PATHFINDER

WLCR Program: HEALTH FACILITY ASSESSMENT

Emergency Preparedness and Climate Shock Resilience

Overview and Purpose

Pathfinder developed this health facility assessment (HFA) user guide and instrument to assess the baseline capacity and the gaps in availability and provision of quality services at public health facilities, as well as health facilities' (HF) readiness to respond and maintain essential services during climate change related shocks and stressors (e.g.: floods, heat waves, drought, food shortages). This assessment is targeted toward emergency preparedness and resilience of sexual and reproductive health care, as well as essential services required for maternal and newborn well-being.

The HFA tool is a user-friendly, adaptable reference that Pathfinder project staff and partners can use to assess the specific needs of project-supported HFs. Teams can leverage the findings of these practical assessments to develop action plans to improve facility readiness to provide quality services. Analysis of the HFA findings can inform project decision making and development of SMART (**s**pecific, measurable, **a**ttainable, **r**elevant, and **t**ime-bound) improvement plans. They will also serve as a reference point for monitoring and measuring improvements in quality and resilience during the project lifecycle.

Developed as a modular tool, this HFA collects information for assessment of:

a. **Geographic coverage and distribution of health facilities, providers, and services by type**
b. **Health facility infrastructure** – health facility timings, no. of OT(s), availability of equipment, IEC materials, and referral options; utilities
c. **Personnel coverage and training—**including capacity and systems for referrals and community outreach and mobilization.
d. **Emergency preparedness** – contingency plans, protocols, and mechanisms for rapid adaptation and re-distribution of services and personnel. This module also serves to assess readiness to deliver the minimum initial services package (MISP) for SRH
e. **Governance and management—**including mechanism, tools, and protocols for supervision, data quality assurance and monitoring, supply and commodity security, and clinical leadership.
f. Health communication and messaging

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INSTRUCTIONS

INSTRUCTIONS TO ENUMERATOR:
Introduce yourself to the facility manager and begin the discussion based on this questionnaire. The facility manager should be able to put you in touch with other staff or additional resources as needed. Complete the health facility assessment tool by observing services, reviewing necessary documents, talking with staff, and physically inspecting equipment, instruments, and supplies. Record your comments and other relevant information in the spaces provided. Unless otherwise specified, please circle only one response for each question.

CODES	QUESTIONS	RESPONSES
	Date of assessment (day/month/year):	
	Name of enumerator	
	Enumerator code	
	Title of the enumerator	
	Institution or organization of the enumerator	

Please use the following text to guide your introductory remarks to, and request for consent from the facility manager:

Hello. My name is [state your name] and I am working with [State the name of your organization]. My organization is conducting an assessment in public health facilities in collaboration with the Ministry of Health.

The purpose of this assessment is to determine the current capacity of health facilities to provide health services and to learn more about existing resources and remaining gaps.

Your facility was selected to participate in this assessment, and we would appreciate your participation. We expect to spend [X] hours in your facility conducting this assessment.

Taking part in this assessment is voluntary and the information you provide will be kept strictly confidential and none of your names will appear in any report. This information will be used only for program planning and implementation purposes with the aim of improving quality of health services and the performance of your facility. Feel free to request clarification of unclear issues during this assessment.

Choosing not to participate in this assessment will not involve any penalty and your participation will not result in a reward, but your information will provide us with an enormous opportunity to support your health facility to provide better health care services. You may also choose to withdraw from the assessment at any time during the interview without penalty to you or your facility. Do you have any questions?

May I begin the interview?	YES 1 NO 0
Get the consent signed by the HF point of contact	
INTERVIEW START TIME (use the 24 hour-clock system)	……. H .....min

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SECTION A1: FACILITY IDENTIFICATION AND DESIGNATIONS

CODES	QUESTIONS	RESPONSES
M1101	Health Facility (HF) Code Number	
M1102	Name of the health facility	
M1103	Address of the HF	
M1104	Region/province	1.Khyber Pakhtunkhwa
M1105	District/Health Zone	1. Charsadda
M1106	Type/level of HF	1. District head quarter (DHQ) 2. Tehsil/Taluka hospital (THQ) 3. Rural health center (RHC) 4. Government Dispensary (GD) 5. Maternal health center (MCH) 6. Basic health unit (BHU) 7. Yonani Shifa Khana
M1107	Managing authority of the HF	1. Department of Health-KP
M1108	Type of Services	1. Outpatient only 2. Inpatient 3. Day care only
M1109	Location of the HF	1. Urban 2. Peri urban 3. Rural 4. Slum 5. Other (specify).....
M1110	Number of union councils served by HF (List of union councils served with name)	
M1111	Total Population (estimated) served by the HF	
M1112	Estimated married women of reproductive age (MWRA):	
M1113	Name of the HF In-Charge/Manager	
M1114	Phone number of the HF or the manager	
M1115	Email of the HF or the manager	
M1100	**Summary of important observations**	

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SECTION A2: LIST OF HEALTH SERVICES AVAILABLE

*For the following section, select "Not Applicable" (NA) if HF being assessed is not expected to provide the service in question. For example, a health post is not intended to offer CEmONC services(*Comprehensive Emergency Obstetric and New born Care)*, so the answer would be NA.*

CODES	SERVICES	DETAILS OF SERVICES	RESPONSES
M1201 a	FP/CONTRACEPTION	Family planning: Oral Contraceptives (combination and progesterone only)	Yes 1 No 0 NA 77
M1201 b		Family planning: Condom	Yes 1 No 0 NA 77
M1202a		Family planning: Injectables (DMPA – IM)	Yes 1 No 0 NA 77
M1202b		Family planning: Injectables (DMPA – SC / Sayana Press)	Yes 1 No 0 NA 77
M1203		Family planning: IUD insertion	Yes 1 No 0 NA 77
M1204		Family planning: IUD removal	Yes 1 No 0 NA 77
M1205		Family planning: Implant insertion	Yes 1 No 0 NA 77
M1206		Family planning: Implant removal	Yes 1 No 0 NA 77
M1207		Family planning: Tubal ligation	Yes 1 No 0 NA 77
M1208		Family Planning: Vasectomy	Yes 1 No 0 NA 77
M1209		Family Planning: Immediate Postpartum LARC	Yes 1 No 0 NA 77
M1210		Emergency contraception pills	Yes 1 No 0 NA 77
M1211	Post-abortion Care (PAC)	PAC: Medical abortion	Yes 1 No 0 NA 77
M1212		PAC: Manual Vacuum Aspiration (MVA)	Yes 1 No 0 NA 77

M1213		PAC: Dilation and curettage (D&C) *(Enumerator prompt suggestion): "does this facility provide D&C services as and when medically indicated?"*	Yes 1 No 0 NA 77
M1214		PAC: Post Abortion Care (PAC) – FP	Yes 1 No 0 NA 77
M1215	HIV/STI	Syndromic management of sexually transmitted infections	Yes 1 No 0 NA 77
M1216		HIV testing and counselling	Yes 1 No 0 NA 77
M1217		HIV treatment	Yes 1 No 0 NA 77
M1218		Prevention of mother-to-child transmission of HIV	Yes 1 No 0 NA 77
M1219		Follow up for HIV care and support	Yes 1 No 0 NA 77
M1220	MNCH	Antenatal care	Yes 1 No 0 NA 77
M1221		Intrapartum care	Yes 1 No 0 NA 77
M1222		Gynecological care	Yes 1 No 0 NA 77
M1223		Newborn care	Yes 1 No 0 NA 77
M1224		Caesarean section	Yes 1 No 0 NA 77
M1225		Operative vaginal delivery	Yes 1 No 0 NA 77
M1226		Blood transfusion	Yes 1 No 0 NA 77
M1227		Obstetric Ultrasound	Yes 1 No 0 NA 77
M1228		Child preventative and curative care and Immunization	Yes 1 No 0 NA 77
M1229		Postnatal care	Yes 1 No 0 / NA 77

M1230	GBV	Immediate psychosocial support	Yes 1 No 0 NA 77
M1231		Referral to other services (legal, ongoing psychosocial, etc.)	Yes 1 No 0 NA 77
M1232		GBV responsive FP counseling and emergency contraception	Yes 1 No 0 NA 77
M1233		Clinical Management of Rape	Yes 1 No 0 NA 77
M1234		Clinical Management of Rape for Pre-Pubescent Children	Yes 1 No 0 NA 77
M1235		Treatment for physical trauma (e.g. broken bones)	Yes 1 No 0 NA 77
M1236		Medico-legal documentation services	Yes 1 No 0 NA 77
M1237		Forensic laboratory services	Yes 1 No 0 NA 77
M1238		Advanced recto-genital surgical repair (e.g. for vaginal or anal fistula)	Yes 1 No 0 NA 77
M1239	AYSRH	Counseling for AY	Yes 1 No 0 NA 77
M1240		Integrated AY SRHR services	Yes 1 No 0 NA 77
M1241	Cervical cancer	Screening: HPV/DNA- VIA- Pap test- OncoE6)	Yes 1 No 0 NA 77 Yes 1 No 2 Yes 1 No 2 Yes 1 No 2
M1242		HPV vaccine	Yes 1 No 0 NA 77
M1243		Detection (Pathology/histology)	Yes 1 No 0 / NA 77

M1244		Pre-cancerous Cervical Lesion Treatment services	Yes 1 No 0 NA 77
		Cryotherapy	Yes 1 No 0 NA 77
		Thermal ablation	Yes 1 No 0 NA 77
		Loop electrosurgical excision procedure (LEEP)	Yes 1 No 0 NA 77
M1245		Referral for cervical cancer diagnosis	Yes 1 No 0 NA 77
		Oncology care	Yes 1 No 0 NA 77
		Palliative Care	Yes 1 No 0 NA 77
M1200	**Summary of important observations:**		

SECTION A3: HUMAN RESOURCES/STAFFING

CODES	QUESTIONS	Total Number	Male/Female (Number)
M1301	Total number of staff in this HF		
M1302	Admin/managerial staff		
M1303	Specialist medical doctors		
M1304	Non-specialist medical doctors		
M1305	Certified/registered midwives		
M1306	Certified/registered nurses		
M1307	Clinical officers/assistant medical officers		
M1308	Nursing assistants/nursing aides		
M1309	Pharmacists/dispensers		
M1310	Laboratory technicians		
M1311	HMIS personnel/records assistants		
M1312	Certified/registered counselors (HIV, FP, PAC, GBV and MNH) (Enumerator prompt suggestion): “how many certified counselors do you have that don’t have other credentials?”		

M1313	Community health workers (Lady health workers)		
M1314	Social workers (Other than LHWs)		
M1300	**Summary of important observations**		

SECTION B1: INFRASTRUCTURE AND GENERAL ENVIRONMENT

CODES	QUESTIONS	RESPONSES	COMMENTS
M1401	At what time, you arrived at the Health Facility?	_____hours _____minutes	
M1402	Was the HF open when you arrived?	Yes 1 No 0	
M1403 (A)	What is the opening time of the health facility?	_____hours _____minutes	
M1403 (B)	What is the closing time of the health facility?	_____hours _____minutes	
M1404	Was there some type of notice board showing the HF's hours of service?	Yes 1 No 0	
M1405	Was there a clearly visible display on what reproductive health services are available?	Yes 1 No 0	
M1406	What is your general impression of the state of cleanliness outside the HF?	Clean 1 Unclean 0	
M1407	What is your general impression of the state of cleanliness inside the HF?	Clean 1 Unclean 0	
M1408	Does the facility have visible data dashboards/wall charts on service-related data?	Yes 1 No 0	
M1409	Was a Patients Charter available and on display?	Yes 1 No 0	
M1410	Were there clear signages to direct patients?	Yes 1 No 0	
M1411	Was there IEC material in waiting areas on all services provided at the HF?	Yes 1 No 0	
M1412	Are there separate toilets for male and female?	Yes 1 No 0	
M1413	Are the toilets functional?	Yes 1 No 0	
M1414	Does the HF have a functioning power source?	Yes 1 No 0	If no, skip to M1416

M1415	If yes, what is the source of power?	Electric supply company Generator UPS Solar Power	
M1416	Is the power source available 24 hours a day?	Yes 1 No 0	If yes, skip to M1416
M1417	What are the hours/time of load-shedding/unavailability of power?	Hours between 8AM TO 2PM Hours between 2PM TO 8PM Hours between 8PM TO 8AM ----------	
M1418	Is there running clean water in this HF?	Yes 1 No 0	
M1419	What is the main source of water? [Select one or more responses]	**1=Mentioned. 0=Not mentioned** a. Piped 1 0 b. Open well 1 0 c. Bore well 1 0 d. Rainwater Harvesting 1 0 e. Water delivery 1 0 f. Other (specify).....	Do not count in the score
M1420	What communication and technology resources are used or are available at this HF?	**1=Mentioned. 0=Not mentioned** a. Landline telephone 1 0 b. Mobile phones 1 0 c. Short wave radio 1 0 d. Internet Connection 1 0	
M1421	Does the HF have any functional emergency transportation (i.e., in good working order and with fuel)?	Yes 1 No 0	
M1422	Type of emergency transportation available at the HF – (own/established arrangement) [Select one or more responses]	**1=Mentioned. 0=Not mentioned** a. Regular Vehicle 1 0 b. Motorcycle 1 0 c. Animal-drawn cart 1 0 d. Bicycle 1 0 e. Boat 1 0 f. Ambulance 1 0 g. Other (specify).....	Do not count in the score
M1423	Does the HF have a functional referral system? (e.g. referral protocol and list of referral institutions by service) Referral facilities contact numbers and address/distances Referral form Referral audit process in place	Yes No Yes 1 No 0 Yes 1 No 0 Yes 1 No 0	*If yes, score one point for each element.* *If no, skip to M1422*
M1424	What is the distance in kilometers between the HF and the nearest referral facility?	Km _ _	Do not count in the score
M1425	Using a vehicle, what is the average trip time between the HF and the nearest referral facility during the rainy season?	☐☐ Hours	Do not count in the score

	[Report the hours OR the minutes from records or audit reports of timely transfers]	Minutes	
M1426	SCORE **(/23)**	--------/23	
M1427	**Summary of important observations**		

SECTION C1: PERSONNEL TRAINING

Defined as receiving training/refresher training in the prior two years.

CODES	Type of training	Health provider type				
		Total (Male/ Female)	Medical Doctor	Registered Nurse	Registered Midwife	Auxiliary health workers
MC101	How many are trained in provision of SAMs-pills					
MC102	How many are trained in provision of SAMs-Injectables					
MC103	How many are trained in provision of IUD insertion and removal?					
MC104	How many are trained in insertion of LARCS-Implant?					
MC105	How many are trained in removal of LARCS-Implant?					
MC106	How many are trained in provision of tubal ligation?					
MC107	How many are trained in provision of no scalpel vasectomy (NSV)?					
MC108	How many are trained in immediate PPFP?					
MC109	How many are trained in emergency contraception?					
MC110	How many are trained in Balance Plus counseling (BCS+) The Balance Counselling Strategy ?					
MC111	How many are trained in BEmONC? Basic Emergency Obstetric and New born Care					
MC112	How many are trained in CEmONC Comprehensive Emergency Obstetric and New born Care?					
MC113	How many are trained in PAC, using medication abortion?					
MC114	How many are trained to provide manual vacuum aspiration (MVA)?					
MC115a	How many are trained to provide PAC?					

MC115b	How many are trained to provide PAC-FP?					
MC116	How many are trained in first line response to GBV?					
MC117	How many are trained in clinical management of rape (CMR)?					
MC118	How many are trained in adolescent-responsive service provision?					
MC119	How many are trained in HIV testing services (HTS)?					
MC120	How many are trained in cervical cancer screening?					
MC121	How many are trained in cervical lesion treatment (e.g: LEEP)?					
MC122	How many are trained in infection prevention and control?					
MC123	How many are trained in stocks management for medical supplies?					
MC124	How many are oriented in provision of the MISP for SRH?					
MC125	How many are designated/qualified to serve in mobile outreach teams?					
Summary of important observations:						

SECTION C2: PERSONNEL COVERAGE AND REFERRAL MECHANISMS

CODES	DETAILS	RESPONSES
MC201	Is there a skilled birth attendant, trained in BEmONC on-site 24/7?	Yes 1 No 0
MC202	Is there a skilled physician, trained in CEmONC available within one-hour 24/7?	Yes 1 No 0
MC203	Is there a provider trained in MVA available 7 days/week?	Yes 1 No 0
MC204	Is there a provider trained in MA for PAC available 7 days/week?	Yes 1 No 0
MC205	Is there a provider trained in both SAM and LARC available 7 days/week?	Yes 1 No 0
MC206	Is there a provider trained in HTS available 7 days/week?	Yes 1 No 0
MC207	Is there a provider trained in CMR 24/7?	Yes 1 No 0
MC208	Is there a provider trained in adolescent-responsive services 7 days/week	Yes 1 No 0
MC209	Are there 24/7 emergency physical trauma services available on site?	Yes 1 No 0

MC210	Is sufficient fuel stored on-site for emergency transport vehicles to reach definitive care under typical conditions?	Yes 1 No 0 N/A *If no powered transport is based at HF, circle N/A*
Summary of important observations:		

SECTION D1: EMERGENCY PREPAREDNESS

For each question I pose, I would like you to rate your health facility according to the following preparedness levels:

2 = High: well-prepared; able to respond

1 = Medium: partial or incomplete preparation; able to respond, but service availability and/or quality will be affected.

0 = Low: unprepared; unable to respond/adapt

Preparedness criteria		**Vulnerability Level:**	**Comments:**
MD101	Written emergency staffing plan that ensures 24/7 coverage of essential services at 1.5% normal case load?	High 2 Medium 1 Low 0	
MD102	Emergency backup generator that is able to cover at least all critical service areas and equipment, including one week worth of fuel?	High 2 Medium 1 Low 0	
MD103	Written emergency energy use protocols, including hours of use for each piece of equipment and electric lights by department?	High 2 Medium 1 Low 0	*If written plans call for reduced hours or short-term cancellation of select services, circle 0 or 1*
MD104	Two-month supply of the following "tracer" commodities for SRH, stored with appropriate temperature and moisture control? 1. Combined OCPs 2. Contraceptive implant (at least one type) 3. Copper IUCD 4. MgSO4 5. Syntocin/Pitocin – 10 iu injectable 6. Misoprostol – 200 mcg tablets 7. Amoxicillin 125g/250g 8. Zinc ORS sachet 9. PEP for HIV (e.g: tenofovir) 10. DPT vaccine 11. Tetanus vaccine	High 2 Medium 1 Low 0	*Vulnerability level scoring:* *High: 7-11 commodities available* *Medium: 4-6 commodities available* *Low: 0-3 commodities available*

MD105	Full personal protective equipment, (waterproof safety boots, aprons, goggles, gloves and masks) sufficient for all staff for two weeks of shifts?	High 2 Medium 1 Low 0	
MD106	All PPE available in appropriate sizes for male and female staff (e.g., small face masks and women's footwear sizes)	High 2 Medium 1 Low 0	
MD107	Written emergency staff access and sleeping/rest quarter plans for: civil unrest, road disruption or destruction, extreme weather prohibiting commuting to homes	High 2 Medium 1 Low 0	*Inquire about contingency plans for each of the three types of shock. Circle High preparedness only if all three are planned for.*
MD108	Designated, marked cold storage for pumped breast milk linked to backup power	High 2 Medium 1 Low 0	
MD109	Back up communication plan for contacting staff in the event of disruption of normal telecommunications	High 2 Medium 1 Low 0	
MD110	Have a contingency plan in place for safe and efficient personnel evacuation (including transfer of in-patient clients)?	High 2 Medium 1 Low 0	
MD111	All staff trained on exit and evacuation routes that are clearly marked and free of obstacles to enable emergency evacuation?	High 2 Medium 1 Low 0	
MD112	Written plan and protocols to transfer critical equipment and medical supplies to another health care facility or to a secure storage?	High 2 Medium 1 Low 0	
MD113	Written quality monitoring plan for drinking water, and washing water?	High 2 Medium 1 Low 0	
MD114	Written plan for emergency maintenance and restoration of waste management systems?	High 2 Medium 1 Low 0	
MD115	Verify water safety conditions, including annually updated risk assessments to map water resources and clean water supplies for the facility?	High 2 Medium 1 Low 0	
MD116	Written protocols for communicating shock-specific and/or shock-related health risks to catchment area?	High 2 Medium 1 Low 0	
Flood/Rain Event Preparedness			
FL01	Written protocols for secure storage for hazardous chemicals to prevent release or leakage during a flood event?	High 2 Medium 1 Low 0	

FL02	Anti-mosquito breeding measures in place, including safe insecticide use protocols?	High 2 Medium 1 Low 0	
FL03	Have a floodwater infiltration control system to reduce risk of facility flooding?	High 2 Medium 1 Low 0	
FL04	Power supplies and equipment are all stored/housed above ground level?	High 2 Medium 1 Low 0	
FL05	If HF is in a repeat flood location, power supplies and equipment are housed above typical high water mark?	High 2 Medium 1 Low 0	
Heat Event/Drought Preparedness			
DR01	Written protocols and staff orientation to passive cooling strategies (e.g. keep windows that are exposed to the sun closed during the day and open at night when the temperature has dropped; close curtains that receive morning or afternoon sun; turn off nonessential lights and electrical equipment that generate heat)?	High 2 Medium 1 Low 0	
DR02	Written contingency plan to ensure effective and timely delivery of sufficient safe water for staff and patient hydration?	High 2 Medium 1 Low 0	
DR03	Written protocols updated annually to conserve and manage water to reduce water usage, specifically in case of prolonged drought?	High 2 Medium 1 Low 0	
DR04	Working appliance thermometers on all refrigerator and freezer storage units?	High 2 Medium 1 Low 0	
DR05	Clinical care protocol adaptations for heat affected conditions are available in all wards?	High 2 Medium 1 Low 0	
DR06	Designated wards assigned cooling devices (air conditioners) with backup power for care of heat affected conditions?	High 2 Medium 1 Low 0	
Summary notes and observations:			

Section D2: Vulnerability Mitigation

The following questions assess advance measures to mitigate vulnerability of the health facility to experiencing effects of a local shock or stressor. These measures are longer term mitigation strategies and not for deployment during times of acute crisis or extreme weather event.

Preparedness criteria		Score:	Comments:
MD201	Participates in a coordinated mechanism across the health sector for sharing of resources and supplies?	Yes 1 No 0	
MD202	Has a schedule to inspect the facility regularly, both internally and externally, for signs of deterioration (e.g. cracks or sinking structural elements)?	Yes 1 No 0	
MD203	Evaluates the condition and safety of structural and non-structural elements impacted by previous events (flood, earthquake, armament damage)?	Yes 1 No 0	
MD204	Direct communication system between the health sector and meteorological services that includes early alert on forecasted events?	Yes 1 No 0	
MD205	Regularly participates in community disaster planning committees to ensure community knowledge on which HF to go to during different types of emergencies (e.g. high ground facilities during flood events; HF equipped with AC during heat events)?	Yes 1 No 0 Not Available 99	
MD206	Has an established post-crisis recovery plan (structural repairs, staff psycho-social support, etc)?	Yes 1 No 0	
MD207	Has a schedule for emptying latrines in advance of the flood season to avoid overflows?	Yes 1 No 0 N/A	
MD208	Has a rainwater collection, storage, and purification system in place year round?	Yes 1 No 0	
INFRASTRUCTURE			
MD209	Has exterior shading devices, trees or other architectural features that mitigate heat (e.g. vaulted, white roofs, deep eves)?	Yes 1 No 0	*For heat event prone areas*
MD210	Back flow valves installed on toilets, waste tanks, and other plumbing infrastructure?	Yes 1 No 0	*For flood/rain event prone areas*
Summary notes and observations:			

SECTION E1: Governance and management

Preparedness criteria	Score:	Comments:

ME101	Participates in local co-management or other community accountability health committees regarding risk reduction management, preparedness planning and implementation?	Yes 1 No 0 Not Available 99	
ME102	Has a functioning routine and systematic process for facility-level quality checking of data compiled for reports?	Yes 1 No 0	
ME103	Staff responsible for compiling and reporting on health service data have received formal data training in the last 2 years	Yes 1 No 0	
ME104	Evidence of submitting the 3 most recent routine reports for: a) Family Planning b) MNCH c) GBV d) Reportable diseases	 Yes 1 No 0 Yes 1 No 0 Yes 1 No 0 Yes 1 No 0	
ME105	Has a defined and dedicated annual budget for emergency preparedness?	Yes 1 No 0	
ME106	Has written protocols in place for staff psycho-social support during crises?	Yes 1 No 0	
ME107	Does the facility have DHIS2 for compiling and reporting health service data or service-related data?	Yes 1 No 0	
Summary notes and observations:			

SECTION F: Health communication and messaging

Preparedness criteria		Score:	Comments:
MF101	Routinely provides community health education on risks and health protective behaviors re: common climate stressors (e.g. heat events, severe storms, rain/flood events)?	Yes 1 No 0	

MF102	Has information and communication systems safely secured with backup arrangements (e.g.: satellite phone) to ensure communication with district health authorities during acute crisis?	Yes 1 No 0	
MF103	Has written communication protocols for conveying critical information to the community during public health emergencies?	Yes 1 No 0	
Summary notes and observations:			

Thank you so much for your time and responses to the questions. We will get in touch with you again if we need further information in this regard.

INSTRUCTIONS TO ENUMERATOR:

1) Data accuracy and completeness check

To ensure data accuracy, missing responses / completeness of the HFA questionnaire, please carefully review all the responses / answers to the questions before leaving the health facility. If there is any missing / incomplete response against any question(s), you are requested to please complete the responses immediately. Once the data accuracy, missing / incomplete responses are ensured, please save this HFA questionnaire on your device / tab / smart phone. After saving it, please move to the next selected HF to do the assessment.

2) Data submission guideline

At the end of each day, enumerator must upload / synchronize all the completed / filled HFA questionnaire(s) to the main data server through KOBO TOOL App. Enumerator must ensure internet connectivity before uploading / synchronizing collected data (HFA questionnaire) to the main server. After uploading, enumerator should send data uploading report to the Pathfinder's focal point via email / WhatsApp / SMS.