

SCREEN1:1. Confirm ID

1. Confirm ID Label

Module 1: Inputs, Finances and Management

1. Confirm ID Label

Instructions for interviewer:*All text in blue are directions for you and should not be read aloud.**All text in red are observations only.**Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent.*

1. Confirm ID Q.1

id_correct**IND_M1***Is the following information correct?***Province: [fac_province]****District: [fac_block]****Facility ID: [customid]****Interviewer ID: [fieldstaff_id]****Supervisor ID: [supervisor_id]***If any of the information above is incorrect, please go back and enter the correct information.*

(1)Yes,(0)No

1. Confirm ID Q.2

replacement**IND_M1***Is this a replacement facility?*

(1)Yes,(0)No

1. Confirm ID Q.3

replacement_name**IND_M1***Enter the name of this replacement facility:*

Enable if :current.replacement = 1

1. Confirm ID Q.4

replacement_address**IND_M1***Enter the physical address of this facility:*

Enable if :current.replacement = 1

END SCREEN 1:1. Confirm ID

SCREEN2:2. GPS Coordinates

2. GPS Coordinates Q.1

platform_type**IND_M1***Health service delivery platform type:***(SELECT ONE)**

(1)Community Health Centre,(2)Primary Health Centre,(-999)Don't know/Uncertain/Don't remember,(-998)Decline to respond

2. GPS Coordinates Q.2

fac_int_ctrl**IND_M1***Is this an intervention facility or a control facility?*

(1)HealthRise intervention facility,(0)Control facility

2. GPS Coordinates Q.3

gps_id

IND_M1

Get GPS of the device. Please fill out the table below manually if the GPS button isn't working

2. GPS Coordinates Label

*Facility GPS Coordinates:
Enter the latitude and longitude*

*Please enter in the same format as displayed on your GPS Device.
Enter the following codes, if necessary: -1= Error with GPS Device*

START ROSTER 2.1:Facility GPS Coordinates:

RosterContents :(1)Latitude,(2)Longitude

Facility GPS Coordinates: Q.4

gps_degrees

gps

Enter degrees:

END ROSTER 2.1:Facility GPS Coordinates:

END SCREEN 2:2. GPS Coordinates

SCREEN3:3. Introduction and Consent

Enable if :current.platform_type IS NOT NULL

3. Introduction and Consent Label

Section 3: Introduction, Consent and General Information

This section is designed to provide a brief introduction to the survey and to solicit consent from the facility administrator. Please complete this section with a facility administrator, manager or other individual who is well-informed about the overall characteristics of this health facility.

3. Introduction and Consent Label

Instructions for interviewer:

All text in blue are directions for you and should not be read aloud.

All text in red are observations only.

Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent.

3. Introduction and Consent Q.1

time_start

IND_M1

Survey Start Time. Please click 'Get Time' button.

SCREEN3.1:KwaZulu-Natal Consent

Enable if :current.fac_province= 1

KwaZulu-Natal Consent Label

Read consent aloud to facility administrator

We are conducting this survey on behalf of Social Surveys Africa to better understand the burden of cardiovascular disease and diabetes in KwaZulu-Natal.

The Department of Health of the KwaZulu-Natal Province and the uMgungundlovu District government have given approval for this study

KwaZulu-Natal Consent Label

to be conducted in local health facilities

Your facility was randomly selected to participate in this study. If you participate, we will ask you questions about facility inputs, activities related to cardiovascular disease and diabetes, and administration.

Information about your facility will be compiled in a dataset that may be made publicly available and provided to researchers for analyses. However, neither your name nor that of any other respondents participating in this study will be included in the dataset or in any report. While the name of your facility will be collected, it will not be included in the publicly-available datasets.

As the facility administrator, a research assistant will ask you to find the required documents that pertain to records of activities and finances at the facility; this information will then be recorded electronically using the facility survey.

The data collected may be used by the Department of Health or other supporting organizations for planning service improvement and investment at your facility. Data may also be used for further studies of healthcare costs.

Your participation in the study is completely voluntary and you have the right to refuse participation at any time. Your participation will not affect your work or your future relationship with the Department of Health.

We are asking for your help to ensure that the information we collect is accurate. If there are questions for which someone else is the most appropriate person to provide the information, please ask that person to assist you in the completion of this survey.

END SCREEN 3.1:KwaZulu-Natal Consent

SCREEN3.2:Northern Cape Consent

Enable if :current.fac_province = 2

Northern Cape Consent Label

Read consent aloud to facility administrator:

We are conducting this survey on behalf of Social Surveys Africa to better understand the burden of cardiovascular disease and diabetes in Northern Cape.

The Department of Health of the Northern Cape Province and the Pixley ka Seme District government have given approval for this study to be conducted in local health facilities.

Your facility was randomly selected to participate in this study. If you participate, we will ask you questions about facility inputs, activities related to cardiovascular disease and diabetes, and administration.

Information about your facility will be compiled in a dataset that may be made publicly available and provided to researchers for analyses.

Northern Cape Consent Label

However, neither your name nor that of any other respondents participating in this study will be included in the dataset or in any report. While the name of your facility will be collected, it will not be included in the publicly-available datasets.

As the facility administrator, a research assistant will ask you to find the required documents that pertain to records of activities and finances at the facility; this information will then be recorded electronically using the facility survey.

The data collected may be used by the Department of Health or other supporting organizations for planning service improvement and investment at your facility. Data may also be used for further studies of healthcare costs.

Your participation in the study is completely voluntary and you have the right to refuse participation at any time. Your participation will not affect your work or your future relationship with the Department of Health.

We are asking for your help to ensure that the information we collect is accurate. If there are questions for which someone else is the most appropriate person to provide the information, please ask that person to assist you in the completion of this survey

END SCREEN 3.2:Northern Cape Consent

3. Introduction and Consent Q.2

consent **IND_M1**
[Go To [comments1] if:current.consent = 0]

Read consent aloud to facility administrator
Do you agree to proceed?
(SELECT ONE)

If not willing to participate, continue to the 'end' section and fill out appropriate information.
(1)Yes,(0)No

3. Introduction and Consent Q.3

confirm_information **IND_M1**
Enable if :current.replacement = 0

Is the following information correct?

Province: [fac_province]
District: [fac_block]
Facility ID: [customid]
(1)Yes,(0)No

3. Introduction and Consent Q.4

confirm_information_replacement **IND_M1**
Enable if :current.replacement=1

(IF REPLACEMENT)

Is the following information correct?

Name: [replacement_name]
Facility Address: [replacement_address]
(1)Yes,(0)No

3. Introduction and Consent Q.5

comments_section1_txt **IND_M1**Enable if :current.confirm_information = 0 OR
current.confirm_information_replacement=0*Please use this space to provide the correct information. It is essential that we have the correct information on file for all participating facilities.*

3. Introduction and Consent Q.6

commentsM1_3 **IND_M1***Comments for Section 3: Consent*

3. Introduction and Consent Label

Important Reminder:
Select "Validate" button above (check mark).
Correct errors, if any, and "validate" again.

END SCREEN 3:3. Introduction and Consent

SCREEN4:4. Inputs

Enable if :current.consent = 1 AND current.time_start IS NOT NULL

4. Inputs Label

This section is primarily designed to capture information about this facility's inputs. Please complete this section with a facility administrator, manager or other individual who is well-informed about the inputs to this health facility.

4. Inputs Q.1

fac_years **IND_M1**

*How many years in total has this facility been in existence?
(If the administrator is unaware, please enter their best estimate.)*

4. Inputs Q.2

fac_years2 **IND_M1**

*How many years has this facility been a [platform_type]
(If the administrator is unaware, please enter their best estimate.)*

4. Inputs Q.3

sppncd **IND_M1**

[Go To [healthrise] if:current.sppncd != 1]

Have you ever heard of the Strategic Plan for the Prevention and Control of Non-Communicable Diseases?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

4. Inputs Q.4

sppncd_imp **IND_M1**

Enable if :current.sppncd = 1

Has this facility ever made changes or implemented programs in response to the Strategic Plan for the Prevention and Control of Non-Communicable Diseases?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

4. Inputs Q.5

sppncd_speci **IND_M1**

Enable if :current.sppncd_imp = 1

Please specify what this facility has done in response to the Strategic Plan for the Prevention and Control of Non-Communicable Diseases

(1)Added new registers for record keeping,(2)Added additional staff,(3)Added new programs,(4)Added new trainings for staff,(5)Added more medications to the pharmacy,(9)Other, specify,(-999)Dont know,(-998)Decline to respond

4. Inputs Q.6

sppncd_fund**IND_M1**

Enable if :current.sppncd = 1

Has this facility received funding from the Strategic Plan for the Prevention and Control of Non-Communicable Diseases?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

4. Inputs Q.7

sppncd_fund2**IND_M1**

Enable if :current.sppncd_fund = 1

*How much funding have you received from the Strategic Plan for the Prevention and Control of Non-Communicable Diseases in the last year?**Amounts should be listed in South African Rand.**Enter the following codes, if necessary:**-999=Don't know**-998=Decline to respond*

4. Inputs Q.8

healthrise**IND_M1**

[Go To [pharm_records_who_t] if:current.healthrise <> 1]

Have you ever heard of the HealthRise/Project HOPE/Expectra program?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

4. Inputs Q.9

healthrise_imp**IND_M1**[Go To [pharm_records_who_t] if:current.healthrise_imp <> 1]
Enable if :current.healthrise = 1*Has this facility implemented the HealthRise/Project HOPE/Expectra program?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

START ROSTER 4.1:When have the HealthRise/Project HOPE/Expectra activities started in this facility?

RosterContents :(1)Month and Year

When have the HealthRise/Project HOPE/Expectra activities started in this facility? Q.10

healthrise_month**Healthr_imp***Month*

(1)January,(2)February,(3)March,(4)April,(5)May,(6)June,(7)July,(8)August,(9)September,(10)October,(11)November,(12)December,(-999)Dont know,(-998)Decline to respond

When have the HealthRise/Project HOPE/Expectra activities started in this facility? Q.11

healthrise_year**Healthr_imp***Year*

(2018)2018,(2017)2017,(2016)2016,(2015)2015,(2014)2014,(-999)Dont know,(-998)Decline to respond

END ROSTER 4.1:When have the HealthRise/Project HOPE/Expectra activities started in this facility?

4. Inputs Q.12

pharm_records_who_t**IND_M1***Who is responsible for the records of indents/orders? (SELECT ALL THAT APPLY)*

(1)Facility Manager,(2)Doctor,(3)Clinical Officers,(5)Midwives,(6)Nurse,(7)Pharmacist,(8)Environmental Health Personnel,(9)Other paramedical staff,(10)Administrative staff,(11)Support staff,(12)Community Care Giver,(13)Other staff, specify,(-999)Don't know,(-998)Decline to respond

4. Inputs Q.13

pharm_records_payments_who_t**IND_M1***Who in this facility is responsible for the records of estimated costs of the indents/orders for pharmaceuticals?*

(1)Facility Manager,(2)Doctor,(3)Clinical Officers,(5)Midwives,(6)Nurse,(7)Pharmacist,(8)Environmental Health Personnel,(9)Other paramedical staff,(10)Administrative staff,(11)Support staff,(12)Community Care Giver,(13)Other staff, specify,(-999)Don't know,(-998)Decline to respond

4. Inputs Label

Please indicate how many of the following items are available at this facility TODAY, how many are owned

4. Inputs Label

by this facility, and of that total, how many of the following items are functional at this facility today.
 Enter the following codes, if necessary:
 0=None
 -999=Don't know
 -998=Decline to respond

START ROSTER 4.2:Item availability

RosterContents :(1)Back-up or standby generator or inverter for electricity,(2)Landline telephone,(3)Cellular telephone,(4)Computer,(5)Printer,(6)Vehicles (4 and 2 wheeled motorized

Item availability Q.14

Total number AVAILABLE

iu_items_avail

input_iu_items

Item availability Q.15

Total number OWNED by facility

iu_items_own

input_iu_items

Enable if :current.iu_items_avail>0

Item availability Q.16

Total number FUNCTIONAL

iu_items_func

input_iu_items

Enable if :current.iu_items_avail>0

Item availability Q.17

Total number from HealthRise/Project HOPE/Expectra

iu_items_hr

input_iu_items

Enable if :current.iu_items_avail>0

END ROSTER 4.2:Item availability

4. Inputs Q.18

Comments for Section 4: Inputs

commentsM1_4

IND_M1

4. Inputs Label

Important Reminder:
 Select "Validate" button above (check mark).
 Correct errors, if any, and "validate" again.

END SCREEN 4:4. Inputs

SCREEN5:5. Finances

Enable if :current.consent = 1

5. Finances Label

Instructions for interviewer:
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 All text in red are observations only.
 Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent.

5. Finances Label

Section 5: Finances

This section is primarily designed to capture information about this facility's finances. Please complete this section with a facility accountant, administrator or other individual who is well-informed about the finances to this health facility.

5. Finances Q.1

sal_rec**IND_M1**

Are records of the salaries/wages/benefits for staff who work at this facility maintained at this facility or at another location?

(1)Maintained at this facility,(0)Maintained at another location,(-999)Don't know,(-998)Decline to respond

5. Finances Q.2

sal_rec_confirm**IND_M1**

Enable if :current.sal_rec =-999

Is there someone present who knows if records of the salaries/wages/benefits paid to staff are kept at this facility?

If so, please complete the remainder of this section with this person.

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

SCREEN5.1:Where are records of the salaries/wages/benefits paid to staff at this facility kept?

Enable if :current.sal_rec = 0 OR (current.sal_rec = -999 AND current.sal_rec_confirm = 1)

Where are records of the salaries/wages/benefits paid to staff at this facility kept? Q.1

sal_rec_no_t**IND_M1**

Where are records of the salaries/wages/benefits paid to staff at this facility kept?

(SELECT ALL THAT APPLY)

(1)Facility itself,(2)National Ministry of Health,(3)Provincial Department of Health,(4)District Health Team Office,(5)Health Sub District Office,(8)Other, specify,(-999)Don't know,(-998)Decline to respond

END SCREEN 5.1:Where are records of the salaries/wages/benefits paid to staff at this facility kept?

5. Finances Q.3

fiscal_yr**IND_M1**

[Go To [atq_acc_t] if:current.fiscal_yr != 0]

Are the start and end dates of this facility's most recent fiscal year April 2017 - March 2018?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

START ROSTER 5.2:What is the first month of the most recently completed fiscal year?

RosterContents :(1)Recent Year

What is the first month of the most recently completed fiscal year? Q.4

fiscal_yr2_month**fiscal_yr2****Month**

(1)January,(2)February,(3)March,(4)April,(5)May,(6)June,(7)July,(8)August,(9)September,(10)October,(11)November,(12)December

What is the first month of the most recently completed fiscal year? Q.5

fiscal_yr2_year**fiscal_yr2****Year**

(2018)2018,(2017)2017,(2016)2016

END ROSTER 5.2:What is the first month of the most recently completed fiscal year?

5. Finances Q.6

atq_acc_t

IND_M1

Please indicate if this facility utilizes any of the following accounting systems:

(SELECT ALL THAT APPLY)

(1)Electronic-based accounting system,(2)Paper-based accounting system,(0)None of the above,(-999)Don't know,(-998)Decline to respond

5. Finances Q.7

exp_year

IND_M1

Are facility expenses recorded by year?

(1)Yes,(0)No

5. Finances Q.8

exp_month

IND_M1

Are facility expenses recorded by month?

(1)Yes,(0)No

Enable if :current.exp_year = 0

5. Finances Label

Complete the following Facility Expenses Extraction for all facilities by clicking the button below.

SCREEN5.3:Facility Expenses Extraction (by year)

Enable if :current.exp_year = 1

Facility Expenses Extraction (by year) Label

Facility Expenses

In this section, we are asking about the total amount of money this facility spent during the previous fiscal year. We are attempting to capture the total amount spent on certain categories of expenditures. Ask to organize the following records:

- Total Expenses
- Infrastructure and Utilities
- Medical Supplies and Equipment
- Pharmaceuticals
- Facility Administration and Staff Training
- Non-Medical Services
- Staff (Salaries and Benefits)

While this section will primarily cover expenditures, in certain cases we have paired expenditure questions with questions covering the input and output associated with these expenses which we hope will facilitate a review of this facility's records.

Report all money spent directly by this facility on the following categories of expenditures for the most recent fiscal year.

Enter the following codes, if necessary:

0 = No expenses

-999 = Don't know

-998 = Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (by year) Q.1

total_expenses_gate

IND_M1

Do you know the TOTAL amount spent by the facility in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [total_expenses_iu_gate] if:current.total_expenses_gate < 1]

START ROSTER 5.3.1:Total expenses

RosterContents :(1)TOTAL amount spent by the facility in the last fiscal year

Total expenses Q.2

Last Fiscal Year

exp_total_YR1**exp_total**

END ROSTER 5.3.1:Total expenses

Facility Expenses Extraction (by year) Label

*Enter the following codes, if necessary:**0=No expenses**-999=Don't know**-998=Decline to respond**All amounts should be listed in South African Rand*

Facility Expenses Extraction (by year) Q.3

*Do you know the TOTAL amount spent by the facility on infrastructure and utilities in the last fiscal year?***total_expenses_iu_gate****IND_M1***(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond*

[Go To [iu_break] if:current.total_expenses_iu_gate < 1]

START ROSTER 5.3.2:Total Infrastructure and Utilities expenses

RosterContents :(1)TOTAL amount spent by the facility on infrastructure and utilities in the last fiscal year

Total Infrastructure and Utilities expenses Q.4

Last Fiscal Year

exp_tot_iu_YR1**exp_iu_tot**

END ROSTER 5.3.2:Total Infrastructure and Utilities expenses

Facility Expenses Extraction (by year) Label

[SELECT CASEWHEN((select exp_tot_iu_YR1 from exp_iu_tot where exp_iu_tot_ID = 1) > (select exp_total_YR1 from exp_total where exp_total_ID = 1), 'Warning: The value entered for the total expenditures on Infrastructure and Utilities is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.' , '')]

Facility Expenses Extraction (by year) Q.5

*Are expenditure breakdowns available?***iu_break****IND_M1***(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond*

[Go To [exp_remodeled_year] if:current.iu_break != 1]

Enable if :current.total_expenses_iu_gate = 1 or

current.iu_break = 1

SCREEN5.3.3:Infrastructure and utilities: Expenditure Breakdown

Enable if :current.iu_break = 1

START ROSTER 5.3.3.1:Infrastructure and utilities

RosterContents :(1)Building and Infrastructure costs.
 Include and add up any of the following following expenses the facility had in the past year:
 a. Rent or Mortgage
 b. Repair or renovation projects
 c. Other Building and Infrastructure Costs such as new windows and other expenses related to the building itself
,(2)Capital and maintenance costs (non-medical equipment and assets). Include acquisition costs and maintenance costs.
 Include and add up any of the following following expenses the facility had in the past year:
 a. Transport vehicles. Include acquisition costs and maintenance costs.
 b. Generators
 c. Landline or cellular telephones
 d. Computers
 e. Refrigerators
 f. Security systems
 g. Textbooks and teaching supplies
 h. Any other non-medical equipment costs such as chairs, tables, water storage tank, cash register or others
,(3)Utilities.
 Include and add up any of the following following expenses the facility had in the past year:
 a. Water utilities
 b. Fuel for generator or electricity connection
 c. Internet connection and computer charges
 d. Temperature regulation systems for heating and cooling the facility
 e. Mobile Medical Unit contingencies
 f. Waste

START ROSTER 5.3.3.1:Infrastructure and utilities

Disposal
 g. Other utility expenses
,(4)Outreach activities including
immunization and family welfare
 promotion campaigns

Infrastructure and utilities Q.1

Last Fiscal Year

exp_iu_YR1

exp_iu

END ROSTER 5.3.3.1:Infrastructure and utilities

END SCREEN 5.3.3:Infrastructure and utilities: Expenditure Breakdown

Facility Expenses Extraction (by year) Q.6

Did the reported amount spent on building costs include a renovation project during the last year?

exp_remodeled_year

IND_M1

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Facility Expenses Extraction (by year) Q.7

Did the reported amount spent on capital costs include the purchase of vehicles during the previous year?

exp_vehicles_year

IND_M1

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Enable if :current.total_expenses_iu_gate = 1 or
current.iu_break = 1

Facility Expenses Extraction (by year) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (by year) Q.8

Do you know the TOTAL amount spent by the facility on medical supplies and equipment in the last fiscal year?

total_expenses_mse_gate

IND_M1

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [mse_break] if:current.total_expenses_mse_gate <> 1]

START ROSTER 5.3.4:Total medical supplies and equipment expenses

RosterContents :(1)TOTAL amount spent by the facility on medical supplies and equipment in the last fiscal year

Total medical supplies and equipment expenses

Last Fiscal Year

Q.9

exp_tot_mse_YR1

exp_mse_tot

END ROSTER 5.3.4:Total medical supplies and equipment expenses

Facility Expenses Extraction (by year) Label

[SELECT CASEWHEN((select exp_tot_mse_YR1 from exp_mse_tot where exp_mse_tot_ID = 1) > (select exp_total_YR1 from exp_total where exp_total_ID = 1)), 'Warning: The value entered for the total expenditures on Medical Supplies and Equipment is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.', '')]

Facility Expenses Extraction (by year) Q.10

Are expenditure breakdowns available?

mse_break

IND_M1

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [exp_phrm_YR1] if:current.mse_break != 1]
Enable if :current.total_expenses_mse_gate <>1

SCREEN 5.3.5: Medical supplies and equipment: Expenditure Breakdown

Enable if :current.mse_break = 1

START ROSTER 5.3.5.1: Medical Supplies and equipment

RosterContents : (1) Surgical and general medical supplies (consumable goods).
 Exclude pharmaceuticals.

 Include and add up any of the following expenses the facility had in the past year:

 a. Syringes, bandages, gloves and/or suture kits

 b. Laboratory reagents

 c. Other consumable surgical and general medical supply related expenses

 (2) Medical equipment (durable goods). Include acquisition and maintenance costs.

 a. Beds

 b. Medical machines and monitors

 c. Laboratory equipment (e.g. slides, test tubes etc.)

 d. Other durable medical equipment expenses

Medical Supplies and equipment Q.1

Last Fiscal Year

exp_mse_YR1

exp_mse

END ROSTER 5.3.5.1: Medical Supplies and equipment

END SCREEN 5.3.5: Medical supplies and equipment: Expenditure Breakdown

Facility Expenses Extraction (by year) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

START ROSTER 5.3.6: Pharmaceuticals

RosterContents : (1) TOTAL amount spent by the facility on pharmaceuticals.

Pharmaceuticals Q.11

Last Fiscal Year

exp_phrm_YR1

exp_phrm

END ROSTER 5.3.6: Pharmaceuticals

Facility Expenses Extraction (by year) Label

[SELECT CASEWHEN((select exp_phrm_YR1 from exp_phrm where exp_phrm_ID = 1) > (select exp_total_YR1 from exp_total where exp_total_ID = 1), 'Warning: The value entered for the total expenditures on Pharmaceuticals is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.', '')]

Facility Expenses Extraction (by year) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (by year) Q.12

Do you know the TOTAL amount spent by the facility on facility administration and staff training in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

total_expenses_atq_gate **IND_M1**

[Go To [atq_break] if:current.total_expenses_atq_gate <> 1]

START ROSTER 5.3.7:Total administration and staff training expenses

RosterContents :(1)TOTAL amount spent by the facility administration and staff training in the last fiscal year

Total administration and staff training expenses *Last Fiscal Year*

Q.13

exp_tot_atq_YR1

exp_atq_tot

END ROSTER 5.3.7:Total administration and staff training expenses

Facility Expenses Extraction (by year) Label

[SELECT CASEWHEN((select exp_tot_atq_YR1 from exp_atq_tot where exp_atq_tot_ID = 1) > (select exp_total_YR1 from exp_total where exp_total_ID = 1), 'Warning: The value entered for the total expenditures on Administration and Staff Training is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.' , '')]

Facility Expenses Extraction (by year) Q.14

Are expenditure breakdowns available?

atq_break

IND_M1

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [total_expenses_nm_gate] if:current.atq_break != 1]

Enable if :current.total_expenses_atq_gate <>1

SCREEN5.3.8:Facility administration and staff training: Expenditure Breakdown

Enable if :current.atq_break = 1

START ROSTER 5.3.8.1:Facility administration and staff training

RosterContents :(1)Amount spent on taxes (all taxes),(2)Amount spent on interest on facility loans,(3)Amount spent on insurance,(4)Amount spent on staff training
(including staff per diems, instructor training fee),(5)Amount spent on office expenses,(6)Amount spent on health record systems,(7)Amount spent on advertising and/or promotional activities.,(8)Other facility administration related expenses

Facility administration and staff training Q.1

Last Fiscal Year

exp_atq_YR1

exp_atq

END ROSTER 5.3.8.1:Facility administration and staff training**END SCREEN 5.3.8:Facility administration and staff training: Expenditure Breakdown**

Facility Expenses Extraction (by year) Label

Staff (1) - Total amount spent on all staff

Please report the total expenditure that this facility has spent each year, during the previous fiscal year. This includes all monetary resources used by this facility on staff (current and former) at this facility including wages, salaries, benefits and allowances over the course of a year, regardless of their source. This will include expenses for regular, ad-hoc, contractual, daily wages or part-time employees.

Facility Expenses Extraction (by year) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (by year) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (by year) Q.15

total_expenses_nm_gate **IND_M1**

[Go To [nm_break] if:current.total_expenses_nm_gate <> 1]

Do you know the TOTAL amount spent by the facility on non medical services in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

START ROSTER 5.3.9:Total non medical services expenses

RosterContents :(1)TOTAL amount spent by the facility on non medical services in the last fiscal year

Total non medical services expenses Q.16

*Last Fiscal Year***exp_tot_nm_YR1****exp_nm_tot****END ROSTER 5.3.9:Total non medical services expenses**

Facility Expenses Extraction (by year) Label

[SELECT CASEWHEN((select exp_tot_nm_YR1 from exp_nm_tot where exp_nm_tot_ID = 1) > (select exp_total_YR1 from exp_total where exp_total_ID = 1), 'Warning: The value entered for the total expenditures on Non-medical services and expenses is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.', '')]

Facility Expenses Extraction (by year) Q.17

*Are expenditure breakdowns available?***nm_break****IND_M1**

[Go To [exp_ps1_YR1] if:current.nm_break != 1]

Enable if :current.total_expenses_nm_gate <>1

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

SCREEN5.3.10:Non-medical services: Expenditure Breakdown

Enable if :current.nm_break = 1

START ROSTER 5.3.10.1:Non-medical services

RosterContents :(1)Amount spent on patient food, staff food and catering
 (excluding salaries paid by facility to canteen staff)
(2)Amount spent on uniforms and laundry
 (excluding salaries paid by facility to laundry staff),(3)Amount spent on housing
 for staff (excluding salaries
 paid by facility to housing
 maintenance or cleaning staff),(4)Amount spent on child care for staff's children
 (excluding salaries paid by facility directly to child care staff),(5)Other non-medical service expenses
 (excluding salaries paid to staff),(6)Amount spent on security services
 (excluding salaries paid by facility to security staff)

Non-medical services Q.1

*Last Fiscal Year***exp_nm_YR1****exp_nm****END ROSTER 5.3.10.1:Non-medical services****END SCREEN 5.3.10:Non-medical services: Expenditure Breakdown**

Facility Expenses Extraction (by year) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

Facility Expenses Extraction (by year) Label *-998=Decline to respond*
All amounts should be listed in South African Rand

START ROSTER 5.3.11:Staff (1) - Total amount spent on all staff

RosterContents :(1)TOTAL amount spent on all staff (current and former)
 at this facility including wages, salaries, benefits and
 allowances for the previous fiscal year

Staff (1) - Total amount spent on all staff Q.18 *Last Fiscal Year*
exp_ps1_YR1 **exp_ps1**

END ROSTER 5.3.11:Staff (1) - Total amount spent on all staff

Facility Expenses Extraction (by year) Label *[SELECT CASEWHEN((select exp_ps1_YR1 from exp_ps1 where exp_ps1_ID = 1) > (select exp_total_YR1 from exp_total where exp_total_ID = 1), 'Warning: The value entered for the total expenditures on Total amount spent on all staff is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondant and correct any mistakes.' , '')]*

Facility Expenses Extraction (by year) Label **Staff (2) – Salaries/Wages**
For each category listed below, please report the total expenditures that this facility spent during the previous fiscal year. This includes all monetary resources used by this facility on staff salaries over the course of a year.

Facility Expenses Extraction (by year) Label *Enter the following codes, if necessary:*
0=No expenses
-999=Don't know
-998=Decline to respond
All amounts should be listed in South African Rand

Facility Expenses Extraction (by year) Q.19 *Do you know the TOTAL amount spent by the facility on staff salaries and wages in the last fiscal year?*
total_expenses_ps2_gate **IND_M1**
(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond
[Go To [ps2_break] if:current.total_expenses_ps2_gate <> 1]

START ROSTER 5.3.12:Total staff salary and wages expenses

RosterContents :(1)TOTAL amount spent on all staff salaries/wages for the previous fiscal year

Total staff salary and wages expenses Q.20 *Last Fiscal Year*
exp_tot_ps2_sal_YR1 **exp_ps2_sal_tot**

END ROSTER 5.3.12:Total staff salary and wages expenses

Facility Expenses Extraction (by year) Q.21 *Are specific wage breakdowns available?*
ps2_break **IND_M1**
(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond
[Go To [commentsM1_5] if:current.ps2_break != 1]
Enable if :current.total_expenses_ps2_gate <>1

SCREEN5.3.13:Salaries/Wages: Expenditure Breakdown

Enable if :current.ps2_break = 1

START ROSTER 5.3.13.1:Staff (2) – Salaries/Wages

RosterContents :(1)Doctors,(2)Clinical Officers,(3)Midwives,(4)Nurse,(5)Pharmacy Personnel,(6)Environmental Health Personnel,(7)Data Clerk,(8)Other allied health provider,(9)Other administrative staff,(10)Support staff,(11)Community Care Giver,(12)Facility-based Community Health Worker

Staff (2) – Salaries/Wages Q.1*Last Fiscal Year***exp_ps2_sal_YR1** **exp_ps2_sal****[HIDDEN]Staff (2) – Salaries/Wages***Did HealthRise help pay salaries for these employees?***exp_ps2_sal_hr** **exp_ps2_sal**

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

END ROSTER 5.3.13.1:Staff (2) – Salaries/Wages**Salaries/Wages: Expenditure Breakdown Q.2***Did HealthRise help pay the salaries for data clerks?***exp_ps2_sal_dataclerk** **IND_M1**

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Enable if :(SELECT exp_ps2_sal_YR1 FROM exp_ps2_sal WHERE exp_ps2_sal = 7) > 0

Salaries/Wages: Expenditure Breakdown Q.3*Did HealthRise help pay the salaries for community caregivers?***exp_ps2_sal_commcare** **IND_M1**

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Enable if :(SELECT exp_ps2_sal_YR1 FROM exp_ps2_sal WHERE exp_ps2_sal = 11) > 0

Salaries/Wages: Expenditure Breakdown Q.4*Did HealthRise help pay the salaries for facility-based community health workers?***exp_ps2_sal_commhealth** **IND_M1**

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Enable if :(SELECT exp_ps2_sal_YR1 FROM exp_ps2_sal WHERE exp_ps2_sal = 12) > 0

END SCREEN 5.3.13:Salaries/Wages: Expenditure Breakdown**END SCREEN 5.3:Facility Expenses Extraction (by year)****SCREEN5.4:Facility Expenses Extraction (By Month)**

Enable if :current.exp_month=1 AND current.exp_year 1

Facility Expenses Extraction (By Month) Label**Facility Expenses**

In this section, we are asking about the total amount of money this facility spent during the previous fiscal year. We are attempting to capture the total amount spent on certain categories of expenditures. Ask to organize the following records:

- *Total Expenses*
- *Infrastructure and Utilities*
- *Medical Supplies and Equipment*
- *Pharmaceuticals*
- *Facility Administration and Staff Training*
- *Non-Medical Services*
- *Staff (Salaries and Benefits)*

While this section will primarily cover expenditures, in certain cases we have paired expenditure questions with questions covering the input and output associated with these expenses which we hope will facilitate a review of this facility's records.

Facility Expenses Extraction (By Month) Label

Report all money spent directly by this facility on the following categories of expenditures for the most recent fiscal year.

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Month 1 = [select fiscal_yr2_month from fiscal_yr2 where fiscal_yr2 = 1]
/ [select fiscal_yr2_year from fiscal_yr2 where fiscal_yr2 = 1]

Facility Expenses Extraction (By Month) Q.1

total_expenses_gate_m **IND_M1**

Do you know the TOTAL amount spent by the facility in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [total_expenses_iu_gate_m]
if:current.total_expenses_gate_m <> 1]

START ROSTER 5.4.1:Total expenses (Months 1 to 6)

RosterContents :(1)TOTAL amount spent by the facility in the last fiscal year

Total expenses (Months 1 to 6) Q.2 *Month 1*
exp_total_M1 **exp_total**

Total expenses (Months 1 to 6) Q.3 *Month 2*
exp_total_M2 **exp_total**

Total expenses (Months 1 to 6) Q.4 *Month 3*
exp_total_M3 **exp_total**

Total expenses (Months 1 to 6) Q.5 *Month 4*
exp_total_M4 **exp_total**

Total expenses (Months 1 to 6) Q.6 *Month 5*
exp_total_M5 **exp_total**

Total expenses (Months 1 to 6) Q.7 *Month 6*
exp_total_M6 **exp_total**

END ROSTER 5.4.1:Total expenses (Months 1 to 6)

START ROSTER 5.4.2:Total Expenses (Months 7 to 12)

RosterContents :(1)TOTAL amount spent by the facility in the last fiscal year

Total Expenses (Months 7 to 12) Q.8 *Month 7*
exp_total_M7 **exp_total**

Total Expenses (Months 7 to 12) Q.9 *Month 8*
exp_total_M8 **exp_total**

Total Expenses (Months 7 to 12) Q.10 *Month 9*
exp_total_M9 **exp_total**

Total Expenses (Months 7 to 12) Q.11 *Month 10*
exp_total_M10 **exp_total**

Total Expenses (Months 7 to 12) Q.12 *Month 11*
exp_total_M11 **exp_total**

Total Expenses (Months 7 to 12) Q.13 *Month 12*
exp_total_M12 **exp_total**

END ROSTER 5.4.2:Total Expenses (Months 7 to 12)

Facility Expenses Extraction (By Month) Label *Enter the following codes, if necessary:*
0=No expenses
-999=Don't know
-998=Decline to respond
All amounts should be listed in South African Rand

Facility Expenses Extraction (By Month) Q.14 *Do you know the TOTAL amount spent by the facility on infrastructure and utilities in the last fiscal year?*
total_expenses_iu_gate_m **IND_M1**
 (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond
 [Go To [iu_break_m] if:current.total_expenses_iu_gate_m <> 1]

START ROSTER 5.4.3:Total infrastructure and utilities expenses (Months 1 to 6)

RosterContents :(1)TOTAL amount spent by the facility on infrastructure and utilities in the last fiscal year

Total infrastructure and utilities expenses (Months 1 to 6) Q.15 *Month 1*
exp_tot_iu_M1 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 1 to 6) Q.16 *Month 2*
exp_tot_iu_M2 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 1 to 6) Q.17 *Month 3*
exp_tot_iu_M3 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 1 to 6) Q.18 *Month 4*
exp_tot_iu_M4 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 1 to 6) Q.19 *Month 5*
exp_tot_iu_M5 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 1 to 6) Q.20 *Month 6*
exp_tot_iu_M6 **exp_iu_tot**

END ROSTER 5.4.3:Total infrastructure and utilities expenses (Months 1 to 6)

START ROSTER 5.4.4:Total infrastructure and utilities expenses (Months 7 to 12)

START ROSTER 5.4.4:Total infrastructure and utilities expenses (Months 7 to 12)

RosterContents :(1)TOTAL amount spent by the facility on infrastructure and utilities in the last fiscal year

Total infrastructure and utilities expenses (Months 7 to 12) Q.21 *Month 7*

exp_tot_iu_M7 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 7 to 12) Q.22 *Month 8*

exp_tot_iu_M8 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 7 to 12) Q.23 *Month 9*

exp_tot_iu_M9 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 7 to 12) Q.24 *Month 10*

exp_tot_iu_M10 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 7 to 12) Q.25 *Month 11*

exp_tot_iu_M11 **exp_iu_tot**

Total infrastructure and utilities expenses (Months 7 to 12) Q.26 *Month 12*

exp_tot_iu_M12 **exp_iu_tot**

END ROSTER 5.4.4:Total infrastructure and utilities expenses (Months 7 to 12)

Facility Expenses Extraction (By Month) Label

```
[SELECT CASEWHEN(((select (exp_tot_iu_M1 + exp_tot_iu_M2 +
exp_tot_iu_M3 + exp_tot_iu_M4 + exp_tot_iu_M5 + exp_tot_iu_M6)
from exp_iu_tot where exp_iu_tot_ID = 1) + (select (exp_tot_iu_M7 +
exp_tot_iu_M8 + exp_tot_iu_M9 + exp_tot_iu_M10 + exp_tot_iu_M11 +
exp_tot_iu_M12) from exp_iu_tot where exp_iu_tot_ID = 1)) > ((select
(exp_total_M1 + exp_total_M2 + exp_total_M3 + exp_total_M4 +
exp_total_M5 + exp_total_M6) from exp_total where exp_total_ID = 1)
+ (select (exp_total_M7 + exp_total_M8 + exp_total_M9 +
exp_total_M10 + exp_total_M11 + exp_total_M12) from exp_total
where exp_total_ID = 1))), 'Warning: The value entered for the total
expenditures on Infrastructure and Utilities is greater than total value of
all expenditures for this facility. Please clarify the previous responses
with the respondant and correct any mistakes.', '')]
```

Facility Expenses Extraction (By Month) Q.27

Are expenditure breakdowns available?

iu_break_m **IND_M1**

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [exp_remodeled_month] if:current.iu_break_m != 1]
Enable if :current.total_expenses_iu_gate <>1

SCREEN5.4.5:Infrastructure and utilities: Expenditure Breakdown

Enable if :current.iu_break_m = 1

START ROSTER 5.4.5.1:Infrastructure and utilities (Months 1 to 6)

RosterContents : (1) Building and Infrastructure costs. Include and add up any of the following following expenses the facility had in the past year: a. Rent or Mortgage b. Repair or renovation projects c. Other Building and Infrastructure Costs such as new windows and other expenses related to the building itself (2) Capital and maintenance costs (non-medical equipment and assets). Include acquisition costs and maintenance costs. Include and add up any of the following following expenses the facility had in the past year: a. Transport vehicles. Include acquisition costs and maintenance costs. b. Generators c. Landline or cellular telephones d. Computers e. Refrigerators f. Security systems g. Textbooks and teaching supplies h. Any other non-medical equipment costs such as chairs, tables, water storage tank, cash register or others (3) Utilities. Include and add up any of the following following expenses the facility had in the past year: a. Water utilities b. Fuel for generator or electricity connection c. Internet connection and computer charges d. Temperature regulation systems for heating and cooling the facility e. Mobile Medical Unit contingencies f. Waste Disposal g. Other utility expenses (4) Outreach activities including immunization and family welfare promotion campaigns

Infrastructure and utilities (Months 1 to 6) Q.1	Month 1
--	---------

exp_iu_M1	exp_iu
------------------	---------------

Infrastructure and utilities (Months 1 to 6) Q.2	Month 2
--	---------

exp_iu_M2	exp_iu
------------------	---------------

Infrastructure and utilities (Months 1 to 6) Q.3	Month 3
--	---------

exp_iu_M3	exp_iu
------------------	---------------

Infrastructure and utilities (Months 1 to 6) Q.4	Month 4
--	---------

exp_iu_M4	exp_iu
------------------	---------------

Infrastructure and utilities (Months 1 to 6) Q.5	Month 5
--	---------

exp_iu_M5	exp_iu
------------------	---------------

Infrastructure and utilities (Months 1 to 6) Q.6	Month 6
--	---------

exp_iu_M6	exp_iu
------------------	---------------

END ROSTER 5.4.5.1:Infrastructure and utilities (Months 1 to 6)**START ROSTER 5.4.5.2:Infrastructure and utilities (Months 7 to 12)**

RosterContents : (1) Building and Infrastructure costs. Include and add up any of the following following expenses the facility had in the past year: a. Rent or Mortgage b. Repair or renovation projects c. Other Building and Infrastructure Costs such as new windows and other expenses related to the building itself (2) Capital and maintenance costs (non-medical equipment and assets). Include acquisition costs and maintenance costs. Include and add up any of the following following expenses the facility had in the past year: a. Transport vehicles. Include acquisition costs and maintenance costs. b. Generators c. Landline or cellular telephones d. Computers e. Refrigerators f. Security systems g. Textbooks and teaching supplies h. Any other non-medical equipment costs such as chairs, tables, water storage tank, cash register or others (3) Utilities. Include and add up any of the following following expenses the facility had in the past year: a. Water utilities b. Fuel for generator or electricity connection c. Internet connection and computer charges d. Temperature regulation systems for heating and cooling the facility e. Mobile Medical Unit contingencies f. Waste Disposal g. Other utility expenses (4) Outreach activities including immunization and family welfare promotion campaigns

Infrastructure and utilities (Months 7 to 12) Q.7 *Month 7*
exp_iu_M7 **exp_iu**

Infrastructure and utilities (Months 7 to 12) Q.8 *Month 8*
exp_iu_M8 **exp_iu**

Infrastructure and utilities (Months 7 to 12) Q.9 *Month 9*
exp_iu_M9 **exp_iu**

Infrastructure and utilities (Months 7 to 12) Q.10 *Month 10*
exp_iu_M10 **exp_iu**

Infrastructure and utilities (Months 7 to 12) Q.11 *Month 11*
exp_iu_M11 **exp_iu**

Infrastructure and utilities (Months 7 to 12) Q.12 *Month 12*
exp_iu_M12 **exp_iu**

END ROSTER 5.4.5.2:Infrastructure and utilities (Months 7 to 12)

END SCREEN 5.4.5:Infrastructure and utilities: Expenditure Breakdown

Facility Expenses Extraction (By Month) Q.28 *Did the reported amount spent on building costs include a renovation project during the last year?*
exp_remodeled_month **IND_M1**
 (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Facility Expenses Extraction (By Month) Q.29 *Did the reported amount spent on capital costs include the purchase of vehicles during the last year?*
exp_vehicles_month **IND_M1**
 (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

Facility Expenses Extraction (By Month) Label *Enter the following codes, if necessary:*
0=No expenses
-999=Don't know
-998=Decline to respond
All amounts should be listed in South African Rand

Facility Expenses Extraction (By Month) Q.30 *Do you know the TOTAL amount spent by the facility on medical supplies and equipment in the last fiscal year?*
total_expenses_mse_gate_m **IND_M1**
 (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond
 [Go To [mse_break_m] if:current.total_expenses_mse_gate_m < 1]

START ROSTER 5.4.6:Total medical supplies and equipment expenses (Months 1 to 6)

RosterContents :(1)TOTAL amount spent by the facility on medical supplies and equipment in the last fiscal year

Total medical supplies and equipment expenses *Month 1*
 (Months 1 to 6) Q.31
exp_tot_mse_M1 **exp_mse_tot**

Total medical supplies and equipment expenses
(Months 1 to 6) Q.32 *Month 2*
exp_tot_mse_M2 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 1 to 6) Q.33 *Month 3*
exp_tot_mse_M3 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 1 to 6) Q.34 *Month 4*
exp_tot_mse_M4 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 1 to 6) Q.35 *Month 5*
exp_tot_mse_M5 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 1 to 6) Q.36 *Month 6*
exp_tot_mse_M6 [exp_mse_tot](#)

END ROSTER 5.4.6:Total medical supplies and equipment expenses
(Months 1 to 6)

START ROSTER 5.4.7:Total medical supplies and equipment expenses
(Months 7 to 12)

RosterContents :(1)TOTAL amount spent by the facility on medical supplies and
equipment in the last fiscal year

Total medical supplies and equipment expenses
(Months 7 to 12) Q.37 *Month 7*
exp_tot_mse_M7 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 7 to 12) Q.38 *Month 8*
exp_tot_mse_M8 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 7 to 12) Q.39 *Month 9*
exp_tot_mse_M9 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 7 to 12) Q.40 *Month 10*
exp_tot_mse_M10 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 7 to 12) Q.41 *Month 11*
exp_tot_mse_M11 [exp_mse_tot](#)

Total medical supplies and equipment expenses
(Months 7 to 12) Q.42 *Month 12*
exp_tot_mse_M12 [exp_mse_tot](#)

END ROSTER 5.4.7: Total medical supplies and equipment expenses (Months 7 to 12)

Facility Expenses Extraction (By Month) Label

```
[SELECT CASEWHEN(((select (exp_tot_mse_M1 + exp_tot_mse_M2 +
exp_tot_mse_M3 + exp_tot_mse_M4 + exp_tot_mse_M5 +
exp_tot_mse_M6) from exp_mse_tot where exp_mse_tot_ID = 1) +
(select (exp_tot_mse_M7 + exp_tot_mse_M8 + exp_tot_mse_M9 +
exp_tot_mse_M10 + exp_tot_mse_M11 + exp_tot_mse_M12) from
exp_mse_tot where exp_mse_tot_ID = 1)) > ((select (exp_total_M1 +
exp_total_M2 + exp_total_M3 + exp_total_M4 + exp_total_M5 +
exp_total_M6) from exp_total where exp_total_ID = 1) + (select
(exp_total_M7 + exp_total_M8 + exp_total_M9 + exp_total_M10 +
exp_total_M11 + exp_total_M12) from exp_total where exp_total_ID =
1))), 'Warning: The value entered for the total expenditures on medical
supplies and equipment is greater than total value of all expenditures for
this facility. Please clarify the previous responses with the respondent
and correct any mistakes.', '')]
```

Facility Expenses Extraction (By Month) Q.43

Are expenditure breakdowns available?

mse_break_m **IND_M1**

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [total_expenses_pharm_gate_m]

if:current.mse_break_m != 1]

Enable if :current.total_expenses_mse_gate <>1

SCREEN5.4.8: Medical supplies and equipment: Expenditure Breakdown

Enable if :current.mse_break_m = 1

START ROSTER 5.4.8.1: Medical Supplies and equipment (Months 1 to 6)

RosterContents :(1)Surgical and general medical supplies (consumable goods).
Exclude pharmaceuticals.
 Include and add up any of the following
following expenses the facility had in the past year:
 a. Syringes, bandages,
gloves and/or suture kits
 b. Laboratory reagents
 c. Other
consumable surgical and general medical supply related expenses
(2)Medical
equipment (durable goods). Include acquisition and maintenance costs.
 a.
Beds
 b. Medical machines and monitors
 c. Laboratory equipment (e.g.
slides, test tubes etc.)
 d. Other durable medical equipment expenses

Medical Supplies and equipment (Months 1 to 6) *Month 1*

Q.1

exp_mse_M1

exp_mse

Medical Supplies and equipment (Months 1 to 6) *Month 2*

Q.2

exp_mse_M2

exp_mse

Medical Supplies and equipment (Months 1 to 6) *Month 3*

Q.3

exp_mse_M3

exp_mse

Medical Supplies and equipment (Months 1 to 6) *Month 4*

Q.4

exp_mse_M4

exp_mse

Medical Supplies and equipment (Months 1 to 6) *Month 5*
 Q.5
exp_mse_M5 [exp_mse](#)

Medical Supplies and equipment (Months 1 to 6) *Month 6*
 Q.6
exp_mse_M6 [exp_mse](#)

END ROSTER 5.4.8.1:Medical Supplies and equipment (Months 1 to 6)

START ROSTER 5.4.8.2:Medical Supplies and equipment (Months 7 to 12)

RosterContents :
 (1)Surgical and general medical supplies (consumable goods).
 Exclude pharmaceuticals.

 Include and add up any of the following following expenses the facility had in the past year:

 a. Syringes, bandages, gloves and/or suture kits

 b. Laboratory reagents

 c. Other consumable surgical and general medical supply related expenses

 (2)Medical equipment (durable goods). Include acquisition and maintenance costs.

 a. Beds

 b. Medical machines and monitors

 c. Laboratory equipment (e.g. slides, test tubes etc.)

 d. Other durable medical equipment expenses

Medical Supplies and equipment (Months 7 to 12) *Month 7*
 Q.7
exp_mse_M7 [exp_mse](#)

Medical Supplies and equipment (Months 7 to 12) *Month 8*
 Q.8
exp_mse_M8 [exp_mse](#)

Medical Supplies and equipment (Months 7 to 12) *Month 9*
 Q.9
exp_mse_M9 [exp_mse](#)

Medical Supplies and equipment (Months 7 to 12) *Month 10*
 Q.10
exp_mse_M10 [exp_mse](#)

Medical Supplies and equipment (Months 7 to 12) *Month 11*
 Q.11
exp_mse_M11 [exp_mse](#)

Medical Supplies and equipment (Months 7 to 12) *Month 12*
 Q.12
exp_mse_M12 [exp_mse](#)

END ROSTER 5.4.8.2:Medical Supplies and equipment (Months 7 to 12)

END SCREEN 5.4.8:Medical supplies and equipment: Expenditure Breakdown

Facility Expenses Extraction (By Month) Label

*Enter the following codes, if necessary:**0=No expenses**-999=Don't know**-998=Decline to respond**All amounts should be listed in South African Rand*

Facility Expenses Extraction (By Month) Q.44

total_expenses_pharm_gate_m **IND_M1**[Go To [total_expenses_atq_gate_m]
if:current.total_expenses_pharm_gate_m <> 1]*Do you know the TOTAL amount spent by the facility on pharmaceuticals in the last fiscal year?**(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond***START ROSTER 5.4.9:Pharmaceuticals (Months 1 to 6)**

RosterContents :(1)TOTAL amount spent by the facility on pharmaceuticals.

Pharmaceuticals (Months 1 to 6) Q.45

*Month 1***exp_phrm_M1****exp_phrm**

Pharmaceuticals (Months 1 to 6) Q.46

*Month 2***exp_phrm_M2****exp_phrm**

Pharmaceuticals (Months 1 to 6) Q.47

*Month 3***exp_phrm_M3****exp_phrm**

Pharmaceuticals (Months 1 to 6) Q.48

*Month 4***exp_phrm_M4****exp_phrm**

Pharmaceuticals (Months 1 to 6) Q.49

*Month 5***exp_phrm_M5****exp_phrm**

Pharmaceuticals (Months 1 to 6) Q.50

*Month 6***exp_phrm_M6****exp_phrm****END ROSTER 5.4.9:Pharmaceuticals (Months 1 to 6)****START ROSTER 5.4.10:Pharmaceuticals (Months 7 to 12)**

RosterContents :(1)TOTAL amount spent by the facility on pharmaceuticals.

Pharmaceuticals (Months 7 to 12) Q.51

*Month 7***exp_phrm_M7****exp_phrm**

Pharmaceuticals (Months 7 to 12) Q.52

*Month 8***exp_phrm_M8****exp_phrm**

Pharmaceuticals (Months 7 to 12) Q.53

*Month 9***exp_phrm_M9****exp_phrm**

Pharmaceuticals (Months 7 to 12) Q.54

*Month 10***exp_phrm_M10****exp_phrm**

Pharmaceuticals (Months 7 to 12) Q.55

*Month 11***exp_phrm_M11****exp_phrm**

Pharmaceuticals (Months 7 to 12) Q.56

*Month 12***exp_phrm_M12****exp_phrm**

END ROSTER 5.4.10:Pharmaceuticals (Months 7 to 12)

Facility Expenses Extraction (By Month) Label

```
[SELECT CASEWHEN(((select (exp_phrm_M1 + exp_phrm_M2 +
exp_phrm_M3 + exp_phrm_M4 + exp_phrm_M5 + exp_phrm_M6) from
exp_phrm where exp_phrm_ID = 1) + (select (exp_phrm_M7 +
exp_phrm_M8 + exp_phrm_M9 + exp_phrm_M10 + exp_phrm_M11 +
exp_phrm_M12) from exp_phrm where exp_phrm_ID = 1)) > ((select
(exp_total_M1 + exp_total_M2 + exp_total_M3 + exp_total_M4 +
exp_total_M5 + exp_total_M6) from exp_total where exp_total_ID = 1)
+ (select (exp_total_M7 + exp_total_M8 + exp_total_M9 +
exp_total_M10 + exp_total_M11 + exp_total_M12) from exp_total
where exp_total_ID = 1)), 'Warning: The value entered for the total
expenditures on pharmaceuticals is greater than total value of all
expenditures for this facility. Please clarify the previous responses with
the respondent and correct any mistakes.', '')]
```

Facility Expenses Extraction (By Month) Label

Enter the following codes, if necessary:
0=No expenses
-999=Don't know
-998=Decline to respond
All amounts should be listed in South African Rand

Facility Expenses Extraction (By Month) Q.57

total_expenses_atq_gate_ IND_M1
m

[Go To [atq_break_m] if:current.total_expenses_atq_gate_m <>
1]

Do you know the TOTAL amount spent by the facility on facility administration and staff training in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

START ROSTER 5.4.11:Total administration and staff training expenses (Months 1 to 6)

RosterContents :(1)TOTAL amount spent by the facility administration and staff training in the last fiscal year

Total administration and staff training expenses (Months 1 to 6) Q.58 *Month 1*

exp_tot_atq_M1 **exp_atq_tot**

Total administration and staff training expenses (Months 1 to 6) Q.59 *Month 2*

exp_tot_atq_M2 **exp_atq_tot**

Total administration and staff training expenses (Months 1 to 6) Q.60 *Month 3*

exp_tot_atq_M3 **exp_atq_tot**

Total administration and staff training expenses (Months 1 to 6) Q.61 *Month 4*

exp_tot_atq_M4 **exp_atq_tot**

Total administration and staff training expenses (Months 1 to 6) Q.62 *Month 5*

exp_tot_atq_M5 **exp_atq_tot**

Total administration and staff training expenses
(Months 1 to 6) Q.63
exp_tot_atq_M6 **exp_atq_tot** *Month 6*

END ROSTER 5.4.11:Total administration and staff training expenses
(Months 1 to 6)

START ROSTER 5.4.12:Total administration and staff training
expenses (Months 7 to 12)

RosterContents :(1)TOTAL amount spent by the facility administration and staff
training in the last fiscal year

Total administration and staff training expenses
(Months 7 to 12) Q.64
exp_tot_atq_M7 **exp_atq_tot** *Month 7*

Total administration and staff training expenses
(Months 7 to 12) Q.65
exp_tot_atq_M8 **exp_atq_tot** *Month 8*

Total administration and staff training expenses
(Months 7 to 12) Q.66
exp_tot_atq_M9 **exp_atq_tot** *Month 9*

Total administration and staff training expenses
(Months 7 to 12) Q.67
exp_tot_atq_M10 **exp_atq_tot** *Month 10*

Total administration and staff training expenses
(Months 7 to 12) Q.68
exp_tot_atq_M11 **exp_atq_tot** *Month 11*

Total administration and staff training expenses
(Months 7 to 12) Q.69
exp_tot_atq_M12 **exp_atq_tot** *Month 12*

END ROSTER 5.4.12:Total administration and staff training expenses
(Months 7 to 12)

Facility Expenses Extraction (By Month) Label

```
[SELECT CASEWHEN(((select (exp_tot_atq_M1 + exp_tot_atq_M2 +
exp_tot_atq_M3 + exp_tot_atq_M4 + exp_tot_atq_M5 +
exp_tot_atq_M6) from exp_atq_tot where exp_atq_tot_ID = 1) + (select
(exp_tot_atq_M7 + exp_tot_atq_M8 + exp_tot_atq_M9 +
exp_tot_atq_M10 + exp_tot_atq_M11 + exp_tot_atq_M12) from
exp_atq_tot where exp_atq_tot_ID = 1)) > ((select (exp_total_M1 +
exp_total_M2 + exp_total_M3 + exp_total_M4 + exp_total_M5 +
exp_total_M6) from exp_total where exp_total_ID = 1) + (select
(exp_total_M7 + exp_total_M8 + exp_total_M9 + exp_total_M10 +
exp_total_M11 + exp_total_M12) from exp_total where exp_total_ID =
1))), 'Warning: The value entered for the total expenditures on
administration and staff training is greater than total value of all
expenditures for this facility. Please clarify the previous responses with
the respondent and correct any mistakes.', '')]
```

Facility Expenses Extraction (By Month) Label

```
[SELECT CASEWHEN(((select (exp_tot_atq_M1 + exp_tot_atq_M2 + exp_tot_atq_M3 + exp_tot_atq_M4 + exp_tot_atq_M5 + exp_tot_atq_M6) from exp_atq_tot where exp_atq_tot_ID = 1) + (select (exp_tot_atq_M7 + exp_tot_atq_M8 + exp_tot_atq_M9 + exp_tot_atq_M10 + exp_tot_atq_M11 + exp_tot_atq_M12) from exp_atq_tot where exp_atq_tot_ID = 1)) > ((select (exp_total_M1 + exp_total_M2 + exp_total_M3 + exp_total_M4 + exp_total_M5 + exp_total_M6) from exp_total where exp_total_ID = 1) + (select (exp_total_M7 + exp_total_M8 + exp_total_M9 + exp_total_M10 + exp_total_M11 + exp_total_M12) from exp_total where exp_total_ID = 1))), 'Warning: The value entered for the total expenditures on administration and staff training is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondant and correct any mistakes.' , '')]
```

Facility Expenses Extraction (By Month) Q.70

atq_break_m **IND_M1**

[Go To [total_expenses_nm_gate_m] if:current.atq_break_m != 1]

Are expenditure breakdowns available?
 (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

SCREEN5.4.13:Facility administration and staff training: Expenditure Breakdown
 Enable if :current.atq_break_m = 1

START ROSTER 5.4.13.1:Facility administration and staff training (Month 1 to 6)

RosterContents :(1)Amount spent on taxes (all taxes),(2)Amount spent on interest on facility loans,(3)Amount spent on insurance,(4)Amount spent on staff training
 (including staff per diems, instructor training fee),(5)Amount spent on office expenses,(6)Amount spent on health record systems,(7)Amount spent on advertising and/or promotional activities.,(8)Other facility administration related expenses

Facility administration and staff training (Month 1 to 6) Q.1	Month 1	exp_atq_M1	exp_atq
Facility administration and staff training (Month 1 to 6) Q.2	Month 2	exp_atq_M2	exp_atq
Facility administration and staff training (Month 1 to 6) Q.3	Month 3	exp_atq_M3	exp_atq
Facility administration and staff training (Month 1 to 6) Q.4	Month 4	exp_atq_M4	exp_atq
Facility administration and staff training (Month 1 to 6) Q.5	Month 5	exp_atq_M5	exp_atq

Facility administration and staff training (Month 1 to 6) Q.6
exp_atq_M6 [exp_atq](#) *Month 6*

END ROSTER 5.4.13.1:Facility administration and staff training (Month 1 to 6)

START ROSTER 5.4.13.2:Facility administration and staff training (Month 7 to 12)

RosterContents :(1)Amount spent on taxes (all taxes),(2)Amount spent on interest on facility loans,(3)Amount spent on insurance,(4)Amount spent on staff training
(including staff per diems, instructor training fee),(5)Amount spent on office expenses,(6)Amount spent on health record systems,(7)Amount spent on advertising and/or promotional activities.,(8)Other facility administration related expenses

Facility administration and staff training (Month 7 to 12) Q.7
exp_atq_M7 [exp_atq](#) *Month 7*

Facility administration and staff training (Month 7 to 12) Q.8
exp_atq_M8 [exp_atq](#) *Month 8*

Facility administration and staff training (Month 7 to 12) Q.9
exp_atq_M9 [exp_atq](#) *Month 9*

Facility administration and staff training (Month 7 to 12) Q.10
exp_atq_M10 [exp_atq](#) *Month 10*

Facility administration and staff training (Month 7 to 12) Q.11
exp_atq_M11 [exp_atq](#) *Month 11*

Facility administration and staff training (Month 7 to 12) Q.12
exp_atq_M12 [exp_atq](#) *Month 12*

END ROSTER 5.4.13.2:Facility administration and staff training (Month 7 to 12)

END SCREEN 5.4.13:Facility administration and staff training:
 Expenditure Breakdown

Facility Expenses Extraction (By Month) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (By Month) Q.71

total_expenses_nm_gate_m **IND_M1**

[Go To [nm_break_m] if:current.total_expenses_nm_gate_m < 1]

Do you know the TOTAL amount spent by the facility on non medical services in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

START ROSTER 5.4.14:Total non-medical services expenses (Months 1 to 6)

RosterContents :(1)TOTAL amount spent by the facility on non medical services in the last fiscal year

Total non-medical services expenses (Months 1 to 6) Q.72 *Month 1*

exp_tot_nm_M1 **exp_nm_tot**

Total non-medical services expenses (Months 1 to 6) Q.73 *Month 2*

exp_tot_nm_M2 **exp_nm_tot**

Total non-medical services expenses (Months 1 to 6) Q.74 *Month 3*

exp_tot_nm_M3 **exp_nm_tot**

Total non-medical services expenses (Months 1 to 6) Q.75 *Month 4*

exp_tot_nm_M4 **exp_nm_tot**

Total non-medical services expenses (Months 1 to 6) Q.76 *Month 5*

exp_tot_nm_M5 **exp_nm_tot**

Total non-medical services expenses (Months 1 to 6) Q.77 *Month 6*

exp_tot_nm_M6 **exp_nm_tot**

END ROSTER 5.4.14:Total non-medical services expenses (Months 1 to 6)

START ROSTER 5.4.15:Total non-medical services expenses (Months 7 to 12)

RosterContents :(1)TOTAL amount spent by the facility on non medical services in the last fiscal year

Total non-medical services expenses (Months 7 to 12) Q.78 *Month 7*

exp_tot_nm_M7 **exp_nm_tot**

Total non-medical services expenses (Months 7 to 12) Q.79 *Month 8*

exp_tot_nm_M8 **exp_nm_tot**

Total non-medical services expenses (Months 7 to 12) Q.80

exp_tot_nm_M9 **exp_nm_tot**

Month 9

Total non-medical services expenses (Months 7 to 12) Q.81

exp_tot_nm_M10 **exp_nm_tot**

Month 10

Total non-medical services expenses (Months 7 to 12) Q.82

exp_tot_nm_M11 **exp_nm_tot**

Month 11

Total non-medical services expenses (Months 7 to 12) Q.83

exp_tot_nm_M12 **exp_nm_tot**

Month 12

END ROSTER 5.4.15:Total non-medical services expenses (Months 7 to 12)

Facility Expenses Extraction (By Month) Label

[SELECT CASEWHEN(((select (exp_tot_nm_M1 + exp_tot_nm_M2 + exp_tot_nm_M3 + exp_tot_nm_M4 + exp_tot_nm_M5 + exp_tot_nm_M6) from exp_nm_tot where exp_nm_tot_ID = 1) + (select (exp_tot_nm_M7 + exp_tot_nm_M8 + exp_tot_nm_M9 + exp_tot_nm_M10 + exp_tot_nm_M11 + exp_tot_nm_M12) from exp_nm_tot where exp_nm_tot_ID = 1)) > ((select (exp_total_M1 + exp_total_M2 + exp_total_M3 + exp_total_M4 + exp_total_M5 + exp_total_M6) from exp_total where exp_total_ID = 1) + (select (exp_total_M7 + exp_total_M8 + exp_total_M9 + exp_total_M10 + exp_total_M11 + exp_total_M12) from exp_total where exp_total_ID = 1))), 'Warning: The value entered for the total expenditures on non-medical services and expenses is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.' , '')]

Facility Expenses Extraction (By Month) Q.84

nm_break_m **IND_M1**

[Go To [total_expenses_ps1_gate_m] if:current.nm_break_m != 1]

Are expenditure breakdowns available?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

SCREEN5.4.16:Non-medical services: Expenditure Breakdown

Enable if :current.nm_break_m = 1

START ROSTER 5.4.16.1:Non-medical services (Months 1 to 6)

RosterContents :(1)Amount spent on patient food, staff food and catering
 (excluding salaries paid by facility to canteen staff)
(2)Amount spent on uniforms and laundry
 (excluding salaries paid by facility to laundry staff),(3)Amount spent on housing
 for staff (excluding salaries
 paid by facility to housing
 maintenance or cleaning staff),(4)Amount spent on child care for staff's children
 (excluding salaries paid by facility directly to child care staff),(5)Other non-medical service expenses
 (excluding salaries paid to staff),(6)Amount spent on security services
 (excluding salaries paid by facility to security staff)

Non-medical services (Months 1 to 6) Q.1	<i>Month 1</i>
exp_nm_M1 exp_nm	
Non-medical services (Months 1 to 6) Q.2	<i>Month 2</i>
exp_nm_M2 exp_nm	
Non-medical services (Months 1 to 6) Q.3	<i>Month 3</i>
exp_nm_M3 exp_nm	
Non-medical services (Months 1 to 6) Q.4	<i>Month 4</i>
exp_nm_M4 exp_nm	
Non-medical services (Months 1 to 6) Q.5	<i>Month 5</i>
exp_nm_M5 exp_nm	
Non-medical services (Months 1 to 6) Q.6	<i>Month 6</i>
exp_nm_M6 exp_nm	

END ROSTER 5.4.16.1:Non-medical services (Months 1 to 6)

START ROSTER 5.4.16.2:Non-medical services (Months 7 to 12)

RosterContents :(1)Amount spent on patient food, staff food and catering
 (excluding salaries paid by facility to cantine staff)
,(2)Amount spent on uniforms and laundry
 (excluding salaries paid by facility to laundry staff),(3)Amount spent on housing
 for staff (excluding salaries
 paid by facility to housing
 maintenance or cleaning staff),(4)Amount spent on child care for staff's children
 (excluding salaries paid by facility directly to child care staff),(5)Other non-medical service expenses
 (excluding salaries paid to staff),(6)Amount spent on security services
 (excluding salaries paid by facility to security staff)

Non-medical services (Months 7 to 12) Q.7	<i>Month 7</i>
exp_nm_M7 exp_nm	
Non-medical services (Months 7 to 12) Q.8	<i>Month 8</i>
exp_nm_M8 exp_nm	
Non-medical services (Months 7 to 12) Q.9	<i>Month 9</i>
exp_nm_M9 exp_nm	
Non-medical services (Months 7 to 12) Q.10	<i>Month 10</i>
exp_nm_M10 exp_nm	
Non-medical services (Months 7 to 12) Q.11	<i>Month 11</i>
exp_nm_M11 exp_nm	
Non-medical services (Months 7 to 12) Q.12	<i>Month 12</i>
exp_nm_M12 exp_nm	

END ROSTER 5.4.16.2:Non-medical services (Months 7 to 12)

END SCREEN 5.4.16:Non-medical services: Expenditure Breakdown

Facility Expenses Extraction (By Month) Label

Staff (1)- Total amount spent on all staff

Please report the total expenditure that this facility has spent each year, during the previous fiscal year. This includes all monetary resources used

Facility Expenses Extraction (By Month) Label

by this facility on staff (current and former) at this facility including wages, salaries, benefits and allowances over the course of a year, regardless of their source. This will include expenses for regular, ad-hoc, contractual, daily wages or part-time employees.

Facility Expenses Extraction (By Month) Label

Enter the following codes, if necessary:
 0=No expenses
 -999=Don't know
 -998=Decline to respond
 All amounts should be listed in South African Rand

Facility Expenses Extraction (By Month) Q.85

total_expenses_ps1_gate_ IND_M1
m

[Go To [total_expenses_ps2_gate_m]
 if:current.total_expenses_ps1_gate_m <> 1]

Do you know the TOTAL amount spent by the facility on all staff in the last fiscal year?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

START ROSTER 5.4.17:Staff (1) - Total amount spent on all staff (Months 1 to 6)

RosterContents :(1)TOTAL amount spent on all staff (current and former)
 at this facility including wages, salaries, benefits and
 allowances for the previous fiscal year

Staff (1) - Total amount spent on all staff (Months 1 to 6) Q.86 *Month 1*

exp_ps1_M1 **exp_ps1**

Staff (1) - Total amount spent on all staff (Months 1 to 6) Q.87 *Month 2*

exp_ps1_M2 **exp_ps1**

Staff (1) - Total amount spent on all staff (Months 1 to 6) Q.88 *Month 3*

exp_ps1_M3 **exp_ps1**

Staff (1) - Total amount spent on all staff (Months 1 to 6) Q.89 *Month 4*

exp_ps1_M4 **exp_ps1**

Staff (1) - Total amount spent on all staff (Months 1 to 6) Q.90 *Month 5*

exp_ps1_M5 **exp_ps1**

Staff (1) - Total amount spent on all staff (Months 1 to 6) Q.91 *Month 6*

exp_ps1_M6 **exp_ps1**

END ROSTER 5.4.17:Staff (1) - Total amount spent on all staff (Months 1 to 6)

START ROSTER 5.4.18:Staff (1) - Total amount spent on all staff (Months 7 to 12)

RosterContents :(1)TOTAL amount spent on all staff (current and former)
 at this facility including wages, salaries, benefits and
 allowances for the previous fiscal year

Staff (1) - Total amount spent on all staff (Months 7 to 12) Q.92
 exp_ps1_M7 exp_ps1

Month 7

Staff (1) - Total amount spent on all staff (Months 7 to 12) Q.93
 exp_ps1_M8 exp_ps1

Month 8

Staff (1) - Total amount spent on all staff (Months 7 to 12) Q.94
 exp_ps1_M9 exp_ps1

Month 9

Staff (1) - Total amount spent on all staff (Months 7 to 12) Q.95
 exp_ps1_M10 exp_ps1

Month 10

Staff (1) - Total amount spent on all staff (Months 7 to 12) Q.96
 exp_ps1_M11 exp_ps1

Month 11

Staff (1) - Total amount spent on all staff (Months 7 to 12) Q.97
 exp_ps1_M12 exp_ps1

Month 12

END ROSTER 5.4.18:Staff (1) - Total amount spent on all staff (Months 7 to 12)

Facility Expenses Extraction (By Month) Label

[SELECT CASEWHEN(((select (exp_ps1_M1 + exp_ps1_M2 + exp_ps1_M3 + exp_ps1_M4 + exp_ps1_M5 + exp_ps1_M6) from exp_ps1 where exp_ps1_ID = 1) + (select (exp_ps1_M7 + exp_ps1_M8 + exp_ps1_M9 + exp_ps1_M10 + exp_ps1_M11 + exp_ps1_M12) from exp_ps1 where exp_ps1_ID = 1)) > ((select (exp_total_M1 + exp_total_M2 + exp_total_M3 + exp_total_M4 + exp_total_M5 + exp_total_M6) from exp_total where exp_total_ID = 1) + (select (exp_total_M7 + exp_total_M8 + exp_total_M9 + exp_total_M10 + exp_total_M11 + exp_total_M12) from exp_total where exp_total_ID = 1))), 'Warning: The value entered for the total expenditures on total amount spent on all staff is greater than total value of all expenditures for this facility. Please clarify the previous responses with the respondent and correct any mistakes.', '')]

Facility Expenses Extraction (By Month) Label

Staff (2) – Salaries/Wages

For each category listed below, please report the total expenditures that this facility spent during the previous fiscal year. This includes all monetary resources used by this facility on staff salaries over the course of a year.

Facility Expenses Extraction (By Month) Label

Enter the following codes, if necessary:

0=No expenses

-999=Don't know

-998=Decline to respond

All amounts should be listed in South African Rand

Facility Expenses Extraction (By Month) Label

*Enter the following codes, if necessary:**0=No expenses**-999=Don't know**-998=Decline to respond**All amounts should be listed in South African Rand*

Facility Expenses Extraction (By Month) Q.98

**total_expenses_ps2_gate_ IND_M1
m**[Go To [ps2_break_m] if:current.total_expenses_ps2_gate_m
<> 1]*Do you know the TOTAL amount spent by the facility on staff salaries and wages in the last fiscal year?**(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond***START ROSTER 5.4.19:Staff (2) - Total Salaries/Wages (Months 1 to 6)**

RosterContents :(1)TOTAL amount spent on all staff salaries/wages for the previous fiscal year

Staff (2) - Total Salaries/Wages (Months 1 to 6)

Month 1

Q.99

exp_tot_ps2_M1**exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 1 to 6)

Month 2

Q.100

exp_tot_ps2_M2**exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 1 to 6)

Month 3

Q.101

exp_tot_ps2_M3**exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 1 to 6)

Month 4

Q.102

exp_tot_ps2_M4**exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 1 to 6)

Month 5

Q.103

exp_tot_ps2_M5**exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 1 to 6)

Month 6

Q.104

exp_tot_ps2_M6**exp_ps2_sal_tot****END ROSTER 5.4.19:Staff (2) - Total Salaries/Wages (Months 1 to 6)****START ROSTER 5.4.20:Staff (2) - Total Salaries/Wages (Months 7 to 12)**

RosterContents :(1)TOTAL amount spent on all staff salaries/wages for the previous fiscal year

Staff (2) - Total Salaries/Wages (Months 7 to 12)

Month 7

Q.105

exp_tot_ps2_M7**exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 7 to 12) *Month 8*
 Q.106
exp_tot_ps2_M8 **exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 7 to 12) *Month 9*
 Q.107
exp_tot_ps2_M9 **exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 7 to 12) *Month 10*
 Q.108
exp_tot_ps2_M10 **exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 7 to 12) *Month 11*
 Q.109
exp_tot_ps2_M11 **exp_ps2_sal_tot**

Staff (2) - Total Salaries/Wages (Months 7 to 12) *Month 12*
 Q.110
exp_tot_ps2_M12 **exp_ps2_sal_tot**

END ROSTER 5.4.20:Staff (2) - Total Salaries/Wages (Months 7 to 12)

Facility Expenses Extraction (By Month) Q.111 *Are specific wage breakdowns available?*
ps2_break_m **IND_M1** (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond
 [Go To [commentsM1_5] if:current.ps2_break_m != 1]

SCREEN5.4.21:Salaries/Wages: Expenditure Breakdown

Enable if :current.ps2_break_m = 1

START ROSTER 5.4.21.1:Staff (2) – Salaries/Wages (Months 1 to 6)

RosterContents :(1)Doctors,(2)Clinical Officers,(3)Midwives,(4)Nurse,(5)Pharmacy Personnel,(6)Environmental Health Personnel,(7)Data Clerk,(8)Other allied health provider,(9)Other administrative staff,(10)Support staff,(11)Community Care Giver,(12)Facility-based Community Health Worker

Staff (2) – Salaries/Wages (Months 1 to 6) Q.1 *Month 1*
exp_ps2_M1 **exp_ps2_sal**

Staff (2) – Salaries/Wages (Months 1 to 6) Q.2 *Month 2*
exp_ps2_M2 **exp_ps2_sal**

Staff (2) – Salaries/Wages (Months 1 to 6) Q.3 *Month 3*
exp_ps2_M3 **exp_ps2_sal**

Staff (2) – Salaries/Wages (Months 1 to 6) Q.4 *Month 4*
exp_ps2_M4 **exp_ps2_sal**

Staff (2) – Salaries/Wages (Months 1 to 6) Q.5 *Month 5*
exp_ps2_M5 **exp_ps2_sal**

Staff (2) – Salaries/Wages (Months 1 to 6) Q.6 *Month 6*
exp_ps2_M6 **exp_ps2_sal**

6. Revenues Label *Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent*

6. Revenues Label **Section 6: Revenues**
This section is primarily designed to capture information about this facility's revenues. Please complete this section with a facility accountant, administrator or other individual who is well-informed about the finances to this health facility.

6. Revenues Q.1 *Are facility revenues recorded by year?*
rev_year **IND_M1** (1)Yes,(0)No

6. Revenues Q.2 *Are facility revenues recorded by month?*
rev_month **IND_M1** (1)Yes,(0)No
Enable if :current.rev_year = 0

SCREEN6.1:Total Revenue (By Year)

Enable if :current.rev_year = 1

Total Revenue (By Year) Label **Total Revenue:**

*Please report the total revenue this facility collected during the previous fiscal year.
This includes all monetary resources acquired by this facility from all sources, and for all purposes.*

Please note, for all tables such as the one below, use the "Tab" key to move to the next cell space

Enter the following codes, if necessary:
0=No revenue
-999=Don't know
-998=Decline to respond
-997 = Missing data/not observed

All amounts should be listed in South African Rand.

START ROSTER 6.1.1:Total Revenue

RosterContents :(1)<u>TOTAL revenue (all payers),(2)(1)Reimbursements from the national Department of Health,(3)(2) Reimbursement from the provincial Department of Health,(4)(3) Other donor agency or private organization,(5)(4) Direct patient / out-of-pocket charges/fees,(6)(5) Direct tuition/training payments,(7)(6) Research funding,(8)(7) Reimbursement from public insurance,(9)(8) Reimbursement from private insurance,(10)(9) NACO/SACS,(11)(10) Other

Total Revenue Q.1 *Last Fiscal Year*
rev_abs_YR1 **rev_abs**
Enable if :(select fac_years from IND_M1) > 0

END ROSTER 6.1.1:Total Revenue

Total Revenue (By Year) Q.2

*Please specify 'other':***rev_abs_year_osp** **IND_M1**

Enable if : (select rev_abs_YR1 from rev_abs where rev_abs = 24) > 0

Total Revenue (By Year) Label

Please review and confirm the data entered:***YR1 Total:*** [select rev_abs_YR1 from rev_abs where rev_abs = 1]***M1 Sum of subcomponents:*** [select sum(rev_abs_YR1) from rev_abs where rev_abs in (2,3,4,5,6,7,8,9,10,11)]*If the sum of the subcomponents is greater than the total for any year, please go back and correct this error.*

END SCREEN 6.1: Total Revenue (By Year)

SCREEN6.2: Total Revenue (By Month)

Enable if : current.rev_month = 1

Total Revenue (By Month) Label

Total Revenue:*Please report the total revenue this facility collected during the previous fiscal year.**This includes all monetary resources acquired by this facility from all sources, and for all purposes.**Please note, for all tables such as the one below, use the "Tab" key to move to the next cell space.**Enter the following codes, if necessary:**0 = No revenue**-999 = Don't know**-998 = Decline to respond**-997 = Missing data/not observed**All amounts should be listed in South African Rand**Month 1 = [select fiscal_yr2_month from fiscal_yr2 where fiscal_yr2 = 1] / [select fiscal_yr2_year from fiscal_yr2 where fiscal_yr2 = 1]*

START ROSTER 6.2.1: Total Revenue (Months 1 to 6)

RosterContents : (1)<u>TOTAL revenue (all payers), (2)(1) Reimbursements from the national Department of Health, (3)(2) Reimbursement from the provincial Department of Health, (4)(3) Other donor agency or private organization, (5)(4) Direct patient / out-of-pocket charges/fees, (6)(5) Direct tuition/training payments, (7)(6) Research funding, (8)(7) Reimbursement from public insurance, (9)(8) Reimbursement from private insurance, (10)(9) NACO/SACS, (11)(10) Other

Total Revenue (Months 1 to 6) Q.1

*Month 1***rev_abs_M1** **rev_abs**

Total Revenue (Months 1 to 6) Q.2

*Month 2***rev_abs_M2** **rev_abs**

Total Revenue (Months 1 to 6) Q.3	<i>Month 3</i>
rev_abs_M3 rev_abs	

Total Revenue (Months 1 to 6) Q.4	<i>Month 4</i>
rev_abs_M4 rev_abs	

Total Revenue (Months 1 to 6) Q.5	<i>Month 5</i>
rev_abs_M5 rev_abs	

Total Revenue (Months 1 to 6) Q.6	<i>Month 6</i>
rev_abs_M6 rev_abs	

END ROSTER 6.2.1:Total Revenue (Months 1 to 6)

START ROSTER 6.2.2:Total Revenue (Months 7 to 12)

RosterContents : (1)<u>TOTAL revenue (all payers),(2)(1)Reimbursements from the national Department of Health,(3)(2) Reimbursement from the provincial Department of Health,(4)(3) Other donor agency or private organization,(5)(4) Direct patient / out-of-pocket charges/fees,(6)(5) Direct tuition/training payments,(7)(6) Research funding,(8)(7) Reimbursement from public insurance,(9)(8) Reimbursement from private insurance,(10)(9) NACO/SACS,(11)(10) Other

Total Revenue (Months 7 to 12) Q.7	<i>Month 7</i>
rev_abs_M7 rev_abs	

Total Revenue (Months 7 to 12) Q.8	<i>Month 8</i>
rev_abs_M8 rev_abs	

Total Revenue (Months 7 to 12) Q.9	<i>Month 9</i>
rev_abs_M9 rev_abs	

Total Revenue (Months 7 to 12) Q.10	<i>Month 10</i>
rev_abs_M10 rev_abs	

Total Revenue (Months 7 to 12) Q.11	<i>Month 11</i>
rev_abs_M11 rev_abs	

Total Revenue (Months 7 to 12) Q.12	<i>Month 12</i>
rev_abs_M12 rev_abs	

END ROSTER 6.2.2:Total Revenue (Months 7 to 12)

Total Revenue (By Month) Q.13

Please specify 'other':

rev_abs_month_osp **IND_M1**

Enable if :(select rev_abs_M1 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M2 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M3 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M4 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M5 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M6 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M7 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M8 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M9 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M10 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M11 from rev_abs where rev_abs = 24) > 0 OR
(select rev_abs_M12 from rev_abs where rev_abs = 24) > 0

Total Revenue (By Month) Label

Please review and confirm the data entered:**M1 Total:** [select rev_abs_M1 from rev_abs where rev_abs = 1]**M1 Sum of subcomponents:** [select sum(rev_abs_M1) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M2 Total:** [select rev_abs_M2 from rev_abs where rev_abs = 1]**M2 Sum of subcomponents:** [select sum(rev_abs_M2) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M3 Total:** [select rev_abs_M3 from rev_abs where rev_abs = 1]**M3 Sum of subcomponents:** [select sum(rev_abs_M3) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M4 Total:** [select rev_abs_M4 from rev_abs where rev_abs = 1]**M4 Sum of subcomponents:** [select sum(rev_abs_M4) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M5 Total:** [select rev_abs_M5 from rev_abs where rev_abs = 1]**M5 Sum of subcomponents:** [select sum(rev_abs_M5) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M6 Total:** [select rev_abs_M6 from rev_abs where rev_abs = 1]**M6 Sum of subcomponents:** [select sum(rev_abs_M6) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M7 Total:** [select rev_abs_M7 from rev_abs where rev_abs = 1]**M7 Sum of subcomponents:** [select sum(rev_abs_M7) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M8 Total:** [select rev_abs_M8 from rev_abs where rev_abs = 1]**M8 Sum of subcomponents:** [select sum(rev_abs_M8) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]**M9 Total:** [select rev_abs_M9 from rev_abs where rev_abs = 1]

Total Revenue (By Month) Label

M9 Sum of subcomponents: [select sum(rev_abs_M9) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]

M10 Total: [select rev_abs_M10 from rev_abs where rev_abs = 1]

M10 Sum of subcomponents: [select sum(rev_abs_M10) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]

M11 Total: [select rev_abs_M11 from rev_abs where rev_abs = 1]

M11 Sum of subcomponents: [select sum(rev_abs_M11) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]

M12 Total: [select rev_abs_M12=2 from rev_abs where rev_abs = 1]

M12 Sum of subcomponents: [select sum(rev_abs_M12) from rev_abs where rev_abs in (2,12,13,14,15,16,17,22,23,24)]

If the sum of the subcomponents is greater than the total for any year, please go back and correct this error.

END SCREEN 6.2:Total Revenue (By Month)

6. Revenues Q.3

routine_fees_gate

IND_M1

Does this facility have any routine user-fees or charges for patient services? This includes any fees, including those for registration or for client health records, or for diagnostics including charges for reports.

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

6. Revenues Q.4

routine_fees_mr

IND_M1

Enable if :current.routine_fees_gate = 1

What kind of user fees? (SELECT ALL THAT APPLY)

(1)Fees for all services,(2)Fees for diagnostic or laboratory reports,(3)Registration fees,(4)Fees for client health records,(-999)Dont know,(-998)Decline to respond

6. Revenues Q.5

routine_fees

IND_M1

Enable if :current.routine_fees_gate = 1

Do ALL patients pay routine user-fees or charges for patient services?

(1)Yes,(0)No, those below certain income do not pay,(2)No one pays,(9)Other, Please specify,(-999)Don't know,(-998)Decline to respond

6. Revenues Q.6

routine_fees_osp

IND_M1

Enable if :current.routine_fees = 9

Please specify 'other'

SCREEN6.3:User Fees

Enable if :array_contains (current.routine_fees_mr, 1) OR array_contains (current.routine_fees_mr, 2) OR array_contains (current.routine_fees_mr, 3)

User Fees Label

User Fees

Please ask for fees charged to patients who pay for services from the facility for the below services.

All fees should be entered in South African Rand

Enter the following codes, if necessary:

0 = No fee is charged

-999 = Don't know

-998 = Decline to respond

-997 = Missing/Data not available

START ROSTER 6.3.1:User Fees

RosterContents :(1)Registration,(2)Ambulance charges,(3)Plasma glucose test,(4)HbA1c test,(5)Fasting lipid profile,(6)Consultation for hypertension,(7)Consultation for diabetes,(8)Adult consultation / registration,(9)Adult overnight stay or overnight observation (one night IP admission charges)

User Fees Q.1

routine_fees_serv

pat_fees_2

Fee

END ROSTER 6.3.1:User Fees

END SCREEN 6.3:User Fees

6. Revenues Q.7

commentsM1_6

IND_M1

Comments for Section 6: Revenues

6. Revenues Label

Important Reminder:
 Select "Validate" button above (check mark).
 Correct errors, if any, and "validate" again.

END SCREEN 6:6. Revenues

SCREEN7:7. Staff Characteristics

Enable if :current.consent = 1

7. Staff Characteristics Label

Instructions for interviewer:

All text in blue are directions for you and should not be read aloud.
 All text in red are observations only.
 Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent.

7. Staff Characteristics Label

Section 7: Staff Characteristics

This section is primarily designed to capture information about this facility's staff. Please complete this section with a facility human resources administrator or other individual who is well-informed about staff employed at this facility.

7. Staff Characteristics Label

Enter the following codes, if necessary:

-999 = Don't know

-998 = Decline to respond

START ROSTER 7.1:Average hours worked per week per individual staff member by staff type.

RosterContents :(1)Doctors,(2)Clinical Officers,(3)Midwives,(4)Nurses,(5)Pharmacy personnel,(6)Environmental Health Personnel,(7)Data Clerk,(8)

START ROSTER 7.1: Average hours worked per week per individual staff member by staff type.

Other paramedical staff,(9)Administrative staff (managers, accountant, human resources manager, etc.),(10)Support staff (cleaners, porters, security, laundry, etc.),(11)Community Care Giver,(12)Facility-based Community Health Worker

Average hours worked per week per individual staff member by staff type. Q.1

fte_hrs_q

fte_hrs

Average hours worked per week per individual staff member

END ROSTER 7.1: Average hours worked per week per individual staff member by staff type.

7. Staff Characteristics Label

Total Staff at this facility:

Total staff that work at this facility. All individuals who work at this facility should be counted.

For each occupational category listed below please indicate the number of persons who worked at this facility at the end of the previous fiscal year. Include all staff who worked at this facility irrespective of the source of payment and any volunteer.

Please indicate the total number of staff in each job category during the last fiscal year.

Enter the following codes, if necessary:

0 = No staff in this job category

-999 = Don't know

-998 = Decline to respond

START ROSTER 7.2: Total Staff at this facility:

RosterContents : (1)Total staff working at this facility,(2)Doctors,(3)Clinical Officers,(4)Midwives,(5)Nurses,(6)Pharmacy personnel,(7)Environmental Health Personnel,(8)Data Clerk,(9)Other paramedical staff,(10)Administrative staff (managers, accountant, human resources manager, etc.),(11)Support staff (cleaners, porters, security, laundry, etc.),(12)Community Care Giver,(13)Facility-based Community Health Worker

Total Staff at this facility: Q.2

fte_tot_YR1

fte_tot

Enable if : (select fac_years from IND_M1) > 0

Last Fiscal Year

END ROSTER 7.2: Total Staff at this facility:

7. Staff Characteristics Label

Please review and confirm the data entered:

Last Fiscal Year Total Staff: [select fte_tot_YR1 from fte_tot where fte_tot = 1]

Last Fiscal Year Sum of Subcomponents: [select sum(fte_tot_YR1) from fte_tot where fte_tot in (2,3,4,5,6,7,8,9,10,11,12,13)]

If the sum of the subcomponents is greater than the total for the last fiscal year, please go back and correct this error.

7. Staff Characteristics Q.3

fac_train**IND_M1***Have there ever been any training sessions organized by this facility in the last 3 years?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

7. Staff Characteristics Q.4

fac_train_ncd**IND_M1***How many of these trainings were focused on non-communicable diseases, such as diabetes and hypertension?*

Enable if :current.fac_train = 1

*Enter the following codes, if necessary:**0 = None**-999 = Don't know**-998 = Decline to respond*

7. Staff Characteristics Q.5

hr_train**IND_M1***Were any of these trainings provided by HealthRise?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

[Go To [staff_train] if:current.hr_train != 1]

7. Staff Characteristics Q.6

hr_train_num**IND_M1***How many of the trainings were provided by HealthRise?**Enter the following codes, if necessary:**0 = None**-999 = Don't know**-998 = Decline to respond*

START ROSTER 7.3:Indicate the total number of staff in each job category that was trained by HealthRise in the past 3 years

*Enter the following codes, if necessary:**0 = None**-999= Don't know**-998= Decline to respond*

RosterContents :(1)Medical officer (MO),(2)NCD Councillor,(3)Doctors,(4)Clinical Officers,(5)Midwives,(6)Nurses,(7)Pharmacy personnel,(8)Environmental Health personnel,(9)Data Clerk,(10)Other paramedical staff,(11)Administrative staff (managers, account, human resources manager, etc.),(12)Support staff (cleaners, porters, security, laundry, etc.),(13)Community Care Giver,(14)Other

Indicate the total number of staff in each job category that was trained by HealthRise in the past 3 years

*Number of staff trained by HealthRise in the past 3 years**Enter the following codes, if necessary:**0 = None**-999= Don't know**-998= Decline to respond Q.7***staff_hr_train_job****hr_train_job**

END ROSTER 7.3:Indicate the total number of staff in each job category that was trained by HealthRise in the past 3 years

*Enter the following codes, if necessary:**0 = None**-999= Don't know**-998= Decline to respond*

END ROSTER 7.3: Indicate the total number of staff in each job category that was trained by HealthRise in the past 3 years

Enter the following codes, if necessary:

0 = None

-999= Don't know

-998= Decline to respond

7. Staff Characteristics Q.8

staff_hr_train_job_oth **IND_M1**

Enable if : (select staff_hr_train_job from hr_train_job where hr_train_job_ID = 14) != 0

Which "other" job categories were trained by HealthRise in the past 3 years?

7. Staff Characteristics Label

[SELECT CASEWHEN((select SUM(staff_hr_train_job) from hr_train_job where hr_train_job_ID =14) = 0, 'It was previously noted that staff members received trainings from HealthRise in the last 3 years. However, the table above indicates that no staff members in any job category were trained by HealthRise in the last 3 years. Please confirm with the respondent that staff members did receive trainings from HealthRise in the past 3 years, and if so, note the number of staff that were trained in each job category in the table above.', '')]

7. Staff Characteristics Q.9

staff_train **IND_M1**

Does the staff working at this facility go for training elsewhere?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

7. Staff Characteristics Label

Please click the button below and fill out the tables for Health Services and Administrative Support Services Provided

SCREEN 7.4: Health Services and Administrative Support Services Provided

Health Services and Administrative Support Services Provided Label

Instructions for interviewer:

All text highlighted in yellow are directions for you and should not be read aloud.

All text highlighted in green are observations only.

Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent.

Please complete all tables before moving on.

Health Services and Administrative Support Services Provided Label

Health Services Provided: Staffing

Health Services and Administrative Support Services Provided Label

For each service listed below, please provide how many hours per day of the week the services is offered and the average number of staff providing this services on a typical day.

Enter the following codes, if necessary:

0 = Service not offered/no staff in this category staffing this clinic/service

-999 = Don't know

-998 = Decline to respond

START ROSTER 7.4.1:Health Services Provided: Staffing

Health Services Provided: Staffing Label		<i>[select services_id from staffing_rt where services_code = current.staffing]</i>
Health Services Provided: Staffing Q.1 staffing_gateway staffing		<i>Is this service provided at this facility?</i> (1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond
Health Services Provided: Staffing Q.2 staffing_mon staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Monday?</i>
Health Services Provided: Staffing Q.3 staffing_tues staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Tuesday?</i>
Health Services Provided: Staffing Q.4 staffing_wed staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Wednesday?</i>
Health Services Provided: Staffing Q.5 staffing_thurs staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Thursday?</i>
Health Services Provided: Staffing Q.6 staffing_fri staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Friday?</i>
Health Services Provided: Staffing Q.7 staffing_sat staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Saturday?</i>
Health Services Provided: Staffing Q.8 staffing_sun staffing Enable if :current.staffing_gateway = 1		<i>How many hours provided on Sunday?</i>
Health Services Provided: Staffing Q.9 staffing_staff staffing Enable if :current.staffing_gateway = 1		<i>What is the typical number of staff providing this service on a typical day?</i>
[HIDDEN]Health Services Provided: Staffing staffing_dh staffing		<i>plat_dh</i>
[HIDDEN]Health Services Provided: Staffing staffing_ch staffing		<i>plat_ch</i>
[HIDDEN]Health Services Provided: Staffing staffing_chc staffing		<i>plat_chc</i>
[HIDDEN]Health Services Provided: Staffing staffing_phc staffing		<i>plat_phc</i>
[HIDDEN]Health Services Provided: Staffing staffing_shc staffing		<i>plat_shc</i>

[HIDDEN]Health Services Provided: Staffing
staffing_mc **staffing** *plat_mc*

[HIDDEN]Health Services Provided: Staffing
staffing_nh **staffing** *plat_nh*

[HIDDEN]Health Services Provided: Staffing
staffing_th **staffing** *plat_th*

[HIDDEN]Health Services Provided: Staffing
staffing_pvt **staffing** *plat_pvt*

END ROSTER 7.4.1:Health Services Provided: Staffing

Health Services and Administrative Support
 Services Provided Q.10
outreach_days **IND_M1** *How many days of outreach are conducted in a typical month?*
 Enter the following response codes, if necessary:
 -999 = Don't know
 -998 = Decline to respond

Health Services and Administrative Support
 Services Provided Q.11
outreach_staff **IND_M1** *How many staff typically participate in outreach?*
 Enter the following response codes, if necessary:
 -999 = Don't know
 -998 = Decline to respond

Health Services and Administrative Support
 Services Provided Label
Administrative and Support Services Provided: Staffing
For each administrative service listed below, please provide how many days per week the service is available, how many hours per typical day the service is offered, and the typical number of staff staffing/providing this services on a typical day.
 Enter the following codes, if necessary:
 1 = Service provided and staffed
 0 = Service not offered/no staff in this category staffing this clinic/service
 -999 = Don't know
 -998 = Decline to respond

START ROSTER 7.4.2:Administrative and Support Services Provided: Staffing

Administrative and Support Services Provided:
 Staffing Label *[select services_id from teams_admin_rt where services_code = current.teams_admin]*

Administrative and Support Services Provided:
 Staffing Q.12
teams_admin_dpw **teams_admin** *How many days per week is this service available?*

Administrative and Support Services Provided:
Staffing Q.13

teams_admin_hpd

teams_admin

How many hours per day is this service typically offered?

Administrative and Support Services Provided:
Staffing Q.14

teams_admin_staff

teams_admin

What is the typical number of staff providing this service on a typical day?

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_dh

teams_admin

plat_dh

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_ch

teams_admin

plat_ch

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_chc

teams_admin

plat_chc

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_phc

teams_admin

plat_phc

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_shc

teams_admin

plat_shc

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_mc

teams_admin

plat_mc

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_nh

teams_admin

plat_nh

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_th

teams_admin

plat_th

[HIDDEN]Administrative and Support Services
Provided: Staffing

teams_admin_pvt

teams_admin

plat_pvt

END ROSTER 7.4.2:Administrative and Support Services Provided:
Staffing

Health Services and Administrative Support
Services Provided Label

Important Reminder:

1. Select "Remove Disabled Values" button below (red X).
2. Select "Validate" button below (green check mark).
3. Select "Show Error Details" button below (bottom right button).

Health Services and Administrative Support
Services Provided Label

4. Fix any "Errors" below (red circle).

END SCREEN 7.4:Health Services and Administrative Support
Services Provided

7. Staff Characteristics Label

Financial Audit Information

7. Staff Characteristics Q.10

fac_audit

IND_M1

Is the annual PIP reports for the most recent fiscal year available?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

7. Staff Characteristics Q.11

commentsM1_7

IND_M1

Comments for Section 7: Staff Characteristics

7. Staff Characteristics Label

Important Reminder:
Select "Validate" button above (check mark).
Correct errors, if any, and "validate" again.

END SCREEN 7:7. Staff Characteristics

SCREEN8:8. Facility Management

Enable if :current.consent = 1

8. Facility Management Label

Instructions for interviewer:

All text in blue are directions for you and should not be read aloud.

All text in red are observations only.

Never read the options Don't know, Decline to respond, or Not applicable; only fill those in when indicated by the respondent.

8. Facility Management Label

Section 8: Facility Management

This section is designed to capture general information about this facility, its infrastructure and other relevant characteristics. Please complete this section with a facility administrator, manager or other individual who is well-informed about the overall characteristics of this health facility

START ROSTER 8.1:How many hours per day is the facility open on each day of the week?

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data
(ENTER NUMBER OF HOURS)

RosterContents :(1)Hours

How many hours per day is the facility open on each day of the week?

Monday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.1

fac_hrs_mon

fac_hrs

How many hours per day is the facility open on each day of the week?

Tuesday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.2

fac_hrs_tues

fac_hrs

How many hours per day is the facility open on each day of the week?

Wednesday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.3

fac_hrs_wed

fac_hrs

How many hours per day is the facility open on each day of the week?

Thursday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.4

fac_hrs_thurs

fac_hrs

How many hours per day is the facility open on each day of the week?

Friday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.5

fac_hrs_fri

fac_hrs

How many hours per day is the facility open on each day of the week?

Saturday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.6

fac_hrs_sat

fac_hrs

How many hours per day is the facility open on each day of the week?

Sunday

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS) Q.7

fac_hrs_sun

fac_hrs

END ROSTER 8.1:How many hours per day is the facility open on each day of the week?

(ENTER NUMBER OF HOURS)

If necessary enter -999 for missing/no data

(ENTER NUMBER OF HOURS)

START ROSTER 8.2:How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

If necessary enter -999 for missing/no data)

(ENTER NUMBER OF HOURS)

RosterContents :(1)Hours

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Monday

If necessary enter -999 for missing/no data)

(ENTER NUMBER OF HOURS) Q.8

hosp_hrs_mon

fac_hrs

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Tuesday

If necessary enter -999 for missing/no data)

(ENTER NUMBER OF HOURS) Q.9

hosp_hrs_tues

fac_hrs

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Wednesday

If necessary enter -999 for missing/no data)
(ENTER NUMBER OF HOURS) Q.10

hosp_hrs_wed

fac_hrs

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Thursday

If necessary enter -999 for missing/no data)
(ENTER NUMBER OF HOURS) Q.11

hosp_hrs_thurs

fac_hrs

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Friday

If necessary enter -999 for missing/no data)
(ENTER NUMBER OF HOURS) Q.12

hosp_hrs_fri

fac_hrs

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Saturday

If necessary enter -999 for missing/no data)
(ENTER NUMBER OF HOURS) Q.13

hosp_hrs_sat

fac_hrs

How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

Sunday

If necessary enter -999 for missing/no data)
(ENTER NUMBER OF HOURS) Q.14

hosp_hrs_sun

fac_hrs

END ROSTER 8.2:How many hours per day is the outpatient services/general services clinic of this facility open on each day of the week?

If necessary enter -999 for missing/no data)
(ENTER NUMBER OF HOURS)

8. Facility Management Q.15

accessible_weeks **IND_M1**

How many weeks per year is the facility not accessible to some patients within this facility's catchment area because of flooding or other environmental reasons(such as flooding)?

Enter the following codes, if necessary:

-999 = Don't know

-998 = Decline to respond

8. Facility Management Q.16

watershortage **IND_M1**

In a typical year, is there a time of year when there is a severe shortage or lack of water at this facility?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.17

examination_rooms **IND_M1**

How many examination rooms are there in this facility? An examination room is room where a medical provider receives and treats patients, and otherwise practices medicine.

Enter the following codes, if necessary:

-999 = Don't know

-998 = Decline to respond

8. Facility Management Q.18

inpatient **IND_M1**

Does this facility provide inpatient care?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.19

fac_beds **IND_M1**

Enable if :current.inpatient=1

How many inpatient beds are there in this facility?

Enter the following codes, if necessary:

-999 = Don't know

-998 = Decline to respond

-996 = Not applicable

8. Facility Management Q.20

maint_inf **IND_M1**

*Does this facility perform routine maintenance and repair of **infrastructure**?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.21

maint_equ **IND_M1**

*Does this facility perform routine maintenance and repair of **major equipment** such as a generator, refrigerator, sterilization equipment, or other large medical equipment?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.22

system_1 **IND_M1**

*Does this facility have a functional **electricity** connection?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.23

electricity_hours**IND_M1**

Usually during a typical day, how many hours is there electricity available at the facility irrespective of the source?

Enter the following codes, if necessary:

-999 = Don't know

-998 = Decline to respond

-996 = Not applicable

8. Facility Management Q.24

electricity_days**IND_M1**

During the past week on how many days was the electricity not available for at least two hours from any source during a time the facility was open for services (including emergency services)?

Enter the following codes, if necessary:

Enter "0" if there were no interruptions in electricity

-999 = Don't know

-998 = Decline to respond

-996 = Not applicable

8. Facility Management Q.25

watersource_t**IND_M1**

What are the most common sources of water used at this facility?

(1)Piped into facility,(2)Well (public protected),(3)Well (facility protected),(4)Well (unprotected),(5)Borehole,(6)Hand pump,(7)Bottled water,(8)Tanker truck,(9)Rainwater,(10)Other,(11)No water source,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.26

internet**IND_M1**

Does this facility have a functional **internet** connection?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.27

hr_internet**IND_M1**

Enable if :current.internet = 1

Was the internet connection implemented at this facility by the HealthRise project?

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.28

atq_hr_t**IND_M1**

Please indicate if this facility utilizes any of the following health record systems:

(4)Paper-based health record system,(3)Electronic-based health record system,(0)None of the above,(-999)Don't know,(-998)Decline to respond,(-996)Not applicable

START ROSTER 8.3:Non-communicable disease initiatives

Now I am going to ask you about activities relating to non-communicable diseases that take place at this facility.

Please list all programs or initiatives relating to non-communicable diseases such as diabetes or hypertension that take place at this facility and are sponsored or paid for by any of the following organizations or entities,
NDOH or other government agency,
HealthRise, Project HOPE or Expectra,
NGO other than HealthRise, Project HOPE or HealthRise,
this facility alone

For each program, please note the following,

1. Name of program or initiative

2. Short description (1 sentence) of program or initiative
3. Sponsor or source of funding for the initiative (select all that apply)

RosterContents :(1)1,(2)2,(3)3,(4)4,(5)5,(6)6,(7)7

Non-communicable disease initiatives

Name of initiative or program

Now I am going to ask you about activities relating to non-communicable diseases that take place at this facility.

Please list all programs or initiatives relating to non-communicable diseases such as diabetes or hypertension that take place at this facility and are sponsored or paid for by any of the following organizations or entities,
NDOH or other government agency,
HealthRise, Project HOPE or Expectra,
NGO other than HealthRise, Project HOPE or HealthRise,
this facility alone

For each program, please note the following,

1. Name of program or initiative
2. Short description (1 sentence) of program or initiative
3. Sponsor or source of funding for the initiative (select all that apply)

Q.29

ncd_prog_name

ncd_prog_list

Non-communicable disease initiatives*Short description of program or initiative*

Now I am going to ask you about activities relating to non-communicable diseases that take place at this facility.

Please list all programs or initiatives relating to non-communicable diseases such as diabetes or hypertension that take place at this facility and are sponsored or paid for by any of the following organizations or entities,
NDOH or other government agency,
HealthRise, Project HOPE or Expectra,
NGO other than HealthRise, Project HOPE or HealthRise,
this facility alone

For each program, please note the following,

1. Name of program or initiative
2. Short description (1 sentence) of program or initiative
3. Sponsor or source of funding for the initiative (select all that apply)

Q.30

ncd_prog_desc

ncd_prog_list

Non-communicable disease initiatives*Sponsor or source of funding for the initiative (select all that apply)*

Now I am going to ask you about activities relating to non-communicable diseases that take place at this facility.

Please list all programs or initiatives relating to non-communicable diseases such as diabetes or hypertension that take place at this facility and are sponsored or paid for by any of the following organizations or entities,
NDOH or other government agency,
HealthRise, Project HOPE or Expectra,
NGO other than HealthRise, Project HOPE or HealthRise,
this facility alone

For each program, please note the following,

1. Name of program or initiative
2. Short description (1 sentence) of program or initiative
3. Sponsor or source of funding for the initiative (select all that apply)

Q.31

ncd_prog_fund

ncd_prog_list

(1)NDOH or other government agency,(2)HealthRise, Project HOPE, or Expectra,(3)NGO other than HealthRise, Project HOPE, or Expectra,(4)This facility alone,(-999)Dont know,(-998)Decline to respond

END ROSTER 8.3:Non-communicable disease initiatives

Now I am going to ask you about activities relating to non-communicable diseases that take place at this facility.

Please list all programs or initiatives relating to non-communicable diseases such as diabetes or hypertension that take place at this facility and are sponsored or paid for by any of the following organizations or entities,
NDOH or other government agency,
HealthRise, Project HOPE or Expectra,
NGO other than HealthRise, Project HOPE or HealthRise,
this facility alone

For each program, please note the following,

1. Name of program or initiative
2. Short description (1 sentence) of program or initiative
3. Sponsor or source of funding for the initiative (select all that apply)

8. Facility Management Q.32

rout_admin_meetings IND_M1

*Does this facility hold **routine** meetings to discuss facility managerial and administrative matters with just facility staff?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.33

admin_meetings IND_M1

Enable if :current.rou

How often do these meetings, to discuss facility managerial and administrative matters, take place?

(5)Weekly,(4)Bi-weekly or monthly,(3)Every 2-3 months,(2)Every 4-6 months,(1)Less often than every 6 months or irregularly,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.34

rout_admin_meetings_co mm IND_M1

*Does this facility hold **routine** meetings about facility activities or management issues with **both facility staff and community members**?*

(1)Yes,(0)No,(-999)Don't know,(-998)Decline to respond

8. Facility Management Q.35

admin_meetings_comm IND_M1

Enable if :current.rou

How often do these meetings, about facility activities or management issues with both facility staff and community members, take place?

(1)Monthly or more often,(2)Every 2-3 months,(3)Every 4-6 months,(4)Less often than every 6 months or irregularly,(-999)Don't know,(-998)Decline to respond,(-996)Not applicable

8. Facility Management Q.36

commentsM1_8 IND_M1

Comments for Section 8: Facility Management

8. Facility Management Label

Important Reminder:
Select "Validate" button above (check mark).
Correct errors, if any, and "validate" again.

END SCREEN 8:8. Facility Management

SCREEN9:9. End

9. End Q.1

who_assisted

IND_M1

What were the positions of the respondents who helped you fill in this section of the survey?

(SELECT ALL THAT APPLY)

(1)Facility Manager,(2)Doctors,(3)Clinical Officers,(4)Midwives,(5)Nurse,(6)Pharmacy Personnel,(7)Environmental Health Personnel,(8)Other Allied Health Provider,(9)Other administrative staff,(10)Support staff,(11)Community Care Giver,(12)Other, specify

9. End Q.2

comments1

IND_M1

Please use the space below to provide us with any feedback/comments/issues you encountered while completing this section.

9. End Q.3

time_end

IND_M1

Enable if :current.consent is not null

Thank you for participating in the Facility Survey Module 1: Inputs, Finances and Management

Click 'Get Time' button.

9. End Label

*Important Reminder:
Select "Validate" button above (check mark).
Correct errors, if any, and "validate" again.*

SCREEN9.1:IHME ONLY

START ROSTER 9.1.1:Survey Version

[HIDDEN]Survey Version

survey_ver_q

survey_ver

Survey version

END ROSTER 9.1.1:Survey Version

END SCREEN 9.1:IHME ONLY

END SCREEN 9:9. End

Validation rules

confirm_dashboard

Please go back to dashboard to correct incorrect information.

current.id_correct=0

Validation rules

GPS latitude	<i>You are out of the latitudinal range</i>	(select gps_degrees from gps where gps = 1) < 22 OR (select gps_degrees from gps where gps = 1) > 33
GPS longitude	<i>You are out of the longitudinal range</i>	(select gps_degrees from gps where gps = 2) < 71 OR (select gps_degrees from gps where gps = 2) > 79

Validation rules

fac_private req	<i>This platform type must be private.</i>	((current.platform_type = 7) OR (current.platform_type = 6))
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Validation rules

Fac years	<i>This number cannot be greater than the total number of years this facility has been in existence.</i>	current.fac_years2 > current.fac_years
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Validation rules

iu_items Func Avail	<i>The total number of functional items cannot be greater than the total number of available items.</i>	current.iu_items_func > current.iu_items_avail
iu_items Owned Avail	<i>Number of owned items can't be more than number</i>	current.iu_items_own > current.iu_items_avail

Validation rules

OP more than Clinic Hrs	<i>The hours per day outpatient services are available cannot be more than the hours per day the facility is open.</i>	(current.hosp_hrs_mon > current.fac_hrs_mon) OR (current.hosp_hrs_tues > current.fac_hrs_tues) OR (current.hosp_hrs_wed > current.fac_hrs_wed) OR (current.hosp_hrs_thurs > current.fac_hrs_thurs) OR (current.hosp_hrs_fri > current.fac_hrs_fri) OR (current.hosp_hrs_sat > current.fac_hrs_sat) OR (current.hosp_hrs_sun > current.fac_hrs_sun)
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