illness	yesno
potential complication of the filliess	yesho
potential risks if illness is not treated	yes
	no
importance of adherence to treatment	yes
	no
about follow-up visit	yes
	no
Advices, explains, instructs	yes
	no
	not applicable
about the referral	yes
	no
	not applicable
on prescribed medicines/treatment	yes
	no
	not applicable
Assessment of an adult patient with arterial hypertension - Does the 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	yes no
medical doctor follow the assessment procedures, investigations and treatment guidelines?	
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about	no
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about	no yes
medical doctor follow the assessment procedures, investigations and treatment guidelines?  Asks questions on the illness about  any specific health complaints	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  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	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	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  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  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  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	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  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  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

sedentary way of life	yes
oddinary way or 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	VOS
of chest, auscultation of lungs	yes
	110
auscultation of heart	yes
	no
of abdoman polantian of liver and sings of a security and sings	Lygo
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 diagnosis	Ves
uic situation and diagnosis	yes
	no
the prognosis	yes
· •	no
about needed examinations	yes
	no

about signs of extreme hypertension	yes
	no
about what to do when signs of extreme hypertension occur	yes
	no
nutrition, i.e. food intake	yes
	no
about alcohol	yes
	no
about smoking	yes
	no
about physical exercise	yes
about physical oxorolog	no
	110
about oral contraceptives	Ves
about oral contraceptives	yes
	no
material commitmation of the illustra-	1
potential complication of the illness	yes
	no
potential risks if illness is not treated	yes
	no
importance of adherence to treatment	yes
	no
about follow-up visit	yes
	no
Advices, explains, instructs	Yes
Advices, explains, instructs	Yes
Advices, explains, instructs	
Advices, explains, instructs	Yes
Advices, explains, instructs	no
Advices, explains, instructs	
	no not applicable
Advices, explains, instructs about the referral	no not applicable yes
	no not applicable  yes no
	no not applicable yes
about the referral	no not applicable  yes no not applicable
	no not applicable  yes no not applicable  yes
about the referral	no not applicable  yes no not applicable  yes no
about the referral	no not applicable  yes no not applicable  yes
about the referral on prescribed medicines/treatment	no not applicable  yes no not applicable  yes no
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or	no not applicable  yes no not applicable  yes no
about the referral on prescribed medicines/treatment	no not applicable  yes no not applicable  yes no
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.	no not applicable  yes no not applicable  yes no not applicable
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or	no not applicable  yes no not applicable  yes no
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.	no not applicable  yes no not applicable  yes no not applicable
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about	no not applicable  yes no not applicable  yes no not applicable  yes yes yes
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.	no not applicable  yes no not applicable  yes no not applicable  yes yes yes
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about	no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about	no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no yes
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about takes patient history (general history, specific to disease)	no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about	no not applicable  yes no not applicable  yes no not applicable  yes no yes no yes no yes
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about takes patient history (general history, specific to disease)	no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
about the referral  on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about  takes patient history (general history, specific to disease)  asks open ended questions during history taking	no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no yes no yes no
about the referral on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about takes patient history (general history, specific to disease)	no not applicable  yes no not applicable  yes no not applicable  yes no yes no yes no yes no yes no
about the referral  on prescribed medicines/treatment  Assessment of a patient with other condition than diabetes or arterial hypertension.  Asks questions on the illness about  takes patient history (general history, specific to disease)  asks open ended questions during history taking	no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no yes no yes no

listens to the client and responds to client questions.	yes
listeris to the chefit and responds to chefit 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
Adding coulding beatweats	
Advices, explains, instructs	yes
	no
results of examinations	yes
Toodito of oxaminations	no
the situation and diagnosis	yes
<b>3</b>	no
the prognosis	yes
	no
about needed examinations	yes
	no
aland fallenning (Self)	
about follow-up visit	yes
about follow-up visit	no
	no
Advices, explains, instructs	*
	no yes no
	no yes
	no yes no
Advices, explains, instructs	yes no not applicable
Advices, explains, instructs	yes no not applicable yes
Advices, explains, instructs about the referral	yes no not applicable  yes no
Advices, explains, instructs	yes no not applicable  yes no
Advices, explains, instructs about the referral	yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs about the referral	yes no not applicable  yes no not applicable  yes yes
Advices, explains, instructs  about the referral  on prescribed medicines/treatment	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
Advices, explains, instructs about the referral	yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment	yes no not applicable  yes no not applicable  yes no not applicable  yes yes yes yes yes yes
Advices, explains, instructs  about the referral  on prescribed medicines/treatment	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
Advices, explains, instructs  about the referral  on prescribed medicines/treatment	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment	yes no not applicable  yes no not applicable  yes no not applicable  yes yes yes yes yes yes yes
Advices, explains, instructs  about the referral  on prescribed medicines/treatment	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control measures?	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control measures?  The doctor	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control measures?	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control measures?  The doctor	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable
Advices, explains, instructs  about the referral  on prescribed medicines/treatment  on risks factors/health education  Did the medical doctor apply infection prevention and control measures?  The doctor	yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable  yes no not applicable

washed hands after the procedure (including use of soap).	yes
	no not applicable
	пос арриодого
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
dosed the consultation politery.	no
	not applicable
Dogs the destar degument the consultation is the matient and?	LV00
Does the doctor document the consultation in the patient card?	yes
	110
Thank you very much for the interview.	
Thank you very much for the interview.  Interviewer comments	
Interviewer comments	
Interviewer comments	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  IMEI (International Mobile Equipment Identity)	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview  Name of municipality	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  IMEI (International Mobile Equipment Identity)  Date of interview  Start time of interview	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  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	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  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	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  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	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  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	Answers
Interviewer comments  End time of interview  Quality of Care Assessment - Exit Interview  Interviewer_ID  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 might also be shared with regional or national authorities.  The information collected from you will be kept confidential within the research team. Instead of using your name, we will give a non-personal identification number which cannot be traced individually. 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. However, we hope you will answer the	Answers

Have you been here today for issues related to your own health or the one of a child (child must be with the person)?	yes no
Socio-demographic information	
Patients' gender	female
ratients gender	male
Year of birth	
Mother/father/caretaker older 18 with child (child is patient)	yes no
Satisfaction with health service	
	very unsatisfied
Overall: How entirfied were you with the convices you received today?	unsatisfied
Overall: How 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
	Curci
Aspects of todays consultation	
At the beginning of the consultation, were you given the opportunity to explain your health problem?	yes 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 investigations and your health problem and treatment?	yes no
Did the medical doctor listen carefully to your concerns and questions and did he/she give satisfactory answers?	yes 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
	•

	difficult or fact broothing
	difficult or fast breathing
	fever
	chest in drawing
	chest pain especially when breathing deeply
	blue lips and nail beds (cyanosis)
	seizures
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have?	inability to swallow
	inability to drink or breastfeed
	vomiting after each drinking or
	breastfeeding
	irritation
	dehydration
	comorbidities/polyorganic
	deficiency
	blood streaked sputum
	don't know
	other
PLEASE SPECIFY	
	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
Smoky surroundings (due to tobacco smoking, fires, etc) have no effect	agree
on whether a baby catches pneumonia.	neither agree, nor disagree
	disagree
	strongly disagree
	drinking dirty water
	eating contaminated food by
What do you think are causes of diarrhea?	unwashed hands after defecation
	eating contaminated food
	food allergies
	other
	don't know
PLEASE SPECIFY	
	drinking clean water
	protect drinking water from
How can you prevent diarrhea?	contamination
	washing hands before preparing
	and eating food

	safe disposal feces by using safe
	latrine
	other
	don't know
PLEASE SPECIFY	
What did you do when your child last had diarrhea?	visited doctor/family medicine center
	tried applying traditional therapy at home
	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
TELAGE OF EOIL T	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
	high blood pressure
	obesity
Which risk factors for cardiovascular disease do you know?	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
Which of the following is a typical symptom of a heart attack?	headache
	feeling thirsty
	pain in the legs
	don't know
	frequent need to urinate
	lower back pain
Which of the following is not a typical symptom caused by diabetes?	tiredness
	unexplained weight loss
	don't know
	strongly agree
	agree
How much do you agree with the following statement: Overweight people are healthier.	neither agree, nor disagree
are nealthier.	disagree
	strongly disagree
	strongly agree
	agree
How much do you agree with the following statement: Smoking does not	neither agree, nor disagree
effect the health.	
	disagree
	strongly disagree
	strongly agree
How much do you agree with the following statement: Changing my	agree
lifestyle today will not affect my health later.	neither agree, nor disagree
	disagree
	strongly disagree
	strongly agree
How much do you agree with the following statement: I cannot influence	agree
my health because it depends on the doctors.	neither agree, nor disagree
,	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
	eat less sugar
What have you already changed in your life to decrease your risk of	eat more fruits and vegetables
getting cardiovascular disease? (do not read responses)	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	former.
	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	
	1

