

RHRC CONSORTIUM MONITORING AND EVALUATION TOOLKIT

FACILITY ASSESSMENT PROTOCOL

Purpose The purpose of this tool is to help you assess existing capacity of health facilities to meet the reproductive health needs of conflict-affected populations. This tool is meant to be used in conjunction with other tools, as this tool alone will not sufficiently determine what services are needed by a particular refugee population.

Description Facility assessment is an inventory of the places where health care may be provided and the services provided at these sites.

Ethical Considerations

Approvals

Before you begin a study, you must obtain certain permissions for ethical, political and logistical reasons. Some groups you may need to obtain permission from include UNHCR, Ministry of Health, civil authorities in your district, community representatives, your own organization and partner organizations. The consent of the individuals interviewed is always required.

Permission should be sought to work with facility staff. It can be helpful to have the written support of the lead organizing agency staff requesting access to facilities. With prior approval of the administration, it may be possible to arrange spontaneous visits to observe the facilities on an average day.

Informed Consent

Every respondent has the right to refuse the interview, or to refuse to answer specific questions. The interviewers must respect this right.

Privacy

It is important that an interview with each respondent (staff member, facility client, etc.) be conducted in a manner that is comfortable for her or him, and in which she or he is able to speak openly and honestly.

No other adult man, woman, older child should be present or be able to hear the interview. Small children may be present. If the respondent indicates that she or he is uncomfortable holding the interview at the facility, the interview can be done at another place or at a later time.

Confidentiality

The interviewers may not discuss the respondents' answers with anyone, except the supervisor when clarification is needed. Respondents' names or other identifying information should not appear on the questionnaire; there should be no way to link specific responses to a specific respondent.

Data Collection Forms

You may use any or all of the following instruments which can be adapted to your particular situation. [Click here](#) for examples of these tools.

- Description of health facility, including inventory of services provided;
- Staffing and coverage;
- Inventory of equipment and supplies;
- Service statistics record.

In preparing to use the tools, you should meet with the facility management team to discuss why you want the information and how you intend to use it. Share the tools with the management so they are not surprised during the site visit. It is important to know the schedule of services provided for each day so the team may plan their visits accordingly.

Sampling Plan

If you will assess several facilities, you will need a list of all facilities of interest in your area and their types (i.e. hospital, clinic, health post). If fewer than 10 facilities are in the area of interest, it is recommended that you assess all of them. If there are more than 10, you may want to assess a representative sample of those facilities. With the list of facilities, it is easy to take a simple random sample of the total. To ensure that you include enough facilities of each type, you may want to take a stratified sample (that is, sort the list of all facilities into order by type of facility and be sure to draw part of your sample from each type).

It is recommended that a research team visit one facility per day, or there will not be time to fully evaluate each site. The team should plan to arrive at the facility before it opens and remain until it closes.

Interviewer and Supervisor Characteristics

Usually a research team consists of 3 people, including those with clinical, research, management and public health skills. Although the number of research teams depends on the number of facilities you will assess, one supervisor should coordinate no more than 3 teams.

The ideal interviewers:

- have technical skills or training,
- have good communication skills in the lingua franca and local languages,
- are comfortable with discussing reproductive health topics, and are open to learning about reproductive health,
- will respect the dignity of respondents and confidentiality required by the survey,
- are interested and motivated to work,
- will reflect well on your organization in the field,
- Previous experience with data collection is desired but not required.

Field supervisors should also exhibit these characteristics, have previous data collection and reproductive health experience and be highly organized. Their

responsibilities are to ensure that the interviewers are completing the data collection forms correctly, review every form in the field to ensure it is correctly and thoroughly filled out, resolve the team's questions and respond to community questions or concerns.

Supervisors can be drawn from your organization and MOH staff. It will be extremely valuable for supervisors to be involved in the pre-tests and revisions of the assessment tools and research team training.

Interviewer Training

Interviewers should receive 5-7 days of training conducted by the field supervisors. The training should emphasize practice with the different data collection forms so that the team is entirely familiar with them. Training should include basic reproductive health technical information and management principles, so the interviewers can communicate with the respondents on the topic. The training should include substantial role playing.

Time Frame To be determined by your organization and depending on the number of facilities to be assessed. Estimate that it will take one day for one team to assess one facility. The entire facility assessment study, including analysis and report writing, should take 2-4 months.

Analysis Plan

The data for quantitative analysis can be processed using any database or survey software, such as Microsoft Access, Epi Info for Windows, Epi Info 6, SPSS or SAS. (The advantage of Epi Info is that it can be downloaded for free from the cdc.gov web site <http://www.cdc.gov/epiinfo/>).

The analysis involves comparing the services that are offered with the services demanded by the population to meet their reproductive health needs. The analysis will illustrate which services need to be introduced, expanded or improved.

Use of Data

Use of these findings should promote better project design by suggesting what material and human resources are needed to upgrade service delivery. In addition, the protocol can be used for monitoring and management purposes by establishing a baseline from which changes in capacity can be measured.

Dissemination

It is critical that the staff of each facility receive a summary of your findings and feedback. Follow-up discussion is necessary to determine priorities for addressing barriers to high quality reproductive health service delivery.

Additional Resources

Epi Info for Windows can be downloaded for free from the cdc.gov web site <http://www.cdc.gov/epiinfo/>

Maine, Deborah, Murat Z. Akalin, Victoria M. Ward, and Angela Kamara *The Design and Evaluation of Maternal Mortality Programs*, 1997. [Appendix A](#). [Appendix B](#)

The Population Council *The Situation Analysis Approach to Assessing Family Planning and Reproductive Health: A Handbook*, 1998. Available in English, French and Spanish. Print only, order at www.populationcouncil.org.