Service Provision Assessment (SPA) Surveys

Overview of Methodology, Key MNH Indicators and Service Readiness Indicators

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Outline of presentation

• Overview of SPA methodology
• Key MNH Indicators
• Service Readiness Indicators, examples from Kenya
• Any association between readiness and Quality of services?
What are SPA Surveys?

- Sample survey of formal sector health facilities
- Provide information about *the overall service environment* and *functioning of components of the health system*
- A mix of questionnaire survey and observations – verification of existence/validity/functionality of equipment and supplies
- Objective: to provide a "snap-shot" of the service environment, resources, and practices used to provide health services in formal sector health facilities
Why a SPA Survey?

• A lot of information already exists
  – Population-based information on coverage and outcomes
  – HMIS reports, Program reports, other reports, eg., on training, equipment, supplies, pharmaceuticals

• However, lack of information on
  – How inputs come together at the service site
  – Validation of self-generated reports
  – Proxy indicators on quality of care/services

• Population-based indicators of quality and availability of services provide late information
  – They change months/years after an intervention
  – When problems exits, usual questions asked are:
What questions can a SPA survey answer?

1. **What is the overall availability of different client services?**
   - E.g., what proportion of facilities offer ANC services in country X? Delivery services?

2. **To what extent are facilities prepared to provide these services?**
   - What infrastructure, resources and support systems are available, e.g., regular electricity and water supply, trained staff, items for infection control, service guidelines, etc.

3. **To what extent does the service delivery process follow generally accepted standards of care?**
   - Does the process followed in service delivery meet standards of acceptable quality and content?

4. **Are clients and service providers satisfied with the service delivery environment?**
   - Clients’ perception of service provided and providers’ satisfaction with the work environment
What is the content SPA surveys?

**Services**
- Maternal & Child Health
  - ANC, Delivery, Newborn care
  - Vaccination services
  - Curative care for children under 5
  - Growth monitoring for children
  - Family planning (FP) services
- HIV / AIDS
  - CT, ART, PMTCT
- Tuberculosis (TB), Malaria, STIs
- Non-Communicable Diseases

**Resources**
- Laboratory Diagnostics
- Equipment
- Pharmaceuticals

**Systems**
- Guidelines & protocols
- Staff training and supervision
- HMIS

**Infrastructure**
- Water
- Electricity
- Client comfort amenities
  - Latrine, waiting area
- Items for infection control
- Infection control practices
- Privacy
Standard SPA Questionnaires

I. Inventory questionnaire

• General information: staffing levels, health care waste management, processing of equipment, methods of eliciting client opinion,
• Availability of services (child health services, FP, ANC, Delivery, HIV testing, STI, TB) and frequency (i.e., # of day/week service is offered)
• Detailed information pertaining to the service, if offered: equipment, guidelines
• Laboratory diagnostics services: availability of different tests, systems for external testing, QC
• Medicine and supplies

II. Health worker interview questionnaire

• Provider qualifications, services provided, training, continuous education
• Supervision
• Perception of the work environment

III. Observation protocols for direct observation of services

• Observation of consultations of ANC, FP and sick child consultations
  • normal deliveries/management of delivery complications
• Checklists cover basic elements of service delivery

IV. Client exit interview questionnaire

• With clients who were observed receiving services to elicit their perception on consultation and service received
Developing SPA Tools and Sample

• Model questionnaire built on prior facility survey instruments
• Uses commonly accepted guidelines
  – IMCI, Safe Motherhood Initiatives, etc
• Questionnaires are adapted to country needs
• Sample of Facilities
  – Sample size varies: 400 – 700
  – Stratified by facility type and region
  – Include public and private sector facilities
  – Provide national- and regional-level indicators
• Sample of Health Providers, Observations, Client Exit Interviews
  – Convenient and purposive sample
Data collection

• Interviewers: Health workers (nurses, midwives, COs)

• 3-week training, including field practice

• Respondents for Inventory: facility in-charge, plus most knowledgeable person present day of survey for particular service

• Relevant items for providing services and supporting quality and must be observed in service area or immediately adjacent location

• Data collection: usually one day/facility

• Duration of field work: 12 – 16 weeks
Quality Control

- Computer-Assisted Personal Interviewing (CAPI) and Computer-Assisted Field Editing (CAFE)
- Field supervision by central office staff and field supervisors
- Field check tables generated to identify problem with data collection
- Often mobile phone communication for rapid problem solving and information sharing
Strengths and Limitations of SPA

Strengths:
• Provide a “snapshot” of functioning of health system
  – Objective, independent measurement of systems & performance using \textit{uniform} criteria
  – Areas of strength vs. weakness
• Comparisons across different service areas, facility types, regions within a country, across countries and regions

Limitations:
• Does not answer “why” questions, e.g., why equipment not functioning, supplies inexistent
Key MNH Indicators

Refer to document on indicators currently tracked
Service Readiness Indicators

What are they?
I. General Service Readiness

**Basic amenities**
- % of facilities with 7 items (power, improved water source, private room for client services, sanitation facilities, communication equipment, computer with internet, transport)

**Basic equipment**
- % facilities with 7 items (blood pressure machine and cuff with stethoscope, adult weighing scale, child weighing scale, infant weighing scale, thermometer, and light source)

**Standard precautions**
- % facilities with 13 items (sterilization equipment, safe disposal of sharps, safe disposal of infectious waste, appropriate storage of sharps waste (sharps box), appropriate storage of infectious waste (waste receptacle with plastic liner), running water and hand-washing soap or else alcohol-based hand rub, environmental disinfectant, latex gloves, guidelines, needles & syringes, medical masks, gowns, eye protection)

**Laboratory capacity**
- % facilities with 12 items (HIV (RDT or other), haemoglobin, malaria (RDT or smear), General microscopy, TB microscopy, blood glucose, syphilis RDT, urine pregnancy test, urine dipstick for urine glucose, urine dipstick for urine protein)

**Essential medicines:** % of facilities with 14 essential medicines available
II. Service-specific readiness

a) FP-MCH
   - FP, ANC, Delivery services, EmOC, curative child care, child immunization, growth monitoring

b) HIV/AIDS & TB
   - HIV CT, ART, HIV care & support, PMTCT, TB

c) Select General Services
   - Malaria, STI, Diabetes, Cardiovascular diseases, basic surgery

Specific Indicator domains for each of these categories include availability of:
- Service guidelines and trained staff
- Equipment
- Diagnostics
- Medicines and commodities
ANC Service Readiness

Examples from Kenya
Antenatal Care

Among facilities offering ANC services


Diagnostics

Medicines / Commodities
Any association between Readiness and Quality of services?

Examples from Kenya
2010 Kenya SPA survey

• 690 facilities surveyed (excluding VCT sites)

• 74% provide ANC services
  – 1,409 ANC observations (556 first visit, and 853 follow-up visit consultations)

• 30% provide normal deliveries
  – 626 deliveries observed
Percentage of observed 1st visit ANC clients who received indicated assessment or test, in facilities having necessary equipment, medicine or test capacity.

- BP: 99%
- Weight: 98%
- HB: 88%
- Urine test: 85%
- HIV test: 99%
- Iron/Folic Acid: 64%
- TT vaccination: 81%
- Malaria test: 95%
Percentage of observed deliveries where indicated item occurred, in facilities having necessary items or medicines

- Partograph used: 71%
- Hand Washing: 35%
- Prepare uterotonic: 87%
• Standard SPA instruments designed to collect all *Service Readiness Indicators*, plus more

THANK YOU