

OBSERVATION SURVEY

Facility name:

Name of person monitoring:

1. What is the date and time that you are conducting this observation?

2. Is the clinic currently open during the COVID-19 crisis?

- No, the clinic is currently completely closed—without information about where to access alternative services
- No, the clinic is currently completely closed—with clear information about where to access alternative services
- Yes, but it is going to close very soon
- Yes, but they will not allow us to monitor
- Yes the clinic is open but the clinic is only serving patients outside—patients do not enter the facility
- Yes the clinic is open, and patients can enter the facility

3. Is the clinic faced with any of the following issues because of the COVID-19 crisis? *(Please select all that apply)*

- There is no physical distancing inside the clinic grounds
- There is no physical distancing outside the gates of the clinic
- There is no access to water and soap
- There is no access to hand sanitizer
- Health workers are not wearing masks
- Health workers are not wearing masks properly
- Chronic patients are not entering the facility — they wait for medicines outside the gates
- The facility is not screening people for COVID-19 symptoms
- Clinical staff in the facility do not have enough PPE (masks, sanitiser)
- Non-clinical staff in the facility do not have enough PPE (masks, sanitiser)
- CHWs/CCGs do not have enough PPE (masks, sanitiser)
- The facility is now busier because it is a COVID-19 vaccination site
- None
- Other *(please specify)*

4. Is it safe to continue with the observation survey?

- Yes, I will continue with the survey
- No, I will end this survey

<p>5. Is this facility open 24 hours/day?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>6. If not 24 hours, what time is the facility meant to OPEN on weekdays (Monday - Friday) <i>(Please record the posted hours of operation for the facility)</i></p>
<p>7. If not 24 hours, what time is the facility meant to CLOSE on weekdays (Monday - Friday) <i>(Please record the posted hours of operation for the facility)</i></p>
<p>8. Is the facility open on Saturday?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p><i>Only ask questions 9 and 10 if open on Saturday</i></p>
<p>9. If not 24 hours, what time is the facility meant to OPEN on Saturday <i>(Please record the posted hours of operation for the facility)</i></p>
<p>10. If not 24 hours, what time is the facility meant to CLOSE on Saturday <i>(Please record the posted hours of operation for the facility)</i></p>
<p>11. About how many patients are waiting to be seen? (Try to collect this at around 10am)</p>
<p>12. Do you see a health promoter or marshal helping patients to get to where they need to go?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>13. Are condoms and lubricant available at the clinic? (tick all that apply)</p> <p><input type="checkbox"/> Lubricant <input type="checkbox"/> Male condoms <input type="checkbox"/> Female condoms <input type="checkbox"/> Lubricant (but only upon request)</p> <p><input type="checkbox"/> Male condoms (but only upon request) <input type="checkbox"/> Female condoms (but only upon request)</p>
<p>14. Is there enough room in the waiting area for everyone?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>15. Are the windows in the facility open?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>16. What is the condition of the building?</p> <p><input type="checkbox"/> Good condition <input type="checkbox"/> Bad condition</p>

17. What is in bad condition? *(Please select all that apply)*

- No light / or lights not working in some areas of the facility
- Broken furniture
- Broken windows or doors
- Broken or cracked roof, walls or floor
- Old building needs renovation
- No running water at the facility
- Rubbish piles
- Other *(please specify):*

Please take a photo of any poor building conditions.

18. Are there toilets in the facility?

- Yes
- No

19. What is the condition of the toilet? *(Bad condition includes: no soap, no water, no toilet paper, no light, dirty, blocked, broken, out of order).*

- Good condition
- Bad condition

20. Please specify what is in bad condition *(Select all that apply)*

- No soap
- No water at all
- No toilet paper
- No light
- Dirty
- Blocked
- Broken
- Out of order
- No running water

21. What is the condition of the filing system?

- Good condition
- Bad condition

22. What is in bad condition? *(Please select all that apply)*

- Files are stored where patients can access them
- The space where files are stored is too small
- The filing system is messy
- Files are lost, missing or misplaced
- There are too few people looking for files
- Other

23. Who is responsible for the filing system?

- There is someone in charge of the filing system who gives out & collects back files
- Staff get their own files and return their own files
- There are several people working in the filing room
- Other

24. Are any of the following patient privacy concerns happening at the facility? *(Please select all that apply)*

- Staff are disclosing the status of people living with HIV in waiting area
- More than one person is being consulted or counselled in the same room
- People living with HIV are separated from other chronic patients
- Security guards check patients' medicines when they are leaving the facility
- Privacy is well respected
- Other privacy violation *(please specify):*

Answer only if you ticked "More than one person is being consulted or counseled in the same room" in previous question (Q24)

25. Why are patients not seen in private rooms? (Please select the answer describes the situation)

- No private rooms in the facility Not enough private rooms
- Staff are not using the private rooms available
- Other (please specify):

26. What posters (if any) are visible on the wall? (Please check all that apply)

- TB infection control poster telling people to cover their mouth if coughing or sneezing
- The Batho Pele principles The members of the clinic committee
- The complaint procedures Where to go to access different services around the facility
- No visible posters
- Other (please specify):

27. Is there complaints box?

- Yes No

28. Is the complaints box locked?

- Yes No

29. Other observations?