Primary Health Care in Kosovo

SUMMARY REPORT ZUBIN POTOK MUNICIPALITY

Quality of Care Study 2018

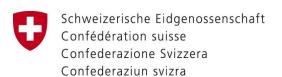


SDC project implemented by Swiss TPH and Save the Children

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Summary Report Zubin Potok Municipality



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1 Background & Objectives

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

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

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

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

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

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

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

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

2 Methodology

2.1 Study design

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

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

2.2 Study area & target population

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

Inclusion criteria for the baseline assessment

Inclusion criteria for the health facilities were as follows:

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

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

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

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

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

2.3 Sample size and sampling strategy

Sampling of health facilities

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

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

Sampling of providers for provider-client observations

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

Sampling of patients for exit interviews

For the exit interviews, <u>all</u> patients that received care for themselves, or for a child in their care, at the facility were interviewed for the exit interview, provided they gave consent¹. 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 5th 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)² 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

¹ Depending on the capacity of the data collectors.

² 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 3rd of August, 2018 (Reference Number: 04/2018).

3 Results

3.1 Summary of results for municipality Zubin Potok

3.1.1 Infrastructure

- One facility was included in the study PHC Zubin Potok.
- The facility provides a limited range of services.
- The infrastructure of the facility, the cleanliness and the maintenance were mostly satisfactory. The facility does not have access to running water but other hygiene measures were found to be adequate.
- Public accountability items, guidelines and information material were present.
- General medical equipment was mostly available and functional although some basic PHC items were missing.
- Besides a gynecological bed and materials for the Pap smear test all gynecological equipment was present.
- Additionally, an EKG machine, a centrifuge, an ultrasound machine and a microscope were available but other items were missing.
- A selection of equipment to assess and monitor child growth was presented.
- Many items of medication and medical products were not available.

3.1.2 Clinical observation

- In total 84 clinical observations were conducted.
- The majority of patients presented for medical problems other than diabetes or hypertension (49), or for referral (20).
- 9 patients consulted for hypertension and 6 for diabetes.
- The score for the adherence to principles of history and physical examination was very good at 93%.
- Infection prevention and control was not very satisfactory. The score (29%) indicates that in cases where infection prevention and control measures were needed, they were often not performed. The confidence interval shows that there was only little variation between the observations concerning the performance.
- The facility received an average score of 52% for their treatment of patients with diabetes. The subgroup with the lowest score was "conducting an examination".
- The same applies to the treatment of patients with hypertension.
- The treatment of patients with illnesses other than hypertension and diabetes received a score of 52%, with highest achievements in the subgroup "questioning the patient".
- A score of 47% was achieved for the treatment of patients who came in for referrals. Again, the subgroup with the highest score was "questioning the patient".

3.1.3 Exit Interviews

- In total 51 patients (including 31 women) were interviewed.
- Half of the patients did not visit the health care facility in the last three months.
- The majority (42) of the patients were either satisfied or very satisfied. 8 patients were unsatisfied and 1 very unsatisfied.
- The aspects with the lowest satisfaction were the questions concerning the current intake of prescriptions, the advice received for the current health problem and the explanation about intake of the prescribed medicine.

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 Zubin Potok Municipality

	Name of the facility	No. of clinical observations	No. of Exit interviews
1	PHC - Zubin Potok	84	51

Table 3 Overall quality scores for Zubin Potok Municipality

	PHC - Zubin Potok
Infrastructure score (structural quality)	73%
Clinical score (process quality)	67%
Exit score (outcome quality)	79%

3.2.3 Infrastructure

Table 4 Services offered

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

Table 5 Facility infrastructure and overall cleanliness and maintenance

Facility	PHC - Zubin Potok
The facility and immediate surroundings (facility yard, waiting area outside) are free from long grass, paper debris and solid waste.	yes
The facility has a rubbish bin which is properly used and not overflowing.	yes
There is a designated waiting room for patients.	yes
The current waiting area is mopped, free of dust, trash; dirt, spider webs, and generally tidy.	yes
There is at least one designated consulting room for women.	yes
There is at least one designated consulting room for children.	yes
All examination room(s) ensure(s) privacy/confidentiality (door, window blind, curtain).	yes
All examination rooms are mopped, free of dust, trash; dirt, spider webs, and the rooms are generally tidy.	yes
All examination rooms are well illuminated.	yes
The facility has electricity	yes
During the past 7 working days, did you have any power cuts of more than 1 hour during opening hours.	no
Is there routinely a time of year when this facility has a severe shortage or lack of power?	yes
If yes, specify:	Zima
The facility has a functional generator	yes
If the health facility has a functional generator: is fuel available today for the generator?	yes
The facility has a functional heating system.	yes
If yes, specify:	not applicable
Has the facility a functional communication equipment (functional landline telephone or cell phone) available (either private phone or facility phone)?	yes
What type of phone do you have available?	Cell phone of facility, Landline of facility
The facility has functional computer.	no
The facility has a functional printer.	no
The facility has internet access.	yes
During the past 7 working days did you have internet for at least 1 hour every day?	yes
The administration shelf is filed and in order.	yes
Does the facility have a patient record system?	yes
In which year was the patient record system introduced?	2001
Are there sufficient empty patient record cards available?	yes

Table 6 Hygiene

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

Table 7 Public accountability items

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

Table 8 Availability of guidelines and information materials

	PHC - Zubin Potok
Therapeutic standard guideline for PHC	yes
List of essential drugs	yes
Calendar for health promotion	yes
Vaccination calendar	yes
Are awareness materials based on standard package info	yes

Table 9 Availability of general medical equipment

Facility	PHC - Zubin Potok
Microsurgery	available, functional
Nebulizer	available, functional
Ambu mask	available, functional
Strong source of light in good condition (portable)	available, functional
Nasal speculum	available, functional
Otoscope	available, functional
Ophthalmoscope	available, functional
Doppler	not available
Glucometer	available, not functional
Peak flow meter	not available
Tape measure	available, functional
Pen light	available, functional
Head light	available, functional
Neurological hammer	available, functional
Weight scale for adults	available, functional
Weight scale for children (over 2 years old)	available, functional
Weight scale for infants and toddlers (up to 2 years old)	available, functional
Sphygmomanometer for children	not available
Sphygmomanometer for adults	available, functional
Stethoscope for children	not available
Stethoscope for adults	available, functional
Obstetrical stethoscope/Fetoscope	not available
Pelvimeter	not available
Sterilization equipment and anti-septical protocol	available, functional
Pulse oximeter	available, not functional
Refrigerator	available, functional
Vaccine refrigerator/portable	available, functional
Height meter board for children (up to two years old)	not available
Meter for height measuring (children over 2 years old)	available, functional
Thermometer	available, functional
Tuning fork	not available
Table for vision testing	available, functional
Ear syringe	available, functional
Scissors	available, functional
Timer	available, functional
Snellen eye chart	not available
Children growth chart	not available
Tongue depressor	available

Table 10 Availability of Gynaecological service equipment

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

Table 11 Availability of advanced equipment

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

Table 12 Availability of equipment to assess and monitor child growth

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

Table 13 Availability of medical products

Facility	PHC - Zubin Potok
Vaccines	yes
Water for injections	yes
Atropine sulphate	no
Dextrose solution	no
Manitol solution	
Diazepam	no
Adrenaline / epinephrine	yes
Furosemid	yes
	yes
Natrium chloride solution	yes
Glyceryl trinitrate/nitroglycerin	yes
Dexamethason	yes
Antitetanus serum	yes
Antivenom imunoglobulin/antivipera serum	yes
Oral rehydratation salt/tresol (o.r.s)	no
Benzylpenicillin/ bipenicillin	yes
Metoclopramide/ methochopramid	yes
Paracetamol/acetaminophen	no
Morphine sulphate	no
Diclofenac	yes
Salbutamol (nebulizer)	no
Hydrocortisone	no
Contraceptives: oral (COC, POP), Injectables, DIU, Condoms	no
Emergency conceptive pill/levonorgestrel	no
Plastic syringes	yes
Needles for syringes	yes
Povidon jod/iodine solution	yes
Surgical gloves	yes
Amoxicillin/erythromycin	no
Chloropiramine/chlorfeniramin (oral antihistamine)	no
Acid acetylsalicylic/aspirin	no
Atenolol/metoprolol	no
Sol. glucose	yes
Hyoscine butylbromide/buscopan	no
Folic acid	no
Oxygen	yes
Bandages	yes
Gauze	yes
Hydrogen peroxide	yes
	1

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

3.2.4 Clinical Observations

Table 14 Clinical observations overview table

	PHC - Zubin Potok % (n=84)
Number of observations (patients)	100%
- women	67% (56)
Observations by type of doctors	
- Family Medical Specialist	0% (0)
- General Practitioner	70% (59)
- Other Specialist	30% (25)
Age of patient	
- <5	1% (1)
- 5 - 18	5% (4)
- 19 - 49	44% (37)
- 50 - 65	29% (24)
- >65	21% (18)
Reason for visit	'
- Hypertension	11% (9)
- Diabetes	7% (6)
- Other	58% (49)
-Referral	24% (20)

Table 15 Adherence to principles of history and physical examination

	PHC - Zubin Potok (n=84)
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	93% (91% - 95%)

Table 16 Infection prevention and control

	PHC - Zubin Potok (n=84)
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	29% (6% - 52%)

Table 17 Patients with diabetes

Diabetes	PHC - Zubin Potok (n=6)
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)	62% (36% - 87%)
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.	19% (0% - 42%)
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)	64% (42% - 87%)
Overall Score	52% (30% - 75%)

Table 18 Patients with hypertension

Hypertension	PHC - Zubin Potok (n=9)
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% (38% - 68%)
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	40% (22% - 57%)
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)	63% (40% - 86%)
Overall Score	54% (36% - 72%)

Table 19 Patients consulting for other reasons than diabetes or hypertension

Other diseases	PHC - Zubin Potok (n=49)
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.	76% (66% - 85%)
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.	40% (25% - 55%)
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)	40% (31% - 49%)
Overall Score	52% (44% - 60%)

Table 20 Patients consulting for referrals

Referrals	PHC - Zubin Potok (n=20)
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% (56% - 82%)
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.	43% (3% - 83%)
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)	33% (20% - 46%)
Overall Score	47% (36% - 58%)

3.2.5 Exit Interviews

Table 21 Socio-demographic attributes among respondents of exit interviews

	PHC - Zubin Potok % (n=51)
Number of interviews	100%
- Women	61% (31)
Education	•
- Never attended school	0% (0)
- Completed lower primary school	0% (0)
- Completed primary school	10% (5)
- Completed high school	59% (30)
- Completed college / university	31% (16)
- Other	0% (0)
Occupation	•
- Farmer	2% (1)
- Employed	18% (9)
- Self-employed	14% (7)
- Housewife	10% (5)
- Governmental employee	10% (5)
- Unemployed	32% (16)
- Pensioner	4% (2)
- Pupil/Student	0% (0)
- Other	10% (5)
Economic or social aid	20% (10)

Table 22 Frequency and reason of visit of exit interviews

	PHC - Zubin Potok % (n=51)	
Excluding today: how often did you access this HC over the past 3 month?		
- Did not access this HC in the past 3 months	51% (26)	
- 1-3 times	37% (19)	
- More than 3 times	12% (6)	
What was the reason for your consultation today?		
- Chronic condition	22% (11)	
- Antenatal care	2% (1)	
- Child health	18% (9)	
- Immunisation	0% (0)	
- Other	59% (30)	

Table 23 Overall satisfaction with health services - exit interviews

	PHC - Zubin Potok % (n=51)
Overall: How satisfied were you with the services you received today	
Very unsatisfied	2% (1)
Unsatisfied	16% (8)
Satisfied	53% (27)
Very satisfied	29% (15)

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

	PHC - Zubin Potok % (n=51)
Patient was given the opportunity to explain the health problem	100% (51)
Patients privacy was ensured	92% (47)
Doctor explained the questioning and physical examinations and the health problem*	94% (29)
Doctor explained the intake of prescribed medicine**	72% (18)
Doctor asked if patient currently takes prescriptions	49% (25)
Patient was given chance to ask questions about the investigation, health problem and treatment	80% (41)
Doctor listened carefully to patients concerns and questions and gave satisfactory answers	80% (41)
Patient got advice on health problem	63% (32)
Medical doctor was polite during consultation	96% (49)

^{*} relevant only when examination was conducted; ** only relevant if medicine were prescribed

Table 25 Payment for health service - exit interviews

	PHC - Zubin Potok % (n=51)
Did you pay today for your health consultation?	0% (0)
Did you get a receipt for your payment?	Not applicable

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Appendix A: Abbreviations

AQH Accessible Quality Healthcare

CI Confidence interval

DHSW Directors of Health and Social Welfare

FM Family Medicine

FMC Family Medicine Centre GP General Practitioner

MFMC Main Family Medicine Centre

MoH Ministry of Health ODK Open Data Kit

PHC Primary Health Care QoC Quality of Care

SARA Service Availability and Readiness Assessment (SARA)

SDC Swiss Agency for Development and Cooperation

Swiss TPH Swiss Tropical and Public Health Institute

WHO World Health Organisation

Appendix B: Questionnaire

Quality of Care Assessment - Infrastructure Assessment	Answers
Interviewer_ID	
IMEI (International Mobile Equipment Identity)	
inici (international Mobile Equipment Identity)	
Date of interview	
Start time of interview	
Name of municipality	
Name of facility	
Oral consent given by interviewee	yes
	no
Which services do you provide at this facility?	
Family planning	yes
	TIO .
Antenatal care	yes
	no
Obstetric and newborn care	yes
	no
Immunization	yes
	no
Child preventative and curative care	yes
	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
If yes, SPECIFY	
Do you have laboratory services?	yes
-	no

Do you have X-ray facilities?	yes
	no
	110
How many days of the working week is at least one doctor present to	1-2 days per week
provide general primary health care services?	
promate general primary meaning and controct.	3-4 days per week
	3-4 days per week
	5 or more days per week
	, '
Programme Transfer of the Control of	
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
5 9 man, paper and an action material	
The facility has a rubbish bin which is properly used and not overflowing.	yes
	no
There is a designated waiting room for patients.	yes
There is a designated waiting room for patients.	*
	no
The current waiting area is manned from of dust tracks dist asides water	VOC
The current waiting area is mopped, free of dust, trash; dirt, spider webs,	yes
and generally tidy.	no
5 , ,	
There is at least one designated consulting room for women.	yes
o.o.o.o.o.o.o.o.o.o.o.o.o.o.o.o.o.o	*
	no
There is at least one designated consulting room for children.	yes
o.o.o.o.o.o.o.o.o.o.o.o.o.o.o.o.o.o	*
	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
and the reeme are generally may.	
All examination rooms are well illuminated.	yes
7 iii Caariii latiori 100m3 are weli iliamiilatea.	
	no
The facility has electricity	yes
The facility flac dioctricity	*
	no
During the past 7 working days, did you have any power cuts of more	VAS
	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 you ODECIEV.	
If yes, SPECIFY:	
The facility has a functional generator	yes
astj mas a ranotional gonorator	*
	no
If the health facility has a functional generator: is fuel available today for	VAS
· · · · · · · · · · · · · · · · · · ·	yes
the generator?	no
The facility has a functional heating system.	yes
,	*
	no
	<u> </u>

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)
	bottled water
	water tank/storage
	other
If other, please SPECIFY:	

	1
Functional washing points exist in examination rooms and/or entrance	yes
hall, and soap or hand disinfectants and water are available.	no
Labellad containers for madical waste disposal are evallable in all	1,,,,,
Labelled containers for medical waste disposal are available in all	yes
required areas (e.g. examination rooms).	no
The facility has adequate and safe disposal of sharps (sharps	yes
box/container).	no
bow containory.	
The facility has adequate and safe disposal of infectious waste.	yes
,,	no
	110
Infectious waste is temporary stored at a protected place.	yes
Throughout made to temperary stored at a protested place.	
	no
Sharps waste is temporary stored at a protected place.	yes
	no
There is no notice and appearance of the Property of the Control o	
There is regular and appropriate collection for infectious waste.	yes
	no
There is regular and appropriate collection for sharps waste.	yes
There is regular and appropriate collection for sharps waste.	
	no
The facility has essential disinfectants and antiseptics.	yes
,,	no
	110
The facility has chlorine solution or other disinfectants to disinfect	yes
contaminated instruments in all required areas (e.g. in examination	no
rooms).	
1001113).	
T	+
The facility has at least one accessible and functional toilet for patients.	yes
	no
The facility has at least one accessible and functional toilet for staff.	yes
The facility has at least one accessible and functional tollet for stan.	
	no
The toilet(s) or latrine is clean.	yes
	no
A 12 24 911 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	+
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.	Ves
Ocap and water are available at the washing point hear tollet or lattifie.	yes
	no
	1
Public accountability	
Public accountability	
	V00
Public accountability Is the facility location visible displayed in public?	yes
	yes no
Is the facility location visible displayed in public?	no
	no yes
Is the facility location visible displayed in public?	no
Is the facility location visible displayed in public?	no yes
Is the facility location visible displayed in public? Are the facility opening hours visibly displayed to the public?	yes no
Is the facility location visible displayed in public?	no yes no yes
Is the facility location visible displayed in public? Are the facility opening hours visibly displayed to the public?	yes no
Is the facility location visible displayed in public? Are the facility opening hours visibly displayed to the public?	no yes no yes

	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?	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?	no
Do any of the leaflets/posters at the facility have a logo/trademark from a	yes
pharmaceutical company?	no
Does the facility have a box/book to get public opinion on the quality of	yes
services?	no
Does the facility have mechanisms to facilitate referral of emergency	yes
patients to the next level?	no
When was the last quality inspection by the health inspectors from the	
Ministry of Health?	
Is there a document or copy available of the following essential	
treatment / management guidelines for different common conditions treated in your health facility?	
Is the booklet on Therapeutic standard guideline for PHC available at	yes
the facility?	no
Is the list of essential drugs available at the facility?	yes
·	no
Are the following IEC materials visibly displayed to patients?	
The Calendar of health promotion developed by MOH or IPH	yes
	no
The Calendar of Vaccination/Immunization	yes
	no
Awareness materials (posters, leaflets) (when counseling) based on	yes
standard package info (children, adults, women and reproductive health, seniors, mental health)	no
Does the facility have the following basic/essential medical equipment and supplies and are they functional?	
General medical equipment	
Microsurgery	available, functional

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

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
Does the delivery set contain	no
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

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

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

Dextrose solution	yes
	no
Manitol solution	yes
	no
Diazepam	yes
Бигорин	no
ADRENALINE / Epinephrine	yes
	no
Furosemid	yes
i diosernia	no
Natrium chloride solution	yes
	no
GLYCERYL TRINITRATE/Nitroglycerin	yes
OLIOLITE IMMITATE/Miloglycelli	no
Dexamethason	yes
	no
Antitetanus serum	1400
Antitetarius serum	yes
	110
ANTIVENOM IMUNOGLOBULIN/Antivipera serum	yes
	no
ODAL DELINDRATATION CALLET	
ORAL REHIDRATATION SALT/Tresol (O.R.S)	yes
	no
BENZYLPENICILLIN/ Bipenicillin	yes
	no
METOCLORDANIDE / Matheadamanid	1,100
METOCLOPRAMIDE/ Methochopramid	yes
PARACETAMOL/Acetaminophen	yes
	no
Morphin sulphate	1,400
inorphin sulphate	yes
Diclofenac	yes
	no
Salbutamol (nebulizer)	Vec
Jaibutatiioi (tiebulizei)	yes
Hydrocortison	yes
	no
Contraceptives: oral (COC, POP), Injectables, DIU, Condoms	Vec
Contraceptives. Grai (COC, FOF), Injectables, DIO, Condoms	yes
	1.5
Emergency conceptive pill / LEVONORGESTREL	yes
	no
Plantia avringas	Lyon
Plastic syringes	yes
	110

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

	ı
Test strips for Glucometer	yes no
Helica and the took state a	
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	
Programme 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	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 Name of facility	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	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
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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	
Profile of fleditif Staff	
Staff name	
Doctors' gender	female
	mala
	male
Doctors' year of birth	
Type of doctor that is observed	family doctor
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	general doctor
	specialist
Please specify:	
Tricase specify.	
Adherence of medical doctor to principles of clinical history and	
Adherence of medical doctor to principles of clinical history and	yes
Adherence of medical doctor to principles of clinical history and physical examination	yes no
Adherence of medical doctor to principles of clinical history and physical examination The medical doctor	no
Adherence of medical doctor to principles of clinical history and physical examination	no yes
Adherence of medical doctor to principles of clinical history and physical examination The medical doctor	no
Adherence of medical doctor to principles of clinical history and physical examination The medical doctor	no yes
Adherence of medical doctor to principles of clinical history and physical examination The medical doctor greets the client.	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
danoronos mar diapotos trodunono	no
Conducts examination	yes
	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
	no

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

sedentary way of life	yes
	no
Asks questions on the illness about	yes
	no not applicable
	пот аррисавіе
high blood pressure	yes
	no
	not applicable
adherence with hypertension treatment	yes
	no
	not applicable
Conducts examination	VAS
Conducts examination	yes no
checks blood pressure	yes
	no
	110
weight measurement / calculation of body-mass index	yes
	no
of skin, mucus membranes, nodes of lymph, ears, nose, thyroid	yes
glands	no
gando	
of eyes	yes
	no
of chest, auscultation of lungs	yes
of chest, adscultation of fungs	no
auscultation of heart	yes
	no
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	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

	1
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
	110
about alcohol	Ves
about alconor	yes
	no
ah aut am aliin a	
about smoking	yes
	no
about physical exercise	yes
	no
about oral contraceptives	yes
·	no
potential complication of the illness	yes
potential complication of the lillion	
	no
notantial riaka if illnoon is not tracted	VOC
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
Advisoo, explaine, mediate	100
	l no
	no
	not applicable
about the referral	not applicable
about the referral	not applicable yes
about the referral	not applicable yes no
about the referral	not applicable yes
	not applicable yes no not applicable
about the referral on prescribed medicines/treatment	not applicable yes no
	not applicable yes no not applicable
	not applicable yes no not applicable yes
	not applicable yes no not applicable yes no
on prescribed medicines/treatment	not applicable yes no not applicable yes no
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or	not applicable yes no not applicable yes no
on prescribed medicines/treatment	not applicable yes no not applicable yes no
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or arterial hypertension.	not applicable yes no not applicable yes no not applicable
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or	not applicable yes no not applicable yes no not applicable yes yes yes
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or arterial hypertension.	not applicable yes no not applicable yes no not applicable
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or arterial hypertension. Asks questions on the illness about	not applicable yes no not applicable yes no not applicable yes no not applicable yes no
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or arterial hypertension.	not applicable yes no not applicable yes no not applicable yes no not applicable yes no yes
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or arterial hypertension. Asks questions on the illness about	not applicable yes no not applicable yes no not applicable yes no not applicable yes no
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)	not applicable yes no not applicable yes no not applicable yes no not applicable yes no onot applicable
on prescribed medicines/treatment Assessment of a patient with other condition than diabetes or arterial hypertension. Asks questions on the illness about	not applicable yes no not applicable yes no not applicable yes no not applicable yes no yes
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)	not applicable yes no not applicable yes no not applicable yes no not applicable yes no onot applicable
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)	not applicable yes no not applicable yes no not applicable yes no not applicable yes no yes no yes no
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)	not applicable yes no not applicable yes no not applicable yes no not applicable yes no yes no yes no
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	not applicable yes no not applicable yes no not applicable yes no yes no yes no yes no yes no yes
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	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
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	no
Conducts examination	yes
	no not applicable
	not applicable
performs medical examinations and other investigations as	yes
individually required.	no
	not applicable
gives clear explanations to the patient concerning the purpose of	yes
medical examinations and other investigations.	no
· ·	not applicable
Advices, explains, instructs	Vas
Advices, explains, instructs	yes
results of examinations	yes
	no
the situation and diagnosis	yes
	no
Abo magazacio	
the prognosis	yes
	no
about needed examinations	yes
	no
about follow-up visit	L VOC
I apout follow-up visit	yes
or	*
	no
Advices, explains, instructs	no yes
	yes no
	no yes
	yes no
Advices, explains, instructs	yes no not applicable
Advices, explains, instructs	yes no not applicable yes
Advices, explains, instructs about the referral	no yes no not applicable yes no not applicable
Advices, explains, instructs	no yes no not applicable yes no
Advices, explains, instructs about the referral	no yes no not applicable yes no not applicable yes
Advices, explains, instructs about the referral on prescribed medicines/treatment	no yes no not applicable yes no not applicable yes no not applicable yes no not applicable
Advices, explains, instructs about the referral	no yes no not applicable yes no not applicable yes no not applicable yes no
Advices, explains, instructs about the referral on prescribed medicines/treatment	no 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 no not applicable 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 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?	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 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 precedure (including use of seen)	
washed hands after the procedure (including use of soap).	yes
	no not applicable
	not applicable
applied proper decontamination procedures (e.g. soaking	yes
contaminated instruments into a bucket with chlorine or any other	no
disinfectant)	not applicable
,	
put on gloves where required.	yes
	no
	not applicable
put on a mask where required.	Vec
put on a mask where required.	yes
	not applicable
	not applicable
closed the consultation politely.	yes
·	no
	not applicable
Does the doctor document the consultation in the patient card?	yes
	no
Thank you very much for the interview.	
Interviewe comments	
Interviewer comments	
End time of interview	
Quality of Care Assessment - Exit Interview	Answers
Interviewer_ID	
Interviewer_ID IMEI (International Mobile Equipment Identity)	
IMEI (International Mobile Equipment Identity)	
IMEI (International Mobile Equipment Identity) Date of interview	
IMEI (International Mobile Equipment Identity) Date of interview Start time of interview	
IMEI (International Mobile Equipment Identity) Date of interview Start time of interview Name of municipality	
IMEI (International Mobile Equipment Identity) Date of interview Start time of interview Name of municipality Name of facility Good morning! My name is [NAME]. We are here on behalf of the Accessible Quality Healthcare Project funded by the Swiss Development Cooperation to conduct a survey of health facilities in our project area. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and the ethical review	
IMEI (International Mobile Equipment Identity) Date of interview Start time of interview Name of municipality Name of facility Good morning! My name is [NAME]. We are here on behalf of the Accessible Quality Healthcare Project funded by the Swiss Development Cooperation to conduct a survey of health facilities in our project area. The objective of this study is to assess the quality of health care services provided in health facilities. The Ministry of Health and the ethical review board has approved this study. We would like to interview people who have today consulted the medical doctor for their own health issues or for a child. Your experiences are very important to improve aspects related to quality of care. Information collected from this interview/questionnaire will be used by Accessible Quality Healthcare Project. Summaries of findings	
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	yes

one of a child (child must be with the person)?	
Socia domographic information	
Socio-demographic information	
Patients' gender female	
male	
Year of birth	
Mother/father/caretaker older 18 with child (child is patient) yes no	
Satisfaction with health service	
very unsatisfied	
Overall: How satisfied were you with the services you received today?	
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 3 months	e past
HC? 1-3 times	
more than 3 times	
chronic condition	
antenatal care	
What was the reason for your consultation today? child health	
immunisation	
other	
conduct an examination	
write you a prescription	
Did the medical doctor Other	
Aspects of todays consultation	
At the beginning of the consultation, were you given the opportunity to yes	
explain your health problem?	
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 yes	
to you?	
Did the medical doctor ask if you are currently taking any (other) prescriptions? yes 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?	
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 no	
some more questions?	
Knowledge, Attitude and Practice	

In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Inability to swallow Inability to drink or breastfeed Vomiting after each drinking or breastfeeding Irritation Infections (ARI) have? In your opinion, how do people get infected with ARI? In your opinion, how do people get infected with ARI?
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory 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 In your opinion, how do people get infected with ARI? In your opinion, how do people get infected with ARI? In your opinion, how do people get infected with ARI?
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Inability to swallow Inability to drink or breastfeed Vomiting after each drinking or breastfeeding Irritation In your opinion, what are symptoms that children with Acute Respiratory Inability to swallow Inability to swallow Inability to drink or breastfeed Vomiting after each drinking or breastfeeding Irritation In your opinion, have opinions that children with Acute Respiratory Inability to swallow Inability to swallow Inability to drink or breastfeed Vomiting after each drinking or breastfeed Vomiting after
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Inability to swallow Inability to drink or breastfeed vomiting after each drinking or breastfeeding Irritation In your opinion 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
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Inability to swallow Inability to swallow Inability to swallow Inability to drink or breastfeed Vomiting after each drinking or breastfeeding Irritation In your opinion, have open that children with Acute Respiratory Inability to swallow Inability to swallow Inability to swallow Inability to swallow Inability to drink or breastfeed Vomiting after each drinking or breastfeeding Irritation In your opinion, have open that children with Acute Respiratory Inability to swallow Inability to
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? Infect
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? Infability to swallow Inability
In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory Infections (ARI) have? In your opinion, what are symptoms that children with Acute Respiratory 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
Infections (ARI) have? 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
Voliding after each difficility of 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
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? dehydration comorbidities/polyorganic deficiency blood streaked sputum don't know other dirty hands
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? deficiency blood streaked sputum don't know other air droplets fomites
deficiency blood streaked sputum don't know other PLEASE SPECIFY air droplets fomites In your opinion, how do people get infected with ARI? deficiency blood streaked sputum don't know other air droplets fomites dirty hands
don't know other PLEASE SPECIFY air droplets fomites In your opinion, how do people get infected with ARI? dirty hands
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In your opinion, how do people get infected with ARI? fomites dirty hands
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
agree
Knowing the symptoms and warning signs of ARI will help to visit the
doctor in time. disagree disagree
strongly disagree
strongly agree
agree
Smoky surroundings (due to tobacco smoking, fires, etc) have no effect
on whether a baby catches pneumonia. disagree disagree
strongly disagree
drinking dirty water
eating contaminated food by
unwashed hands after defecation
What do you think are causes of diarrhea? eating contaminated food
food allergies
other
don't know
PLEASE SPECIFY
drinking clean water
How can you prevent diarrhea? protect drinking water from contamination
washing hands before preparing and eating food

	safe disposal feces by using safe
	latrine
	other
	don't know
PLEASE SPECIFY	
- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	visited doctor/family medicine center tried applying traditional therapy
What did you do when your child last had diarrhea?	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	
	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?
Child's food diversity during the last 24 hours: Did you child eat any of the	Any vegetables/ cucumbers, 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	
	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
	strongly disagree
Non-communicable diseases	Strongly disagree
14011-6011111UIIIUUDIG UISGOSSS	diabetes
	high blood pressure
Which risk factors for cardiovascular disease do you know?	obesity
	smoking/tobacco use (Nos)
	high cholesterol/high blood fat
	to contrar a little constitut
	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
How much do you gares with the following statements Overweight months	agree
How much do you agree with the following statement: Overweight people are healthier.	neither agree, nor disagree
	disagree
	strongly disagree
	strongly agree
	agree
How much do you agree with the following statement: Smoking does not effect the health.	neither agree, nor disagree
enect the health.	disagree
	strongly disagree
	strongly agree
	agree
How much do you agree with the following statement: Changing my	neither agree, nor disagree
lifestyle today will not affect my health later.	disagree
	strongly disagree
	strongly agree
	agree
How much do you agree with the following statement: I cannot influence	neither agree, nor disagree
my health because it depends on the doctors.	disagree
Are you currently taking measures to have a healthy lifestyle?	strongly disagree
	no, not at the moment
	I am trying from time to time
	yes, sometimes
	yes frequently
	not motivated
How motivated are you to change your lifestlye?	rather not motivated
	rather motivated
	motivated
	do more physical exercise
	lose weight
	eat less fat
What have you already changed in your life to decrease your risk of getting cardiovascular disease? (do not read responses)	eat less sugar
	eat more fruits and vegetables
	stop smoking /stop using Nos
	control my diabetes more actively (if applicable)
	control my high blood pressure
	more actively (if applicable)

I have never tried
yes no
benefitting from any economic or social aid scheme
health insurance
other
yes no
yes no
never attended school
completed lower primary school (max 5 years)
completed primary school (9 years)
completed high school (12 years)
completed college/university
other
farmer
employed
self-employed business
housewife
governmental employee, teacher, administrative / professional,
unemployed
pensioner
Other

