ANNEXURE E

QUESTIONNAIRE

CLIENT SATISFACTION WITH REGARD TO ACCESSIBILITY OF PRIMARY HEALTHCARE SERVICES IN MOLEMOLE MUNICIPALITY OF THE LIMPOPO PROVINCE

This questionnaire tries to understand if you are satisfied with primary healthcare services in the Molemole municipality. Aspects that will be included are:

- Distance to the clinic
- Cost involved to get health services
- Availability of treatment
- Nature of services

If you give us honest answers it will assist us to improve the service. Remember that your information will remain confidential and you can withdraw from the study at any time.

Thank you for your participation.
CLIENT SATISFACTION WITH REGARD TO ACCESSIBILITY OF PRIMARY HEALTHCARE SERVICES IN MOLEMOLE MUNICIPALITY OF THE LIMPOPO PROVINCE. Accessibility is defined as the continuing and organised supply of an equitable level of health care that is within easy reach of all citizens geographically, functionally, financially and culturally.

1. Questionnaire number: ____________________________
2. Name of the clinic: ____________________________
3. Day of the week: ____________________________
4. Number of the participant: ____________________________

5. BIOGRAPHICAL DATA

5.1 Gender: ________________________________________
5.2 Age: ________________________________________
5.3 Village: ________________________________________

MARK WITH AN X IN THE APPROPRIATE SPACE

6. GEOGRAPHICAL ACCESSIBILITY

6.1 How long does it take you to get from the village to your nearest clinic?

<table>
<thead>
<tr>
<th>Less than an 1 hour</th>
<th>1 hour to 2 hours</th>
<th>More than 2 hours</th>
</tr>
</thead>
</table>

6.2 What type of transport do you take when you visit the clinic?

<table>
<thead>
<tr>
<th>Walking</th>
<th>Taxi</th>
<th>Bus</th>
<th>Donkey cart</th>
<th>Own car</th>
<th>Other (specify)</th>
</tr>
</thead>
</table>

6.3 How much does it cost you to travel to the clinic?

<table>
<thead>
<tr>
<th>Nothing</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>R0-R10</td>
<td></td>
</tr>
<tr>
<td>R11-R20</td>
<td></td>
</tr>
<tr>
<td>R21-R30</td>
<td></td>
</tr>
<tr>
<td>R31-R40</td>
<td></td>
</tr>
<tr>
<td>R40 and above</td>
<td></td>
</tr>
</tbody>
</table>

7. **FINANCIAL ACCESSIBILITY**

7.1 How much do you pay for the services provided?

<table>
<thead>
<tr>
<th>Nothing</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>R0-R5</td>
<td></td>
</tr>
<tr>
<td>R6-R10</td>
<td></td>
</tr>
<tr>
<td>R11-R20</td>
<td></td>
</tr>
<tr>
<td>R21-R30</td>
<td></td>
</tr>
</tbody>
</table>

8. **FUNCTIONAL ACCESSIBILITY**

8.1 Are you satisfied with the operational (opening) hours of the clinic?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

8.2 If not, give the reason why are you not satisfied.

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8.3 Were you involved in the decision about the operational hours of the clinic?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>

8.4 If not, would you like to be involved in deciding on operational hours for the clinic?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
</table>
8.5 How can you be involved?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8.6 How could you change the operational times of the clinic?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8.7 What other services are available in the community?

<table>
<thead>
<tr>
<th>Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care groups</td>
</tr>
<tr>
<td>Home-based care</td>
</tr>
<tr>
<td>DOTS supporters</td>
</tr>
<tr>
<td>Traditional healers</td>
</tr>
<tr>
<td>Religious groups</td>
</tr>
<tr>
<td>Traditional midwives</td>
</tr>
<tr>
<td>Other (Specify)</td>
</tr>
</tbody>
</table>

8.8 Why are you visiting the clinic today?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

8.9 Are you satisfied with the service you receive at the clinic?

YES  NO

8.10 If yes, why are you satisfied?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
8.11 If no, why are you not satisfied?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

9. CULTURAL ACCESSIBILITY

9.1 Is the relationship between the nurses and the community members acceptable?

YES  NO

9.2 Will you always utilise this clinic in your community?

YES  NO

9.3 Are the services provided at the clinic acceptable according to the culture of your community?

YES  NO

9.4 If no, which services are not acceptable?
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

9.5 Give suggestions on how services can be improved.
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
ANNEXURE G

INFORMATION LIST: COMPLETED BY RESEARCHER

Name of the clinic: ______________________
Day of the week: ________________________

1. Staffing Level

1.1 Approved staff structure (according to Department of Health):

   Professional nurses: ______________________
   Enrolled nurses: ______________________
   Auxiliary nurses: ______________________
   General assistance: ______________________
   Watchman: ______________________

1.2 Number of staff positions filled:

   Professional nurses: ______________________
   Enrolled nurses: ______________________
   Auxiliary nurses: ______________________
   General assistance: ______________________
   Watchman: ______________________

1.3 Number of staff on day of data collection:

   Professional nurses: ______________________
   Enrolled nurses: ______________________
   Auxiliary nurses: ______________________
   General assistance: ______________________
   Watchman: ______________________

2. Types of services available at the clinic

   Services available at fixed clinics:
   • Curative care (minor ailments)
   • Antenatal care
   • Deliveries
   • Postnatal care
• Growth monitoring (child health care)
• Family planning
• Immunisation
• Mental health
• Chronic treatment
• School health services
• Home visits
• HIV/AIDS counselling

Services available at mobile clinic:
• Curative care (minor ailments)
• Antenatal care
• Growth monitoring (child health care)
• Family planning
• Immunisation
• Health education
• Mental health
• Chronic diseases (including TB)
• School health services
• Home visits

3. Referral system

All clinics refer their clients to the district hospital which is 9-18km away from the clinics.

4. Nurses’ support system, including facilities and equipment

Equipment available per clinic:
• Scales for weighing adults
• Scales for weighing babies
• Height measuring device
• Thermometers
• Stethoscope
• Obstetrical stethoscope
• Instruments for measuring blood pressure
• Diagnostic sets
• Autoclave (steam sterilisation)
• Suture material
• Delivery packs
• Incubator
• Oxygen cylinder
• Examination light
• Suction machine, electrical
• Doptone
• Refrigerators, electrical or gas

_Facilities available at the clinics:_

Clinic A is utilising a new clinic since April 2003. The new clinic has enough consulting rooms. Clinic B still operates in the small clinic and does not have enough consulting or counselling rooms. Clinic C is a very big clinic, but it does not have a nurse’s home. Some of the consulting rooms are used as the nurse’s residence. The clinic has no telephones, only a public phone that uses a card. It has no water supply and no toilets. Clinic D uses the community offices. Only two rooms are available as the clinic is under construction. Clinic E operates in the field, but has a small room as an office, and a store room at the district hospital.

5. _Availability of supplies according to the essential drug list (EDL):_

**Available:** According to the staff, stock is sufficient to meet the clinic’s needs until the next delivery.

**Not available:** According to the staff, stock is insufficient and will not meet the clinic’s needs until the next delivery.
<table>
<thead>
<tr>
<th>Treatment available for specific systems according to the EDL</th>
<th>Available</th>
<th>Not available on day of data collection</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Alimentary tract and metabolism</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Blood and blood-forming organs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Cardiovascular system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>D. Dermatological treatment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>G. Genitourinary system and sex hormones</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>H. Systemic hormonal preparations, excluding sex hormones</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>J. General anti-infectives for systemic use</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>L. Antineoplastic and immunomodulating agents</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>M. Musculoskeletal system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>N. Central nervous system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>P. Antiparasitic products</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>R. Respiratory system</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>S. Sensory organs</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>V. Various</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>