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| EUV Survey Question Guide |

Updated: January 2022

Welcome to the EUV survey.

*Instructions: Please read each prompt carefully and pay attention to any instructions or hints. If the prompt is a question, read the question exactly as it is written. If the prompt is an observation, be sure to note your observation as instructed. If you make a mistake, you can navigate to previous questions using the "Go To" button at the top.*

The survey is organized into five sections (see below):

* Background Information
* Section 1: Stock Management
* Section 2: Storage Management
* Section 3: Case Management
* Section 4: Facility Management
* Section 5: COVID Continuity of Care

A prompt will notify you when you are starting a new section and any relevant instructions will be given. If you need to go back to any section for any reason, use the arrow buttons or the "Go To" button at the top of the page.

# Background Information Section

| **Question** | **Answer** |
| --- | --- |
| Country | Select country code |
| Data Supervisor Name |  |
| Data Collector |  |
| How many tablets are available for assessing this site? | Select the number of tablets available, *one tablet or two tablets* |
| If two or more data collectors are completing the survey at this facility, which data collector role are you? | Select one *data collector 1* or *data collector 2* |
| Province/State/Region  *Select one* | Select one *province, state, or region* from the list provided |
| District  *Select one* | Select one *district* from the list provided |
| Facility Type  *Select one* | Select one *facility type* from the list provided |
| Facility Name  *Select one* | Select one *facility name* from the list provided |
| Click below to record your GPS coordinates |  |
| Please select the month in which the EUV will be completed:  *Supervisors to confirm final month of data collection.* | January, February, March April, May, June, July, August, September, October, November, December |

Section 1: Stock Management

Welcome to the EUV Survey - Section 1: Stock Management.

*Instructions: Please read each prompt carefully and pay attention to any instructions or hints. If the prompt is a question, read the question exactly as it is written. If the prompt is an observation, be sure to note your observation as instructed.*

*Malaria Stock Management: This section will ask questions regarding the stock management for malaria products the facility is required to manage in accordance with the national guidelines, protocols, and/or laws, regardless of whether the product is currently in stock.*

*Please look at both the physical inventory, as well as the stock balance on the stock/bin or electronic record.*

***Stock Management Questions***

The series of questions in this section will be completed once for each program area that data is being collected for and will ask questions regarding the stock management for [malaria, family planning, or MNCH] products the facility is required to manage in accordance with the national guidelines, protocols, and/or laws, regardless of whether the product is currently in stock. Please note that each facility type is required to manage a specific set of malaria products. Products will appear according to the facility type selected. For each product, you will be required to answer questions 1 to 16.

*Instructions: The following questions will ask you to observe the physical inventory for each commodity, as well as the stock balance on the stock/bin or electronic record. You may need to ask the pharmacist to see older stock cards to answer the questions.*

**Q1. Has this product been in stock, issued to patients, and/or ordered at the facility at any point in the previous 12 months?** *(Please check the stock monitoring tool(s) for the last 12 months to respond to this question.)*

1. Yes
2. No

**Q1-A. Please explain why this product hasn't been in stock, issued to patients, and/or ordered in the previous 12 months?** *(Question relevant when Q1 is “No”)*

1. No trained provider,
2. Low or no demand for product,
3. Not available from suppliers,
4. Not procured by public system,
5. Other product used,
6. Other (please specify)

**Q1-B. Please explain the other reason the product has not been in stock, issued to patients, and/or ordered in the previous 12 months:** *(Question relevant when Q1-A is “Other”)*

**Q2. Looking at the physical inventory in the storeroom, count how many units of the product are currently in stock.** *(Question relevant when Q1 is “Yes”)*

**Q2-A. Since the stock in the storeroom is 0 for this product, are there currently any usable units of this product in the dispensary?** *(Question relevant when Q2 is 0)*

1. Yes
2. No

**Q3: How many expired units of this product are on the shelf not separated from usable products?** *(Enter ‘999’ if you do noy know the number of expired products)*

**Q3-** **A: Since all units of this product in the storeroom are expired, are there currently any usable units of this product in the dispensary?** *(Question relevant when Q3 is all of the products)*

1. Yes
2. No

**Q4. Is there currently a store ledger, stock card or electronic record available for the product?**

1. Yes
2. No

**Q5. Is the first date on the stock card, store ledger, or electronic records for the commodity before first date of the period under review?** *(Question relevant when Q4 is “Yes”)*

*The period under review is the three full months prior to (but not including) the survey month. You may need to ask the pharmacist to see older stock cards to cover this period.*

1. Yes
2. No

**Q6.** **What is the first date for which data was entered on the store ledger, stock card or electronic record for this product?** *(Question relevant when Q4 is “Yes”)*

**Q7. What is the ending balance on the store ledger, stock card or electronic record?** *(Question relevant when Q4 is “Yes”)*

*On the day of visit*

**Q8. What is the last date for which data was entered on the store ledger, stock card or electronic record?** *(Question relevant when Q4 is “Yes”)*

**Q9. Does the store ledger, stock card or electronic record show any stockouts in the last three full months prior to (but not including) the survey month?** *(Question relevant when Q4 is “Yes”)*

*Stockout = zero (0) stock balance.*

1. Yes
2. No
3. Don’t know

**Q10. According to the store ledger, stock card or electronic record, how many stockouts were recorded in the last three full months prior to (but not including) the survey month)?** *(Question relevant when Q9 is “Yes”)*

*Stockout = zero (0) stock balance.*

Now, we will ask you a few questions about each reported stockout.

*Questions 11-14-A will be repeated for each stock out*

**Q11: Did the first stockout begin before the first day of the period under review?** *(Question relevant when Q8 is “Yes”)*

1. Yes
2. No

**Q 12: According to the store ledger, stock card or electronic record, is there a date recorded for the stockout that occurred in the last three full months prior to (but not including) the survey month?** *(Question relevant when Q10 is “Yes”)*

*Repeat for #2 = second stockout, #3 = third stockout, etc.*

1. Yes
2. No
3. Don’t know

**Q13. According to the store ledger, stock card or electronic record, on what date did the stockout begin?** *(Question relevant when Q11 is “Yes”)*

*Stockout should have occurred in the last 3 full months prior to (but not including) the survey month.*

**Q14. Was this product restocked?**

*If 'no', it means the product is currently stocked out and has never been restocked*

1. Yes
2. No

**Q14-A. According to the store ledger, stock card or electronic record, after this stockout, what is the date that this product was restocked?** *(Question relevant when Q14 is “Yes”)*

**Q15. According to the store ledger, stock card or electronic record, how many units of this product were issued/dispensed from this facility in the last three full months prior to (but not including) the survey month?**

***Reason(s) for Stockouts Question -*** *This question will be asked once for each program area data is being collected for at the facility.*

*Instructions: The next question should be answered by a pharmacist or facility manager. Please refer to the products that were stocked out in the last 3 months to answer the following question.*

**Q16. (Question to head of pharmacy/facility manager): Thinking back about the stockouts of the [program area] products, what were the primary reasons for those stockouts during the period under review?**

*Select all that apply. Please refer to the list of products that were stocked out in the last three full month*

1. Products ordered but stocked out at the resupply point
2. Products ordered but rationed due to low stock at the resupply point
3. Products ordered but delivery delayed from central warehouse or other point in the supply chain
4. Product ordered but delivery has been canceled
5. Product not ordered given low/no demand at facility
6. Product not ordered because there is no trained staff or equipment available
7. No order/report submitted or submitted late
8. Errors in order (i.e., inadequate quantities requested)
9. Frequency of deliveries is too low for facility's demand
10. Transportation challenges (e.g., road inaccessible, lack of transportation, etc.)
11. Unexpected increase in consumption
12. Change in national guidelines, protocols, and/or laws
13. Insufficient funding
14. Product is being phased out in country
15. Other
16. Unknown

**Q16-A. Please select the reason(s) why the delivery was delayed or canceled:** *(Question relevant when Q16 is “c.* *Products ordered but delivery delayed from central warehouse or other point in the supply chain” or “d. Product ordered but delivery has been canceled”)*

1. Lack of transportation
2. Inaccessible roads
3. Slow processing of orders
4. Other operational challenges
5. Security issues
6. Other
7. Unknown

**Q16-B. Please specify the other reason(s) for the stockout(s):** *(Question relevant when Q16 is “Other”)*

**Q16-C. Please specify the other reason(s) that the delivery was delayed or canceled:** *(Question relevant when Q16-A is “Other”)*

***[Malaria only] Action(s) Taken When the First Line ACT Product Is Out of Stock Questions***

*\*Respondents will complete Q17- 17C if the first line ACT is AS/AQ, DHA-PPQ, or AS-PYR and will complete the question for their given first line ACT. If the first line ACT is Alu then respondents will complete Q18-18C*

**Q17. Has AS/AQ 25/67.5 mg (3 tablets)/ DHA/PPQ 20 mg/160 mg (dispersible or hard tablets)/ 60mg pyronaridine/20mg artesunate sachet been stocked out at any point in the past 12 months?** *Look at the stock monitoring tools for the past 12 months to answer this question. If no stock monitoring tools are available, ask the pharmacist or store manager if the product was stocked out at any point in the past 12 months.*

1. Yes
2. No

**Q17.A. In the past 12 months, what actions has the facility taken when there is no prescribed pediatric AS/AQ 25/67.5 mg (3 tablets)/ DHA/PPQ 20 mg/160 mg (dispersible or hard tablets)/ 60mg pyronaridine/20mg artesunate sachet formulation available?**

*Check all that apply.*

1. Send the patient to buy the medication from outside the facility
2. Send the patient to a nearby health facility
3. Cut higher dose ASAQ formulation to dispense to pediatric patient
4. Substitute with another ACT (Alu, DHA/PPQ, AS-PYR)
5. Substitute with SP
6. Substitute with another anti-malarial medication (not Alu, AS-PYR, DHA/PPQ, or SP)
7. Other
8. No action taken

**Q17.B. Please specify what action(s) the facility takes when there is no prescribed pediatric AS/AQ 25/67.5 mg (3 tablets)/ DHA/PPQ 20 mg/160 mg (dispersible or hard tablets)/ 60mg pyronaridine/20mg artesunate sachet available:** *(Question relevant when Q17A is “Other”)*

**Q17.C. Please specify the other anti-malarial medication that is used when there is no prescribed pediatric AS/AQ 25/67.5 mg (3 tablets)/ DHA/PPQ 20 mg/160 mg (dispersible or hard tablets)/ 60mg pyronaridine/20mg artesunate sachet available:** *(Question relevant when Q17A is “Substitute with another anti-malarial medication”)*

*This should not include AS/AQ 25/67.5 mg (3 tablets)/ DHA/PPQ 20 mg/160 mg (dispersible or hard tablets)/ 60mg pyronaridine/20mg artesunate sachet or SP.*

**Q18. Have all four presentations of AL been stocked out at the same time at any point in the past 12 months?** *Look at the stock monitoring tools for the past 12 months to answer this question. If no stock monitoring tools are available, ask the pharmacist or store manager if all four products were stocked out at the same time at any point in the past 12 months.*

1. Yes
2. No

**Q18.A. In the past 12 months, what actions has the facility taken when there is no AL available?**

*This means the facility is stocked out of all four AL presentations.*

*Check all that apply.*

1. Send the patient to buy the medication from outside the facility
2. Send the patient to a nearby health facility
3. Substitute with another ACT (AS/AQ, DHA/PPQ, or AS-PYR)
4. Substitute with SP
5. Substitute with another anti-malarial medication (not AS/AQ, DHA/PPQ, AS-PYR, or SP)
6. Other
7. No action taken

**Q18.B. Please specify what action(s) the facility takes when there is no AL available:** *(Question relevant when Q18A is “Other”)*

**Q18.C. Please specify the other anti-malarial medication that is used when there is no AL available:** *(Question relevant when Q18A is “Substitute with another anti-malarial medication”)*

*This should not include AL or SP.*

**[Malaria only] Microscopy questions.**

*Instructions: The training questions should be asked to the head of facility/person in charge. As for the types of reagents, supplies, and equipment available, the data collector should observe which are available at the facility on the day of visit.*

**Q19. Does this facility perform microscopy?**

1. Yes
2. No

**Q20. How many people have to perform malaria microscopy in their job responsibilities?** *(Question relevant when Q19 is “Yes”)*

*Must be a whole number. If you do not know how many people are responsible, enter 999 (Not Applicable)*

**Q21. How many of those people have been trained in malaria microscopy?** *(Question relevant when Q20 is greater than 0 and not 999)*

*Training methods include on-the-job training (in-service training), workshop or conference (in-service training), workshop or conference (pre-service training), and university/college (pre-service training)*

*Must be less than or equal to previous answer. If you do not know how many people were trained, enter 999 (Don't Know)"*

**Q22. Please select all types of reagents, equipment, and supplies that this facility has available for use:** *(Question relevant when Q19 is “Yes”)*

1. Giemsa stain
2. Methanol
3. Deionized water
4. Slides
5. Pipettes
6. Functional microscope
7. Other
8. Don't know

**Q22.A. Please specify the 'other' types of reagents:** *(Question relevant when Q22 is “Other”)*

***MNCH Stock Management-Specific Questions***

These questions will be interspersed with the usual stock management questions for other task orders, and the numbering below follows the standard numbering format.

**Q1-A. Does the facility have any cold storage equipment available?** *(Cold storage equipment includes EPI/vaccine refrigerator, other refrigerator, cold box, freezer, and cold room (for warehouses))*

1. Yes
2. No

**Q1-B. What type(s) of cold storage equipment does the facility use?** *(Question relevant when Q1-A is “Yes”)*

*(A working refrigerator means that the refrigerator is turned on and the temperature is between 2 and 8 degrees Celsius. A working cold box has frozen ice packs in it.)*

1. Working EPI/vaccine refrigerator
2. Working other refrigerator
3. Cold box(es)
4. Cold room
5. Freezer

**Q1-C. Is there a thermometer for monitoring cold storage temperatures?** *(Question relevant when Q1-B is “a. Working EPI/vaccine refrigerator” or “b. Working other refrigerator” or “d. Cold room” or “e. Freezer”)*

1. Yes
2. No

**Q1-D.** **Does the facility have a temperature log available on the day of visit?** *(Question relevant when Q1-C is “Yes”)*

1. Yes
2. No

**Q1-E.** **Does the facility monitor cold storage temperatures at least once daily?** *(Question relevant when Q1-D is “Yes”)*

*Review the temperature log to confirm.*

1. Yes
2. No

**Q1-F.** **How many times in the last seven days has the recorded temperature been outside of 2 degrees C and 8 degrees C in the cold storage?** *(Question relevant when Q1-E is “Yes”)*

*Review the temperature records to answer this question.*

**Q2-A. For the available oxytocin units, what temperature storage conditions are specified on the label?** *(Question relevant when commodity is “Oxytocin\_inj\_10\_IU\_1ampoule” and Q2 is greater than “0”)*

*Select all that apply*

*Look at the labels for all oxytocin products on the shelf at the facility on the day of visit*

1. Between 2 -8 degrees C
2. Under 25 degrees C
3. Under 30 degrees C
4. No temperature listed on packaging

**Q3-B. What type(s) of cold storage equipment is usable oxytocin stored in?** *(Question relevant when there are some non-expired oxytocin products)*

*A working refrigerator means that the refrigerator is turned on and the temperature is between 2 and 8 degrees Celsius. A working cold box has frozen ice packs in it.*

*Select all that apply*

1. Working EPI/vaccine refrigerator
2. Working other refrigerator
3. Cold box(es)
4. Cold room
5. Freezer
6. No oxytocin is being stored in cold storage equipment at this facility

**Q3-C. Please explain why there is no usable oxytocin stored in cold storage equipment:** *(Question relevant when Q3-B is “f. No oxytocin is being stored in cold storage equipment at this facility”)*

**Q3-D. How many usable units of oxytocin are stored in working cold storage?** *(Question relevant when Q3-B is not “no oxytocin is being stored in cold storage equipment at this facility” and when there are some non-expired oxytocin products)*

*Cold storage equipment includes EPI/vaccine refrigerator, other refrigerator, cold box, and cold room (for warehouses).*

*Cold storage is working when it is cold. For refrigerators, it is on and temperature is between 2 degrees and 8 degrees Celsius. A working cold box has frozen ice packs in it.*

*Usable units are units that have not expired and/or are broken or damaged.*

**Q3-E. Why are some units of oxytocin NOT stored in working cold storage?** *(Question relevant when Q3-D does not equal the physical count of the product)*

1. Cold storage broken
2. Cold storage space too small
3. Staff believes that some oxytocin is “heat-stable”
4. Other

**Q3-F. Please explain the other reason why some units of oxytocin are not stored in working cold storage:** *(Question relevant when Q3-E is “Other”)*

***Stock Management Challenges Question***

*Instructions: The next question should be answered by a pharmacist or facility manager.*

**Q17. Now, I'd like to ask you about a few challenges that may affect stock management at this facility. For each statement, please indicate if you agree or disagree.**

1. Too few staff trained in stock management
2. Too few staff available to manage stock or complete store ledger, stock card or electronic records
3. Stock cards or electronic records are not available
4. Process and stock cards or electronic records are too complicated
5. Staff do not see value in keeping stock cards up-to-date
6. Written guidance and training materials on stock management are inadequate or out of date
7. Storage space is too small
8. Stock cards or electronic records are kept away from the products

**Q17-A. Are there any other stock management challenges at this facility that were not mentioned on the previous page?**

1. Yes
2. No

**Q17-B. Please explain what the other stock management challenge(s) is:** *(Question relevant when Q20-A is “Yes”)*

#### Section 2: Storage Management

Welcome to EUV Survey - Section 2: Storage Management.

*Instructions: Please read each prompt carefully and pay attention to any instructions or hints. If the prompt is a question, read the question exactly as it is written. If the prompt is an observation, be sure to note your observation as instructed.*

*In this section, you will be asked to observe current storage conditions and select the response that best matches your observations. Every storage area observed for the stock management section should be assessed in this section.*

**Q1. How many storage areas will you assess?**

**Q1-A. Are the commodities for all program areas stored in the same place? (if multiple program areas)**

1. All storage areas have products for all program areas stored together
2. Some of the storage areas store commodities for all program areas together, but some are separated
3. Commodities for each program area is stored in separate storage areas

**Q1-B. How many storage areas will you assess that store commodities for all program areas together?** *(Question relevant when Q1 is “All storage areas have products for all program areas stored together” or “Some of the storage areas store commodities for all program areas together, but some are separated”)*

**Q1-C. How many storage areas will you assess that only store malaria commodities?** *(Question relevant when Q1 is “Some of the storage areas store commodities for all program areas together, but some are separated” or* *“Commodities for each program area is stored in separate storage areas”)*

**Q1-D. How many storage areas will you assess that only store family planning commodities?** *(Question relevant when Q1 is “Some of the storage areas store commodities for all program areas together, but some are separated” or* *“Commodities for each program area is stored in separate storage areas”)*

*Instructions: Please complete this section based on your observations of the storage location. If needed, ask the facility manager and/or head of pharmacy to assist you by showing you the appropriate locations and/or equipment in question. These questions should be repeated for each storage area being assessed. Every storage area used to complete the stock management section should be assessed in this section*

**Q1. To what extent are medicines and supplies stored and organized according to first-to-expire, first-out (FEFO)?** (Review expiration dates and organization)

*Select one of the following that best applies*

1. All are organized according to FEFO
2. Most are organized according to FEFO
3. Some are organized according to FEFO
4. None are organized according to FEFO
5. Unknown/unclear

**Q2. To what extent are damaged and/or expired medicines and supplies separated from usable medicines and supplies?**

*Select one of the following that best applies*

1. All are clearly separated.
2. Most are clearly separated.
3. Some are clearly separated.
4. None are clearly separated.
5. Unknown

**Q3. To what extent are medicines and supplies stored separately from insecticides and chemicals (including LLINs)?**

Select one of the following that best applies

1. All medicines and supplies are stored separately from insecticides and chemicals
2. Most medicines and supplies are stored separately from insecticides and chemicals
3. Some medicines and supplies are stored separately from insecticides and chemicals
4. No medicines and supplies are stored separately from insecticides and chemicals
5. Unknown/Unclear

**Q4. To what extent are products stored on pallets and/or shelves (i.e., products are not stored on the floor)?**

*Select one of the following that best applies*

1. All products are stored on pallets and/or shelves.
2. Most products are stored on pallets and/or shelves.
3. Some products are stored on pallets and/or shelves.
4. No products are stored on pallets and/or shelves.
5. Unknown

**Q5. To what extent are products stored approximately 30 cm from the wall (for pallets and boxes only)?**

*Select one of the following that best applies*

1. All products are stored approximately 30 cm from the wall
2. Most products are stored approximately 30 cm from the wall
3. Some products are stored approximately 30 cm from the wall
4. No products are stored 30 cm from the wall
5. Unknown

**Q6. To what extent are products stacked appropriately: not stacked more than 2.5 meters high?**

*Select one of the following that best applies*

1. All products are stacked appropriately
2. Most products are stacked appropriately
3. Some products are stacked appropriately
4. No products are stacked appropriately
5. Unknown

**Q7. To what extent does the storeroom show evidence of rodents or insects in the storage area? (Visually inspect the storage area for evidence of rodents [droppings] or insects that can damage or contaminate the products.)**

*Select one of the following that best applies*

1. Extensive evidence of rodents or insects
2. Some evidence of rodents or insects
3. No evidence of rodents or insects
4. Unknown

**Q8. To what extent are medicines and supplies protected from direct sunlight?**

*Select one of the following that best applies*

1. All products are protected from sunlight
2. Most products are protected from sunlight
3. Some products are protected from sunlight
4. No products are protected from sunlight
5. Unknown

**Q9. Is there a thermometer for monitoring storage room temperatures?**

*Select one of the following that best applies*

1. Yes
2. No
3. Unknown

**Q9-A. Do you monitor storage room temperatures daily?** *(Question relevant when Q8 is “Yes”)*

*Look at temperature log to respond to question. Select one of the following that best applies*

1. Yes
2. No
3. Unknown

**Q10. Which of the following best describes the condition of the storeroom roof and walls?**

*Select one of the following that best applies*

1. Extensive evidence of cracks, holes, and signs of water leakage or dampness
2. Some evidence of cracks, holes, and signs of water leakage or dampness
3. No evidence of cracks, holes, and signs of water leakage or dampness
4. Unknown

**Q11. Is there a fire extinguisher and/or sand available for fire safety equipment?**

*Select one of the following that best applies*

1. Yes, both
2. Fire extinguisher only
3. Sand only
4. None
5. Unknown

**Q12. Is the storage room secured with a lock and key?**

*Select one of the following that best applies*

1. Yes
2. No
3. Unknown

**Q12-A. Please explain why you do not know whether the storage area is secured with a lock and key:**

**Q13. Is access to the storage area limited to authorized personnel?**

*Select one of the following that best applies*

1. Yes
2. No
3. Unknown

**Q13-A. Please explain why you do not know whether access to the storage area is limited to authorized personnel:**

**Q14. Are products in the storage area in good condition?**

*There are no signs that the products are wet or cracked due to heat or sunlight*

1. There are no signs of any product being wet or damaged due to heat or sunlight
2. Most products are in good conditions, but some products have signs of being wet or damaged due to heat or sunlight
3. Some products are in good conditions, but most products have signs of being wet or damaged due to heat or sunlight
4. No products are in good condition. All products have signs of being wet or damaged due to heat or sunlight

# Section 3: Case Management [Malaria only]

Welcome to the EUV Survey - Section 3: Case Management.

*Instructions: Please read each prompt carefully and pay attention to any instructions or hints. If the prompt is a question, read the question exactly as it is written. If the prompt is an observation, be sure to note your observation as instructed. With authorization or assistance from the facility manager, collect the following malaria case management information according to facility registers. The information provided should be for the last full month prior to the survey month.*

**Q1. Does the facility have the most updated, standard treatment guidelines?**

1. Yes
2. No

**Q2. Can you access patient records?**

1. Yes
2. No

*Instructions: Following the instructions in the enumerator's guide, randomly select 20 patient case records that were seen in the last full month prior to the survey month. If at least 20 patients were not seen in the last full month prior to the survey month, please look at the last three months prior to the survey month to randomly select the 20 patient case records.*

*If there were fewer than 20 patient records in the last three months prior to the survey month, please fill out the form for every patient record.*

**Q2-A. Are there 20 or more patient records to review?**

1. Yes
2. No

**Q2-B. How many patient case records are available for review?** *(Question relevant when Q2-A is “No”)*

**Q3. Select the patient's age range:**

1. Under 5 years of age
2. 5 years of age or older
3. Unknown

**Q4. Did the patient present with fever?**

*Fever is 37.5 degrees Celsius or above*

1. Yes
2. No

**Q5. Was the patient diagnosed with malaria?**

*The malaria diagnosis should be explicitly written in the patient's record. If it is not explicitly written, but the patient received malaria medication, select 'not specified' for malaria diagnosis.*

1. Yes
2. No
3. Not specified

**Q5-A. Was the patient diagnosed with uncomplicated or severe malaria?** *(Question relevant when Q5 is “Yes”)*

*The type of malaria (uncomplicated or severe) should be explicitly written in the patient's record. If the patient's record does not specify and only says 'malaria' as diagnosis, select 'undetermined'.*

1. Severe Malaria
2. Uncomplicated Malaria
3. Undetermined

**Q6. How was the patient diagnosed?** *(Question relevant when Q5 is “Yes”)*

1. Clinically (by symptoms- no testing done)
2. By rapid diagnostic test (RDT)
3. By microscopy
4. By RDT and microscopy
5. Not Specified

**Q7. What medication was the patient given?**

1. Artemisinin-based combination therapy (ACT) tablet or dispersible
2. Artesunate injection
3. Artesunate injectable followed by oral ACT dose
4. Artemether injection
5. Artesunate suppository
6. Quinine tab
7. Quinine injection
8. Quinine injectable followed by oral ACT dose
9. Sulfadoxine-pyrimethamine (SP)
10. Other malaria treatment
11. Non-Malaria treatment
12. Not treated

**Q7-A. Please specify what other treatment was provided:** *(Question relevant when Q7 is “Other”)*

# Section 4: Facilities Management [Malaria only]

Welcome to EUV Survey -Section 4: Facilities Management.

*Instructions: Please read each prompt carefully and pay attention to any instructions or hints. If the prompt is a question, read the question exactly as it is written. If the prompt is an observation, be sure to note your observation as instructed.*

***Management and Training Questions***

*Instructions: The following questions will ask about the responsibilities of personnel at this facility and their training backgrounds.*

**Q3. How many people have stock management in their job responsibilities?**

*Must be a whole number. If you do not know how many people are responsible, enter 999 (Not Applicable)*

**Q4. How many of those people have been trained in stock management?** *(Question relevant when Q3 is greater than 0 and not 999)*

*Must be less than or equal to previous answer. If you do not know how many people were trained, enter 999 (Don't Know)*

*Training methods include on-the-job training (in-service training), workshop or conference (in-service training), workshop or conference (pre-service training), and university/college (pre-service training)*

**Q5. How many people have malaria case management in their job responsibilities?**

*Must be a whole number. If you do not know how many people are responsible, enter 999 (Not Applicable)*

**Q6. How many of those people have been trained in malaria case management?** *(Question relevant when Q5 is greater than 0 and not 999)*

*Must be less than or equal to previous answer. If you do not know how many people were trained, enter 999 (Don't Know)*

*Training methods include on-the-job training (in-service training), workshop or conference (in-service training), workshop or conference (pre-service training), and university/college (pre-service training)*

**Q7. How many people have intermittent preventive treatment in pregnancy (IPTp) in their job responsibilities?**

*Must be a whole number. If you do not know how many people are responsible, enter 999 (Not Applicable)*

**Q8. How many of those people have been trained in intermittent preventive treatment in pregnancy (IPTp)?** *(Question relevant when Q7 is greater than 0 and not 999)*

*Must be less than or equal to previous answer. If you do not know how many people were trained, enter 999 (Don't Know)*

*Training methods include on-the-job training (in-service training), workshop or conference (in-service training), workshop or conference (pre-service training), and university/college (pre-service training)*

**Q9. How many people have administering rapid diagnostic tests (RDTs) for malaria in their job responsibilities?**

*Must be a whole number. If you do not know how many people are responsible, enter 999 (Not Applicable)*

**Q10. How many of those people have been trained in administering rapid diagnostic tests (RDTs) for malaria?** *(Question relevant when Q9 is greater than 0 and not 999)*

*Must be less than or equal to previous answer. If you do not know how many people were trained, enter 999 (Don't Know)*

*Training methods include on-the-job training (in-service training), workshop or conference (in-service training), workshop or conference (pre-service training), and university/college (pre-service training)*

**Q11. Was a supply chain supervisory visit conducted in the past 6 months?**

1. Yes
2. No

**Q11-A. Who conducted the supervisory visit?** *(Question relevant when Q11 is “Yes”)*

1. Host country
2. Implementing partner (on behalf of the government)
3. Host country plus implementing partner (joint supervision)
4. Other

# Section 5: COVID-19 Continuity of Care

Welcome to EUV Survey -Section 5: COVID-19 Continuity of Care.

*Instructions: In this final section, we have a short set of questions that assess the impact of Covid-19 on continuity of care in health facilities. Please answer the following questions about the availability of PPE, practices and training for health care workers, and any service or reporting disruptions.*

***PPE Availability (Storeroom)***

*Instructions: Please answer the first set of questions while IN THE STOREROOM or storage area.* *The following question will ask whether you have PPE available.*

**Q1. In the storeroom or in a storage area, are the following PPE supplies currently available?**

*Please do not consider PPE that is currently being used by staff. Answer only as to whether additional PPE resources are available in storage area*

1. Medical face masks (e.g., surgical masks, N95, K95)
   1. Yes
   2. No
2. Face shields
   1. Yes
   2. No
3. Non-medical face coverings (e.g., cotton masks)
   1. Yes
   2. No
4. Gowns
   1. Yes
   2. No
5. Gloves
   1. Yes
   2. No
6. Alcohol-based hand sanitizer
   1. Yes
   2. No

***Health Workers***

*Instructions: Please answer the remaining questions via a KEY INFORMANT INTERVIEW with the person in-charge.* *The following questions ask about the practices and training of clinical and facility staff.*

**Q2. On a typical day, how many of the clinical staff that provide case management use medical masks (e.g., surgical masks, N95, K95) while seeing patients?**

1. All
2. Some
3. None

**Q3. On a typical day, how many of the clinical staff that provide case management use non-medical masks (e.g., cotton masks) while seeing patients?**

1. All
2. Some
3. None

**Q4. On a typical day, how many of the clinical staff that provide case management use gloves while seeing patients?**

1. All
2. Some
3. None

**Q5. How many staff at this facility have been trained in infection prevention and control?**

*Please note that this last question concerns the entire staff at the facility, not just the case management staff.*

***Hand Washing***

**Q6. Does this facility have one or more places available for staff to wash hands?**

1. Yes
2. No

**Q7. Does the hand washing station(s) have water available?**

*(Question relevant when Q6 is “Yes”)* *Note: Verify that water is available today, the day of visit.*

1. Yes
2. No

**Q8. Does the hand washing station(s) have soap available?**

*(Question relevant when Q6 is “Yes”)* *Note: Verify that soap is available today, the day of visit.*

1. Yes
2. No

**Q9. What is the primary means by which most clinical staff sanitize their hands between patients?**

1. Wash hands with soap and water
2. Use hand sanitizer
3. Change gloves between patient visits
4. None of the above (insufficient resources to sanitize hands between patients)

***Disruptions to Continuity of Care***

**Q10. Do you think that the clinical services at your facility have been disrupted by COVID-19?**

1. Yes
2. No

**Q11. To what extent have services been disrupted?** *(Question relevant when Q10 is “Yes”)*

1. 1 (Minimal disruption)
2. 2
3. 3
4. 4
5. 5 (Non-functioning)

**Q12. What do you think is responsible for the disruption in services?** *(Question relevant when Q10 is “Yes”)*

1. Lock down policies or enforcement prevents clients from accessing services
   1. Yes
   2. No
2. Reduced availability of transport for clients to access a facility
   1. Yes
   2. No
3. Messaging that people should not seek care unless they have more severe illness (e.g., guidance from officials, public service announcements)
   1. Yes
   2. No
4. Clients afraid to come to the health facility
   1. Yes
   2. No
5. Health workers afraid to come to work
   1. Yes
   2. No
6. Health workers choose not to come to work (e.g., strike)
   1. Yes
   2. No
7. Health workers not able to come to work due to illness
   1. Yes
   2. No
8. Lack of PPE (e.g., masks, gloves)
   1. Yes
   2. No
9. Increases in stockouts of medicines due to Covid-19
   1. Yes
   2. No

**Q13. Have you been able to report routine data as expected?**

1. Yes
2. Yes, but with more delay than usual
3. Yes, but only some reports not all
4. No

**Q14. Do you have community health workers affiliated with your facility?**

1. Yes
2. No

**Q13. Have the CHW been reporting data as expected?** *(Question relevant when Q14 is “Yes”)*

1. Yes
2. Yes, but with more delay than usual
3. Yes, but only some reports not all
4. No