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Appendixes
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Appendix A: Sample COPE Forms

Sample Self-Assessment Guide

Clients' Right to Privacy and Confidentiality

Clients have a right to privacy and confidentiality during delivery of services. This includes privacy and confidentiality during counseling, physical examinations, and clinical procedures, as well as in the staff's handling of clients' medical records and other personal information.

The group working on this guide should include staff who provide reproductive health information or services or who are responsible for record keeping (including receptionists, gatekeepers, and guards).

If any of the following questions reveal a problem at your facility, or if you think any of the questions need to be discussed further, write your comments on a flipchart in the following format:

Problem	Cause(s)	Recommendation	By Whom	By When

If you are aware of a problem at your facility that is not addressed in this guide, please include it.

1. Do providers discuss client care with other staff members only when necessary?
2. Do staff respect clients' wishes about whether to provide information to family members, including spouses and all who accompany them?
3. Are client records kept in a secure space, with access strictly limited to authorized staff? Do staff make sure that clients do not have access to others' records?
4. Does the facility have private space so that counseling sessions, physical examinations, and procedures cannot be observed or overheard by others?
5. Do staff take measures to ensure that counseling sessions and examinations are not interrupted?
6. When a third party is present during a counseling session, an examination, or a procedure, do staff explain the person's presence and ask the client's permission?
7. When discussing a client's care with other staff members, do service providers respect confidentiality by speaking in a private space, so the conversation cannot be overheard?
8. Are all laboratory test results kept confidential?
9. Are all services offered in a manner that is respectful, confidential, and private?

(continued)

Sample Self-Assessment Guide (continued)

Other Issues That You Think Are Important:

10. _____

11. _____

12. _____

Sample Client Record-Review Checklist

Note: This checklist can be used to review the records for clients of any reproductive health services. For surgical procedures, please also use the Surgical Record-Review Checklist.

CLIENT RECORD-REVIEW CHECKLIST											
Site: <u>Sunshine Clinic</u>				Date: <u>July 1, 2003</u>							
Reviewer: <u>Linda Karisa</u>											
(Select 10 records at random)											
Checklist Item	1	2	3	4	5	6	7	8	9	10	Total
1. Client identification information is recorded.	x	x	x	x		x	x	x		x	8
2. Date of visit is recorded.	x	x	x	x	x	x	x	x	x	x	10
3. Client's reason for visit is recorded.	x		x	x	x	x	x	x			7
4. Client's medical history is recorded.			x	x	x	x					4
5. Client's reproductive health history is recorded.	x	x		x	x		x	x		x	7
6. General physical examination was conducted.		x	x		x	x			x		5
7. Client's signs and symptoms are recorded.		x	x	x	x						4
8. Any prescriptions or treatment are recorded.	x	x	x			x	x	x			6
9. Follow-up plans are recorded.	x		x		x	x	x		x		6
10. Staff signatures are present.				x							1
11. Entries are legible.	x	x		x		x	x				5
<p>Comments on records reviewed:</p> <hr/> <hr/> <hr/> <hr/>											

Sample Client-Interview Guide for Reproductive Health Services

Greet the client and introduce yourself:

My name is _____, and I work here. We are trying to improve services for clients, and we would like your honest opinion of how well we are doing and what we need to improve—both the good things and the bad things. This interview is private and confidential. You are free not to answer any questions you do not want to, and if you do not want to take part in the interview at all, you do not have to. Your name will not be used. This will take about 10 minutes. Your ideas are important to us—may I ask you a few questions?

SITE: Sunshine Clinic DATE: September 14, 2003

NAME OF INTERVIEWER: Flora Moon

Note to interviewer: Ask the questions printed in boldface type. Check (✓) responses that the client gives. Write additional notes in the spaces provided.

1. Is this your first visit to this facility, or is it a follow-up visit?

First visit Follow-up visit.....

2. Is the client female or male?

Female..... Male.....

3. What type of services did you come for today?

Check responses given. (Do not read the responses to the client.)

- a. Antenatal care.....
- b. Labor and delivery.....
- c. Postpartum and newborn care.....
- d. Family planning.....
- e. Postabortion care.....
- f. Reproductive tract infections (RTIs), including sexually transmitted infections (STIs).....
- g. HIV.....
- h. Gynecological services.....
- i. Men's reproductive health services.....
- j. Infertility.....
- k. Other: _____

4. Did you get the services you came for?

Yes.... No....

If no: Why not? What happened?

(continued)

Sample Client-Interview Guide for Reproductive Health Services (continued)

5. How long did you have to wait before you saw a doctor or nurse today?

70 minutes

6. What did you do while you were waiting?

Read some pamphlets, took care of my 3-year-old.

7. Were you given information today?

Yes... No...

If yes: What type of information were you given? (Check all that the client mentions.)

- a. Antenatal care.....
- b. Labor and delivery.....
- c. Postpartum and newborn care.....
- d. Family planning.....
- e. Postabortion care.....
- f. RTIs, including STIs
- g. HIV.....
- h. Gynecological disorders.....
- i. Disorders of the male reproductive system.....
- j. Infertility.....
- k. Harmful practices.....
- l. Other: Nutrition

8. Do you feel that the staff explained information clearly?

Yes... No...

9. Were you able to spend enough time with the service provider to discuss your needs?

Yes... No...

10. Are there any areas of the clinic that you think need improvement, to make them cleaner, more comfortable, or more private?

Yes... No...

If yes: Please tell me which ones and why.

Waiting room was crowded, no place to sit.

(continued)

Sample Client-Interview Guide for Reproductive Health Services (continued)

11. Were the staff respectful?

Yes... No...

12. Could the service you received in any of the departments have been improved?

Yes... No...

If yes: What could have been better?

Make sure there is privacy during examinations.

13. Were you asked to pay for services you received today?

Yes... No...

14. Are the services in this clinic affordable to most people in this community?

Yes... No...

15. What have you heard from your family or friends or others in your community about the quality of services at this clinic?

In general, people think the services here are good.

Note to interviewer: If this is the client's first visit to the facility, skip to question 19. If he or she has been here before, continue below.

16. [For those who have been here before] When did you first come to this clinic?

Last year

17. [For those who have been here before] Since you first started coming here, has the quality of services improved, stayed the same, or gotten worse?

- a. Improved
- b. Stayed the same
- c. Gotten worse

18. [For those who have been here before] What has changed to make things:

a. Better? Do not know

b. Worse? Do not know

(continued)

Sample Client-Interview Guide for Reproductive Health Services (continued)

19. What do you like most about this clinic? Why?

The nurses are caring.

20. What do you like least about this clinic? Why?

The crowded waiting room.

21. Is there anything you think could be done to improve services here?

Provide water for the women in the maternity ward.

I would like to answer any questions that you have before you leave. Is there anything that concerns you, or anything that I can help you with?

Thank you for your help and ideas!

Sample Client Register Form

CLIENT REGISTER FORM

Client number: 05 Date: Sept. 10, 2004 Time client arrived at facility: 8:15 a.m.

Sex: Male Female

Primary reason for visit (see Service Type codes): A

Secondary reason for visit (see Service Type codes): D

Visit timing: First visit for primary service Follow-up visit for primary service

	Staff member's initials	Time service started	Time service completed	Contact time (in minutes)
First contact	<u>GH</u>	<u>9:23</u>	<u>9:35</u>	<u>12</u>
Second contact	<u>LM</u>	<u>9:45</u>	<u>9:50</u>	<u>5</u>
Third contact	_____	_____	_____	_____
Fourth contact	_____	_____	_____	_____
Fifth contact	_____	_____	_____	_____
Sixth contact	_____	_____	_____	_____
Comments:	_____			

Codes: Service Type

A—Antenatal care

B—Postpartum and newborn care

C—Family planning

D—Reproductive tract infections (RTIs), including sexually transmitted infections (STIs)

E—HIV

F—Gynecological services

G—Men's reproductive health services

H—Infertility

I—Other (if chosen, please describe)

Sample Client-Flow Chart

CLIENT-FLOW CHART

(Use as many pages as necessary)

Page 1 of 2

Site: Sunshine Clinic

Date: September 10, 2004

Session: Morning

Client number	Time		Total time (in minutes)	Contact time (in minutes)	Waiting time (in minutes)	Service type (primary)	Service type (secondary)	Visit timing	Comments
	In	Out							
01	8:00	8:50	50	40	10	B	C	2	
02	8:10	9:20	70	11	59	C	-	2	
03	8:15	9:23	68	14	54	C	-	2	
04	8:15	9:25	70	6	64	G	-	2	
05	8:15	9:50	95	17	78	A	D	2	
06	8:15	11:00	165	57	108	F	D	1	
07	8:20	1:30	310	74	236	A	D	2	
08	8:20	11:00	160	17	143	F	-	1	
09	8:20	10:22	122	8	114	C	-	2	
10	8:28	12:55	267	193	74	E	D	2	
11	8:30	9:34	64	8	56	B	-	2	
12	8:30	9:40	70	7	63	B	-	2	
13	8:30	10:08	98	24	74	C	-	2	
14	8:30	10:15	105	6	99	C	-	2	
15	9:00	1:20	260	52	208	B	D	2	
16	9:00	2:10	310	111	199	A	I (ob.emer.)	1	Adm.fem.ward
17	9:00	10:05	65	16	49	B	-	2	
18	9:00	10:05	65	6	59	C	-	2	
19	9:00	10:30	90	6	84	C	-	2	
20	9:30	10:11	41	6	35	C	-	2	
Total			2,545	679	1,866				

Codes: Service Type

- A—Antenatal care
- B—Postpartum and newborn care
- C—Family planning
- D—Reproductive tract infections (RTIs), including sexually transmitted infections (STIs)
- E—HIV
- F—Gynecological services

- G—Men’s reproductive health services
- H—Infertility
- I—Other (please describe)

Codes: Visit Timing

- 1—First visit
- 2—Follow-up visit

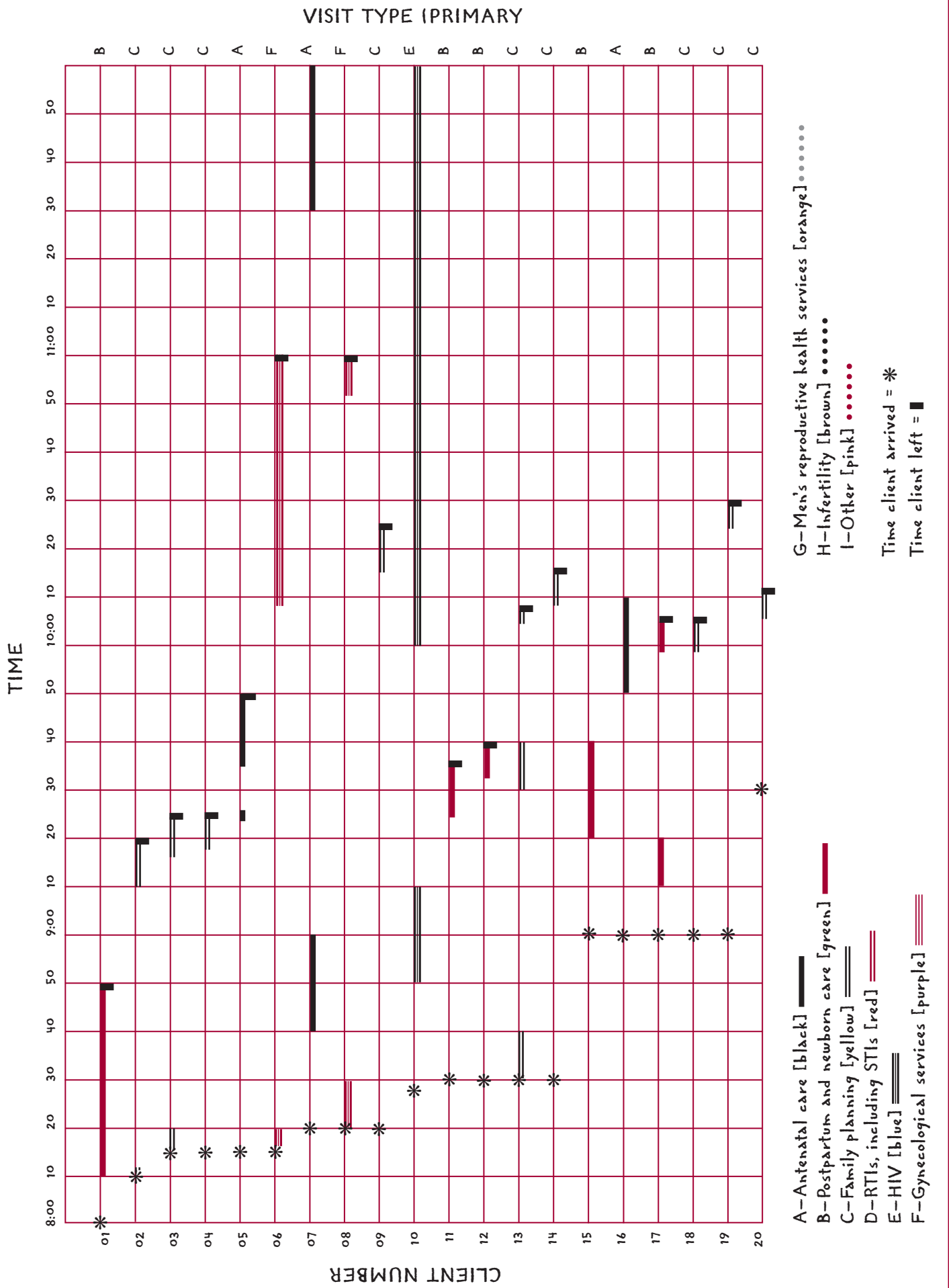
Sample Client-Flow Chart Summary

CLIENT-FLOW CHART SUMMARY				
Site: <u>Sunskine Clinic</u> Date: <u>September 10, 2004</u> Session: <u>8:00 a.m. to 2:30 p.m.</u>				
Page	Total number of clients	Total time (in minutes)	Total contact time (in minutes)	Percentage of client time spent in contact with staff
Page 1	20	2,545	679	27%
Page 2	10	1,300	325	25%
Page 3				
Totals	30	3,845	1,004	26%

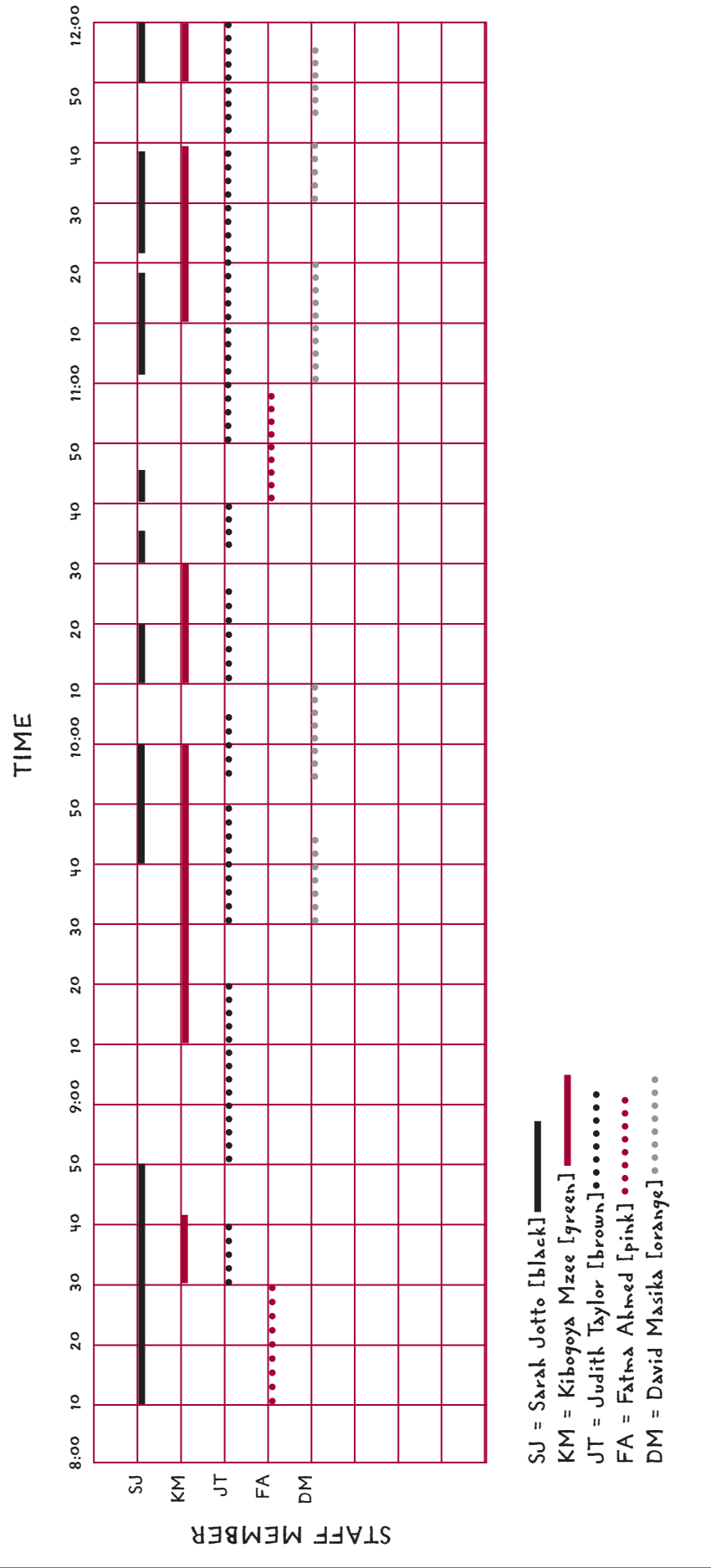
Average number of minutes per client (rounded to a whole number): 128
(divide "Total time" by "Total number of clients")

Average contact minutes (rounded to a whole number): 33
(divide "Total contact time" by "Total number of clients")

Sample Client-Flow Graph



Sample Staff-Utilization Graph



Sample Completed Action Plans

Action Plan showing problems identified through use of client interviews

Problem	Cause(s)	Recommendation	By Whom	By When
Long waiting time for antenatal clients	<ul style="list-style-type: none"> ■ All clients arrive at the same time 	<ul style="list-style-type: none"> ■ Create appointment system 	F. Solomon	August 1, 2003
	<ul style="list-style-type: none"> ■ No afternoon services 	<ul style="list-style-type: none"> ■ Extend service hours to 4:30 p.m. 	F. Solomon	August 30, 2003
Lack of privacy during examination of antenatal clients	<ul style="list-style-type: none"> ■ No separate room or curtain 	<ul style="list-style-type: none"> ■ Sew and hang three curtains 	G. Njeru (cleaner)	July 30, 2003
Not enough seats in waiting area in MCH clinic	<ul style="list-style-type: none"> ■ Benches are broken 	<ul style="list-style-type: none"> ■ Repair benches 	C. Greyson (maintenance)	July 28, 2003
	<ul style="list-style-type: none"> ■ No chairs 	<ul style="list-style-type: none"> ■ Get two chairs from storage closet 		July 10, 2003
No food for patients in maternity ward	<ul style="list-style-type: none"> ■ No money to pay for food 	<ul style="list-style-type: none"> ■ Ask local church to contribute food for maternity ward 	E. Kamala (ward attendant)	July 20, 2003

(continued)

Sample Completed Action Plans (continued)

Action Plan showing problems identified through use of record review

Problem	Cause(s)	Recommendation	By Whom	By When
Many clients' medical histories are not completed on client record forms.	<ul style="list-style-type: none"> ■ Staff do not ask their clients for this information. ■ Staff are not aware of what information they need to ask clients for. ■ Staff have not been fully trained. 	<ul style="list-style-type: none"> ■ Update all reproductive health clinical and counseling staff on how to take a complete medical history. 	S. Diallo	July 21, 2003

(continued)

Sample Completed Action Plans (continued)

Action Plan showing problems identified through use of Self-Assessment Guides

Problem	Cause(s)	Recommendation	By Whom	By When
A chronic shortage of expendable supplies in the maternity ward has led to increased risk of infection for staff and clients.	<ul style="list-style-type: none"> ■ Inadequate budget for hospital supplies. 	<ul style="list-style-type: none"> ■ Ask antenatal clients to purchase maternity supplies. 	L. Karisa (clinic nurse)	July 1, 2003
	<ul style="list-style-type: none"> ■ Failure to charge clients any fees for services or supplies. 	<ul style="list-style-type: none"> ■ Ask the pharmacy to prepackage maternity supplies for clients (bottle of chlorine, pair of gloves, syringes, sanitary pads, etc.). 	Dr. Ware (clinic director)	July 1, 2003
		<ul style="list-style-type: none"> ■ Retain any unused supplies for use by other clients who cannot afford to buy them. 	J. Samanda (ward nurse)	July 1, 2003
Pregnant clients testing positive for HIV do not return for follow-up services.	<ul style="list-style-type: none"> ■ Staff are not trained to discuss the range of services available. 	<ul style="list-style-type: none"> ■ Conduct whole-site training on clinical, counseling, and support services available to prevent mother-to-child transmission of HIV and to support HIV-positive clients. 	L. Karisa (clinic nurse)	July 1, 2003
	<ul style="list-style-type: none"> ■ Clients feel unwelcome and stigmatized by staff. 	<ul style="list-style-type: none"> ■ Conduct HIV and stigma awareness/sensitivity training for all staff. 	J. Samanda (nurse supervisor)	July 30, 2003
	<ul style="list-style-type: none"> ■ HIV-positive clients are afraid that others will find out their status and harm them. 	<ul style="list-style-type: none"> ■ Review/revise protocols on client confidentiality and orient all staff. ■ Provide counseling training for providers on how to assist clients in making decisions about disclosure. 	Dr. Ware (clinic director) R. Minja (HIV counselor)	August 30, 2003 September 5, 2003

Sample COPE Follow-Up Sheet

Problem	Cause(s)	Recommendation	Status	Comments
Child health services are not discussed in any organized way, so supervisors and staff are not updated on these services.	No child health committee exists.	Form a child health services planning committee.	Solved	Meets once a month.
There are no heavy-duty gloves for the cleaning staff, so these staff are not protected against infections.	Gloves were not ordered.	Purchase with petty cash.	Solved	Question now is how to maintain supply.
Some clients are not offered reproductive health services after being treated for abortion complications, resulting in untreated STIs and unintended pregnancies.	Some staff in the gynecology ward are not trained in counseling postabortion clients.	Train all providers in the gynecology ward in reproductive health counseling.	Attempted	Is currently in the planning stage.

(continued)

Sample COPE Follow-Up Sheet (continued)

Problem	Cause(s)	Recommendation	Status	Comments
Counseling is not always provided to clients tested for HIV.	<p>1) There is no policy on voluntary counseling and training (VCT).</p> <p>2) Training in counseling skills is inadequate.</p>	<p>1) Develop VCT protocols.</p> <p>2) Train key staff in counseling clients before and after their HIV test.</p>	In progress	<p>Work group drafted policies and protocols; these are currently under review.</p> <p>Five staff registered for the next district-level VCT training.</p>
The facility does not provide ultrasound services, so clients who need this service have to travel far to another facility.	The facility lacks ultrasound equipment.	Order equipment from headquarters.	Unsolved	There are no funds with which to purchase equipment. A meeting is scheduled to discuss funding alternatives.