PROCESS EVALUATION OF STI SERVICES OF DISTRICT AND TEACHING HOSPITALS UNDER NATIONAL AND PROVINCIAL AIDS CONTROL PROGRAMS

(Round-1)

Research Tools

For STIs Services

S.No.	Description	Codes
01	Province:	
02.	City:	
03.	Name of NGO/Firm:	
04.	When services were started; give month and year:	
05.	Write beneficiary high-risk group served (FSW, MSM, IDU, Jail inmate):	
06.	Name of Field Researcher:	
07.	Date of Interview:	

SoSec Consulting Services Islamabad

A. Format to Review Quality and Consistency of STI Clinic Services

(Note: If there is more than one clinic, randomly select one clinic for detailed review)

No.	QUE	STIONS	SKIP TO				
A01	Name of Doctor Incharge:						
A02	Name of counsellor or official providing counse	lling services:					
A03	Total number of patients visits during April – June, 2005: New Cases Old Cases						
A04	Total number of persons diagnosed and treated syndromic approach, during quarter April – Jun report or the outpatient register): New Cases Old Cases						
A05	Tot al number of patients counselled in the clini (check from the quarterly report or the counselli						
A06	What are the (five) important messages the cou during counselling session for prevention again relevant box).						
	1. Use of condom with sex partners	2. Use of screened blood for transfus	sion				
	3. Person suffering from STI is more liable to get HIV infection	4. Use of sterile syringe for all injection	ons				
	5. Use of lubricants for anal sex	6. Increased risk of HIV infection thro with injecting drug users	ough sex				
	6. Treatment from a qualified person if there are STI symptoms	7.					
A07	If there is a patient in the clinic, observe counse quality of counselling:	elling technique and comment on the					
A08	Do you refer suspected HIV/AIDS persons for \	/CT services					
	Yes						
	No						
	If Yes, Where						

No.	QUESTIONS		SKIP TO
A09	Is diagnosis written on the outpatient register based on syndromic approach i.e. common symptoms (verify from the outpatient register)? Yes Some time No	1 2 3	
A10	Is age of the patient written on the outpatient register (verify from the outpatient register)? Yes Some time No	1 2 3	
A11	Is profession of the patient written on the outpatient register (verify from the outpatient register)? Yes Some time No	1 2 3	
A12	Is follow-up advice written on the outpatient register and or outpatient prescription (verify from the outpatient register or prescription)? Yes Some time No	1 2 3	
A13	Are monthly, quarterly and annual consolidated reports of STI patients prepared? Yes No	1 2	A19
A14	Obtain copy of the last month or quarterly report, and <u>comment</u> if it meets the needs of the contract related to STI services (see instructions):		
A15	Are monthly or quarterly consolidated reports analysed? Not analysed Informally analysed Formally analysed	$\begin{vmatrix} 1 \\ 2 \\ 3 \end{vmatrix}$	A19
A16	Get copy of last month or quarter report and <u>comment</u> on the quality of analysis and its recommendations:		

No.	QUESTIONS		SKIP TO
A17	Is analysis of monthly, quarterly or annual consolidated reports used for procurement of drugs?		
	Yes	1	
	No	2 →	A19
A18	Link with stock-outs of drugs and <u>comment</u> :		
A19	Is record of laboratory tests maintained in the clinic?		
	Yes	1	
	No	2	Section-B
A20	Confirm from the lab. tests register in the clinic and comment:		
A21	Is record of laboratory tests reviewed and analysed quarterly?		
	Not analysed	1	
	Informally analysed	2	Section-B
	Formally analysed	3	
A22	Get copy of last quarter report of laboratory tests, check quality of review and its recommendations and comment:		
Note:	1. Randomly check any five consecutive days record of STI outpatients of last month to find answer to questions 9-12.		
	2. Check lab. register entries of last month to get answer to question 19.		
	3. Confirm response to questions 13, 15 and 21 from the last month or quarter report. If case reporting and analysis is done on annual basis, confirm responses from the annual report		

	Num	ber of D	ays the	drug w	as out o	of stock	in the N	lonth (C	heck Ja	anuary t	o June :	2005)
	Jan	Feb	Mar	Apr	Мау	June	July	Aug	Sept	Oct	Nov	Dec
Name of Drug												
Tetracycline Capsule												
Doxycycline Capsule												
Amoxycillin capsule												
Erythromycin tablet												
Metronidazole tablet												
Clotrimazole or Nystatin vaginal Pessary												
Ciprofloxacin capsule/table												
Probenecid												
Benzathine penicillin Injection												
Ceftriaxone or Kanamycin Injection												

Note: Fill stock-out of drugs for the months January –June, 2005

C. Essential supplies related to STIs in the Hospital Clinic

Availability		
Name of Equipment and Supplies	Yes	No
Vaginal speculum		
Gloves		
Condom		
Torch/lamp		
Hand lens		
Examination Bed/couch		
Curtain		
Bed sheet		
Disposable syringe		
Needle cutter		
Soap		
Cotton		
Waste disposal containers		
Education material for clients		

Please look for these items at the time of visit to the clinic

D. Privacy for the Patients examination in the STI Clinic of the Hospital

No.	QUESTIONS		
D01	Is there a patient examination room/place where access of persons other than patient and service provider can be restricted?		
	Yes	1	
	No	2	Section-E
D02	Is patient-provider dialogue in moderate tone is heard outside the examination room/place (watch if the doctor is examining a patient)?		
	Yes	1	
	No	2	

E. Format for Discussion with Doctors Working in the STI Clinic

No.		QUESTIONS				
E01	Since how long the doctor is working in the clir	ince how long the doctor is working in the clinic:				
	Number of months:					
E02	When did you receive training in the managem syndromic approach?	ent of STI services using				
E03	How long was the training course?					
	Number of days:					
E04	Do you have a copy of STIs management proto on syndromic approach for consultation? Yes No		d 1 2			
E05	What are the (10) common STI diseases in y	your view?	<u>(Please do not j</u>	prompt)		
	01. Gonorrhoea	02. Chalamydia				
	03. Syphilis	04. Chancroid				
	05. AIDS	06. Hepatitis B virus inf	06. Hepatitis B virus infection			
	07. Genital Warts (HPV infection)	08. Genital Herpes (Hu infection)	08. Genital Herpes (Human Herpes virus infection)			
	09. Trichomoniasis	10. Candidiasis				
	11.Ophthalmia Neonatorum	12. Others (Bacterial Vaginosis)				
E06	What are (five) common complications of S	Tls in your view?	<u>(Please do not</u>	prompt)		
	01. Ectopic pregnancy	02. Spontaneous abort	ion			
	03. Stillbirth	04. Low birth weight ba	ıby			
	05. Neonatal conjunctivitis and pneumonia	06. Congenital syphilis				
	07. Infertility	08. Urethral Stricture				
	09. Cancer cervix and prostate	10.				
E07	Who are (five) common high-risk groups in	(Please do not	prompt)			
	01. FSWs (female sex workers)	02. MSM (Men having	sex with men)			
	03. IDUs(Injecting drug users)	04. Hijras				
	05. Clients/partners of sex workers	06. People with STIs				
	07. Long distance truckers	08. Prisoners				
	09. Migrant worker	10. Uniform personnel				

(General information to be collected from the doctors)

No.		QUESTIONS	
E08	What are (five) common STI syndromes in y	our view?	(Please do not prompt)
	01. Urethral discharge	02. Vaginal discharge	
	03. Genital ulcers	04. Scrotal swelling wi	thout an injury
	05. Pelvic inflammatory disease	06. Neonatal conjuncti	ivitis
	07. Inguinal Bubo	08	_
E09	What are the (five) common messages you	give to the STI patients	<u>(Please do not prompt)</u>
	01. Repeat instructions for medication to ensure they have been understood	02. Complete treatmen decrease or clear.	nt even if symptoms
	03. Bring your contact (partner) for treatment – might have been infected	04. Return if symptom	s persist
	05. Avoid sex until cured or use condom	06. STIs generally spi	read through sex
	07. Use condom with sex partners	08. Risk of acquiring H with high risk population partners	
	09. Provide leaflet on STIs	10.	
E10	What are (10)common drugs you prescribe		· · · · · · · · · · · · · · · · · · ·
	01. Tetracycline capsule	02. Metronidazole tabl	et
	03. Doxycycline capsule	04. Clotrimazole or Ny Pessary	vstatin vaginal
	05. Benzathine penicillin Injection	06. Amoxycillin capsul	le
	07. Ciprofloxacin capsule/table	08. Ceftriaxone	
	09. Erythromycin tablet	10. Kanamycin Injectio	on
	11. Crystalline Penicillin G.	12. Acyclovir	
E11	In Which (five) situations you would consid	er hospitalisation of STI patie	ent? (Please do not prompt)
	01. Diagnosis is uncertain	02. Suspected pelvic a	abscess
	03. Pregnancy	04. Surgical emergence or ectopic pregnancy	cies like appendicitis
	05. When clinical follow-up for 72-hours can't be ensured	06. Severe illness prev	vents outpatient visit
	07	08	_
E12	In your opinion, what are the (three) advant management approach?	ages and (three) disadvantag	es of syndromic (Please do not prompt)
	Advantages	<u>Disadvantages</u>	
	01. Simple, in-expensive, rapid and can be implemented on a large scale	01. Low sensitivity esp	pecially in women
	02. Requires minimum training	02. Requires more dru	ıgs
	03. Standardized case management	03. Over treatment	
	04. Simplifies reporting		

No.		QUES	TIONS	
	05. Easy monitoring and supervision			
	06. Cost effective			
E13	Discuss with the doctor the given case hist mentioned questions.	ory and	d write the responses given to the under-	
	A 30-year old healthy female stenographer is s sex partner. On examination, she has few sore			only
	What is the most likely diagnosis in your opinion?			
	What are the appropriate management steps in your view?			
	How would you discuss with her husband?			
E14	Discuss with the doctor the given case hist mentioned questions.	ory and	d write the responses given to the under-	
	A woman comes to the clinic and complains of should be FALSE in your opinion?	lowera	abdominal pain. Which of the following stateme	nt
	PID should be suspected?			
	She is likely to have trichomonas infection?			
	Ectopic pregnancy should be suspected, especially if her periods are late?			
	If she has rebound tenderness on abdominal examination she should be referred to a surgeon?			
	She is likely to have a chlamydia infection?			

Chancroid, syphilis; Benzathine Penicillin 2.4 million in single dose plus Erythromycin 500 mg three times daily for 7 days; educate for compliance of treatment; provide condom; partner notification; return after 7 days.

F. Assessing Infectious Waste Management in STI Outpatient of Hospital

No.	QUESTIONS		
F01	Are containers used for collecting separately the three wastes namely kitchen waste, hazardous waste and infectious waste Yes	1	
	No	2	
F02	Are containers of standardized colours? a. Kitchen/general waste – Black colour bins/bags:		
	Yes No	1 2	
	b. Hazardous waste (needless, syringes, blades, scissors) Yes No	1 2	
	c. Infectious or potentially infectious waste (blood, body fluids, dressings, bandages, etc – put in red bags		
	Yes No	1	
F03	Method of disinfect ion of hazardous and infectious waste? None Disinfection with Sodium Hypo chlorite solution Autoclave Microwave Incineration	1 2 3 4 5	
F04	Method of disinfect ion of linen? Yes	1	
F05	No Method of final disposal Municipal waste Landfill	2 1 2	
F06	Ask if SOP is available for waste management and its disposal? Yes No If yes, get a copy and comment linking it with above points	1 2	

Field researcher to ask these questions from relevant hospital management staff.

G. Questionnaire for Exit Interview of Patients who Received STI Services from the Hospital Clinic

No.	QUESTIONS	
G01	What is your opinion about staff attitude at the time of visit to health facility? Do you think the staff was: Passionate Casual Non responsive	1 2 3
G02	Wait time in the queue: Less than 30 minutes Between 30 and 60 minutes More than 60 minutes	1 2 3
G03	Did you receive all the prescribed drugs? All Some None	1 2 3
G04	Did you get the instructions from the doctor, how to take the medicines? Yes No	1 2
G05	Were the given instructions clear to you for administering the medicines? Yes No	1 2
G06	Did you get instructions from the doctor for repeat visit, if not cured? Yes No	1 2
G07	Did you get any instructions from the doctor about treatment of your partner? Yes No	1 2
G08	Were you given condom free of charge along with medicines? Yes No	1 2
G09	Were you briefed how STIs including HIV spread? Yes No	1 2
G10	How do you rate the overall services provided? Highly satisfied Satisfied Partially satisfied Not satisfied	1 2 3 4

Note: Undertake exit interview of three patients

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