

**THE WORLD BANK**  
HEALTH SECTOR SURVEY  
SRI LANKA (2011)

**A. CONTROL INFORMATION [TO BE COMPLETED BEFORE INTERVIEW]**

**A.1 Country**

<b>a1</b>
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**A.1a Language**

	<b>Language a1a</b>
English	1
Sinhala	2
Tamil	3

**A.2**

	<b>Sampling Region a2</b>
Western	1
Central	2
Southern	3
Northern	4
Eastern	5
North-West	6
North-Central	7
Uva	8
Sabaragamuwa	9

**A.3a**

	<b>Screeners Region (coded ex post) a3a</b>
Western	1
Central	2
Southern	3
Northern	4
Eastern	5
North-West	6
North-Central	7
Uva	8
Sabaragamuwa	9

**A.3x1 Name of district**

<b>a3x1</b>
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**A.3x Name of city**

**a3x**

**A.3b Is this city the official capital city? a3b**

Yes	1
No	2

**A.3c Is this city the main business city? a3c**

Yes	1
No	2

**A.3 Size of locality a3**

City with population over 1 million	2
Over 250,000 to 1 million	3
50,000 to 250,000	4
Less than 50,000	5

**A.5 Sector match between screener information and sample frame a5**

Yes, screener and sample frame info match	1
No, screener and sample frame do not match but health establishment still does activities that match sample frame	2
No, does not match	3

**A.6 Size**

	<b>Sampling size a6a</b>	<b>Screeners Size a6b</b>
Micro <5	0	0
Small >=5 and <=19	1	1
Medium >=20 and <=99	2	2
Large >=100	3	3

**A.7 health establishment is part of a larger firm a7**

Yes	1
No, a firm on its own	2

**A.7a**

Number of health establishments that form the firm	<b>a7a</b>
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**A.12 Interviewer code**

**a12**

**A.13 Supervisor code**

**a13**

**HSA.14** What is the name of the health establishment?  
**(INTERVIEWER: USE THE NAME THAT THE HEALTH ESTABLISHMENT IS REGISTERED IN. IF THERE IS AN ALTERNATIVE NAME USED TO IDENTIFY THE HEALTH ESTABLISHMENT INFORMALLY, PLEASE RECORD THIS IN PARENTHESES.)**

<input type="text"/>	<b>HSa14x</b>
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**HSA.15** What is the postal address of this health establishment?

<input type="text"/>	<b>HSa15x</b>
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**HSA.16** Please confirm the type of this health establishment **SHOW CARD 1**

Hospital specialized (e.g. Dental, E.N.T, Eye)	1	<b>HSa16</b>
Hospital general (including nursing homes)	2	
Health Centre specialized. (e.g. Diabetes center, Cancer center)	3	
Health Centre general	4	
Diagnostic laboratory/ Medical laboratory	5	
Other (dialysis, diagnostic imaging center)	6	

**A.14 Time face-to-face interview begins:**

Day (dd)	Month (mm)	Year (yyyy)	Hour (00 to 23)	Minutes (00 to 59)
<input type="text"/>				
<b>a14d</b>	<b>a14m</b>	<b>a14y</b>	<b>a14h</b>	<b>a14min</b>

**B. GENERAL INFORMATION**

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING.**

The goal of this survey is to gather information and opinions about the health care providers in Sri Lanka. The information gathered here will help the World Bank to develop new policies and programs that enhance employment, economic growth and service situation in.

The information obtained here will be held in the strictest confidentiality. Neither this name nor the name of this business will be used in any document based on this survey.

**READ OUT THE FOLLOWING INTRODUCTORY SENTENCE ONLY IF A7 = 1 (yes):**  
**The first few questions (B.1-B.3) apply to the firm which this health establishment is part of.**

**B.1** What is this firm's current legal status? **SHOW CARD 2**

Shareholding company with shares traded in the stock market	1
Shareholding company with non-traded shares or shares traded privately (public or private)	2
Sole proprietorship	3
Partnership	4
Limited partnership	5
<b>OTHER (SPECIFY – SPONTANEOUS) b1x</b>	<b>6</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**WRITE 100% AND GO TO QUESTION HSB.4**

**b1**

Other	
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**b1x**

**INTERVIEWER: PLEASE NOTE WHEN b1 IS 3 (SOLE PROPRIETORSHIP), WRITE 100% FOR QUESTION b3.**

**B.2** What percent of this firm is owned by each of the following: **SHOW CARD 3**

	<b>Percent</b>	<b>DON'T KNOW (SPONTANEOUS)</b>
Private domestic individuals, companies or organizations	<b>b2a</b> %	<b>-9</b>
Private foreign individuals, companies or organizations	<b>b2b</b> %	<b>-9</b>
Government	<b>b2c</b> %	<b>-9</b>
Other	<b>b2d</b> %	<b>-9</b>
	<b>100%</b>	

**IF 100% END INTERVIEW**

**INTERVIEWER: CHECK THAT TOTAL SUMS TO 100% (UNLESS RESPONDENT DOES NOT KNOW)**

**B.3** What percent of this firm does the largest owner or owners own?

	Percent
Percentage held by largest owner or owners	<b>b3</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**READ ONLY IF A7=1 (yes)**  
**I want to proceed by asking you about this health establishment only.**

**HSB.4** Are any of this health establishment's suppliers partially or fully owned by any of the major owners of this health establishment?

Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>DOES NOT APPLY</b>	<b>-7</b>

**HSb4**

**B.5** In what year did the health establishment first begin providing health care?

	Year
Year health establishment began operations	<b>b5</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**INTERVIEWER: PROVIDE FOUR DIGITS FOR YEAR**

**HSB.6** Is this health establishment fully or partially owned by the Top Manager?

Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSb6**

**HSB.7** What is the highest completed level of education of the Top Manager?  
**SHOW CARD 4**

No education	1
Primary school (1-5 years)	2
Secondary School (6-10 years)	3
Higher Secondary School (11-12 years)	4
Vocational Training	5
University degree (MBBS, BA, BSc etc.)	6
Masters degree from a Sri Lankan university	7
Masters degree from university in another country	8
Other post graduate degree (MD, PG diploma, Ph.D, MBA, Masters) from a Sri Lankan university	9
Other post graduate degree (MD, PG diploma, Ph.D, MBA, Masters) from university in another country	10
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSb7**

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**HSB.8** Which of the following best characterizes this health establishment?  
**SHOW CARD 5**

Public	1
Private for profit	2
Private non-profit, non-religious	3
Private non-profit, religious	4
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>REFUSE TO ANSWER (SPONTANEOUS)</b>	<b>-8</b>

**HSb8**

**B.9** Does this health establishment have a currently valid internationally-recognized quality certification?  
**(INTERVIEWER: IF THERE IS NEED FOR CLARIFICATION, SOME EXAMPLES ARE: ISO 9000 or 14000, OR HACCP)**

Yes	1
No	2
<b>STILL IN PROCESS</b>	<b>-6</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**b9**

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**D. SERVICE PROVISION AND SUPPLIES**

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**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**  
Now I would like to ask you a few questions about the services this health establishment is providing and about its supply structures.

**HSD.1** Is this health establishment registered to provide services for any health insurance companies?

Yes	1
No	2

<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
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<b>HSd1</b>
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<b>HSD.2</b>	Does this health establishment provide any of the following? <b>SHOW CARD 6</b>
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Services	Yes	No	DON'T KNOW (SPONTANEOUS)	
Childhood immunizations	1	2	-9	HSd2a
Family planning services	1	2	-9	HSd2b
Antenatal care	1	2	-9	HSd2c
TB testing services	1	2	-9	HSd2d
TB treatment	1	2	-9	HSd2e

<b>HSD.3</b>	Does this health establishment have any of the following equipment in operating condition? <b>SHOW CARD 7</b>
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Equipment	Yes	No	DON'T KNOW (SPONTANEOUS)	REFUSE TO ANSWER (SPONTANEOUS)	
Incinerator	1	2	-9	-8	HSd3a
MRI	1	2	-9	-8	HSd3b
CT scan	1	2	-9	-8	HSd3c
Mammography	1	2	-9	-8	HSd3d
Cobalt therapy equipment	1	2	-9	-8	HSd3e
Linear accelerator	1	2	-9	-8	HSd3f
Renal dialysis	1	2	-9	-8	HSd3g

<b>HSD.4</b>	Does this health establishment conduct laboratory tests?
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Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSD.6**

<b>HSd4</b>
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<b>HSD.5</b>	What laboratory tests does this health establishment provide? <b>SHOW CARD 8</b>
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Laboratory tests	Yes, for free	Yes	No	DON'T KNOW (SPONTANEOUS)	
Enzyme tests for heart disease diagnosis	1	2	3	-9	HSd5a
Total cholesterol tests	1	2	3	-9	HSd5b
Total iron binding capacity test	1	2	3	-9	HSd5c
Glycosylated hemoglobin test (HbA1C)	1	2	3	-9	HSd5d
PCR tests for identified diseases (molecular biology)	1	2	3	-9	HSd5e

Blood culture	1	2	3	-9	HSd5f
Cytology	1	2	3	-9	HSd5g
Molecular biology techniques	1	2	3	-9	HSd5h

**HSD.6** Please tell us if the following drugs or commodities are available **today** in this health establishment. Please only reply with "yes" if the drugs are present in the form and dosage indicated.  
**SHOW CARD 9**

Type of Drugs	Yes	No	DON'T KNOW (SPONTANEOUS)	NOT APPLICABLE (SPONTANEOUS)	
Salbutamol inhaler	1	2	-9	-7	HSd6a
Glibenclamide capsules or tabs	1	2	-9	-7	HSd6b
Insulin soluble	1	2	-9	-7	HSd6c
Streptokinase	1	2	-9	-7	HSd6d
Atenolol capsules or tabs	1	2	-9	-7	HSd6e
Captopril OR Enalapril capsules or tabs	1	2	-9	-7	HSd6f
Simvastatin capsules or tabs	1	2	-9	-7	HSd6g
Amitriptyline capsules or tabs	1	2	-9	-7	HSd6h

**HSD.7** Has this health establishment ever received a contract from a government agency to provide health care services?

Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSd7**

**HSD.8** In the past 3 years, we want to know if this health establishment was offered support from a medical company in each of the following activities:  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Activities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Continuing education of health providers from this health establishment	1	2	-9	HSd8a
Information on clinical practice guidelines	1	2	-9	HSd8b
Information on pharmaceutical	1	2	-9	HSd8c
Information on medical supplies	1	2	-9	HSd8d
Technology upgrades	1	2	-9	HSd8e
<b>OTHER (SPONTANEOUS – SPECIFY)</b>	1	2	-9	<b>HSd8f</b>

Other

**HSd8fx**

**HSD.9** In the past 3 years, we want to know if this health establishment actually received support from a medical company in each of the following activities:  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Activities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Continuing education of health providers from this health establishment	1	2	-9	HSd9a
Information on clinical practice guidelines	1	2	-9	HSd9b
Information on pharmaceutical	1	2	-9	HSd9c
Information on medical supplies	1	2	-9	HSd9d
Technology upgrades	1	2	-9	HSd9e
<b>OTHER (SPONTANEOUS – SPECIFY)</b> HSd9fx	1	2	-9	HSd9f

Other				
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**HSd9fx**

**E. DEGREE OF COMPETITION**

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**  
 The next section to be covered seeks to understand the competitive environment and how this health establishment acts in it.

**E.2** In fiscal year 2010/11, for the main market in which this health establishment provided services, how many competitors did this health establishment's main service face?

None	1
One	2
2-5	3
More than 5	4
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**e2**

**E.11** Does this health establishment compete against unregistered or informal firms?

Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**e11**

**HSE.12** In fiscal year 2010/11, for the main market in which this health establishment provided services, what was the most important single factor that determined this health establishment's competitiveness:

Price	1
Quality	2
Long-term relationship with customers	3
<b>OTHER (SPONTANEOUS - SPECIFY) HSe12x</b>	<b>4</b>
<b>DOES NOT KNOW</b>	<b>-9</b>

**HSe12**

Other

**HSe12x**

**HSE.13a** Who sets the price of this health establishment's main product set?  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Government	1
Industry association	2
This health establishment	3
Suppliers	4
Insurance companies	5
<b>DO NOT APPLY</b>	<b>-7</b>

*GO TO QUESTION HSE.14*  
*GO TO QUESTION HSE.14*

**HSe13a**

**HSE.13b** What is the most important determinant for the price of this health establishment's main product?  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Prices are set according to cost and profit	1
Prices are set according to the price of competitor(s) or market	2
<b>OTHER (SPONTANEOUS - SPECIFY) HSe13bx</b>	<b>3</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSe13b**

Other

**HSe13bx**

<b>HSE.14</b>	Approximately what percentage of this total revenue comes from the following sources? <b>SHOW CARD 10</b>
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	<b>Percent of total revenue</b>
Patient	<b>HSe14a</b>
Private health insurance	<b>HSe14b</b>
Private company	<b>HSe14d</b>
President's Fund	<b>HSe14e</b>
Ministry of Health	<b>HSe14f</b>
Other government	<b>HSe14g</b>
Other	<b>HSe14h</b>
<b>INTERVIEWER: CHECK THAT THE TOTAL IS 100%</b>	<b>100%</b>

**F. PATIENT CARE**

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**

The next section to be covered seeks to understand the competitive environment and how this health establishment acts in it.

**HSF.1** Does this health establishment provide inpatient care?

Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSF.12**

**HSf1**

**HSF.2** In fiscal year 2010/2011, what was this health establishment 's total capacity?

	Number
Number of beds	<b>HSf2</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.3** In fiscal year 2010/11, what was the composition of beds across departments?

**SHOW CARD 11**

	Number of beds
Surgery	<b>HSf3a</b>
Gyn & Ob	<b>HSf3b</b>
Pediatrics	<b>HSf3c</b>
Internal medicine	<b>HSf3d</b>
ICU adults	<b>HSf3e</b>
ICU pediatrics	<b>HSf3f</b>
Cardiology	<b>HSf3g</b>
<b>OTHER (SPONTANEOUS – SPECIFY) HSf3hx</b>	<b>HSf3h</b>

Other		<b>HSf3hx</b>
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**HSF.4** In 2010, what was the number of beds used as a proportion of the total number of beds available (capacity utilization)?

	Percent
Inpatient capacity utilization	<b>HSf4</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.5** | In 2010, what was the number of admissions in this health establishment ?

	Number
Admissions	<b>HSF5</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.6** | Over the last three years (2007-2010), has the number of admissions in this health establishment :

**INTERVIEWER: READ EACH OPTION ALOUD**

Increased	1
Stayed the same	2
Decreased	3
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSF.9**

**GO TO QUESTION HSF.8**

**HSF6**

**HSF.7** | How large would you estimate the increase?

	Percent
Change	<b>HSF7</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSF.9**

**HSF.8** | How large would you estimate the decrease?

	Percent
Change	<b>HSF8</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.9** | Over the last three years, has the number of beds in this health establishment :

**INTERVIEWER: READ EACH OPTION ALOUD**

Increased	1
Stayed the same	2
Decreased	3
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSF.12**

**GO TO QUESTION HSF.11**

**HSF9**

**HSF.10** | How large would you estimate the increase?

	Percent
Change	<b>HSF10</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSF.12**

**HSF.11** How large would you estimate the decrease?

	Percent
Change	<b>HSf11</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.12** How many operating theatres are there in this health establishment?

	Number
Operating theatres	<b>HSf12</b>
<b>DOES NOT APPLY</b>	<b>-7</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.13** In fiscal year 2010/11, how many hours per week did this health establishment 's outpatient care typically operate?  
**(INTERVIEWER: RESPONSE MUST BE 168 HOURS OR LESS)**

	Hours
Typical hours of operation in a week	<b>HSf13</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.14** In the last year, how many outpatients did this health establishment see?

	Number
Outpatients	<b>HSf14</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSF.15** Over the last three years, has the number of outpatients served in this health establishment :

**INTERVIEWER: READ EACH OPTION ALOUD**

Increased	1
Stayed the same	2
Decreased	3
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION L.1**  
**GO TO QUESTION HSF.17**

**HSf15**

**HSF.16** How large would you estimate the increase?

	Percent
Change	<b>HSf16</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION L.1**

**HSF.17** How large would you estimate the decrease?

	Percent
Change	<b>HSf17</b> %
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**L. LABOR**

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**  
**Now I would like to ask you a few questions about this health establishment's labor force.**

**L.1** At the end of fiscal year 2010/11, how many permanent, full-time individual worked in this health establishment? Please include all employees and managers (Permanent, full-time employees are defined as all paid employees that are contracted for a term of one or more fiscal years and/or have a guaranteed renewal of their employment contract and that work a full shift  
**(INTERVIEWER: INCLUDE INTERVIWEE IF APPLICABLE).**

	Number
Permanent, full-time workers end of last fiscal year	<b>11</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSL.2** We would like to know about the number of each type of the following personnel. If an individual plays more than one role, please only count them only once for their primary role.  
**SHOW CARD 12**

Type of staff	Number	<b>DON'T KNOW (SPONTANEOUS)</b>	<b>NOT APPLICABLE (SPONTANEOUS)</b>	
Doctor general		<b>-9</b>	<b>-7</b>	<b>HSI2a</b>
Doctor specialized		<b>-9</b>	<b>-7</b>	<b>HSI2b</b>
Qualified nurse		<b>-9</b>	<b>-7</b>	<b>HSI2c</b>
Trainee nurse		<b>-9</b>	<b>-7</b>	<b>HSI2d</b>
Pharmacist		<b>-9</b>	<b>-7</b>	<b>HSI2e</b>
Laboratory technician		<b>-9</b>	<b>-7</b>	<b>HSI2f</b>
Business manager		<b>-9</b>	<b>-7</b>	<b>HSI2g</b>
Medical records assistant/officer		<b>-9</b>	<b>-7</b>	<b>HSI2h</b>
Other staff		<b>-9</b>	<b>-7</b>	<b>HSI2i</b>

<b>HSL.4</b>	Also please tell us how many of the people who play this role at the health establishment also work for a governmental organization? <b>SHOW CARD 14</b>
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Type of staff	Number	DON'T KNOW (SPONTANEOUS)	NOT APPLICABLE (SPONTANEOUS)	REFUSE	
Doctor general		-9	-7	-8	HSI4a
Doctor specialized		-9	-7	-8	HSI4b
Qualified nurse		-9	-7	-8	HSI4c
Trainee nurse		-9	-7	-8	HSI4d
Pharmacist		-9	-7	-8	HSI4e
Laboratory technician		-9	-7	-8	HSI4f
Business manager		-9	-7	-8	HSI4g
Medical records assistant/officer		-9	-7	-8	HSI4h
Other staff		-9	-7	-8	HSI4i

<b>L.10</b>	Over fiscal year 2010/11, did this health establishment have formal training programs for its permanent, full-time employees?
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Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**110**

**M. BARRIERS AND OBSTACLES**

<b>HSM.1</b>	Which of the following is the biggest obstacle to the operations of this health establishment? <b>SHOW CARD 16, 17, 18</b>
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Limited access to finance	1
Restricted access to land	2
Difficult business registration procedures	3
Corruption	4
Crime, theft and disorder	5
Shortage of qualified doctors general	6
Shortage of qualified doctors specialized	7
Shortage of qualified nurses	8
Shortage of qualified lab technicians	9
Political instability	10
Limited demand for products or services	11
Competition from low quality providers	12
Competition from lower priced providers	13

Biggest obstacle	
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>REFUSE TO ANSWER (SPONTANEOUS)</b>	<b>-8</b>

**HSm1a**

Rotation 1	1
Rotation 2	2
Rotation 3	3

**HSm1b**

<b>HSM.2</b>	Over the last 12 months, in a typical month, out of 10 management hours, approximately how many of these hours were spent in dealing with requirements imposed by government regulations? <b>(INTERVIEWER: SOME EXAMPLES OF GOVERNMENT REGULATIONS ARE DEFINED AS TAXES, CUSTOMS, LABOR, HEALTH REGULATIONS, LICENSING AND REGISTRATION, INCLUDING DEALINGS WITH OFFICIALS AND COMPLETING FORMS)</b>
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	<b>Number</b>
Number of hours	
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>REFUSE TO ANSWER (SPONTANEOUS)</b>	<b>-8</b>

**HSm2**

<b>HSM.3</b>	Is this health establishment registered with the Ministry of Health?
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Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION HSJ.1**

**HSm3**

<b>HSM.4</b>	Which of the following aspects represents the biggest obstacle faced by this health establishment in getting fully registered? <b>SHOW CARD 19, 20, 21</b>
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Getting information on what you need to do to register	1
Time to complete registration procedures	2
Fees to complete registration procedures	3
Taxes on registered businesses	4
The inspection and meetings with government officials registered businesses must have	5
Paying bribes that registered business need to pay	6
Enforcing contracts	7
Registering property	8

Biggest obstacle	
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>REFUSE TO ANSWER (SPONTANEOUS)</b>	<b>-8</b>

**HSm4a**

Rotation 1	1
Rotation 2	2
Rotation 3	3

**HSm4b**

**J. BUSINESS-GOVERNMENT RELATIONS**

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**  
**The following questions assess how facilities, such as this one, deal with government officials and their agencies.**

**HSJ.1** In the past 3 years, did this health establishment receive assistance from a government agency in each of the following activities concerning this health establishment?  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Facilities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Continuing education of health providers from this health establishment	1	2	-9	HSj1a
Information on clinical practice guidelines	1	2	-9	HSj1b
Vaccines (e.g., H1N1)	1	2	-9	HSj1c
Medicines (e.g., tamiflu)	1	2	-9	HSj1d
Blood transfusion services	1	2	-9	HSj1e
Quality assurance practices	1	2	-9	HSj1f
Patient safety	1	2	-9	HSj1g
Patient transfer	1	2	-9	
<b>OTHER (SPONTANEOUS - SPECIFY) HSj1hx</b>	1	2	-9	HSj1h

Other		HSj1hx
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**J.7** It is said that facilities are sometimes required to make gifts or informal payments to public officials to “get things done” with regard to customs, taxes, licenses, regulations, services etc. On average, what percentage of total annual sales, or estimated total annual value, do facilities like this one pay in informal payments or gifts to public officials for this purpose?

	Percent
Percentage of total annual sales paid as informal payment	j7a %
<b>NO PAYMENTS OR GIFTS ARE PAID</b>	<b>0</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>REFUSE TO ANSWER (SPONTANEOUS)</b>	<b>-8</b>

**PROVIDE EITHER ONE OR THE OTHER, NOT BOTH**

	SLRs
Total annual informal payment	j7b
<b>NO PAYMENTS OR GIFTS ARE PAID</b>	<b>0</b>
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>
<b>REFUSE TO ANSWER (SPONTANEOUS)</b>	<b>-8</b>

<b>HSJ.8</b>	In the past 3 years, did this health establishment receive any technical assistance from a government agency to do any of the following service related activities? <b>SHOW CARD 22</b>
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Activities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Provide childhood vaccinations	1	2	-9	HSj8a
Family planning services	1	2	-9	HSj8b
Antenatal care	1	2	-9	HSj8c
Control of TB	1	2	-9	HSj8d

<b>HSJ.9</b>	In the past 3 years, did this health establishment receive any financial assistance from a government agency to do any of the following service related activities? <b>SHOW CARD 23</b>
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Activities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Provide childhood vaccinations	1	2	-9	HSj9a
Family planning services	1	2	-9	HSj9b
Antenatal care	1	2	-9	HSj9c
Control of TB	1	2	-9	HSj9d

<b>HSJ.10</b>	Does this health establishment report the following to government agency (E.g. Health ministry, Statistics bureau, police)? <b>(INTERVIEWER: READ OUT ONE BY ONE)</b>
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Activities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Service statistics on how many patients received key services	1	2	-9	HSj10a
Sudden deaths/ deaths due to injury (E.g. Post mortem)	1	2	-9	HSj10b
Adverse events such as maternal or child deaths, communicable disease, etc.	1	2	-9	HSj10c
Compliance with quality standards	1	2	-9	HSj10d
Equipment purchases	1	2	-9	HSj10e
New construction or expansion of existing infrastructure	1	2	-9	HSj10f
Financial information such as revenue	1	2	-9	HSj10g
Medical legal issues	1	2	-9	HSj10h

<b>HSJ.11</b>	Do you know of any <b>health establishment</b> similar to this that has been penalized by the government for not adhering to minimum quality standards? <b>(INTERVIEWER: POSSIBLE EXAMPLES OF NOT ADHERING TO MINIMAL QUALITY STANDARDS INCLUDE SELLING COUNTERFEIT AND EXPIRED DRUGS OR CAUSING ADVERSE EVENTS SUCH AS MATERNAL OR CHILD DEATHS)</b>
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Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSj11**

<b>HSJ.12</b>	Have you had an inspection from a government agency (Provincial council and Local authorities ) in the last year for monitoring the safety and quality of services provided by this health establishment?
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Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**HSj12**

## K. BUSINESS PROCESS MANAGEMENT

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**  
**The following addresses this health establishment's business process and workflow management.**

**HSK.1** Does the health establishment use any of the following record systems?  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Record System	Yes	No	DON'T KNOW (SPONTANEOUS)	
Paper based patient record system	1	2	-9	HSk1a
Electronic based patient record system	1	2	-9	HSk1b
Paper based accounting system	1	2	-9	HSk1c
Electronic based accounting systems	1	2	-9	HSk1d
Paper based inventory system for drugs and medical supplies	1	2	-9	HSk1e
Electronic based inventory system for drugs and medical supplies	1	2	-9	HSk1f

**HSK.2** Does this health establishment routinely carry out any of the following activities?  
**(INTERVIEWER: READ OUT ONE BY ONE)**

Activities	Yes	No	DON'T KNOW (SPONTANEOUS)	
Send medical staff to continuing education	1	2	-9	HSk2a
Disseminate clinical practice guidelines to staff	1	2	-9	HSk2b
Produce internal report on care provided to patients	1	2	-9	HSk2c
Prepare statistics on how many patients received key services	1	2	-9	HSk2d

**HSK.3** In this health establishment are there guidelines, for the following available and accessible for patients?  
**(INTERVIEWER: READ OUT ONE BY ONE)**

	Yes	No	DON'T KNOW (SPONTANEOUS)	
Diabetes care	1	2	-9	HSk3a
Cancer management	1	2	-9	HSk3b
Cardiovascular disease	1	2	-9	HSk3c
Infection prevention and control (e.g., dengue, leptospirosis)	1	2	-9	HSk3d
Depression	1	2	-9	HSk3e
Laboratory procedures	1	2	-9	HSk3f
Diagnostic procedures (e.g., colonoscopy, endoscopy)	1	2	-9	HSk3g

<b>HSK.4</b>	Does this health establishment have the following assets or items? <b>(INTERVIEWER: READ OUT ONE BY ONE)</b>
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Asset	Yes	No	DON'T KNOW (SPONTANEOUS)	REFUSE TO ANSWER (SPONTANEOUS)	
Electricity connection (that works more than half the time during business hours)	1	2	-9	-8	<b>HSk4a</b>
Functioning backup generator	1	2	-9	-8	<b>HSk4b</b>
Air conditioning	1	2	-9	-8	<b>HSk4c</b>
Functioning computer	1	2	-9	-8	<b>HSk4d</b>
Functional ambulance or other vehicle for emergency transportation of Patients	1	2	-9	-8	<b>HSk4e</b>

## N. PERFORMANCE

**READ THE FOLLOWING TO THE RESPONDENT BEFORE PROCEEDING:**  
Please provide the following information from the financial statements of this health establishment.

<b>HSN.1</b>	Over fiscal year 2010/11, did this health establishment receive support in the form of donations, free inputs or co-funding, regardless of the source?
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Yes	1
No	2
<b>DON'T KNOW (SPONTANEOUS)</b>	<b>-9</b>

**GO TO QUESTION N.2**

**HSn1**

<b>HSN.2</b>	Approximately how much of each of the following items did you receive free of cost in the last year? Please estimate the value of the donation. <b>SHOW CARD 24</b>
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	SLRs	DON'T KNOW (SPONTANEOUS)
Wages and allowances for staff recruited by the health establishment	<b>HSn2a</b>	<b>-9</b>
Drugs	<b>HSn2b</b>	<b>-9</b>
Other medical supplies	<b>HSn2c</b>	<b>-9</b>
Fuel and other non-medical supplies	<b>HSn2d</b>	<b>-9</b>
Transport	<b>HSn2e</b>	<b>-9</b>
Utilities	<b>HSn2f</b>	<b>-9</b>
Purchase of equipment and other capital	<b>HSn2g</b>	<b>-9</b>
Other	<b>HSn2h</b>	<b>-9</b>

**N.2** For fiscal year 2010/11, please provide the following information about this health establishment by referring directly to the income statement:  
**(INTERVIEWER: READ OUT ONE BY ONE)**

	SLRs	DON'T KNOW (SPONTANEOUS)
Total annual cost of labor including wages, salaries, bonuses, social payments	<b>n2a</b>	<b>-9</b>
Total annual costs of electricity	<b>n2b</b>	<b>-9</b>
Total annual cost of drugs	<b>HSn2dr</b>	<b>-9</b>
Total annual cost of other medical supplies	<b>HSn2med</b>	<b>-9</b>

**A.15a Please complete the following information about the interviewee(s)**

	Position in the firm	Years with the firm	Gender
<b>Main respondent</b>	<b>a15a1a</b>	<b>a15a2a</b>	<b>a15a3</b>
<b>Second respondent</b>	<b>a15a1b</b>	<b>a15a2b</b>	<b>a15b3</b>
<b>Third respondent</b>	<b>a15a1c</b>	<b>a15a2c</b>	<b>a15c3</b>

**THE SURVEY ENDS HERE**  
**THANK YOU VERY MUCH FOR YOUR COOPERATION.**

**A.15 Time face-to-face interview ends:**

Day (dd)	Month (mm)	Year (yyyy)	Hour (00 to 23)	Minutes (00 to 59)
<b>a15d</b>	<b>a15m</b>	<b>a15y</b>	<b>a15h</b>	<b>a15min</b>

**INTERVIEWERS PLEASE ANSWER AT END OF THE INTERVIEW:**

**A.16** It is my perception that the responses to the questions regarding opinions and perceptions:

Truthful	1
Somewhat truthful	2
Not truthful	3

**a16**

**A.17** The responses to the questions regarding figures (productivity and employment numbers):

Are taken directly from health establishment records	1
Are estimates computed with some precision	2
Are arbitrary and unreliable numbers	3

**a17**

**HSA.18** On the following scale, how would you rate the cleanliness of this health establishment?

Very Bad	1
Bad	2
Moderate	3
Good	4
Very Good	5

**HSa18**

**HSA.19** On the following scale, how would you rate the privacy offered to patients at this health establishment?

Very Bad	1
Bad	2
Moderate	3
Good	4
Very Good	5

**HSa19**

**HSA.20** Was there clean water available for patients to drink provided by the health establishment?

Yes	1
No	2

**HSa20**

**HSA.21** Did you ever see a care provider with a patient?

Yes	1
No	2

**HSa21**

**HSA.22** Did you ever see a provider wash his hands after treating a patient?

Yes	1
No	2

**HSa22**

**HSA.23** Were there chairs available for patients to sit on while waiting to be seen by the provider?

Yes	1
No	2

**HSa23**

**INTERVIEWER COMMENTS:**

<b>a17x</b>
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(Problems occurred/extraordinary circumstances which could influence results)

**SUPERVISORS PLEASE ANSWER:**

<b>A.18</b>	This questionnaire was completed in:
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One visit in face-to-face interview with one person	1	<b>STOP HERE</b>
One visit in face-to-face interview with different managers/staff	2	
Several visits	3	

**a18**

<b>A.19</b>	If option 2 or 3 in <b>A.18</b> , estimate duration of the whole interview
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<b>Hour</b>	<b>Minutes</b>

**a19h      a19m**