

Service Delivery Point (SDP) Questionnaire

IDENTIFICATION															
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:												
001a	<p>Your name: Is this your name?</p> <p>[ODK will display the name associated with the phone's serial number]</p>	Yes 1 No 0	Always												
001b	<p>Enter your name below.</p> <p><i>Please record your name</i></p>	Interviewer's Name	001a = 0												
002a	<p>Current date and time.</p> <p>[ODK will display on screen]</p> <p>Is this date and time correct?</p>	Yes 1 No 0	Always												
002b	<p>Record the correct date and time.</p>	<table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="text-align: center;">Day</td> <td style="text-align: center;">Month</td> <td style="text-align: center;">Year</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> <tr> <td style="text-align: center;">Hours</td> <td style="text-align: center;">Min</td> <td style="text-align: center;">AM/PM</td> </tr> <tr> <td style="height: 20px;"></td> <td></td> <td></td> </tr> </table>	Day	Month	Year				Hours	Min	AM/PM				002a = 0
Day	Month	Year													
Hours	Min	AM/PM													
003a	<p>LOCATION INFORMATION 1</p>	LOCATION INFORMATION 1a 1 LOCATION INFORMATION 1b 2 LOCATION INFORMATION 1c 3 LOCATION INFORMATION 1d 4 LOCATION INFORMATION 1e 5 LOCATION INFORMATION 1f 6 LOCATION INFORMATION 1g 7	Always												
003b	<p>LOCATION INFORMATION 2</p>	ODK will populate a list of appropriate LOCATION INFORMATION 2 based on the LOCATION INFORMATION 1 selected	Always												
003c	<p>LOCATION INFORMATION 3</p>	ODK will populate a list of appropriate LOCATION INFORMATION 3 based on the LOCATION INFORMATION 2 selected.	Always												
003d	<p>LOCATION INFORMATION 4</p>	ODK will populate a list of appropriate LOCATION INFORMATION 4 based on the LOCATION INFORMATION 3 selected	Always												
004	<p>Enumeration area</p>	ODK will populate a list of appropriate enumeration areas based on the LOCATION INFORMATION 4 selected	Always												
005	<p>Are you following up with a facility from the previous phase or did you want to add a new facility?</p>	Follow up facility 1 New facility 2	Always												

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
005a	<p>Is this new facility in the same physical location as an old facility from a previous phase?</p> <p><i>Select YES if this new facility is in the same premises as a facility from the previous phase.</i></p> <p><i>Select NO if this is a newly constructed facility that is now serving the EA or the new facility has replaced a facility from the previous phase.</i></p>	Yes 1 No 0	005 = 2
005b	<p>Do you know the name of the old facility that was replaced by this new facility?</p>	Yes 1 No 0	005a = 1
005c	<p>Name of the old facility that was replaced</p> <p>ODK will display listing of all facility names in the EA from the previous phase.</p>	FACILITY NAME 1 1 FACILITY NAME 2 2 FACILITY NAME 3 3	005b = 1
005d	<p>Name of the facility</p> <p>ODK will display listing of all facility names in the EA from the previous phase.</p>	FACILITY NAME 1 1 FACILITY NAME 2 2 FACILITY NAME 3 3	005 = 1
005e	<p>Facility name:</p> <p>Level 1: Level 2: Level 3: EA name:</p> <p>Type: Authority:</p> <p>Is this the correct facility?</p>	Yes 1 No 0	005 = 1
005f	<p>The facility name from the previous phase was FACILITY NAME. Do you need to update the name for the current phase?</p>	Yes 1 No 0	005 = 1
005g	<p>What is the name of this facility:</p>	Name: <div style="border: 1px solid black; width: 200px; height: 30px; margin: 5px 0;"></div>	005 = 2 OR 005f = 1
005h	<p>The facility type from the previous phase was FACILITY TYPE. Do you need to update this type for the current phase?</p>	Yes 1 No 0	005 = 1
006	<p>Type of facility</p> <p><i>Please select the type of facility. This question will also be displayed if data could not be imported from the dataset for a follow-up interview.</i></p>	FACILITY TYPE 1 1 FACILITY TYPE 2 2 FACILITY TYPE 3 3 FACILITY TYPE 4 4 FACILITY TYPE 5 5 FACILITY TYPE 6 6 Other 7	Always
006a	<p>CALCULATE: ADVANCED FACILITY</p> <p><i>This will not appear on the screen but is used in subsequent relevancies</i></p>	Yes 1 No 0	006 = #

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
006b	The managing authority from the previous phase was MANAGING AUTHORITY. Do you need to update the managing authority for the current phase?	Yes 1 No 0	005 = 1
006c	Managing authority <i>Please select the managing authority for the facility. This question will also be displayed if data could not be imported from the dataset for a follow-up interview.</i>	Government..... 1 NGO 2 Faith-based organization 3 Private 4 Other..... 5	005 = 2 OR 006b = 1
006d	Has the facility moved to a new physical location since the last phase?	Yes 1 No 0	005 = 1
006e	Does this facility continue to serve the same EA?	Yes 1 No 0	006d = 1
006f	DO NOT INTERVIEW THIS FACILITY. GO TO 099 AND ENTER RESULT CODE “No longer serves EA (lost to follow-up)”		006e = 0
007	Facility number <i>Please record the number of the facility from the listing form.</i>	Facility number <input style="width: 100px; height: 20px;" type="text"/>	006e ≠ 0
008	Is a competent respondent present and available to be interviewed today?	Yes 1 No 0	Always

INFORMED CONSENT			
<i>Find the competent respondent responsible for patient services (main administrator and family planning in-charge) who is present at the facility. Administer the consent procedures.</i>			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
009a	Provide a paper copy of the Consent Form to the respondent and read it. / Read the verbal consent text. May I begin the interview now?	Yes..... 1 No..... 0	008 = 1
009b	Respondent's signature <i>Please ask the respondent to sign or check the box in agreement of their participation.</i>	Gather signature: Check box: <input type="checkbox"/>	009a = 1
010	Interviewer's name: <i>Mark your name as a witness to the consent process.</i>	<div style="border: 1px solid black; width: 200px; height: 30px; margin: 0 auto;"></div>	009a = 1
011	What is your position in this facility? <i>Select the highest managerial qualification of the respondent.</i>	Owner 1 In-charge / manager 2 Staff..... 3 No response..... -99	009a = 1

Section 1 – Information about Services																											
Now I would like to ask about the services provided at this facility.																											
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:																								
101	<p>Now I have some questions about staffing for this facility. For the following questions, please tell me how many staff with this qualification are currently assigned to this facility and provide family planning services.</p> <p>Finally, tell me the total number present at any time today. We want to know the highest technical qualification that any staff may hold regardless of the person’s actual assignment or specialist studies.</p> <p><i>Enter -88 for do not know and -99 for no response. 0 is a possible answer.</i></p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 70%;"></th> <th style="width: 15%; text-align: center;">Total Number FP</th> <th style="width: 15%; text-align: center;">Present Today FP</th> </tr> </thead> <tbody> <tr><td>MEDICAL STAFF 1</td><td></td><td></td></tr> <tr><td>MEDICAL STAFF 2</td><td></td><td></td></tr> <tr><td>MEDICAL STAFF 3</td><td></td><td></td></tr> <tr><td>MEDICAL STAFF 4</td><td></td><td></td></tr> <tr><td>MEDICAL STAFF 5</td><td></td><td></td></tr> <tr><td>MEDICAL STAFF 6</td><td></td><td></td></tr> <tr><td>Other Medical Staff</td><td></td><td></td></tr> </tbody> </table>		Total Number FP	Present Today FP	MEDICAL STAFF 1			MEDICAL STAFF 2			MEDICAL STAFF 3			MEDICAL STAFF 4			MEDICAL STAFF 5			MEDICAL STAFF 6			Other Medical Staff			009a = 1
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MEDICAL STAFF 6																											
Other Medical Staff																											
102	<p>Does this facility have electricity at this time?</p> <p><i>Select for running electricity only.</i></p>	Yes..... 1 No 0 No response -99	009a = 1																								
103	<p>At any point today, has the electricity been out for two or more hours?</p>	Yes..... 1 No 0 Don't know -88 No response -99	009a = 1																								
104	<p>Does this facility have running water at this time?</p> <p><i>Select for running water only.</i></p>	Yes..... 1 No 0 No response -99	009a = 1																								
105	<p>At any point today, has running water been unavailable for two or more hours?</p>	Yes..... 1 No 0 Don't know -88 No response -99	009a = 1																								
106	<p>How many hand-washing facilities are available on site for staff to use?</p> <p><i>Enter -88 for do not know, -99 for no response.</i></p>	Number of facilities <input style="width: 100px; height: 20px;" type="text"/>	006a = 1																								
107	<p>May I see a nearby handwashing facility that is used by staff?</p> <p><i>Handwashing facility must be accessible to most health workers in the facility.</i></p> <p><i>At the handwashing facility, OBSERVE: (Select all that apply)</i></p>	Soap is present..... 1/0 Stored water is present..... 1/0 Running water is present..... 1/0 Handwashing area is near a sanitation facility 1/0 None of the above -77 Did not see the facility -99	106 > 0																								

Section 2 – Family Planning Service Availability			
Now I would like to ask about family planning services provided at this facility. If there is another provider who would be better able to answer my questions on family planning services in this facility, I would appreciate if you could refer me to the appropriate person.			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
201	Do you usually offer family planning services / products?	Yes..... 1 No 0 No response -99	009a = 1
202	How many days in a week are family planning services / products offered / sold here? <i>Enter a number between 0 and 7. Enter 0 for less than 1 day per week. Enter -88 for do not know, -99 for no response.</i>	Number of days <input style="width: 100px; height: 30px;" type="text"/>	201 = 1
203	Does this facility provide family planning supervision, support, or supplies to community health volunteers?	Yes..... 1 No 0 No response -99	006a = 1
204	How many community health volunteers are supported by this facility to provide family planning services? <i>Record only CHVs who receive supervision, support, or supplies for family planning.</i> <i>If CHVs were recorded as employees in 101, please do not include them here as well.</i> <i>Enter -88 for do not know, -99 for no response.</i>	Number of CHVs <input style="width: 100px; height: 30px;" type="text"/>	203 = 1
205	Do the community health volunteers provide any of the following contraceptives:	Condoms 1/0 Pills 1/0 Injectables..... 1/0 None of the above -77 No response -99	203 = 1
206	How many times in the last 12 months (insert 6 months if biannual SDP surveys) has a mobile outreach team visited your facility to deliver supplementary/additional family planning services? <i>Enter -88 for do not know, -99 for no response. 0 is a possible answer.</i>	Number of times <input style="width: 100px; height: 30px;" type="text"/>	201 = 1 AND 006a = 1
207	Which of the following family planning services do you offer to unmarried adolescents age 10-19? <i>Read all options and select all that apply.</i>	Counsel for contraceptive methods..... 1/0 Provide contraceptive methods 1/0 Prescribe / refer contraceptive methods.... 1/0 None of the above -77 No response -99	201 = 1

Section 4 – Provision of Family Planning Methods			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
401	<p>Which of the following methods are provided to clients at this facility?</p> <p><i>Read all options out loud.</i></p>	Female sterilization..... 1/0 Male sterilization 1/0 Implant 1/0 IUD..... 1/0 Injectables - Depo Provera 1/0 Injectables - Sayana Press..... 1/0 Pill 1/0 Emergency Contraception 1/0 Male Condom 1/0 Female Condom 1/0 Diaphragm 1/0 Foam/Jelly 1/0 Std. Days / Cycle beads 1/0 None of the above -77 No response -99	201 = 1
402	<p>Are clients charged for obtaining any of the following methods at this facility?</p> <p><i>Read all options out loud.</i></p> <p><i>[ODK will only display methods selected in 401]</i></p>	Female sterilization..... 1/0 Male sterilization 1/0 Implant 1/0 IUD..... 1/0 Injectables - Depo Provera 1/0 Injectables - Sayana Press..... 1/0 Pill 1/0 Emergency Contraception 1/0 Male Condom 1/0 Female Condom 1/0 Diaphragm 1/0 Foam/Jelly 1/0 Std. Days / Cycle beads 1/0 No response -99	201 = 1

Service Delivery Point Questionnaire



NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:																												
403	<p>How much do you charge for one unit of each method that you provide?</p> <p><i>Enter all prices in LOCAL CURRENCY.</i></p> <p><i>Enter -88 for do not know, -99 for no response.</i></p> <p>[ODK will only display the methods for which the facility charges from 402.]</p>	<table border="1"> <thead> <tr> <th data-bbox="805 347 1157 380"></th> <th data-bbox="1165 291 1348 347">Amount per Unit</th> </tr> </thead> <tbody> <tr><td>Female Sterilization (full cost of procedure)</td><td></td></tr> <tr><td>Male Sterilization (full cost of procedure)</td><td></td></tr> <tr><td>Implants (full cost of implant and insertion)</td><td></td></tr> <tr><td>IUD (full cost of IUD and insertion)</td><td></td></tr> <tr><td>One shot of 3-month injectable (Depo Provera)</td><td></td></tr> <tr><td>One shot of 3-month injectable (Sayana Press)</td><td></td></tr> <tr><td>One month supply of pills</td><td></td></tr> <tr><td>A single dose of emergency contraception</td><td></td></tr> <tr><td>One male Condom</td><td></td></tr> <tr><td>One female Condom</td><td></td></tr> <tr><td>Diaphragm</td><td></td></tr> <tr><td>Foam/Jelly</td><td></td></tr> <tr><td>Std. Days/Cycle beads</td><td></td></tr> </tbody> </table>		Amount per Unit	Female Sterilization (full cost of procedure)		Male Sterilization (full cost of procedure)		Implants (full cost of implant and insertion)		IUD (full cost of IUD and insertion)		One shot of 3-month injectable (Depo Provera)		One shot of 3-month injectable (Sayana Press)		One month supply of pills		A single dose of emergency contraception		One male Condom		One female Condom		Diaphragm		Foam/Jelly		Std. Days/Cycle beads		402 = 1 for each method charged
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404	<p>Do family planning clients need to pay any fees in order to be seen by a provider in this facility even if they do not obtain a method of contraception?</p> <p>These may be consultation or registration fees charged to everyone who is seen in this facility or may be specific to family planning clients.</p>	Yes..... 1 No 0 No response -99	201 = 1																												
405	<p>On days when you offer family planning services, does this facility have trained personnel able to insert implants?</p>	Yes..... 1 No 0 No response -99	401 implant = 1																												
406	<p>On days when you offer family planning services, does this facility have trained personnel able to remove implants?</p>	Yes..... 1 No 0 No response -99	401 implant = 1																												
407	<p>On days when you offer family planning services, does this facility have trained personnel able to insert IUDs?</p>	Yes..... 1 No 0 No response -99	401 IUD = 1																												
408	<p>On days when you offer family planning services, does this facility have trained personnel able to remove IUDs?</p>	Yes..... 1 No 0 No response -99	401 IUD = 1																												

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
409	<p>Does this facility have the following supplies needed to insert and/or remove implants:</p> <p><i>Read out all supplies and select all that apply. Supplies do not need to be observed, but must be available on the day of the interview.</i></p>	Clean Gloves 1/0 Antiseptic 1/0 Sterile Gauze Pad or Cotton Wool 1/0 Local anesthetic..... 1/0 Sealed Implant Pack..... 1/0 Surgical Blade..... 1/0 Mosquito forceps (straight or curved) 1/0 None of the above -77 No response -99	401 implant = 1
410	<p>If a woman came in today needing an implant inserted, could that service be provided to her today onsite?</p>	Yes..... 1 No 0 No response -99	401 implant = 1
411	<p>If a woman came today needing her implant removed, could that service be provided to her today onsite?</p>	Yes..... 1 No 0 No response -99	401 implant = 1
412	<p>If a woman comes to your facility today needing her implant removed, but it is deeply placed, could that service be provided to her today onsite?</p>	Yes..... 1 No 0 No response -99	401 implant = 1
413	<p>Would someone at this facility know where to send her to have the implant removed?</p>	Yes..... 1 No 0 No response -99	412 = 0
414	<p>Does this facility have the following supplies needed to insert and/or remove IUDs:</p> <p><i>Read out all supplies and select all that apply. Supplies do not need to be observed, but must be available on the day of the interview.</i></p>	Exam gloves 1/0 Antiseptic (povidone iodine) 1/0 Drapes 1/0 Scissors 1/0 Sponge-holding forceps..... 1/0 Speculums (large and medium) 1/0 Tenaculum 1/0 Uterine sound 1/0 None of the above -77 No response -99	401 IUD = 1
IN_1	<p>Does this facility offer self-injection training for DMPA-SC (Sayana Press)?</p>	Yes..... 1 No 0 No response -99	401 'Injectables-Sayana Press' = 1
IN_2	<p>Which of the following does the self-injection training include?</p> <p><i>Select all that apply</i></p>	Where the client should store the injection material until she uses it 1/0 An instruction sheet for the client to take home to remind her of steps for self-injection..... 1/0 A reinjection calendar (e.g., information on when and how to remember her next injection date) or the client to take home 1/0 Counseling on follow-up options 1/0 What the client should do with the syringe after the injection 1/0 The ways that partners could potentially interfere with self-injection..... 1/0 Instruction for the client not to share her self-injection supplies 1/0 What the client should do if problems occur with self-injection 1/0 None of the above 1/0	IN_1 = 1

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NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:																																										
IN_3	Have any women been trained at this facility to inject themselves in the last 4 weeks?	Yes..... 1 No 0 No response -99	IN_1 = 1																																										
IN_4	In the last 4 weeks, about how many women self injected or took units home for self-injection?	0-4..... 1 5-9..... 2 10-19..... 3 20-29..... 4 30 or More 5 No Response -99	IN_3 = 1																																										
415a	<p>May I see your family planning register from last completed month?</p> <p><i>From family planning register, record:</i> (1) The total number of family planning visits (new and continuing) in the last completed month, for each method. (2) The number of new clients who received family planning services in the last completed month, for each method. <i>Past completed month. Enter -88 for do not know, enter -99 for no response.</i></p>	<table border="1"> <thead> <tr> <th></th> <th>Total # visits</th> <th># new clients</th> </tr> </thead> <tbody> <tr><td>Female Sterilization</td><td></td><td></td></tr> <tr><td>Male Sterilization</td><td></td><td></td></tr> <tr><td>Implants</td><td></td><td></td></tr> <tr><td>IUD</td><td></td><td></td></tr> <tr><td>Injectables-3 month (Depo Provera)</td><td></td><td></td></tr> <tr><td>Injectables-3 month (Sayana Press)</td><td></td><td></td></tr> <tr><td>Pill</td><td></td><td></td></tr> <tr><td>Emergency contraception</td><td></td><td></td></tr> <tr><td>Male Condom</td><td></td><td></td></tr> <tr><td>Female Condom</td><td></td><td></td></tr> <tr><td>Diaphragm</td><td></td><td></td></tr> <tr><td>Foam/Jelly</td><td></td><td></td></tr> <tr><td>Std. Days/Cycle beads</td><td></td><td></td></tr> </tbody> </table>		Total # visits	# new clients	Female Sterilization			Male Sterilization			Implants			IUD			Injectables-3 month (Depo Provera)			Injectables-3 month (Sayana Press)			Pill			Emergency contraception			Male Condom			Female Condom			Diaphragm			Foam/Jelly			Std. Days/Cycle beads			006a = 1
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415b	<p>May I see your family planning register from last completed month?</p> <p><i>From family planning record book, record:</i> The total number of family planning products sold in the last completed month, for each method.</p> <p><i>Enter -88 for do not know, enter -99 for no response.</i></p>	<table border="1"> <thead> <tr> <th data-bbox="804 273 1139 344"></th> <th data-bbox="1145 273 1324 344"># of units sold or provided</th> </tr> </thead> <tbody> <tr> <td data-bbox="804 353 1139 389">Implants</td> <td data-bbox="1145 353 1324 389"></td> </tr> <tr> <td data-bbox="804 398 1139 434">IUD</td> <td data-bbox="1145 398 1324 434"></td> </tr> <tr> <td data-bbox="804 443 1139 501">Injectables-3 month (Depo Provera)</td> <td data-bbox="1145 443 1324 501"></td> </tr> <tr> <td data-bbox="804 510 1139 568">Injectables-3 month (Sayana Press)</td> <td data-bbox="1145 510 1324 568"></td> </tr> <tr> <td data-bbox="804 577 1139 613">Pill</td> <td data-bbox="1145 577 1324 613"></td> </tr> <tr> <td data-bbox="804 622 1139 658">Emergency contraception</td> <td data-bbox="1145 622 1324 658"></td> </tr> <tr> <td data-bbox="804 667 1139 703">Male Condom</td> <td data-bbox="1145 667 1324 703"></td> </tr> <tr> <td data-bbox="804 712 1139 748">Female Condom</td> <td data-bbox="1145 712 1324 748"></td> </tr> <tr> <td data-bbox="804 757 1139 792">Diaphragm</td> <td data-bbox="1145 757 1324 792"></td> </tr> <tr> <td data-bbox="804 801 1139 837">Foam/Jelly</td> <td data-bbox="1145 801 1324 837"></td> </tr> <tr> <td data-bbox="804 846 1139 882">Std. Days/Cycle beads</td> <td data-bbox="1145 846 1324 882"></td> </tr> </tbody> </table>		# of units sold or provided	Implants		IUD		Injectables-3 month (Depo Provera)		Injectables-3 month (Sayana Press)		Pill		Emergency contraception		Male Condom		Female Condom		Diaphragm		Foam/Jelly		Std. Days/Cycle beads		006a = 0
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417a	<p>You mentioned that you typically provide the [METHOD] at this facility, can you show it to me?</p> <p>If no, probe: Is the [METHOD] out of stock today?</p> <p>[417a-e will repeat for each of the methods that are provided at the facility according to 401, except Female and Male Sterilization]</p>	<p>In-stock and observed1 In-stock but not observed2 Out of stock3 No Response -99</p>	201 = 1
417b	<p>How many days has the [METHOD] been out of stock?</p> <p>[417a-e will repeat for each of the methods that are provided at the facility according to 401, except Female and Male Sterilization]</p> <p><i>Enter 1 if only for today. Enter -88 for Do not know. Enter -99 for No response.</i></p>	<p>Number of days <input data-bbox="1121 645 1342 728" type="text"/></p>	417a = 3
417c	<p>Has the [METHOD] been out of stock at any time in the last 3 months?</p> <p>[417a-e will repeat for each of the methods that are provided at the facility, except Female and Male Sterilization]</p>	<p>Yes.....1 No0 Don't know -88 No response -99</p>	417a = 1 or 2
417d	<p>Why is this facility out of stock for [METHOD]?</p> <p>PROBE IF MULTIPLE REASONS GIVEN: What was the main reason?</p> <p>[417a-e will repeat for each of the methods that are provided at the facility, except Female and Male Sterilization]</p>	<p>Did not place order for shipment1 Ordered but did not receive shipment2 Did not order right quantities3 Ordered but did not receive right quantities ..4 Unexpected increase in consumption5 Stock-out due to COVID-19 disruption6 Other96 Don't know -88 No response -99</p>	417a = 3
417e	<p>When do you expect to receive your next shipment of [METHOD]?</p> <p>[417a-e will repeat for each of the methods that are provided at the facility, except Female and Male Sterilization]</p>	<p>Weeks (1) <input data-bbox="1193 1361 1329 1429" type="text"/></p> <p>Months (2) <input data-bbox="1193 1429 1329 1496" type="text"/></p> <p>Don't know -88 No response -99</p>	417a = 3

NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
418	Is Miso-Kare (misoprostol) available in the facility for management of postpartum hemorrhage or other gynecologic issues?	Yes 1 No 0 Don't know -88 No response -99	009a = 1 AND 006a = 1
419	Can you show it to me? If no, probe: Is it out of stock today?	In-stock and observed 1 In-stock but not observed 2 Out of stock 3 No Response -99	418 = 1
420	Is Ma-Kare (mifepristone & misoprostol) available in the facility?	Yes 1 No 0 Don't know -88 No response -99	009a = 1 AND 006a = 1
421	Can you show it to me? If no, probe: Is it out of stock today?	In-stock and observed 1 In-stock but not observed 2 Out of stock 3 No Response -99	420 = 1

Section 5 – Family Planning Service Integration			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
501	<p>Which of the following services are provided at this facility?</p> <p><i>Read all options and select all that apply.</i></p>	Antenatal..... 1/0 Delivery 1/0 Postnatal..... 1/0 Post-abortion 1/0 None of the above -77 No response -99	009a = 1 AND 006a = 1
502	<p>Which of the following is discussed with the mother during an antenatal care visit?</p> <p><i>Read all options and select all that apply. If your respondent is not involved in antenatal care, ask if they can refer you to someone at the facility who provides these services.</i></p>	Return to fertility..... 1/0 Healthy timing and spacing of pregnancies 1/0 Immediate and exclusive breastfeeding ... 1/0 Family planning methods available to use while breastfeeding..... 1/0 Lactational Amenorrhea Method and transition to other methods 1/0 Long-acting method options 1/0 None of the above -77 No response -99	501 antenatal = 1
503	<p>Which of the following is discussed with the mother after delivery and before discharge from the facility?</p> <p><i>Read all options and select all that apply. If your respondent is not involved in delivery care, ask if they can refer you to someone at the facility who provides these services.</i></p>	Return to fertility..... 1/0 Healthy timing and spacing of pregnancies 1/0 Immediate and exclusive breastfeeding ... 1/0 Family planning methods available to use while breastfeeding..... 1/0 Lactational Amenorrhea Method and transition to other methods 1/0 Long-acting method options 1/0 None of the above -77 No response -99	501 delivery = 1
504	<p>Is the woman offered a method of family planning before discharge from the facility?</p>	Yes..... 1 No 0 No response -99	501 delivery = 1 AND 201 = 1
505	<p>Which of the following is discussed with the mother during a postnatal care visit?</p> <p><i>Read all options and select all that apply. If your respondent is not involved in postnatal care, ask if they can refer you to someone at the facility who provides these services.</i></p>	Return to fertility..... 1/0 Healthy timing and spacing of pregnancies 1/0 Immediate and exclusive breastfeeding ... 1/0 Family planning methods available to use while breastfeeding..... 1/0 Lactational Amenorrhea Method and transition to other methods 1/0 Long-acting method options 1/0 None of the above -77 No response -99	501 postnatal = 1
506	<p>Is the woman offered a method of family planning during a postnatal care visit?</p>	Yes..... 1 No 0 No response -99	501 postnatal = 1 AND 201 = 1

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NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
507	<p>Which of the following is discussed with the mother during a post-abortion visit?</p> <p><i>Read all options and select all that apply. If your respondent is not involved in post-abortion care, ask if they can refer you to someone at the facility who provides these services.</i></p>	Post-abortion mental health..... 1/0 Return to fertility..... 1/0 Healthy timing and spacing of pregnancies 1/0 Long-acting method options 1/0 Family planning methods..... 1/0 None of the above-77 No response-99	501 post-abortion = 1
508	<p>Is the woman offered a method of family planning during a post-abortion visit?</p>	Yes..... 1 No 0 No response -99	501 post-abortion = 1 AND 201 = 1
509	<p>Does this facility offer any service related to diagnosis, treatment, or supportive services for HIV?</p>	Yes..... 1 No 0 No response -99	009a = 1
510	<p>When a client comes in for HIV services, are they offered condoms by the HIV service provider?</p> <p><i>If your respondent is not involved in HIV service provision, ask if they can refer you to someone at the facility who provides these services.</i></p>	Yes..... 1 No 0 Don't know-88 No response -99	509 = 1 AND 006a = 1
511	<p>Does the HIV service provider offer them any other method of contraception besides condoms?</p>	Yes..... 1 No 0 Don't know-88 No response -99	509 = 1 AND 006a = 1

Section 6 – Coronavirus (COVID-19)			
We know that many facilities experienced operational challenges during the Coronavirus (COVID-19) pandemic and many regular services were disrupted. We are interested in learning about the experiences at your facility. Please remember that your answers are confidential and that no one outside the study team will know the identity of the facilities we interview.			
NO	QUESTIONS AND FILTERS	CODING CATEGORIES	Relevant if:
COV_1	Did this facility completely close when it otherwise would have been open at any time during the Coronavirus (COVID-19) restrictions?	Yes 1 No 0 No response -99	009a = 1
COV_2	For how long was the facility closed?	Less than one week 1 1-2 weeks 2 3-4 weeks 3 One month or longer 4 No response -99	COV_1 = 1
COV_3	During the time of Coronavirus (COVID-19) restrictions, did this facility reduce hours or days of operation?	Yes 1 No 0 No response -99	009a = 1
COV_4	Which of the following describes the facility's current operational schedule? <i>Read all options</i>	Not currently providing services 1 Open, but still at reduced number of hours compared to pre-COVID-19 restrictions 2 Returned to previous hours of service as prior to COVID-19 restrictions 3 Open more hours than prior to the COVID-19 restrictions 4 No response -99	COV_1 = 1
COV_5	During the time of Coronavirus (COVID-19) restrictions, were personnel reassigned from family planning services to COVID-19 related duties?	Yes 1 No 0 No response -99	201 = 1
COV_6	During the time of the Coronavirus (COVID-19) restrictions, were family planning services suspended?	Yes 1 No 0 No response -99	201 = 1
COV_7	For how long were family planning services suspended?	Less than one week 1 1-2 weeks 2 3-4 weeks 3 One month or longer 4 No response -99	COV_6 = 1
COV_8	Which of the following describes the facility's current family planning services? <i>Read all options</i>	Not currently providing family planning services 1 Providing reduced family planning services compared to pre-COVID-19 restrictions 2 Providing same family services as prior to COVID-19 restrictions 3 Providing more family services than prior to the COVID-19 restrictions 4 No response -99	COV_6 = 1
COV_9	During the time of Coronavirus (COVID-19) restrictions, did this facility experience increased absenteeism of personnel?	Yes 1 No 0 No response -99	009a = 1

Service Delivery Point Questionnaire

COV_10	During the time of Coronavirus (COVID-19) restrictions, was support to the CHW services disrupted?	Yes 1 No 0 No response -99	203 = 1
COV_11	For how long were CHW support services disrupted?	Less than one week 1 1-2 weeks 2 3-4 weeks 3 One month or longer 4 No response -99	COV_10 = 1
COV_12	Have CHW support services returned to the level they were at prior to COVID-19?	Yes 1 No 0 No response -99	COV_10 = 1
COV_13	During the time of Coronavirus (COVID-19) restrictions, were you able to keep the records of family planning clients up to date?	Yes 1 No 0 No response -99	201 = 1
COV_14	During the time of Coronavirus (COVID-19) restrictions, was there a period of time when provider administered methods were not offered due to the restrictions? PROBE: Provider administered methods include sterilization, IUD, implant, and injectables.	Yes 1 No 0 No response -99	401 female sterilization n = 1 OR male sterilization n = 1 OR IUD = 1 OR Implant = 1 OR DMPA-IM = 1 OR DMPA-SC = 1
COV_15	For how long were provider administered methods not offered?	Less than one week 1 1-2 weeks 2 3-4 weeks 3 One month or longer 4 No response -99	COV_14 = 1
COV_16	How regular was the supply of family planning methods to this facility during the time of Coronavirus (COVID-19) restrictions?	No change/regular 1 More irregular 2 Stopped completely 3 Don't Know -88 No response -99	201 = 1
COV_17	During the time of Coronavirus (COVID-19) restrictions, did your facility experience any reduction in the number of family planning clients (or purchase of contraceptive products) compared to your usual client numbers?	No reduction 1 Small Reduction 2 Moderate Reduction 3 Large Reduction 4 No response -99	201 = 1

LOCATION AND QUESTIONNAIRE RESULT			
094	<p>Ask permission to take a photo of the entrance of the facility.</p> <p>Did you get consent to take the photo?</p>	Yes..... 1 No 0	009a = 1
<p>Thank the respondent for her / his time. <i>The respondent is finished, but there are still more questions for you to complete outside the facility.</i></p>			
095	Ensure that no people are in the photo	TAKE PICTURE CHOOSE IMAGE	094 = 1
096	<p>Take a GPS point outside near the entrance to the facility.</p> <p><i>Record location when the accuracy is smaller than 6m.</i></p>	RECORD LOCATION	Always
097	How many times have you visited this service delivery point for this interview?	1 st time 1 2 nd time 2 3 rd time 3	Always
098	In what language was this interview conducted?	English 1 French 2 Language 3 3 Language 4 4 Language 5 5 Language 6 6 Other 96	009a = 1
099	Record the result of the Service Delivery Point Questionnaire.	Completed 1 Not at facility 2 Postponed 3 Refused 4 Partly completed 5 Temporarily closed 6 Permanently closed / destroyed 7 No longer serves EA (lost to follow-up) 8 Other 9	Always