



18 August 2021

REQUEST FOR PROPOSAL (RFP)
RFP Number UNFPA/SOM/RFP/21/017
For the establishment of a:
CONTRACT FOR PROFESSIONAL SERVICES
In regards to:
**CONDUCTING OF 2021 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH
COMMODITIES AND SERVICES IN SOMALIA**

LETTER OF INVITATION

Dear Sir/Madam,

The United Nations Population Fund (UNFPA), an international development agency, is seeking qualified Bids for the provision of services (CONDUCTING OF 2021 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICES IN SOMALIA). Your company is hereby invited to submit your best Technical and Financial Bids for the requested services. Your Bid could form the basis for a contract for professional services (CPS) between your company and UNFPA.

1. To enable your company to submit a Bid, please read the following attached documents carefully:

Section I:	Instructions to Bidders
Section II:	Terms of Reference
Section III:	UNFPA General Conditions of Contract
Section IV:	UNFPA Special Conditions of Contract
Section V:	Supplier Qualification Requirements
Section VI:	Bid and Returnable Forms
Section VII:	Contractual Forms
Section VIII:	Annexes on the Survey

2. The Bid process will be conducted through a TWO-envelope system. Interested Bidders are requested to submit their Technical Bid *separately* from their Financial Bid containing price information. Specific instructions for the submission can be found Section I – Instructions to Bidders, clause 18 Submission, Sealing and Marking of Bids.
3. Bidders are requested to carefully read Section I – Instructions to Bidders, clause 18 Submission, Sealing and Marking of Bids, where detailed instructions of the submission process are provided. It is the Bidder's responsibility to assure compliance with the submission process. If the envelopes or emails are not marked / submitted per the instructions, UNFPA will neither assume responsibility for the bid's misplacement or premature opening nor guarantee the confidentiality of the Bid process. Incorrect submissions might result in your Bid being declared invalid.



All Bids comprising of Technical and Financial parts should reach the below and corresponding addresses **no later than 06 September 2021 at 15:00 Mogadishu local time¹**:

Only bids received by email will be accepted:

- a. If you choose to submit your Bid then it must be done electronically by email, your Technical Bid and Financial Bid should be submitted in separate emails in accordance to clause **Error! Reference source not found**. Submission of electronic Bids, should reach the email inbox of bids.somalia@unfpa.org. Do not submit Bid documents to any other email address, sending the Bid to any other email address, including as a carbon copy (cc), will violate confidentiality and result in the invalidation of the Bid.
4. Bids received after the stipulated date and time will be rejected.
5. Bidders are asked to acknowledge receipt of this RFP using the Bid Confirmation Form SECTION VI – ANNEX A: BID CONFIRMATION FORM. A completed Form should be e-mailed to: bids.somalia@unfpa.org **no later than 06 September 2021 at 15:00 Mogadishu local time** and indicate whether or not a Bid shall be submitted. Bidders that will not submit a Bid are kindly asked to indicate the reason(s) for not bidding on the Bid Confirmation Form to help UNFPA improve its future Bid exercises.
1. Any questions relating to the Bid process and/or to the attached documents shall be sent to the e-mail: kgiri@unfpa.org

Responses to all questions received will be handled in accordance to the instructions included in Section I - Instructions to Bidders, clause 8 Clarifications of solicitation documents. Do not submit a Bid to this contact, or your Bid will be declared invalid, as UNFPA will not be able to guarantee the confidentiality of the Bid process.

2. UNFPA posts all Bids notices, clarifications and results in the United Nations Global Marketplace; hence, we strongly encourage Bidders to register on [UNGM](https://www.ungm.org). The UNGM is the procurement portal of the United Nations system. By registering on UNGM, suppliers become part of the database that UN buyers use when searching for suppliers. The link describes the registration process: <https://www.ungm.org/Public/Pages/RegistrationProcess>

Suppliers can also access all UN Bids online and, by subscribing to the Tender Alert Service, suppliers can be automatically notified via email of all UN business opportunities that match the products and services for which they have registered. Instructions on how to subscribe to the Tender Alert Service can be found in the UNGM Interactive Guide for suppliers.

3. UNFPA looks forward to receiving your Bid and thanks you in advance for your interest in UNFPA procurement opportunities.
4. This letter is not to be construed in any way as an offer to contract with your company/institution.

¹ <http://www.timeanddate.com/worldclock/city.html?n=69>



Yours sincerely,

Mr. Walter Mendonça Filho
Deputy Representative
UNFPA, Somalia CO

Process reviewed and approved by:

Robert Afanou
Procurement Associate
Procurement Services Branch
UNFPA Headquarters



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SECTION I: INSTRUCTIONS TO BIDDERS

A. INTRODUCTION

1. General

- 1.1. UNFPA's Procurement Services Branch wishes to establish a contract for professional services with a qualified supplier(s) for the provision of professional services (Conducting 2021 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICES IN SOMALIA) in support of UNFPA's Reproductive Health Commodities Security Supplies Programme located in Somalia.
- 1.2. As a result of this competitive Bid process, UNFPA plans to sign a Contract for Professional Services with a single supplier.
- 1.3. In the event of UNFPA signing a contract the following shall apply:
 - 1.3.1. The successful Bidder(s) shall accord the same terms and conditions to any other organization with the United Nations Systems, located in AAIA, Mogadishu, Somalia, that wishes to avail itself of such terms, after written consent from UNFPA Somalia CO.;
 - 1.3.2. The contract template specified in
 - 1.3.3. SECTION VII – ANNEX A: TEMPLATE OF CONTRACT FOR PROFESSIONAL SERVICES, shall be used.

2. Eligible Bidders

- 2.1. This Bidding process is open to all legally-constituted companies that can provide the requested services (CONDUCTING 2021 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICES IN SOMALIA) and have legal capacity to deliver and perform in the country, or through an authorized representative.
- 2.2. Bidders and all parties constituting the Bidder may hold any nationality.
- 2.3. Bidders must not have a conflict of interest in order to be considered eligible. Bidders found to have a conflict of interest shall be disqualified. Bidders may be considered to have a conflict of interest with one or more parties in this Bidding process, if they:
 - 2.3.1. Are, or have been associated in the past, with a company or any of its affiliates that have been engaged by UNFPA to provide consulting services for the preparation of the design, specifications, and other documents to be used for the procurement of the goods and/or services to be purchased under this Bid.
 - 2.3.2. Submit more than one Bid in this Bidding process, except for alternative Bids accepted under instructions to Bidders clause 18 is not permitted. However, this does not limit the participation of subcontractors in more than one Bid.
 - 2.3.3. Any Bidder that is uncertain as to whether the situation it is in constitutes a conflict of interest must disclose the situation to UNFPA and seek UNFPA's guidance.
 - 2.3.4. The following information must be disclosed in the Bid:
 - 2.3.4.1. Bidding entities whose owners, part-owners, officers, directors, controlling shareholders, or key personnel are immediate family of UNFPA staff involved



- in procurement functions and/or of any government official of the beneficiary country and/or of any Implementing Partner (IP) receiving the goods and/or services under this RFP; and
- 2.3.4.2. Any other situation that could potentially lead to actual or perceived conflict of interest, collusion, or unfair competition practices.
 - 2.3.4.3. Failure to disclose the information above may result in rejection or disqualification of the Bid or of the award resulting of the Bid process.
- 2.4. Bidders under declaration of ineligibility by UNFPA in accordance with clause 2 at the time of contract award will be disqualified. Bidders are not eligible to submit a Bid if at the time of Bid submission, they are:
- 2.4.1. Listed as suspended or removed by the United Nations Procurement Division (UNPD);
 - 2.4.2. Declared ineligible by other organizations of the United Nations through the disclosure of the ineligibility or listing as suspended on [United Nations Global Marketplace \(UNGM\)](#) as a result of having committed fraudulent activities;
 - 2.4.3. Included on the [UN 1267 list](#) issued by the Security Council resolution 1267 that establishes a sanctions regime to cover individuals and entities associated with Al-Qaida and/or the Taliban;
 - 2.4.4. Debarred by the World Bank Group in accordance with the [WB Listing of Ineligible Firms & Individuals](#) and the [WB Corporate Procurement Listing of Non-Responsible Vendors](#).
- 2.5. All Bidders must adhere to the UN Supplier Code of Conduct, which may be found by clicking on [UN Supplier Code of Conduct](#).
- 2.6. Accordingly, any company that is found to have undertaken unethical, unprofessional, or fraudulent activities, as defined in clause 4, will be temporarily suspended or permanently debarred from business relations with UNFPA
- 2.7. Bids may be submitted by a Joint Venture (JV). In the case of a JV:
- 2.7.1. The completed Joint Venture Partner Information Form, SECTION VI – ANNEX F: JOINT VENTURE PARTNER INFORMATION FORM, must be included with the Bid; and
 - 2.7.2. All parties to the JV shall be jointly and severally liable; and
 - 2.7.3. The JV must nominate a Representative, who will have the authority to conduct all businesses for and on behalf of all parties of the JV during the Bidding process, and, if the JV is awarded a contract, during the validity of the contract.

3. Cost of Bid

- 3.1. Bidder will bear all costs associated with the preparation and submission of the Bid(s), and the procuring UN entity will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the Bid.

4. Fraud and Corruption

- 4.1. UNFPA's Policy regarding fraud and corruption is available by clicking on [Fraud Policy](#) and applies fully to this Bid. Submission of any Bid implies that the Bidder is aware of this Policy.
- 4.2. UNFPA is committed to preventing, identifying, and addressing all acts of fraud against UNFPA, as well as against third parties involved in UNFPA activities. To this effect, UNFPA has developed an Anti-Fraud Policy with the aim to raise awareness of fraud risks, implement controls to prevent fraud, and establish a procedure to detect fraud and to enforce the Policy.



- 4.3. UNFPA requires that Bidders, suppliers, and contractors and their subcontractors observe the highest standards of ethics during the procurement and execution of UNFPA contracts.
- 4.4. Pursuant to this Policy, UNFPA defines the terms set forth as follows:
 - 4.4.1. “Corrupt practice” means the offering, giving, receiving, or soliciting, directly or indirectly, of anything of value to influence improperly the actions of another party;
 - 4.4.2. “Fraudulent practice” means any act or omission, including misrepresentation, that knowingly or recklessly misleads, or attempts to mislead, a party to obtain a financial or other benefit, or to avoid an obligation;
 - 4.4.3. “Collusive practice” means an arrangement between two or more parties designed to achieve an improper purpose, including influencing improperly the actions of another party;
 - 4.4.4. “Coercive practice” means impairing or harming, or threatening to impair or harm, directly or indirectly, any party or the property of the party to influence improperly the actions of a party;
 - 4.4.5. “Obstructive practice” means acts intended to materially impede the exercise of UNFPA’s contractual rights of audit, investigation and access to information, including destruction, falsification, alteration or concealment of evidence material to a UNFPA investigation into allegations of fraud and corruption.
 - 4.4.6. “Unethical practice” means conduct or behavior that is contrary to Staff or Supplier codes of conduct, such as those relating to conflict of interest, gifts, hospitality, post-employment provisions, abuse of authority and harassment
- 4.5. UNFPA will reject to award a contract if it determines that a Bidder recommended for award has engaged in corrupt, fraudulent, collusive, coercive, obstructive or unethical practices while competing for the contract in question;
- 4.6. UNFPA will declare a supplier ineligible, either indefinitely or for a stated period of time, to be awarded a UNFPA contract/agreement if at any time it determines that the supplier has engaged in any corrupt, fraudulent, collusive, coercive, obstructive or unethical practices in competing for, or in executing, a UNFPA contract/agreement.
- 4.7. Any supplier participating in UNFPA’s procurement activities must provide all required documents, records, and other elements to UNFPA personnel upon first request to facilitate any investigation of allegations of misconduct by either suppliers or any other party to the procurement activities. The absence of such cooperation may be sufficient grounds for the debarment of the supplier from the UNFPA supplier roster and may lead to suspension following review by UNFPA.
- 4.8. Suppliers, their subsidiaries, agents, intermediaries and principals must cooperate with the UNFPA Office of Audit and Investigations Services as well as with any other oversight entity authorized by the Executive Director and with the UNFPA Ethics Advisor as and when required. Such cooperation shall include, but not be limited to, the following: access to all employees, representatives’ agents and assignees of the vendor; as well as production of all documents requested, including financial records. Failure to fully cooperate with investigations will be considered sufficient grounds to allow UNFPA to repudiate and terminate the Agreement, and to debar and remove the supplier from UNFPA’s list of registered suppliers.
- 4.9. A confidential Anti-Fraud Hotline is available to any Bidder to report suspicious fraudulent activities at [UNFPA Investigation Hotline](#)



5. Zero Tolerance

5.1. UNFPA has adopted a zero tolerance policy on gifts and hospitality. Bidders are therefore requested not to send gifts or offer hospitality to UNFPA personnel. If interested on reading further on this policy, please select [Zero Tolerance Policy](#).

6. Disclaimer

6.1. Should any of the links malfunction or are inaccessible for any reason in this Request for Proposal or any of its Annexes, suppliers can contact the Procurement Official referenced below in clause 8 and request for them to share a PDF version of such document(s).

B. SOLICITATION DOCUMENTS

7. UNFPA Bidding document

7.1. This RFP document is posted on [United Nations Global Marketplace \(UNGM\)](#).

7.2. Bidding documents consists of the following:

Section I:	Instructions to Bidders
Section II:	Terms of Reference
Annex A:	Instructions for Preparing Technical Bid
Section III:	UNFPA General Conditions of Contract
Section IV:	UNFPA Special Conditions of Contract
Section V:	Supplier Qualification Requirements
Section VI:	Bid and Returnable Forms
Annex A:	Bid Confirmation Form
Annex B:	Bid Submission Form
Annex C:	Bidder Identification Form
Annex D:	Bidder’s Previous Experience
Annex E:	Price Schedule Form
Annex F:	Joint Venture Partner Information Form
Annex G:	Checklist of Bid Forms
Section VII:	Contractual Forms
Annex A:	Template of Proposed Contract for Professional Services
Annex B:	Bank Guarantee for Advance Payment
Annex C:	Performance Security

7.3. Bidders are expected to examine all instructions, forms, Terms of Reference, terms and conditions contained within this Bid document. Failure to comply with these documents shall be at the Bidder’s risk and may affect the evaluation of the Bid or result in the rejection of the Bid.

7.4. Bidders are cautioned to read Section II – Terms of Reference, as there may be special requirements. The requirements presented herein are not to be construed as defining a particular service provider’s service. Bidders are encouraged to advise UNFPA if they disagree.

7.5. The requirements included in this document are the minimum requirements of the services solicited. Services offered in the Bid must meet or exceed all requirements herein.



8. Clarifications of Bidding documents

8.1. Bidders requiring clarification to the Bid process and/or to the Bid documents may be addressed in writing to:

The Bids Focal Point

Email: kgiri@unfpa.org

Bidders should **NOT** submit any Bid to this contact or your Bid will be declared invalid, as UNFPA will not be able to guarantee the confidentiality of the Bidding process.

Bidders may request clarifications **no later than 06 September 2021 at 15:00 Mogadishu local time².**

8.2. UNFPA will respond in writing to any requests for clarification received prior to the deadline and will circulate the answers (including an explanation of the requests without identifying the sources) to all prospective Bidders that have received the Bid documents. A copy of the questions and UNFPA's answers will also be posted on UNGM, (www.ungm.org).

8.3. UNFPA will respond to requests for clarifications as soon as possible. However, delays in UNFPA's response will not oblige UNFPA to extend the Bid submission deadline. UNFPA may extend the deadline in specific cases UNFPA deems justified and necessary.

9. Amendments to Bidding documents

9.1. At any time prior to the Bid submission deadline, UNFPA may for any reason, whether at its own initiative or in response to a clarification requested by a prospective Bidder, modify the Bidding documents by issuing an amendment.

9.2. UNFPA shall post all amendments under the original notice on UNGM. All prospective Bidders that have received the Bidding documents shall periodically check if amendments have been posted to the bidding documents on UNGM.

9.3. To give prospective Bidders reasonable time to take the amendments into account, UNFPA may, at its discretion, extend the Bid submission deadline.

C. PREPARATION OF BIDS

10. Language of the Bid

10.1. Bid documents and all related correspondence will be written in English.

10.2. Any printed literature furnished by a prospective Bidder written in a language other than the language indicated must be accompanied by a translation in the preferred language indicated above. For the purpose of interpretation of the Bid, and in the event of discrepancy or inconsistency in meaning, the version translated into the preferred language indicated above shall govern. The sole responsibility for translation and the accuracy thereof shall rest with the Bidder.

11. Bid currency and prices

11.1. All prices shall be in US dollars (USD) or any other convertible currency.

11.2. The Bidder shall indicate on the Price Schedule Form in accordance to SECTION VI – ANNEX E: PRICE SCHEDULE FORM the unit of measure, the unit price and total Bid price of the goods and/or services (where applicable) it proposes to supply under the contract.

² <http://www.timeanddate.com/worldclock/city.html?n=69>



12. Conversion to single currency

12.1. To facilitate evaluation and comparison, the procurement official will convert all Bid prices expressed in the amounts in various currencies in which the Bid prices are payable to USD at the [UN Operational Rate of Exchange \(UNORE\)](#) on the last day for submission of Bids.

13. Most favored pricing

13.1. By submitting a Bid, the Bidder certifies that the same services have not been offered to other customers under similar circumstances at a lower cost. Should a Bidder be found to have done so, it must offer the lower cost to UNFPA.

14. Validity of Bids

14.1 Bids must remain valid for 90 calendar days after the Bid submission deadline. UNFPA will consider Bids with shorter validity as not substantially responsive and reject them. Under special circumstances, UNFPA may request Bidders to extend the validity Submission of Bids.

15. Documents establishing eligibility and conformity to Bid documents

15.1. Evidence of conformity of the goods/services to the Bidding documents may include the following documentation as described in clauses 16 Technical Bid and 17 Financial Bid, to be completed and returned in hard copies or in electronic format depending on the submission approach selected.

15.2. Submission of a Bid that does not substantially respond to the UNFPA Bid document in every respect shall be at the Bidder's risk and may result in a rejection of the Bid.

All required documents returned with the Technical Bid should be submitted in PDF version. The Financial Bid should be submitted both in PDF version and Excel version.

16. Technical Bid

16.1. Documents establishing the eligibility of the Technical Bid:

16.1.1. Completed and signed Bid Submission Form; SECTION VI – ANNEX B: BID SUBMISSION FORM, in PDF format. Note: if the bid submission form is not submitted or not signed, and provided the bidder has not indicated they do not accept any of the conditions required in this form, UNFPA shall consider that the bidder has accepted all such conditions. For the sake of good order, at the time of bid evaluation UNFPA will request the bidder to provide the signed Bid Submission Form.

16.1.2. Completed Bidder Identification Form; SECTION VI – ANNEX C: BIDDER IDENTIFICATION FORM in PDF format.

16.1.3. Completed Bidder's Previous Experience; SECTION VI – ANNEX D: BIDDER'S PREVIOUS EXPERIENCE in PDF format.

16.1.4. Technical Bid, including documentation to demonstrate that the Bidder meets all requirements. The Technical Bid should be presented concisely and structured to include but not necessarily be limited to the information listed in **Error! Reference source not found.** in PDF format

16.1.5. Supporting documents/information per the Supplier Qualification Requirements;



16.1.6. SECTION V: SUPPLIER QUALIFICATION REQUIREMENT

16.1.7. Completed Joint Venture Partner Information Form; SECTION VI – ANNEX F: JOINT VENTURE PARTNER INFORMATION FORM in PDF format, if applicable.

16.1.8. Copy of last year of audited financial statements

17. Financial Bid

17.1. Bidders must complete the Price Schedule Form in accordance to SECTION VI – ANNEX E: PRICE SCHEDULE FORM – both in PDF format (signed version) and excel format. The separate Financial Bid must contain a quotation in a single currency, itemizing all services to be provided.

17.2. Please consider the following information when completing the Price Schedule Form:

17.2.1. The Price Schedule Form must provide a detailed cost breakdown, as shown in SECTION VI – ANNEX E: PRICE SCHEDULE FORM. Bidders are required to provide separate figures for each of the steps for each item.

17.2.2. Estimates for out of pocket expenses should be listed separately. Where installation, commissioning, training or other similar services are required to be performed by the Bidder, the Bidder shall include the prices for these services broken down into itemized prices.

17.2.3. All prices/rates Bid must be exclusive of all taxes, since UNFPA is exempt from taxes. The applicable unit of measure should be clearly indicated.

17.2.4. Submit this Financial Bid in a separate envelope/email from the rest of the Technical Bid.

18. Partial & Alternative Bids

18.1. Partial Bids are not under this RFP.

18.2. Alternative bids are not accepted. Bidders are only allowed to submit their best proposal. In the event of a supplier submitting more than one bid, the following shall apply:

18.2.1. All bids marked alternative bids will be rejected and only the base bid will be evaluated.

18.2.2. All bids will be rejected if no indication is provided as to which bids are alternative bids.

19. Submission and marking of Bids

19.1. The Bid process shall be conducted through a TWO separate - email opening system. Interested Bidders are requested to submit their Technical Bid separately from their Financial Bid containing price information.

19.2. UNFPA provides alternative methods of Bid submission:

19.2.1. Electronic Bids may be submitted via email in accordance with the guidelines provided in clause 19.3.

19.2.2. Hard copy Bids WILL NOT BE ACCEPTED whether delivered personally, by mail, or by courier in accordance with the guidelines provided in clause 19.4

19.2.3. Only bids received by email will be accepted. In accordance with UNFPA's green procurement initiative, electronic submissions are strongly encouraged.



19.3. Submission of electronic Bids

- 19.3.1. Bidders must enter the following text in the subject line: UNFPA/SOM/RFP/21/017 *Company Name*, and specify “Technical Bid” or “Financial Bid”. Example below:
- 19.3.1.1. UNFPA/SOM/RFP/21/017 Company name, Technical Bid
 - 19.3.1.2. UNFPA/SOM/RFP/21/017 Company name, Financial Bid
 - 19.3.1.3. Submissions without this text in the subject line may be rejected.
- 19.3.2. Electronic submissions must be sent only to bids.somalia@unfpa.org. Bids received at bids.somalia@unfpa.org mailbox shall not be opened before the scheduled opening date. Sending the Bid to any other email address, including as a carbon copy (cc), will violate confidentiality and result in the invalidation of the Bid.
- 19.3.3. The total size of the email submission must **not exceed 20 MB**, including e-mail body, attachments, and headers.
- 19.3.4. It is recommended that the entire Bid be consolidated into as few attachments as possible, in commonly-used file formats in accordance to what has been stated in clauses 16 & 17. If the Bid consists of large files, it is recommended that these files be sent in separate emails prior to the submission deadline. Multiple emails must be clearly identified by indicating in the subject line “email X” sequentially, and the final “email Y – final”.
- 19.3.5. It is the Bidder’s responsibility to ensure that Bids sent by email are received by the submission deadline. Bidders will receive an auto-reply acknowledging the receipt of each email when it is received by UNFPA’s email system. If you do not receive an auto-reply, inform Ms. Sella Ouma at e-mail ouma@unfpa.org

19.4. Submission of Bids

- 19.4.1. Bidders must prepare and submit all Bid documents in an electronic version by email. All requisite Bid Documents must be attached to the email forwarding the Bid. Where the documents are too heavy it will be acceptable to provide a link to the bid documents. Please assure to use two separate emails, one sent immediately after another for the Technical Bid and Financial Bid.
- 19.4.2. Marking of the two separate emails submitting the bid:
In the case of the Technical Bid the Subject line must indicate ***‘TECHNICAL BID SUBMISSION - UNFPA/SOM/RFP/21/017, Your Company Name’***
- Meanwhile for the Financial Bid the Subject line must indicate ***‘FINANCIAL BID SUBMISSION - UNFPA/SOM/RFP/21/017, Your Company Name’***
- 19.4.2.1. The **first part of the forwarding email** for both the technical and financial bids must be clearly marked with:



UNITED NATIONS POPULATION FUND
UNFPA Somalia Country Office
Thorn Tree Lodge, AAIA
Mogadishu, Somalia
UNFPA/SOM/RFP/21/017, *Company Name*
Attention: Ms. Sella Ouma, Operations Manager
E-Mail: bids.somalia@unfpa.org

TO BE OPENED ONLY BY AUTHORIZED UNFPA PERSONNEL
DO NOT OPEN EMAIL BEFORE 06 September 2021 at 15:00 Mogadishu local time

- 19.4.2.2. The body of the email submitting the bid must also indicate the name and address of the Bidder. If the subject line is not marked as required, UNFPA will assume no responsibility in the event of Bid misplacement or premature opening.
- 19.4.2.3. The **last part of each of the Bid submission emails** must be clearly marked with:

TO BE OPENED ONLY BY AUTHORIZED UNFPA PERSONNEL

Submission 1 of 2: UNFPA/SOM/RFP/21/017[*Company name*], Technical Bid (in the case of Technical bid)

and

Submission 2 of 2: UNFPA/SOM/RFP/21/017 [*Company name*], Financial Bid (in the case of Financial bid)

20. Deadline for submission of Bid and late Bids

- 20.1. Bids must be delivered by email as advised above and by the date and time specified in this RFP. If any doubt exists as to the time zone in which the Bid should be submitted, refer to <http://www.timeanddate.com/worldclock/>, or contact the Bid focal point.
- 20.2. Bids received after the submission deadline shall be declared late, rejected and the supplier informed by UNFPA accordingly. UNFPA will not be responsible for Bids that arrive late due to the courier company and any other technical issues which are not within the control of UNFPA.

21. Modification and withdrawal of Bids

- 21.1. Bidders are expected to have sole responsibility to examine the conformity of their Bids to the requirements of the RFP, keeping in mind that material deficiency in providing information requested by UNFPA, or lack of clarity in the description of goods or services to be provided may result negatively in the evaluation process of the Bids.
- 21.2. Bidders may modify, substitute or withdraw their Bid after submission, provided that written notice is received by UNFPA prior to the submission deadline.



21.3. Any proposed modification, substitution or withdrawal must be submitted in accordance to clause 18 - Submission, sealing and marking of Bids based on the approach utilized. The respective envelope or email shall be clearly marked “MODIFICATION”, “SUBSTITUTION” or “WITHDRAWAL”. Any revision to the Bid must be received by the deadline.

21.4. No Bid may be modified, substituted or withdrawn in the interval between the submission deadline and the expiration of the period of the Bid validity. No Bid may be modified, substituted or withdrawn after the submission deadline.

22. Storage of Bids

22.1. Bids received prior to the deadline of submission and the time of opening shall remain secure and unopened until the Bid opening date stated in UNFPA’s RFP.

D. BID OPENING AND EVALUATION

23. Bid opening

23.1. UNFPA will conduct an internal Bid opening on 08 September 2021, at local time 10:00 hours Mogadishu time³ at the office of UNFPA Somalia Country Office.

23.2. Bids will be opened by an ad-hoc panel consisting of at least two staff members (of which one may be from a different United Nations agency/fund/program) and where at least one individual has no involvement in the subsequent stages of the procurement process. There will be separate Bid openings for Technical and Financial Bids. The Bidders’ names and submitted documents shall be announced and recorded on the Technical Bid opening report.

23.3. A Bid opening report will be available for viewing only to Bidders who have submitted a bid or their authorized representatives for a period of thirty days from the date of the opening. Information not included in the Bid opening report will not be provided to Bidders.

23.4. Once the Technical evaluation has been completed, the Financial Bids will be opened. During the Financial Bid opening, the Bidders’ names and the prices stated in the Financial Bid shall be announced and recorded on the Financial Bid opening report.

23.5. No Bid shall be rejected during Bid opening, except for late Bids. Rejected Bids will be shredded except for any bank securities, which will be returned to the Bidder.

24. Clarification of Bids

24.1. To assist in the examination, evaluation and comparison of Bids, UNFPA may ask Bidders for clarification of their Bids. The request for clarification and the response shall be in writing by UNFPA, and no change in price or substance of the Bid shall be sought, offered or permitted. Clarification of Bids may be provided only in response to UNFPA request for clarification or request for additional information.

25. Preliminary examination of Bids

25.1. Prior to the detailed evaluation, UNFPA shall examine the Bids to determine whether they are complete with respect to minimum documentation requirements, whether the documents are properly signed, whether any computational errors have been made and whether the Bids are generally in order.

25.2. The procurement official will determine the substantial responsiveness of each Bid to the RFP during the preliminary examination.

³ <http://www.timeanddate.com/worldclock/city.html?n=69>



- 25.3. A substantially responsive Bid conforms to all the terms, conditions, and specifications of the Bidding documents without material deviation, reservation, or omission. A material deviation, reservation, or omission is one that:
- 25.3.1. Affects in any substantial way the scope, quality, or services specified; or
 - 25.3.2. Limits in any substantial way, inconsistent with the Bidding documents, UNFPA's rights or the Bidder's obligations under the contract; or
 - 25.3.3. If rectified would unfairly affect the competitive position of other Bidders presenting substantially responsive Bids.
- 25.4. UNFPA considers material deviations to include, but not be limited to the following:
- 25.4.1. During preliminary examination of Bids
 - 25.4.1.1. Absence of Bid form(s), change in the wording or lack of signature on key portions of the Bid form when this is clearly required. Any change in wording that is consistent with the standard format of the Bid form(s) is not a material deviation;
 - 25.4.1.2. The Bidder indicates in the Bid that they do not accept important contract conditions, i.e. related to Force Majeure, Applicable Law, Delivery Schedule, Payment Terms, General Conditions of Contract and Limitation of Liability;
 - 25.4.1.3. Non submission of non-historical documents (documents that should be specifically prepared by the Bidder in response to this RFP) by the bid submission deadline.
 - 25.4.1.4. Non-eligibility of the Bidder;
 - 25.4.1.5. Financial information is included in the Technical Bid.
 - 25.4.2. During technical evaluation of Bids and qualification of Bidders:
 - 25.4.2.1. Bids do not reach the minimum threshold on technical score.
 - 25.4.2.2. The Bidder does not meet the minimum conditions for qualification.
 - 25.4.3. During Financial evaluation of Bids:
 - 25.4.3.1. The Bidder does not accept the required price correction in accordance to Section I: Instructions to Bidders, clause 26.1.3
 - 25.4.3.2. Required price components are missing;
 - 25.4.3.3. The Bidder offers less quantity than what is required
- 25.5. If a Bid is not substantially responsive to the Bidding documents, it shall be rejected by UNFPA and may not subsequently be made responsive by the Bidder by correction of the material deviation, reservation, or omission.

26. Non-conformities, errors, and omissions

- 26.1. Provided that a Bid is substantially responsive:
- 26.1.1. UNFPA may waive any non-conformities or omissions in the Bid that do not constitute a material deviation.
 - 26.1.2. UNFPA may request the Bidder to submit the necessary information or documentation within a reasonable period of time to rectify non-material non-conformities or omissions in the Bid related to documentation requirements. Such omission shall not be related to any aspect of the price of the Bid. Failure of the Bidder to comply with the request may result in the rejection of its Bid.
 - 26.1.3. UNFPA shall correct arithmetical errors on the following basis:



- 26.1.3.1. If there is a discrepancy between the unit price and the line item total that is obtained by multiplying the unit price by the quantity, the unit price shall prevail, and the line item total shall be corrected, unless in the opinion of UNFPA there is an obvious misplacement of the decimal point in the unit price. In that case the line item total as quoted shall govern, and the unit price shall be corrected;
- 26.1.3.2. If there is an error in a total corresponding to the addition or subtraction of subtotals, the subtotals shall prevail and the total shall be corrected.

27. Evaluation of Bids

- 27.1. The evaluation of the Bids will be carried out in a two-step process by an evaluation panel, with evaluation of the Technical Bid being completed prior to any Financial Bid being opened and compared.
- 27.2. The Financial Bid will be opened only for those Bidders, where Technical Bids reach a minimum score of 70% and whom have fulfilled the supplier qualifications. The total number of points a Bidder may obtain for Technical and Financial Bids is 100 points.
- 27.3. Information relating to the examination, evaluation, comparison, and post-qualification of Bids and recommendation of contract award shall not be disclosed to Bidders or any other person not officially concerned with such process until the contract award is published.
- 27.4. Any effort by a Bidder to influence UNFPA in the examination, evaluation, comparison, and post-qualification of the Bids or contract award decisions may result in the rejection of its Bid.
- 27.5. Notwithstanding from the time of Bid opening to the time of contract award, if any Bidder wishes to contact UNFPA on any matter related to the Bidding process, it should do so in writing.

28. Technical evaluation

- 28.1. The Technical Bid is evaluated on the basis of its responsiveness to the Terms of Reference shown in Section II, the Technical Bids submitted by the Bidders and the evaluation criteria published below.

28.2. Scoring Scale System

Criteria	1. [A] Maximum Points	2. [B] 3. Points attained by the Bidder	4. [C] Weighting %	5. [B] x [C] = [D] Total Points
1. Technical proposal and overall comprehension: Clear understanding of the requested tasks and tools provided; the tools and methods indicated are adequately applied in the proposal; proposal of technical proposal is sound and robust.	100		25%	
2. Work Plan: Presentation of a clear and appropriate work plan including milestones; the data collection plan and analysis is consistent, realistic and can be efficiently implemented.	100		20%	
3. Quality control: Definition of a clear and comprehensive quality control plan to minimize risks and to ensure highest data quality; it specifies responsibilities/tasks, their frequency and responsible points in the team.	100		15%	
4. Study Team: Qualification and experience of the consultants'/survey team's work to meet the requirements (listed in the TOR)-detailed in a CV of no more than 3 pages; in particular, experience in survey management and data collection and knowledge of new survey technologies for electronic data collection.	100		20%	
5. Organization: The reputation of the organization: credibility and reliability; experience of the organization within a relevant and similar area and theme with other UN or international organizations.	100		20%	
GRAND TOTAL ALL CRITERIA	500		100%	



28.2.1. The following scoring scale system will be used by the technical evaluation panel to conduct the Technical Bid evaluation objectively.

Degree to which the Terms of Reference requirements are met based on evidence included in the Bid submitted	Points out of 100
Significantly exceeds the requirements	90 – 100
Exceeds the requirements	80 – 89
Meets the requirements	70 – 79
Partially meets the requirements	1 – 69
Does not meet the requirements or no information provided to assess compliance with the requirements	0

29. Supplier qualification requirements

29.1. The responses from the Bidders compared to SECTION VI – ANNEX C: BIDDER IDENTIFICATION FORM and SECTION VI – ANNEX D: BIDDER’S PREVIOUS EXPERIENCE of this document will be evaluated based on the criteria provided below to assess the degree of Bidder qualification for the proposed contract.

Number	Supplier Qualification Parameter	Bid is acceptable? (YES/NO)	Justification
1	Legal and regulatory requirements	UNFPA shall examine the Bid to confirm that it does not contain any material deviations, reservation, or omission related to the General Conditions of Contracts (Section III)	
2	Bidder is established as a company and legally incorporated in the country		
3	Bidder is not a banned or suspended supplier		
4	Financial stability		
5	Bidder is experienced and technically capable of delivering the services under projects worth over USD 100,000		

29.2. Notwithstanding anything stated above, UNFPA reserves the right to assess the Bidder’s capabilities and capacity to execute the services satisfactorily before deciding on award.

29.3. Even though the Bidders may meet the above qualifying criteria, they can be subject to disqualification if they have made misleading or false representations in the forms, statements and attachments submitted in proof of the qualification requirements, and/or



have a record of poor performance such as: not properly completing contracts, inordinate delays in completion, litigation history, financial failures, etc.

30. Financial evaluation

30.1. The Financial Bid will only be evaluated if the Technical Bid achieves the minimum score as indicated in clause 27.2 and is considered qualified through the supplier qualification process described in clause 29. Proposals failing to obtain this minimum technical threshold or those which will not be considered qualified through the supplier qualification process will not be eligible for further consideration.

30.2. The Financial Bid is evaluated on the basis of its responsiveness to the Price Schedule Form SECTION VI – ANNEX E: PRICE SCHEDULE FORM. The maximum number of points for the Financial Bid is 100. This maximum number of points will be allocated to the lowest price. All other Financial Bids will receive points in inverse proportion according to the following formula:

$$\text{Financial Score} = \frac{\text{Lowest Bid (\$)}}{\text{Bid being Scored (\$)}} \times 100 \text{ (Maximum Score)}$$

31. Total score

31.1. The total score for each Bidder will be the weighted sum of the technical score and financial score. The maximum total score is 100 points.

$$\text{Total Score} = 70\% \text{ Technical Score} + 30\% \text{ Financial Score}$$

E. AWARD OF CONTRACT AND FINAL CONSIDERATIONS

32. Award of Contract

32.1. UNFPA intends to award the Contract for Professional Services to the Bidder(s) that obtains the highest combined score of the Technical and Financial evaluation.

32.2. UNFPA reserves the right to annul the RFP and reject all Bids at any time prior to award of the contract without thereby incurring any liability to the affected Bidder(s) or any obligation to provide information.

33. Rejection of Bids and annulments

33.1. UNFPA reserves the right to reject any Bid if the Bidder has previously failed to perform properly or on time in accordance with previous contracts/purchase orders or if the Bidder from UNFPA's perspective is not in a position to deliver pursuant to the contract.

33.2. UNFPA reserves the right to annul the RFP and reject all Bids at any time prior to award of the contract without thereby incurring any liability to the affected Bidder(s) or any obligation to provide information.

33.3. Bidders waive all rights to appeal against the decision made by UNFPA.



34. Right to vary requirements and to negotiate at time of award

- 34.1. At the time of award of the contract UNFPA reserves the right to vary the quantity of goods and/or services specified in the RFP by up to 20% without any change in hourly/daily or any other rates or prices proposed by the Bidders or other terms and conditions.
- 34.2. UNFPA reserves the right to negotiate the price with the Bid winner before awarding the contract to ensure that the Financial Bid is competitive on all aspects of the price.
 - 34.2.1. The purpose of negotiations of offers selected based on the 'cumulative analysis methodology' is to ensure that the technical proposal is in line with requirements and that the financial proposal is competitive on all aspects of the price.
 - 34.2.2. In the negotiations, any deficiency in the offer will be pointed out to the supplier. The supplier will be allowed to make adjustments in the proposal in order to improve and more clearly specify the contents of the offer. However, under no circumstances shall the requirements (Terms of Reference/specifications) be changed.

35. Signing of the Contract

- 35.1. The procurement official will send the successful Bidder(s) the contract for professional services for a fixed contract value which constitutes notification of award. Successful Bidder(s) shall sign and date the contract, and return it to UNFPA within 10 calendar days of receipt of the contract. To facilitate the process of signing the contract, Bidders are expected to have reviewed the template of Contract for Professional Services, found in
- 35.2. SECTION VII – ANNEX A: TEMPLATE OF CONTRACT FOR PROFESSIONAL SERVICES of the Bidding documents prior to submitting a Bid. The successful bidder shall deliver the services and/or goods in accordance with the delivery schedule outlined in the Bid/ Contract only after both parties sign the contract.
- 35.3. UNFPA reserves the right to discontinue the contract if the supplier's performance is not satisfactory to UNFPA.

36. Publication of Contract Award

- 36.1. UNFPA will publish the following contract award information on United Nations Global Marketplace <http://www.ungm.org>, unless it is deemed to be in the interest of UNFPA no to do so: Purchase Order reference Number, Description of the Goods or Services procured, Beneficiary Country, Supplier Name and Country, Contract amount and the issue date of the contract/purchase order.

37. Payment Provisions

- 37.1. UNFPA's policy is to pay for the performance of contractual services rendered or to effect payment upon the achievement of specific milestones described in the contract.

38. Bid protest

- 38.1. Bidder(s) perceiving that they have been unjustly or unfairly treated in connection with a solicitation, evaluation, or award of contract may complain to the UNFPA Head of the Business Unit, Mr. Anders Thomsen Representative of Somalia Country Office at thomsen@unfpa.org . Should the supplier be unsatisfied with the reply provided by the UNFPA Head of the Business Unit, the supplier may contact the Chief of the Procurement Services Branch at procurement@unfpa.org.



39. Documents establishing sustainability efforts of the Bidder

39.1. Currently UNFPA is requesting information on environmental and social policies and related documentation with Bids submitted by prospective suppliers. UNFPA is incorporating environmental and social criteria considerations into the evaluation process, such as adherence to Global Compact requirements (more information can be accessed here, <http://www.unglobalcompact.org/>, or by contacting Procurement Services Branch at procurement@unfpa.org). UNFPA encourages suppliers to consider joining the UN Global Compact and to look into other ways to help reduce their environmental impact now.



SECTION II: TERMS OF REFERENCE (TOR)

2021 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICES IN SOMALIA

BACKGROUND

Insecurity and other challenges that affect large parts of Somalia are huge challenges to service delivery, particularly in sustaining efficient supply chain systems. Managing health commodities in any given program is a task that is entrenched with many challenges. In a country like Somalia, which has a federal governance structure and is divided into several states, the health and health supply chain systems are mostly driven by ad hoc measures which can vary from one sector to another. For instance, Tuberculosis and HIV/AIDS programs are more vertical than others, while the Birth Spacing (family planning) program tends to be far less visible.

It is commonly agreed that, without a well-performing commodity supply chain management system, health services would not be able to serve the needs of end-users in a very reliable way. It is in this context that the new Somalia Reproductive Health Strategic Plan puts an emphasis on Logistics Management Information System (LMIS) development and its application to ensure an accurate and reliable data collection and reporting system is in place.

In addition, the Somali Reproductive Health Technical Working Group under the Ministry of Health “MOH” leadership has recognized the necessity of strengthening the existing supply chain systems through different mechanisms, among which human capacity and supply chain innovation and institutional capacity building are the most prominent ones. Access to essential medicines is a critical health system component that remains weak in Somalia. While most of the medicines procured through traditional donor support have to meet the standards of the donor organization and are procured through UN agencies and INGOs from internationally recognized suppliers, they represent only approximately 30% of the total country needs. Somalia itself has not yet developed a strong system for regulation or control over the procurement, import, and distribution of essential medicines. As a result, large quantities of sub-standard, and many a times, spurious pharmaceutical medicines and clinical supplies may find their way to both public and private sector facilities. The impact is significant considering that 70% of procurement occurs through private sector providers. This fragmented procurement and supply chain system highlights a missed opportunity to benefit from economies of scale and minimize duplication of efforts in an environment where resources are scarce.

UNFPA, as one of the core supporters to the Somali MoH within this area of concern, works closely with the MoH to strengthen Reproductive Health Commodity Security (RHCS) as one of the core components under the health sector. In addition, UNFPA supports MoH to ensure greater access to the health services, in particular to quality Sexual and Reproductive Health (SRH) services at different administrative levels such as local, district and regional. Along with this support, UNFPA strengthens the technical capacity of the service providers of SRH services with a focus on the maternal health, birth spacing (family planning), midwifery care, obstetric fistula repair, adolescents and youth reproductive health services, clinical management of rape (CMR) and more.

Somalia has been selected to be part of UNFPA global programme of reproductive health commodity security (UNFPA Supplies), which provides a good opportunity to understand the actual situation in the country as well as to assess and evaluate the different pillars and components of the RHCS, which will serve not only UNFPA but other sister UN agencies and organizations as well as the Government of Somalia.

As part of UNFPA Supplies, an assessment at the health facilities and service delivery points (SDPs) should be conducted to provide reliable baselines and evidence-based information that will inform the related plans and strategies for program implementation. This assessment is part of the global UNFPA Supplies survey that focuses on the supplies and commodity security in the selected countries.

Within this context, the assessment includes and focuses mainly on the availability of modern contraceptives and essential life-saving maternal/reproductive health medicines, and also on information regarding the supply chain (including cold chain), staff training and supervision, availability of guidelines and protocols, information communication technology (ICT), method of waste disposal and service user's fee, views of clients about the services and the use of generic contraceptives.

PURPOSE

UNFPA seeks the services of a professional consulting company with experience in similar types of assessments in developing countries. The purpose of this assessment is to generate information on the availability and stock out of commodities at the service delivery points as well as in the government-managed warehouses at the central, regional and state level where present.

OBJECTIVES

The main objective of this assessment is to assess the availability and levels of stock out of reproductive health commodities at the health facility level as well as the existence and functionality of the warehouses at the central, regional and state level in Somalia.

The specific objectives are to:

- Assess the availability and level of stock out of essential reproductive health commodities⁴ and life-saving maternal health drugs.
- Determine the functionality of the supply chain.
- Review the information related to staff supervision and training needs identification e.g., for logistic management system, forecasting, procurement and family planning service delivery.
- Determine the availability of guidelines and protocols for supply chain and stock management.
- Review the methods used for safe disposal of unused or expired medicines at the facility level and the availability of guidelines for disposal of expired medicines.
- Assess the use of the generic contraceptives by the end users.

⁴ **Maternal life-saving commodities:** (1) Ampicillin; (2) Azithromycin; (3) Benzathine benzylpenicillin; (4) either Betamethasone *or* Dexamethasone; (5) Calcium gluconate; (6) Ceftriaxone; (7) Gentamicin; (8) Hydralazine; (9) Magnesium sulfate; (10) Methyldopa; (11) Metronidazole; (12) Amoxicillin; (13) Misoprostol; (14) Nifedipine; (15) Oxytocin; (16) *Either* Sodium chloride *or* Sodium lactate compound solution; (17); Tetanus toxoid vaccines; (18) Clotrimazole; (19) Iron and Folic Acid supplements; **Contraceptives:** (1) male condoms; (2) female condoms; (3) oral contraceptives; (4) injectable contraceptives; (5) Emergency Contraception; (6) IUDs; (7) Implants; (8) Sterilization for women; (9) Sterilization for men.



- Review the use of technology for data entry for consumption data and stock status of reproductive health and family planning supplies.
- Feedback from clients and their satisfaction especially the feedback on the user's fees for basic health services.

The company will also analyse the findings and make key recommendations for improving the availability of RH commodities and access to quality SRH services. Given the scope of the work, the company may work with select experts to achieve the goals and objectives of this assessment.

It is envisaged that the assessment will obtain information on a set of Reproductive Health Commodity Security (RHCS) programmatic and managerial issues to inform SRHR milestones and reset targets where necessary.

In addition, the assessment will avail data for use in the preparation of the Annual Health Sector Performance Report; United Nations Sustainable Development Cooperation Framework (UNSDCF) progress reports and the Global Program report on RHCS among others.

The company will follow the UNFPA Supplies protocol and tools. Data collection will be done through appropriate software application that the consulting team may have or develop as needed. The company will keep the UNFPA Somalia Country Office informed through necessary orientation and guidance on the use of the selected App platform. Data collected through the platform will be transferred and processed in order to be compatible with Excel, SPSS, or STATA; and hence can then be used for data analysis for reporting on findings and formulation of conclusions and recommendations.

The company will establish appropriate communication and collaboration among the interested partners: Ministry of Health and UNFPA.

SCOPE OF THE SERVICES

The assessment will involve desk review and fieldwork as required to the sampled health facilities. The entire assessment exercise will take place for a maximum of four months, including analysis and report writing. Due to the COVID-19 pandemic, it is expected that the company will conduct part of this exercise virtually by using the remote and virtual communication platforms and portals such as Google meeting, MS Teams, Zoom virtual meeting platform or others.

METHODOLOGY AND TECHNICAL APPROACH

Phase 1 – Survey methodology and tools: A previously developed methodology including data collection templates and questionnaires will be provided by UNFPA. In addition, the company will have developed a data collection App to enter and populate the templates with the questionnaire and templates for questions and indicators to collect the required data.

The company must follow the methodology provided, including sampling methodology, survey questionnaire structure and annotated outline for reporting. The company will be responsible for adapting the questionnaire to each Somali regional context as needed. Any suggested deviation from the proposed methodology must be shared and validated by the UNFPA Somalia Country Office Chief of Health beforehand.

Phase 2 – Implementation of the survey: This phase will focus on data collection as per the defined protocol, data analysis and report drafting. The developed App will be used as the electronic platform



for data collection. The company will be expected to put in place quality control mechanisms for maintaining high standards throughout the survey process.

Phase 3 – Development of the final report: This phase includes sharing of the preliminary report to UNFPA and consequent revision according to feedback received from partners and stakeholders; presentation of findings to UNFPA and relevant stakeholders; and submission of the final report.

The company will establish appropriate communication and collaboration among the main stakeholders – the Government of Somalia (including the Ministry of Health and Central Warehouse management team) and UNFPA. The company will be responsible for providing UNFPA with a data quality control plan along with double checking Standard Operating Procedures (SOPs) before data collection, and for implementing it. The company will be responsible for formulating and presenting conclusions and recommendations based on the assessment findings and presenting these findings and recommendations to stakeholders, and others considered pertinent.

EXPECTED DELIVERABLES AND DEADLINES

The following deliverables are expected from this service, in hard copy and soft copy versions, including PDF, Word and Excel Worksheets versions as applicable:

1. Survey protocol.
2. Report outline with assessment protocols.
3. Draft survey report.
4. Full data sets.
5. Final survey report with recommendations.
6. Dissemination materials (e.g., 4-to-6-page summary, presentations of findings/reports in PowerPoint format).

Deliverables	Deadlines (*)
Survey protocol	2 weeks after commencement of contract
Report outline with survey protocol finalised	3 weeks after commencement of contract
Data set repository completed with preliminary data analysis prepared	8 weeks after commencement of contract
Draft survey report prepared and full data sets complete	10 weeks after commencement of contract
Final survey report and dissemination materials	12 weeks after commencement of contract

Note: (*) Above deadlines are tentative and are to be revised and amended upon drafting of the contract.

ACTIVITIES AND TASKS

1. Desk review of relevant documents.
2. Submission of survey protocol to UNFPA and MoH.
3. Data collection in the developed electronic App platform and analysis as referred in the protocol.
4. Management of the survey.
5. Comparative analysis with data sets.
6. Draft and final survey report, including incorporating comments from UNFPA and stakeholders.



7. Presentation to UNFPA and stakeholders of dissemination materials about the survey draft and final findings and recommendations.

The company will work in close coordination with UNFPA Somalia Country Office's Sexual and Reproductive Health (SRH) team and the M&E Specialist.

Requirements of the Company

- (a) Proven experience in similar types of evaluations and assessment in developing countries.
- (b) Experience in post-conflict and/or conflict countries.
- (c) Experience in international development work in developing countries.
- (d) Strong technical capabilities as evidenced by previous and/or current assignments in international development, preferably with the United Nations, bilateral donors, international development cooperation agencies, or international financial institutions.

Qualifications and Skills of the Consulting team

The company will need to put together a team of professionals to deliver the required outputs. As a minimum, this team will consist of:

Team Leader:

- Minimum of Master's degree in Evaluation and Social Research Methods, Programme Management, International Development, Public Health, Social Science, or related fields.
- Demonstrated knowledge, competence and working experience on health facility assessments, health-related surveys and similar exercises.
- Excellent research skills including data collection, data analysis and report writing, preferably in the field of sexual and reproductive health or health system assessment.
- At least 7 years of proven experience in conducting surveys, research data management, technical assessments of development programmes, and report writing, preferably in the area of health.
- Excellent planning, analytical, and organizational skills.
- Good knowledge and experience with online platforms/apps for data collection.
- Knowledge of the regions of Somalia and the Somalia public sector, familiarity with SRH issues and the health sector in Somalia, as well as experience in supply chain management will be considered an asset.
- Proficiency in statistical packages (Excel, STATA, SPSS and/or others).
- Fluency in English. Knowledge of Somali an advantage.
- Familiarity with UNFPA or the UN is an added value.

Associate Researcher(s)

- Minimum of Master's degree in Programme/Project Evaluation and Social Research Methods, Public Health, Statistics or Bio-Statistics, International Development, Social Science, or related fields.
- Excellent research skills including data collection, data analysis and report writing, preferably in the field of sexual and reproductive health or health systems assessment.
- At least 5 years of proven experience in conducting surveys and managing data collection teams.
- Extensive experience in analyzing surveys and statistics, preferably in the area of health.
- Experience in designing and leading surveys in public health, in SRH and supply chain management.
- Excellent knowledge and experience with online platforms/apps for data collection.



- Proficiency in statistical packages (Excel, STATA, SPSS and/or others).
- Experience both in quantitative and qualitative analysis.
- Knowledge of the regions of Somalia and the Somalia public sector, familiarity with SRH issues and the health sector in Somalia, as well as experience in supply chain management will be considered an asset.
- Fluency in English. Knowledge of Somali an advantage.
- Familiarity with UNFPA or the UN is an added value.

The company may wish to propose additional team members as deemed necessary to undertake the assignment. It would be ideal that at least one team member is a fluent Somali speaker.

Travel and Expenses

Visits to participating health facilities in all regions in Somalia as a result of the sampling exercise will be required. Bidders are requested to integrate necessary resources and travel budget in the financial proposal (under out-of-pocket expenses). The following facilities (with locations) need to be part of this assessment:

- (a) Mogadishu Central Warehouse (Mogadishu, Somalia)
- (b) Garowe Central Warehouse (Garowe, Puntland)
- (c) Hargeisa Central Warehouse (Hargeisa, Somaliland)
- (d) Estimated sample size of health facilities to be assessed as part of the assignment: 50 in total, spread across the entire country, and disaggregated as follows: **27** Primary health facilities and **23** Secondary health facilities.

Further distribution of the health facilities to be assessed is given below.

Total number of health facilities to be assessed on-site: 23 facilities distributed as follows:

- (i) Banadir Regional Administration (3 with at least 1 CEmONC center)
- (ii) Galmudug (3 with at least 1 CEmONC center)
- (iii) Hirshabelle (3 with at least 1 CEmONC center)
- (iv) Jubaland (3 with at least 1 CEmONC center)
- (v) South West (3 with at least 1 CEmONC center)
- (vi) Puntland (4 being 2 CEmONC centers and 2 BEmONC centers)
- (vii) Somaliland (4 being 2 CEmONC centers and 2 BEmONC centers)

Further, all CEmONC centers currently supported by UNFPA (23 in total) need to be part of the assessment, 9 of which need to be visited in person for the assessment and the remaining 14 may be assessed remotely. The list of the 23 CEmONC centers supported by UNFPA is as follows:

No.	CeMONC Facility Name	Location
1.	Banadir Hospital	Federal Government of Somalia (FGS)
2.	Daynile Hospital	FGS
3	De Martino Hospital	FGS
4.	Jowhar Hospital	FGS
5.	Beletweyne Hospital	FGS
6.	Kismayo Hospital	FGS

7.	Guricel Hospital	FGS
8.	Baardheere Hospital	FGS
9.	Baravo Hospital	FGS
10.	Bayhawa Hospital	FGS
11.	Hargeisa Group Hospital	Somaliland
12.	Lasanod Hospital	Somaliland
13.	Gabiley Hospital	Somaliland
14.	Erigavo HOSPITAL	Somaliland
15.	Burao HOSPITAL	Somaliland
16.	Aluula District Hospital	Puntland
17.	Ayaan Community Hospital	Puntland
18.	Badhan District Hospital	Puntland
19.	Dahar District Hospital	Puntland
20.	Eyl District Hospital	Puntland
21.	Jariiban District Hospital	Puntland
22.	Garowe (General) Referral Hospital	Puntland
23.	Bosaso General Hospital	Puntland

The remaining number of health facilities (27 with this count) may be assessed remotely. The total count will then be 50 facilities assessed: 23 facilities to be assessed on-site plus 27 facilities to be assessed remotely.



SECTION II – ANNEX A: INSTRUCTIONS FOR PREPARING TECHNICAL BID

The Technical Bid should be concisely presented and structured in the following order to include, but not necessarily be limited to, the following information:

1. Brief description of the firm and the firm's qualifications: providing information that will facilitate our evaluation of your firm/institution's substantive reliability, such as catalogues of the firm, and financial and managerial capacity to provide the services.
2. Your firms' understanding of the requirements for services and the objective of this project, including assumptions: Include any assumptions as well as comments on the data, support services and facilities to be provided as indicated in the TOR or as you may otherwise believe to be necessary.
3. Proposed Approach, Methodology, Timing and Outputs: any comments or suggestions on the TOR, as well as your detailed description of the manner in which your firm/institution would respond to the TOR. You should include the number of person hours/days in each specialization that you consider necessary to carry out all work required.
4. Proposed Team Structure: The composition of the team that you would propose to provide to the assignment, and the work tasks (including supervisory) which would be assigned to each. An organogram/organization chart illustrating the reporting lines, together with a description of such organization of the team structure should support your Bid.
5. Proposed Project Team Members: attach the curriculum vitae of the senior professional member of the team and members of the proposed team.
6. Detailed description of your proposed deliverables.
7. Detailed project plan (Gantt chart) showing the required resources and support from your firm as well as from UNFPA.
8. Detailed description of the technical specifications of your Bid.
9. A list of tasks which are out-of-scope versus in-scope.
10. Why you would be qualified for this project (Similar reference deliverables, ideally with live examples).
11. UNFPA requests Bidders to submit information on environmental and social policies and any related documentation in their Bid.
12. Copies of current certificates such as GMP/quality, FSC/_CPP, manufacturer's ISO certificate for any product, manufacturer's CE certificate, USA 510k, Japan QS standard, etc. as and if applicable
13. All standard forms as explained under clause Section I: Instructions to Bidders, clause 16

Bidder(s) should not include any information or indications related to their Financial Bid in their Technical Bid. Such action will definitely lead to disqualification of entire Bid.



SECTION III: GENERAL CONDITIONS OF CONTRACT

UNFPA's General Conditions of Contract are available through the links below as well as attached as a separate PDF document in this RFP.

Provision of Goods	For contract/PO values equivalent or over USD 100,000, covering goods	English	French	Spanish
------------------------------------	-----------------------------------------------------------------------	-------------------------	------------------------	-------------------------



SECTION IV: UNFPA SPECIAL CONDITIONS OF CONTRACT

CONTRACT RATES	The rates charged for the services performed shall not be adjustable.
SERVICES DEFINED	Services are to include design, installation and commissioning, training services, technical assistance and warranty services as required to supply in the contract.
KEY PERFORMANCE INDICATORS	<p>Successful Bidders performance will be monitored and evaluated by UNFPA on a monthly basis to enable the assessment on the effectiveness, efficiency and/or consistency of services provided. The results of the evaluation will be communicated to the supplier to enable improvements.</p> <p>An extension of the contract will take into consideration results of performance evaluation(s).</p> <p>The evaluation will be based on, but not limited to, the following key performance indicators:</p> <p>Services:</p> <ul style="list-style-type: none"> • Expected output achieved; • Satisfactory level of quality and technical competence; • Effective and timely communication/ document handling and professionalism; • Timely delivery of services based on client requirements; • Adherence to contractual agreement (Purchase Order, contract terms and conditions). <p>Key performance indicators may be modified and/or added during the validity of this contract.</p>
PAYMENT TERMS	<p>UNFPA's policy is to pay for the performance of contractual services rendered and/or to effect payment upon the achievement of specific milestones described in the contract.</p> <p>UNFPA's policy is not to grant advance payments except in unusual situations where the potential supplier, whether a private firm, non-governmental organization or a government or other entity, specifies in the Bid that there are special circumstances warranting an advance payment. UNFPA will normally require a bank guarantee or other suitable security arrangement in such cases.</p> <p>Any request for an advance payment is to be justified and documented, and must be submitted with the Financial Bid. The justification shall explain the need for the advance payment, itemize the amount requested and provide a time schedule for utilization of said amount. Information about your financial status must be submitted, such as audited financial statements at 31 December of the previous year and include this documentation with your financial bid. Further information</p>

	<p>may be requested by UNFPA at the time of finalizing contract negotiations with the awarded Bidder.</p>
<p>REPORTING</p>	<p>In addition of any already described condition, for contracts with an annual value greater than USD 200,000, suppliers must provide annual internal control attestation reports prepared by independent auditors based on recognized standards, such as the International Standard on Assurance Engagements (ISAE) 3402, Assurance Reports on Controls at a Service Organization, or the Statement on Standards for Attestation Engagements (SSAE) 16, Reporting on Controls at a Service Organization, to give UNFPA reasonable assurance on the adequacy of the design and operating effectiveness of the controls in place over the services provided to UNFPA. If the services provided to UNFPA are in turn subcontracted by the service provider, attestation reports should also be obtained for the concerned subcontractors.</p>

SECTION V: SUPPLIER QUALIFICATION REQUIREMENTS

1. Legal and regulatory requirements

1.1. This will be judged based on the bid confirmation form submitted by the Bidders. Special consideration will be given to the Bids not suggesting any alternative or suggesting alternatives that are fully acceptable to UNFPA. Bids should clearly indicate where the Bidder does not accept, the reason(s) for the non-acceptance, and the alternative provision, for each of the terms of the RFP as well as the UNFPA General Conditions of Contracts: De Minimis Contracts, Provision of Goods, Provision of Goods and Services. (For this, use SECTION VI – ANNEX B: BID SUBMISSION FORM)

2. Legal status of the Bidder

- 2.1. Technical Proposals from the Bidders should provide evidence that the Bidder is established as a company and legally incorporated in the country; e.g. through provision of certification of incorporation or other evidence (this is not required for companies already registered in national, regional or international Stock Exchanges. However, evidence on such registrations should be provided)
- 2.2. Copy of valid manufacturing license from the country of manufacturing and/or a copy of company registration in the country of operation demonstrating that is duly authorized to supply these goods/services to the country of destination
- 2.3. In the case of a Bidder not doing business within the country of destination, the Bidder is or will be represented by an agent in the country that is equipped and able to carry out the supplier's maintenance, training, repair and spare parts-stocking obligations prescribed in the SECTION I: INSTRUCTIONS TO BIDDERS and SECTION II:

3. Bidder's eligibility

- 3.1. Technical Proposals from the Bidders should provide written confirmation that they are not listed in any of the banned/suspended supplier lists. (SECTION VI – ANNEX B: BID SUBMISSION FORM)
 - Listed as suspended or removed by the United Nations Procurement Division (UNPD);
 - Declared ineligible by other organizations of the United Nations through the disclosure of the ineligibility or listing as suspended on United Nations Global Marketplace Vendor ineligibility list posted on the United Nations Global Market Place (UNGMP);
 - Included on the [UN 1267 list](#) issued by the Security Council resolution 1267 that establishes a sanctions regime to cover individuals and entities associated with Al-Qaida and/or the Taliban;
 - Debarred by the World Bank Group in accordance with the [WB Listing of Ineligible Firms & Individuals](#) and the [WB Corporate Procurement Listing of Non-Responsible Vendors](#).

4. Financial stability

4.1. Financial stability of the Bidders will be judged based on the ratios such as current ratio, quick ratio and debt ratio. Bidders are requested to provide key financial ratios using the table below with their audited financial statements to support the statements. The financial ratios should cover key financial stability ratios over a five-year period, including those mentioned in the table below.

Financial Ratio	2019	2020	2021
Current ratio			
Quick ratio			
Debt ratio			
.....			

4.2. Evidence that the Bidder has successfully completed at least one similar contract/LTA within the last five years for supply of goods or services as offered.

4.3. Provide contact details of commercial banks and names of contact persons from whom UNFPA could seek feedback regarding financial stability.

5. Experience and Technical Capacity

- Company’s managerial capabilities
- Evidence for quality assurance systems in place
- Bidder must have delivered similar services satisfactorily to UN or similar organizations during the last three years, and the services should have been delivered with no negative performance reports
- References in support of the satisfactory delivery of services specified above
- Data to support that the Bidder has capacity to perform the services that will be issued pursuant to the contract and complete the deliverables within the stipulated delivery period



SECTION VI: BID AND RETURNABLE FORMS

Below find an overview of the attached Bidding and returnable forms required for the RFP.

Description		Status	Preferred file for submission
Annex A:	Bid Confirmation Form	Mandatory	PDF
Annex B:	Bid Submission Form	Mandatory	PDF
Annex C:	Bidder Identification Form	Mandatory	PDF
Annex D:	Bidder's Previous Experience	Mandatory	PDF
Annex E:	Price Schedule Form	Mandatory	PDF & Excel
Annex F:	Joint Venture Partner Information Form	Optional	PDF
Annex G:	Checklist of Bid Forms	Not Applicable	Not Applicable
Annex H:	Bank Guarantee for Advance Payment	Optional	PDF



SECTION VI – ANNEX A: BID CONFIRMATION FORM

[Complete this page and return it prior to bid opening]

To:	UNFPA Somalia Country office	Date:	22 JULY 2021
		Email:	<i>bids.somalia@unfpa.org</i>
From:	<i>[Insert Company Name]</i>		
	<i>[Insert Contact person from Company]</i>		
	<i>[Insert Telephone number]</i>		
	<i>Insert E-mail address of contact person]</i>		
	<i>[Insert Postal address of Company]</i>		
Subject:	UNFPA/SOM/RFP/21/017		

<input type="checkbox"/>	YES, we intend to submit a bid in response to the above mentioned RFP.
<input type="checkbox"/>	NO, we are unable to submit a bid in response to the above mentioned RFP due to the following reason(s):

- () The requested products and/or services are not within our range of supply.
- () The requested products are not available at the moment.
- () We are unable to submit a competitive bid for the requested products/services at the moment.
- () We cannot meet the requested specifications.
- () The information provided for bidding purposes is insufficient and unclear
- () Your RFP document is too complicated
- () Insufficient time is allocated to prepare an adequate Bid.
- () We cannot meet the delivery requirements.
- () We cannot adhere to your terms and conditions (please specify: payment terms, request for performance security, etc.):
- () Our current capacity is overbooked
- () We are closed during the holiday season
- () We had to give priority to other clients' requests
- () We do not sell directly, but through distributors
- () We have no after-sales service available in the recipient country
- () The person handling bid is away from the office
- () Other (please specify)

<input type="checkbox"/>	YES, even though on this occasion we have not submitted a Bid we are definitely interested in future possible RFP's.
<input type="checkbox"/>	No, we are not interested in participating in future possible RFP's, please remove us from your vendor database.

If UNFPA should have any questions in regards to this Bid Confirmation Form and would require further clarification on our No Bid decision, UNFPA should contact the following focal person who will be able to assist:

Name:		E-mail:	
Post Title:		Telephone	



SECTION VI – ANNEX B: BID SUBMISSION FORM

Date: [Insert Month, Day, Year]

To: UNFPA
 [Insert Address of office coordinating Bid process]

The undersigned, having read the original RFP documents of UNFPA/SOM/RFP/21/017 including all Annexes, any subsequent revisions and all answers to the questions received from prospective Bidders posted on United Nations Global Marketplace in full before submitting, hereby offers to provide the services, in accordance with any specifications stated and subject to the terms and conditions set out or specified in the RFP documents.

Special Note: If Bidder proposes any deviations from the terms and conditions stipulated in the RFP document, such deviations must be included on this form in accordance with the below format. Such deviations should not be indicated within the main body or any other part of the Bid. If the proposed modifications are not acceptable to UNFPA, UNFPA reserves the right to reject the Bid. Strongly discouraging deviations for semantic changes.

Original term/condition per RFP UNFPA/SOM/RFP/21/017 and the subsequent revisions	Proposed deviation (alternate clause), by the undersigned	Reason for proposing alternate clause

We agree to abide by this Bid for a period of [Select between 60-120 days depending on the type of and the complexity of the service going to be procured; should be in line with clause 13] from the date fixed for Bid opening in the Request for Proposal, and the Bid shall remain binding upon us and may be accepted at any time before the expiration of that period.

If our Bid is accepted, we undertake to commence and complete delivery of all items in the contract within the time frame stipulated.

We understand that UNFPA is not bound to accept any Bid it may have received and that a binding contract would result only after final negotiations and award of contract are concluded on the basis of the Technical and Financial Bids.

We confirm that our firm has no conflict of interest in accordance with Section I: Instructions to Bidders clause 2.3, as well as that our firm, its affiliates or subsidiaries, including any subcontractors or suppliers for any part of the LTA, have not been declared ineligible by UNFPA, in accordance with Section I: Instructions to Bidders clause 2.4.

	On behalf of Business Authority	On behalf of Legal Authority
Signature:		
Name:		
Title:		
Name of Company:		
Telephone:		
Email:		



SECTION VI – ANNEX C: BIDDER IDENTIFICATION FORM

UNFPA/SOM/RFP/21/017

1. Organizational Information	
Company/Institution Name	
Address, City, Country	
Telephone/FAX	
Website	
Date of establishment	
Legal Representative: Name/Surname/Position	
Legal structure: natural person/Co. Ltd, NGO/institution/other (specify)	
Organizational Type: Manufacturer, Wholesaler, Trader, Service provider, etc.	
Areas of expertise of the organization	
Current Licenses, if any, and permits (with dates, numbers and expiration dates)	
Years supplying to UN organizations	
Years supplying to UNFPA	
Production Capacity	
Subsidiaries (indicate names of subsidiaries and addresses, if relevant to the Bid)	
Commercial Representatives in the country: Name/Address/Phone (for international companies only)	

2. Quality Assurance Certification	
International Quality Management System (QMS)	
List of other ISO certificates or equivalent certificates	
Presence and characteristics of in-house quality control laboratory (if relevant to Bid)	

3. Expertise of Staff	
Total number of staff	
Number of staff involved in similar contracts	

4. Contact details of persons that UNFPA may contact for requests for clarification during Bid evaluation	
Name/Surname	
Telephone Number (direct)	
Email address (direct)	
Be advised that this person must be available during the two weeks following the Bid opening date.	

Signature and stamp of the Bidder:	
Name:	
Title:	
Name of Company:	
Telephone:	
Email:	



SECTION VI – ANNEX D: BIDDER’S PREVIOUS EXPERIENCE

Order No. & Date	Description ⁵	Client	Contact person, phone number, email address	Date of service		Contract Amount	Satisfactory completion
				From	To	(Currency)	

Indicate the description of products, services or works provided to their clients.

To be attached: Evidence (client’s letter or certificate) in support of satisfactory completion of above orders.

Signature and stamp of the Bidder:		Countersigned by and stamp of Chartered Accountant	
Name and title:		Name and title:	
Name of Company:		Name of Company:	
Telephone:		Telephone:	
Email:		Email:	
Date:		Date:	

[Countersignature by chartered accountant should be included if procurement expenditure is estimated to surpass the USD 100,000 annual threshold]

⁵ Please indicate relevant contracts to the one requested in the RFP.

SECTION VI – ANNEX E: PRICE SCHEDULE FORM

(Please see attached Excel spread sheet Annex E: Price Schedule Form.xls)

1. Submit this document in a separate email from the Technical Bid as indicated in Section I: Instructions to Bidders clause 18 Submission, sealing, and marking of Bids and in Annex I Instructions to Bidders.
2. All prices/rates Bid must be exclusive of all taxes, since UNFPA is exempt from taxes.
3. The Price Schedule Form must provide a detailed cost breakdown, as shown below. Provide separate figures for each of the steps in Item 1 below; estimates for out of pocket expenses should be listed separately in Item 2 below.
4. UNFPA anticipates awarding the project on a fixed-price basis. To complete an analysis of the Bid, firms are required to submit itemized pricing that identifies the people who will work on the project (including resumes), their billing rates, and the number of hours proposed for the project. Anticipated travel, lodging, and out-of-pocket expensed should be detailed as well.

Item	Description	Unit	Quantity	Unit cost	Total	Comments
1. Professional Fees						
<i>Total Professional Fees</i>					\$\$	
2. Out-of-Pocket expenses						
<i>Total Out of Pocket Expenses</i>					\$\$	
Total Contract Price <i>(Professional Fees + Out of Pocket Expenses)</i>					\$\$	
Add your categories that you want to have under the price schedule form						



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Signature and stamp of the Bidder:	
Name:	
Title:	
Name of Company:	
Telephone:	
Email:	



SECTION VI – ANNEX F: JOINT VENTURE PARTNER INFORMATION FORM

[The Bidder shall fill in this Form in accordance with the instructions below.]

Date: *[insert date (as month, day, and year) of Bid Submission]*

UNFPA/CCC/RFP/21/NNN

Page _____ of _____ pages

1. Bidder's Legal Name: <i>[Insert Bidder's legal name]</i>
2. Joint Venture (JV) Party Legal Name: <i>[Insert JV's Party legal name]</i>
3. JV's party country of registration: <i>[Insert JV's Party country of registration]</i>
4. JV's party year of registration: <i>[Insert JV's Part year of registration]</i>
5. JV's party legal address in country of registration: <i>[Insert JV's Party legal address in country of registration]</i>
6. JV's party authorized representative information Name: <i>[Insert name of JV's Party authorized representative]</i> Address: <i>[Insert address of JV's Party authorized representative]</i> Telephone/Fax numbers: <i>[Insert telephone/fax numbers of JV's Party authorized representative]</i> Email Address: <i>[Insert email address of JV's Party authorized representative]</i>
7. Attached are copies of original documents of: <i>[Check the box(es) of the attached original documents]</i> <input type="checkbox"/> Articles of Incorporation or Registration of firm named in 2, above, in accordance with Section I: Instructions to Bidders clause 2: Eligible Bidders. <input type="checkbox"/> JV Agreement, or letter of intent to enter into such an agreement, signed by the legally-authorized signatories of all the parties



SECTION VI – ANNEX G: CHECKLIST OF BID FORMS

The following checklist is provided as a courtesy to Bidders. Please use this checklist while preparing the Bid to ensure that your Bid contains all required information. This checklist is for the Bidder’s internal reference and does *not* need to be submitted with the Bid.

ACTIVITY	LOCATION	YES/NO/ N/A	REMARKS
Have you read and understood all of the Instructions to Bidders in Section I of the Bidding documents?	SECTION I: INSTRUCTIONS TO BIDDERS		
Have you reviewed and agreed to the UNFPA General Conditions of Contracts?	SECTION III: GENERAL CONDITIONS OF CONTRACT		
Have you reviewed and agreed to the UNFPA Special Conditions for Contracts?	SECTION IV: UNFPA SPECIAL CONDITIONS OF CONTRACT		
Have you completed the Bid Submission Form?	SECTION VI – ANNEX B: BID SUBMISSION FORM		
Have you completed the Bidder’s Identification Form?	SECTION VI – ANNEX C: BIDDER IDENTIFICATION FORM		
Have you completed the Bidder’s Previous Experience Form?	SECTION VI – ANNEX D: BIDDER’S PREVIOUS EXPERIENCE		



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Have you completed and signed the Price Schedule Form?	SECTION VI – ANNEX E: PRICE SCHEDULE FORM		
Have you completed the Joint Venture Partner Information Form? [If applicable]	SECTION VI – ANNEX F: JOINT VENTURE PARTNER INFORMATION FORM		
Have you reviewed all of the relevant Contract form(s)?	SECTION VII: CONTRACTUAL FORMS		
Have you prepared a copy of the previous year’s audited Company Balance Sheet and Financial Statements?	Section I: Instructions to Bidders, clause 11 & SECTION V: SUPPLIER QUALIFICATION REQUIREMENTS		
Have you provided written confirmation that your company is neither suspended by the United Nations system nor debarred by the World Bank Group?	SECTION VI – ANNEX B: BID SUBMISSION FORM & Section I: Instructions to Bidders clause 2.4		
Have you provided a copy of any of your company’s environmental or social policies, and any related documentation?	Section I: Instructions to Bidders, clause 39		
Have you reviewed the UN Global Compact requirements?	Section I: Instructions to Bidders, clause 39		
Have you sealed and marked the Bids according to Instructions to Bidders clause 19.3 (electronic Bids) or clause 19.4 (hard copy Bids)	Section I: Instructions to Bidders, clause 19		



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If submitted electronically through email, is the file size of the Bid less than 20MB?	Section I: Instructions to Bidders, clause 19.3.3		
Have you noted the Bid closing deadline?	Invitation Letter number 3		
Have you provided information on Supplier Qualification Requirements?	SECTION V: SUPPLIER QUALIFICATION REQUIREMENTS & SECTION VI – ANNEX B: BID SUBMISSION FORM		
Have you provided evidence that the Bidder has successfully completed at least one similar contract within the last five years for supply of goods/services?	SECTION V: SUPPLIER QUALIFICATION REQUIREMENTS		
Have you provided contact details of commercial banks and names of contact persons from whom UNFPA can seek feedback?	SECTION V: SUPPLIER QUALIFICATION REQUIREMENTS		



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<p>Have you provided sufficient documentation of your company's ability to undertake the services, i.e.,</p> <ul style="list-style-type: none"> - List of similar contracts/LTAs executed for other clients including contact details. - Evidence that the Bidder possesses experience in the geographical area. - At least three years of experience in performing similar contracts/Long Terms Agreements 	<p align="center">SECTION VI – ANNEX D: BIDDER'S PREVIOUS EXPERIENCE</p> <p align="center">&</p> <p align="center">SECTION V: SUPPLIER QUALIFICATION REQUIREMENTS</p>		
<p>Have you provided sufficient documentation of your company's managerial capability?</p> <ul style="list-style-type: none"> - Details of company's managerial structure. - Quality assurance systems in place. 	<p align="center">SECTION VI – ANNEX C: BIDDER IDENTIFICATION FORM</p>		
<p>Have you supplied clients' certificates in support of the satisfactory operation of the goods/services as specified above?</p>	<p align="center">SECTION VI – ANNEX D: BIDDER'S PREVIOUS EXPERIENCE</p>		
<p>Have you checked Section I: Instructions to Bidders, clauses 16, 17 & 18 and provided all requested documentation in the correct formats?</p>	<p align="center">Section I: Instructions to Bidders, clauses 16 & 17</p>		



SECTION VII: CONTRACTUAL FORMS

Below find an overview of the attached contractual forms for this RFP.

Description		Status	Preferred file for submission
Annex A:	Template of Contract for Professional Services	Mandatory	PDF
Annex B:	Bank Guarantee for Advance Payment	Mandatory	PDF
Annex C:	Performance Security	Optional	PDF



SECTION VII – ANNEX A: TEMPLATE OF CONTRACT FOR PROFESSIONAL SERVICES

CONTRACT N° UNFPA/CCC/PSC/YY/NNN

BETWEEN THE

UNITED NATIONS POPULATION FUND

AND

[INSERT NAME OF CONTRACTOR]

FOR THE PROVISION OF [DESCRIBE SERVICES]

This Contract is entered into between the United Nations Population Fund, a subsidiary organ of the General Assembly of the United Nations (“UN”) in terms of Article 22 of the UN Charter, with its Headquarters at 605 Third Avenue, New York, NY 10158, USA (the “UNFPA”) and [Name of Contractor], a [type of entity] organized under the laws of [country], with its registered office at [address] (the “Contractor”). UNFPA and the Contractor are collectively referred to herein as the “Parties” and each individually as a “Party”.

WITNESSETH

WHEREAS, UNFPA wishes to engage the Contractor in order to provide [description of services] as specified in the Terms of reference (the “TOR”) attached as Annex B (the “Services”) in accordance with the terms and conditions set forth in this Contract;

WHEREAS, the Contractor represents that it possesses the requisite knowledge, skill, personnel, resources and experience and that it is fully qualified, ready, able and willing to undertake and provide the Services in accordance with the terms and conditions set forth in this Contract;

NOW, THEREFORE, in consideration of their mutual covenants herein contained, the Parties agree as follows:



**ARTICLE 1
CONTRACT DOCUMENTS**

1.1. This document together with the Annexes attached hereto and referred to below, all of which are incorporated herein and made a part hereof, constitute the entire contract between UNFPA and the Contractor for the provision of the Services (the “Contract”).

Annex A:	UNFPA General Conditions of Contract: Contracts for the Provision of Services (the “UNFPA General Conditions”);
Annex B:	Terms of reference, [and]
[Annex C:]	[Any other document that may be required – delete if not applicable].

1.2. The Contract documents are complementary of one another, but in case of ambiguities, discrepancies, or inconsistencies between or among them, the following order of priority shall apply:

1.2.1	First, this document;
1.2.2	Second, Annex A;
1.2.3	Third, Annex B, [and]
1.2.4	[Fourth, Annex C – delete is not applicable]

1.3. This Contract embodies the entire agreement between the Parties with regard to the subject matter hereof and supersedes all contemporaneous or prior representations, agreements, contracts and proposals, whether written or oral, by and between the Parties on this subject.

Note to UNFPA user: *If reference to the solicitation documents in the Contract is desired, please add the following paragraph 1.4 and complete it as necessary. Otherwise, please delete paragraph 1.4 entirely.*



1.4. The following documents are referred to in this Contract only as aids in interpretation of the rights and obligations of the Parties under the Contract but shall not be construed, for any purposes or under any circumstances, as creating any such rights or obligations: (a) [e.g. the CONTRACTOR’s technical proposal dated] and (b) [e.g. the CONTRACTOR’s financial proposal dated [date] in response to (c) bid document UNFPA/[]]. The documents referred to in this Article 1.4 are not attached hereto but are known to, and in the possession of, the Parties.

**ARTICLE 2
COMMENCEMENT DATE; CONTRACT TERM**

2.1 This Contract shall enter into force on the date of the last signature affixed by the Parties (the “Commencement Date”). This Contract shall remain in force for [insert number in figures and in words] years, starting from the Commencement Date (the “Contract Term”), unless terminated by either Party in accordance with Article 13 of the UNFPA General Conditions of Contract.

**ARTICLE 3
OBLIGATIONS OF THE CONTRACTOR**

3.1 The Contractor shall perform the Services as specified in Annex B with due diligence and efficiency and in accordance with this Contract.

Note to UNFPA user: *If a deliverables schedule is desired, please add the sentence below and complete the deliverables schedule as necessary. If a deliverables schedule is not necessary, please delete below sentence and deliverables schedule accordingly.*

The Contractor shall submit to UNFPA the deliverables according to the following schedule:

DELIVERABLES	DEADLINE	RESPONSIBILITIES OF UNFPA	RESPONSIBILITIES OF THE CONTRACTOR



- 3.2 Unless otherwise provided for in this Contract the Contractor shall furnish all technical and administrative support, human resources, materials and equipment necessary to ensure the timely and satisfactory performance of the Services.
- 3.3 All reports shall be written in the English language, and shall describe in detail the services rendered under the Contract during the period of time covered in such report. All reports shall be transmitted by the Contractor by mail and email to the address specified in Article 8.2 of this Contract.
- 3.4 The Contractor represents and warrants the accuracy of any information or data provided to UNFPA for the purpose of entering into this Contract, as well as the quality of the deliverables and reports foreseen under this Contract in accordance with the highest industry and professional standards.
- 3.5 The Contractor will maintain, within the Contract Term, detailed financial records, which clearly identify all funds received from UNFPA and expended by the Contractor for the implementation of the Contract. The Contractor is also required to ensure that adequate systems of internal control are put in place to ensure the financial management of this Contract is conducted with the required level of due diligence.

**ARTICLE 4
PAYMENT AND FEE**

- 4.1 In full consideration for the complete, satisfactory, and timely performance of the Services under this Contract, UNFPA shall pay the Contractor the fee of [Insert currency & amount in figures and in words] (the “Fee”).

***Note to UNFPA user:** If a payment schedule is desired, pls. add sentence below and complete the payment schedule as necessary. If a payment schedule is not necessary, pls. delete below sentence and payment schedule.*

The Fee will be paid to the Contractor according to the following payment schedule:

PAYMENT DUE DATE	PAYMENT AMOUNT	BALANCE



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- 4.2 The Fee shall be inclusive of all applicable cost of material, professional charges, allowances, travel related costs and any other miscellaneous expenses applicable.
- 4.3 The Fee shall not be subject to any adjustment or revision because of price or currency fluctuations or the actual costs incurred by the Contractor in the performance of the Contract.
- 4.4 Payments effected by UNFPA to the Contractor shall not be deemed to relieve the Contractor of its obligations under this Contract nor as an acceptance of UNFPA of the Contractor's performance of the Services.
- 4.5 UNFPA shall make payments to the Contractor under this Contract within thirty (30) days after the UNFPA's receipt of the Contractor's invoice(s) and complete set of supporting documentation where applicable. The Contractor shall forward the original invoice(s) to the address specified in Article 8.2 of this Contract. Payments shall be subject to satisfactory completion of the deliverables stipulated under Article 3 of this Contract and acceptance by UNFPA of the deliverables and invoice(s) submitted by the Contractor.

Payments by UNFPA shall be made to the Contractor's following bank account:

Account name:	
Bank Address:	
Acct Number:	
ABA Number:	
BIC (Swift address):	

ARTICLE 5
SPECIAL CONDITIONS

Note to UNFPA user: Enter *ONLY* one of the two following options. Please assure to delete the option which was not used as well as the text boxes accordingly.



Utilize this option in case that special conditions have been negotiated amongst the parties to the General Conditions of Contract: Contracts for the provision of services or in the case that the Contractor insist on including any other special provisions:

5.1 The Parties agree that **[Insert article]** of the UNFPA General Conditions shall be amended to read as follows: **[Insert wording of amended article]**.

5.2 The Parties agree (...).]

Utilize this wording option if no special conditions apply:

5.3 No special conditions shall apply.

Note to UNFPA user: *If travel is required to be carried out by the Contractor in order to fulfil the terms of reference of this contract, please include the below article 6 associated with security requirements linked with travel. Should the contract not require for the Contractor to travel, please delete the entire article. Please assure that in case of deleting that the correct numbering of articles and subsequent paragraphs is guaranteed.*

ARTICLE 6 SECURITY

6.1 The Contractor shall be fully responsible for the safety and security of its personnel and for the safekeeping of all assets, equipment and supplies in the custody of the Contractor or its personnel (as this term is referred to in Article 2 of the General Conditions).

6.2 The Contractor shall:

6.2.1 Put in place and maintain its own security plan, taking into account the security situation in the country where the Services are being provided;

6.2.2 Assume all risks and liabilities related to the Contractor's security, assets entrusted to it by UNFPA and the full implementation of its own security plan.



- 6.3 The Contractor and its personnel are neither subject to, nor obliged to adhere to the United Nations Security Management policies and procedures, except insofar as they relate to the utilization of UNFPA's assets, equipment and supplies, or as required to perform the Services under this Contract.
- 6.4 UNFPA may lend reasonable assistance, when possible and to the extent feasible, to the Contractor and its personnel. Any travel or financial assistance provided shall be on a space-available and reimbursable basis.
- 6.5 UNFPA may, at its sole discretion, consent to the inclusion of the Contractor and its personnel in the UNFPA security plan to the extent that it applies within the country where the Services are being provided on the same terms that are offered to implementing partners of UNFPA. Notwithstanding this provision, the Contractor acknowledges and agrees that the UNFPA shall have no obligation to evacuate personnel from the country where the Services are being provided in case of emergency or due to security developments.
- 6.6 Notwithstanding the foregoing, the Contractor acknowledges and agrees that the UNFPA shall not be liable to the Contractor, or its personnel, in connection with the provision, or failure to provide, any security assistance pursuant to this Article 6.1, or otherwise, and the Contractor shall indemnify, defend, hold and save harmless the UNFPA and its officials, employees and agents from and against any claim or liability of any nature arising in respect of any safety or security related incident, including without limitation, the death, injury or illness of any personnel, or the loss, damage, destruction, sabotage or theft of any assets, equipment or supplies in the custody of the Contractor or its personnel. The foregoing indemnity is without prejudice to any other indemnity provided by the Contractor, or any other rights or remedies of the UNFPA, under this Contract.
- 6.7 Upon the Contractor's request, UNFPA may provide security advisory information to the Contractor.

ARTICLE 7
REVIEW; IMPROPER PERFORMANCE

- 7.1 UNFPA reserves the right to review and inspect (including the performance of tests, as appropriate) all Services performed by the Contractor under this Contract, to the extent practicable, at all reasonable places and times during the Contract Term. UNFPA shall perform such review and inspection in a manner that will not unduly hinder the performance of the Services by the Contractor. The Contractor shall cooperate with all such reviews and inspections by UNFPA, at no cost or expense to UNFPA.



- 7.2 If any Services performed by the Contractor do not conform to the requirements of this Contract, without prejudice to and in addition to any of UNFPA's other rights and remedies under this Contract or otherwise, UNFPA shall have the following options, to be exercised in its sole discretion:
- 7.3 If UNFPA determines that the improper performance can be remedied by way of re-performance or other corrective measures by the Contractor, UNFPA may request the Contractor in writing to take, and the Contractor shall take, at no cost or expense to the UNFPA, the measures necessary to re-perform or take other appropriate actions to remedy the improperly performed Services within [insert number in figures and in words] days after receipt of the written request from UNFPA or within such shorter period as UNFPA may have specified in the written request if emergency conditions so require, as determined by UNFPA in its sole discretion.
- 7.4 If the Contractor does not promptly take corrective measures or if UNFPA reasonably determines that the Contractor is unable to remedy the improper performance in a timely manner, UNFPA may obtain the assistance of other entities or persons and have corrective measures taken at the cost and expense of the Contractor.
- 7.5 If UNFPA, in its sole discretion, determines that the improper performance cannot be remedied by re-performance or other corrective measures by the Contractor, UNFPA, at UNFPA's sole discretion, may terminate the Contract in accordance with Articles 13.1 or 13.2 (second sentence) of the UNFPA General Conditions, without prejudice to and in addition to any of its other rights and remedies under this Contract or otherwise.
- 7.6 Neither review nor inspection hereunder, nor failure to undertake any such review or inspection, shall relieve the Contractor of any of its warranty or other obligations under this Contract.

ARTICLE 8 MISCELLANEOUS

- 8.1 No terms or provisions of this Contract will be deemed waived and no breach excused, unless such waiver or excuse is in writing and signed by the Parties giving the waiver or excuse. No consent to, or excuse or waiver of, a breach of this Contract shall constitute a consent to, excuse or waiver of any other subsequent breach. Any notice, request or approval required or permitted to be given or made under the Contract shall be made in writing in the English language. Such notice, request or approval, shall be deemed to be duly given or made when it shall have been delivered by either (i) personal delivery against receipt, (ii) recognized overnight delivery service, (iii) postage prepaid, return receipt requested certified mail, or (iv) email, addressed to the party or parties for whom intended at the



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addresses shown below or such other addresses as intended recipient previously shall have designated by written notice previously given pursuant to the Contract.

For UNFPA:

Contractual Matters		Technical / operational Matters:	
Name:		Name:	
Title:		Title:	
Branch/Division:		Branch/Division:	
UNFPA, Address		UNFPA, Address	
Tel:		Tel:	
Email:		Email:	

For the Contractor:

Contractual Matters		Technical / operational Matters:	
Name:		Name:	
Title:		Title:	
Contractor name:		Contractor name:	
Address:		Address:	
Tel:		Tel:	
Email:		Email:	

- 8.3 If any provision of this Contract is held to be invalid, illegal or unenforceable, the validity, legality and enforceability of the remaining provisions will not in any way be affected or impaired.
- 8.4 Neither the Contractor nor any of its personnel (as this term is referred to in Article 2 of the General Conditions) shall engage in any corrupt, fraudulent, collusive, coercive, obstructive or unethical practices (“Proscribed Practices”). In the event of any Proscribed Practice, in addition to any other rights or remedies available to UNFPA under this Contract, the Contractor may, inter alia, be declared ineligible to continue business with UNFPA.
- 8.5 For purposes of this Contract, the following shall apply:
 - 8.5.1 “Corrupt practice” means the offering, giving, receiving, or soliciting, directly or indirectly, of anything of value to influence improperly the actions of a public official;



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- 8.5.2 “Fraudulent practice” means any act or omission, including misrepresentation, that knowingly or recklessly misleads, or attempts to mislead, a party to obtain a financial or other benefit, or to avoid an obligation;
 - 8.5.3 “Collusive practice” means an arrangement between two or more parties designed to achieve an improper purpose, including influencing improperly the actions of another party;
 - 8.5.4 “Coercive practice” means impairing or harming, or threatening to impair or harm, directly or indirectly, any party or the property of the party to influence improperly the actions of a party;
 - 8.5.5 “Obstructive practice” means any act or omission intended to materially impede the exercise of contractual rights of audit, investigation and access to information, including destruction, falsification, alteration or concealment of evidence material to an investigation into allegations of fraud and corruption;
 - 8.5.6 “Unethical practice” means any conduct or behaviour that is contrary to staff or supplier codes of conduct, such as those relating to conflict of interest, gifts and hospitality, post-employment provisions, abuse of authority and harassment.
- 8.6 UNFPA has adopted a zero tolerance policy on gifts and hospitality. The Contractor acknowledges that UNFPA personnel is prohibited from accepting any gift, even of a nominal value, including drinks, meals, food products, hospitality, calendars, stationery, transportation, recreational trips to sporting or cultural events, theme parks or offers of holidays, or any other forms of gifts, hospitality, benefits or discounts. The Contractor shall not offer any forms of gifts, hospitality, benefits or discounts to UNFPA personnel.
- 8.7 The Contractor acknowledges that the following vendors are considered ineligible for the award of any contract by UNFPA:
- 8.7.1 Vendors suspended or removed from the UN Procurement Division vendors’ list;
 - 8.7.2 Vendors declared ineligible by any UN organization;
 - 8.7.3 Vendors included on the World Bank’s listing of ineligible firms;
 - 8.7.4 Vendors included on the list maintained pursuant to the UN Security Council resolution 1267.
- 8.8 During the validity of this Contract, the Contractor shall inform UNFPA promptly and without delay by written notice if it or any of its principal officers have been included in any of the lists or listings referred to in Article 8.7 or if it or any of its principal officers have otherwise been declared ineligible for the award of any contract by any UN organization. Failure to fulfill this requirement will be considered as a breach of this Contract that entitles UNFPA to terminate this Contract forthwith.
- 8.9 By signing this Contract, the Contractor agrees that UNFPA is free to disclose this Contract to other UN agencies.



IN WITNESS WHEREOF, the authorized representatives of the Parties have signed this Contract on the dates set forth below:

For UNFPA		For [Contractor]	
Signature		Signature	
Name:		Name:	
Title		Title	
Date:		Date:	

(N.B. Each page of the contract is to be initialed)



SECTION VII – ANNEX B: BANK GUARANTEE FOR ADVANCE PAYMENT

The bank, as requested by the successful Bidder, shall fill in this Form in accordance with the instructions indicated.]

Date: [insert date (as day, month, and year) of Bid Submission]

RFP: UNFPA/SOMC/RFP/21/017

[bank's letterhead]

Beneficiary: [insert legal name and address of UNFPA]

ADVANCE PAYMENT GUARANTEE NUMBER: [insert Advance Payment Guarantee no.]

We, [insert legal name and address of bank], have been informed that [insert complete name and address of Bidder] (hereinafter called "the supplier") has entered into a Contract for Professional Services Number [insert number] dated [insert date of Agreement] with you, for the supply of [insert types of goods/services to be delivered] (hereinafter called the "contract").

Furthermore, we understand that, according to the conditions of the contract, an advance is to be made against an advance payment guarantee. At the request of the supplier, we hereby irrevocably undertake to pay you any sum or sums not exceeding in total an amount of [insert amount(s)⁶ in figures and words] upon receipt by us of your first demand in writing declaring that the supplier is in breach of its obligation under the contract because the supplier used the advance payment for purposes other than toward delivery of the goods/services.

It is a condition for any claim and payment under this guarantee to be made that the advance payment referred to above must have been received by the supplier on its account [insert number and domicile of the account]

This guarantee shall remain valid and in full effect from the date of the advance payment received by the supplier under the contract until [insert date⁷].

[signature(s) of authorized representative(s) of the bank]

⁶ The bank shall insert the amount(s), either in the currency(ies) of the contract or a freely-convertible currency acceptable to UNFPA.

⁷ Insert the delivery date stipulated in the contract delivery schedule. UNFPA should note that in the event of an extension of the time to perform the contract, UNFPA would need to request an extension of this guarantee from the bank. Such request must be in writing and must be made prior to the expiration date established in the guarantee. In preparing this guarantee, UNFPA might consider adding the following text to the Form, at the end of the penultimate paragraph: "We agree to a one-time extension of this guarantee for a period not to exceed [six months/one year], in response to UNFPA's written request for such extension, such request to be presented to us before the expiration of the guarantee."



SECTION VII – ANNEX C: PERFORMANCE SECURITY

The bank, as requested by the successful Bidder, shall fill in this Form in accordance with the instructions indicated.

Date: [insert date (as day, month, and year) of Bid Submission]

RFP: UNFPA/SOM/RFP/21/017

Bank's Branch or Office: [insert complete name of Guarantor]

Beneficiary: [insert legal name and address of UNFPA]

PERFORMANCE GUARANTEE NUMBER: [insert Performance Guarantee number]

We have been informed that [insert complete name of Bidder] (hereinafter called "the supplier") has entered into Contract for Professional Services Number [insert number] dated [insert day and month], [insert year] with you, for the supply of [description of goods and related services] (hereinafter called the "contract").

Furthermore, we understand that, according to the conditions of the contract, a performance guarantee is required.

At the request of the supplier, we hereby irrevocably undertake to pay you any sum(s) not exceeding [insert amount(s)⁸ in figures and words] upon receipt by us of your first demand in writing declaring the supplier to be in default under the contract, without cavil or argument, or your needing to prove or to show grounds or reasons for your demand or the sum specified therein.

This guarantee shall expire no later than the [insert number] day of [insert month] [insert year],⁹ and any demand for payment under it must be received by us at this office on or before that date.

This guarantee is subject to the Uniform Rules for Demand Guarantees, ICC Publication No. 458, except that subparagraph (ii) of Sub-article 20(a) is hereby excluded.

[Signatures of authorized representatives of the bank and the Supplier]

⁸ The Bank shall insert the amount(s) specified in the SCG and denominated, as specified in the SCG, either in the currency(ies) of the Contract or a freely-convertible currency acceptable to UNFPA.

⁹ UNFPA should note that, in the event of an extension of the time to perform the Contract, UNFPA would need to request an extension of this Guarantee from the Bank. Such request must be in writing and must be made prior to the expiration date established in the Guarantee. In preparing this Guarantee, UNFPA might consider adding the following text to the Form, at the end of the penultimate paragraph: "We agree to a one-time extension of this Guarantee for a period not to exceed [six months/one year], in response to UNFPA's written request for such extension, such request to be presented to us before the expiration of the Guarantee."



SECTION VIII: ANNEX A: SURVEY QUESTIONNAIRE

SURVEY QUESTIONNAIRE

2013 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICES

INFORMATION ABOUT THE INTERVIEW	
Country
Date of the Survey (year and month)
Name of Interviewer	Date of Interview.....
Time Interview Started.....	Time Interview Ended.....
Questionnaire checked and attested to be properly completed	
Name of Supervisor
Signature	Date)



The questionnaire is in two parts; Module 1 (sections 1 to 13) is for the health facility/SDP; and, module 2 (sections 14 and 15) is for exit interview of clients visiting the SDP.

To administer Module 1, the interviewer should find the person in charge of the facility or the most senior worker who is present at the facility on that day. It is recommended that the interviewer should greet the interviewee; introduce himself herself; and, explain the purpose of the visit.

To ensure informed consent to the interview it is necessary to read the following statement to the interviewee:

- Your facility was selected to participate in this study. We will be asking you questions about aspects of RH commodities and services in your facility including family planning. The information obtained from your facility and from other facilities will be used by the MOH and other partners to understand the situation and for better planning to improve on service provision.
- The survey is in two parts: The first part will be answered by you the service provider and the second part will be answered by the clients who are visiting the facility for family planning services. We will require your permission to carry on with the exit at the appropriate time.
- You are assured that your name or that of any other health worker who will be designated to respond to this questions or the name of any client WILL NOT be mentioned or included in the dataset or in any report of this survey.
- You may refuse to answer any question or choose to stop the interview at any time. However, we hope you will answer the questions, which will be of benefit to strengthening national efforts to provide RH services including family planning.
- If there are questions for which someone else is the most appropriate person to provide the information, we would appreciate if you introduce us to that person to help us collect that information.
- At this point, do you have any questions about the study? Do I have your agreement to proceed?

The interviewer can proceed with the interview once the consent of the interviewee has been obtained. At the end of the interview for the SDP [Sections 1 to 13]; please thank the interviewee for his/her time and the information provided; and, obtain his/her permission or the permission of the relevant authorities before carrying on with the Exit Interview of Family planning clients [Sections 14 and 15]



MODULE 1:

AVAILABILITY OF COMMODITIES



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SECTION 1: FACILITY IDENTIFICATION (Name, Location and Distance)	
SN ^o	ITEMS
001	Name of Service Delivery Point.....
002	A) Location (Name of Settlement)..... B) Location (Name of Administrative Unit).....
003	Indicate geographic coordinates of the SDP if any system Global Positioning System (GPS) is used; /____/____/
004	SDP is located in an urban area or a rural settlement (as per your country's classification; 1 Urban <input type="checkbox"/> 2 <input type="checkbox"/> Rural
005	A) What is the distance between the location of the health facility and the nearest warehouse or store or facility which this SDP receives its regular supplies? /_/_/_/ B) Please indicate distance is in; 1 Kilometers <input type="checkbox"/> 2 Mile <input type="checkbox"/>

SECTION 2: SDP TYPE AND SERVICES PROVIDED	
006	Level of Service Delivery Point(Tick the option that is applicable to your country) Primary Level Care SDPs/facilities (or equivalent to country context) 1 <input type="checkbox"/> Secondary level care SDPs/facilities/hospitals (or equivalent) 2 <input type="checkbox"/> Tertiary level care SDPs/facilities/hospitals (or equivalent) 3 <input type="checkbox"/>
007	Management of Service Delivery Point: 1 Government <input type="checkbox"/> 2 Private <input type="checkbox"/> 3 NGO <input type="checkbox"/> 4 Others (please specify.....) <input type="checkbox"/>
008	Does this facility provide family planning services? 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> (If No, then items in Section 3 and 5 (that is 011 to 014 and 019 to 024) should NOT be administered)
009	Does this facility provide maternal health including delivery services (e. g. with a maternity unit or section for delivery)? 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/> (If No, then items in Section 4 (that is 015 to 018) should NOT be administered)
010	Does this facility provide any HIV/AIDS services (e.g. VCT, PMTCT, ART, etc.)? 1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>



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SECTION 3: MODERN CONTRACEPTIVE METHODS OFFERED AT SDP										
Please note that for the SDP to respond to items in this section, it should have indicated in Item 008 above that 'Yes' it provides family planning services										
Item	(1) Male condoms	(2) Female Condoms	(3) Oral Contraception	(4) Injectables	(5) IUDs	(6) Implants	(7) Sterilisation for Females	(8) Sterilisation for Male	(9) Emergency contraception	
011 With respect to each of the contraceptive methods, <u>please state whether the SDP is supposed/ expected to offer it, in line with the current national protocols, guidelines and/or laws specific for this level</u> of service delivery. Please discuss with the respondent and then record your conclusion before proceeding. (* Please recall SDP level as recorded in item 006 above)	1 Yes, this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	Yes , this SDP is expected /supposed to provide this method <input type="checkbox"/> 2 No, this SDP is NOT expected/ supposed to provide this method <input type="checkbox"/> <i>(Tick only one option)</i>	
	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>	1 Yes <input type="checkbox"/> 2 No <input type="checkbox"/>
	012 If 'Yes' in item 011 (i.e., this SDP is supposed/ expected to offer this method), please state whether the SDP actually <u>offer it to clients</u> on a regular basis	3 Not Applicable (because "No" to item 011) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 011) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>	3 Not Applicable (because "No" to item 01) <input type="checkbox"/> <i>(Tick only one option)</i>
NOTE, FOR EACH OF THE METHODS - If this SDP is actually supposed/expected to OFFERS the contraceptive method but it is currently out of stock or not available at the time of the survey, please record as "Yes" (i.e.; the method is actually offered, although it is not currently in stock or available)										



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Item	(1) Male condoms	(2) Female Condoms	(3) Oral Contraception	(4) Injectables	(5) Emergency contraception	(6) IUDs	(7) Implants	(8) Sterilisation for Females	(9) Sterilisation for Male
<p>013 If this SDP is supposed/expected to offer this method to clients (in line with current national guidelines, etc.) but the response to 010 is "No", please indicate the main reason</p> <p><i>(Tick only one option [as the main reason] for each contraceptive)</i></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p> <p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	
<p>014 From responses provided to Item 012, discuss with the respondent and record the conclusion by ticking one of the following statements</p>	<p>IF THIS IS A PRIMARY SDPS (AS NOTED IN ITEMS 06)</p> <p>1 This SDP offers up to two modern contraceptive methods <input type="checkbox"/></p> <p>2 This SDP offers three and more (at least three) modern contraceptive methods <input type="checkbox"/></p>				<p>IF THIS IS A SECONDARY OR TERTIARY SDPS (AS NOTED IN ITEM 06)</p> <p>3 This SDP offers up to four modern contraceptive methods <input type="checkbox"/></p> <p>4 This SDP offers FIVE and more (at least three) modern contraceptive methods <input type="checkbox"/></p>				



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SECTION 4: AVAILABILITY OF MATERNAL/RH MEDICINES									
Items	Maternal/RH Medicines								
	Please note that for the SDP to respond to items in this section, it should have indicated in Item 009 above that 'Yes' it provides maternal health including delivery services								
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)
	Ampicillin	Azithromycin	Benzathine benzylpenicillin	<i>Either Betamethasone Or Dexamethasone Or Both of these medicines</i>	Calcium gluconate	Cefixime	Gentamicin	Hydralazine	Magnesium sulfate
015 With respect to each of the maternal/ RH Medicines, please state whether the SDP is supposed have it available; in line with the current national protocols, guidelines and/or laws specific for this level' of service delivery. Please discuss with the respondent and then record your conclusion before proceeding (* Please recall SDP level as recorded in item 006 above)	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available <u>any or both of these</u> Maternal /RH Medicines <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available <u>any or both of these</u> Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>	1 Yes , this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/> 2 No , this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/>
	(Tick only one option)	(Tick only one option)	(Tick only one option)	(Tick only one option)	(Tick only one option)	(Tick only one option)	(Tick only one option)	(Tick only one option)	(Tick only one option)



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<p>016 If 'Yes' in item 015 (i.e., this SDP is expected/ supposed to have available the maternal /RH medicine) please state whether the medicine is currently available at the SDP</p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes (for any or both) <input type="checkbox"/></p> <p>2 No (for any or both) <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 015) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>
<p>017 If this SDP is supposed/ expected to have available this medicine (in line with current national guidelines, etc.) but the response to 015 is "No", please indicate the main reason <i>(Tick only one option [as the main reason] for each medicine)</i></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this SDP <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p> <p>5 No train staff to provide this medicine at the SDP <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>



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INTERVIEWER VERIFICATION for ITEM 016									
Medicines	(1) Ampicillin	(2) Azithromycin	(3) Benzathine benzylpenicillin	(4) <i>Either</i> Betamethasone <i>Or</i> Dexamethasone <i>Or Both of these</i> <i>medicines</i>	(5) Calcium gluconate	(6) Cefixime	(7) Gentamicin	(8) Hydralazine	(9) Magnesium sulfate
For each response provided for item 016 , the interviewer should validate the response by a physical Inventory and note the appropriate finding	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, <u>any or both</u> of the medicine(s) is/are in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock
	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, <u>any or both</u> of the medicine(s) is/are NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock

SECTION 4 continues on the next page

SECTION 4 - continues: AVAILABILITY OF MATERNAL/RH MEDICINES								
Items	Maternal/RH Medicines							
	Please note that for the SDP to respond to items in this section, it should have indicated in Item 007 above that 'Yes' it provides delivery services							
	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
	Methyldopa	Metronidazole	Mifepristone	Misoprostol	Nifedipine	Oxytocin	<i>Either</i> Sodium lactate compound solution <i>Or</i> Sodium chloride <i>Or Both of these</i> <i>medicines</i>	Tetanus toxoid



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<p>015-continues</p> <p>With respect to each of the maternal/ RH Medicines, please state whether the SDP is supposed have it available; in line with the current national protocols, guidelines and/or laws specific for this level* of service delivery. Please discuss with the respondent and then record your conclusion before proceeding</p> <p>(* Please recall SDP level as recorded in in item 006 above)</p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available <u>any or both of these</u> Maternal /RH Medicines <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available <u>any or both of these</u> Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes, this SDP is expected /supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p>2 No, this SDP is NOT expected/ supposed to have available this Maternal /RH Medicine <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>
<p>016-continues</p> <p>If 'Yes' in item 015 (i.e., this SDP is expected/ supposed to have available the maternal /RH medicine) please state whether each medicine is currently available at the SDP</p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes (for any or both) <input type="checkbox"/></p> <p>2 No (for any or both) <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>	<p>1 Yes <input type="checkbox"/></p> <p>2 No <input type="checkbox"/></p> <p>3 Not Applicable (because "No" to item 016) <input type="checkbox"/></p> <p><i>(Tick only one option)</i></p>
<p>017-continues</p> <p>If this SDP is supposed/ expected to have available this medicine (in line with current national guidelines, etc.) but the response to 013 is "No", please indicate the main reason</p> <p><i>(Tick only one option [as the main reason] for each medicine)</i></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this SDP with this medicine <input type="checkbox"/></p> <p>2 Delays by this SDP to request for supply of the medicine <input type="checkbox"/></p> <p>3 The medicine is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no demand/need for the medicine at this SDP <input type="checkbox"/></p>



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	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>	5 No train staff to provide this medicine at the SDP <input type="checkbox"/>
	7. Any other Reason (please specify).....	7. Any other Reason (please specify).....	7. Any other Reason (please specify).....	7. Any other Reason (please specify).....	7. Any other Reason (please specify).....	6 The SDP does not have a cold chain to store the medicine <input type="checkbox"/>	7. Any other Reason (please specify).....	7. Any other Reason (please specify).....
018 From responses provided to Item 016 above, please discuss with respondent and record the conclusion by ticking one of the following statements	1 Yes - this SDP has available the seven (7) lifesaving maternal/RH medicines (which included the two mandatory medicines [Magnesium Sulfate and Oxytocin] and any other five of the remaining medicines on the list - bearing in mind that; a) Sodium chloride and Sodium lactate compound solution are alternate; and b) Dexamethasone is an alternate to Betamethasone <input type="checkbox"/>					2 No - this SDP does not have available the seven (7) lifesaving maternal/RH medicines (which included the two mandatory medicines [Magnesium Sulfate and Oxytocin] and any other five of the remaining medicines on the list - bearing in mind that; a) Sodium chloride and Sodium lactate compound solution are alternate; and b) Dexamethasone is an alternate to Betamethasone <input type="checkbox"/>		

INTERVIEWER VERIFICATION for ITEM 016								
Medicines	(10) Methyldopa	(11) Metronidazole	(12) Mifepristone	(13) Misoprostol	(14) Nifedipine	(15) Oxytocin	(16) <i>Either</i> Sodium chloride <i>Or</i> Sodium lactate compound solution	(17) Tetanus toxoid
For each response provided for item 016 , the interviewer should validate the response by a physical Inventory and note the appropriate finding	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock	<input type="checkbox"/> Inventory taken, <i>any</i> or <i>both</i> of the medicine(s) is/are in stock	<input type="checkbox"/> Inventory taken, Medicine is in stock
	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock	<input type="checkbox"/> Inventory taken, <i>any</i> or <i>both</i> of the medicine(s) is/are NOT in stock	<input type="checkbox"/> Inventory taken, Medicine is NOT in stock



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SECTION 5: NO STOCK OUT OF MODERN CONTRACEPTIVE METHODS AT SDP

Please note that for the SDP to respond to items in this section, it should have indicated in Item 008 above that 'Yes' it provides family planning services

Item	(1) Male condoms	(2) Female Condoms	(3) Oral Contraception	(4) Injectables	(5) Emergency contraception	(6) IUDs	(7) Implants	(8) Sterilisation for Females	(9) Sterilisation for Male
(i): NO STOCK-OUT IN THE LAST THREE MONTHS BEFORE THE SURVEY									
019 With respect to each of the contraceptive methods that the SDP is supposed/expected to provide in line with the current national protocols, guidelines and/or laws specific for this level* of service delivery (as indicated in Item 011 above); please indicate whether it has been out of stock at this SDP on any given day, within the last three months preceding the survey, and therefore the contraceptive method was not available to give/provide to clients at this SDP <i>(* Please recall SDP level as recorded in in item 006 above)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>	1 Yes; this method has been out-of-stock (STOCK-OUT) on a given day at this SDP in the last three months <input type="checkbox"/> 2 No; this method has not been out-of-stock (NO STOCK OUT) on any given day at this SDP in the last three months <input type="checkbox"/> <i>(Tick only one option)</i>
020 From responses provided to Item 019 above, please discuss with respondent and record the conclusion by ticking one of the following statements	One or more of the contraceptive methods offered by this SDP has been out-of-stock on a given day in the last three months preceding the survey. Therefore, this SDP experienced stock out in the last three months [STOCK-OUT WITHIN THE LAST SIX MONTHS] <input type="checkbox"/>					All contraceptive method offered by this SDP has been available/ in-stock on all days in the last three months preceding the survey. Therefore, this SDP did not experience stock out in the last three months [NO-STOCK-OUT WITHIN THE LAST SIX MONTHS] <input type="checkbox"/>			
021 If "Yes" to Item 019 (that this method has been out of stock (STOCK OUT) at this SDP on any given day within the last three months (in line with current national guidelines, etc.) please indicate the main reason	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>	1 Delays on the part of main source institution/warehouse to re-supply this SDP with this contraceptive <input type="checkbox"/> 2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/>



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	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p> <p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p> <p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p> <p>7. Any other Reason (please specify).....</p>	
(ii): NO STOCK-OUT AT THE TIME OF THE SURVEY										
<p>022 With respect to each of the contraceptive methods that the SDP is supposed/expected to provide in line with the current national protocols, guidelines and/or laws specific for this level* of service delivery (as indicated in Item 011 above); please indicate whether it is currently out of stock at this SDP and therefore the contraceptive method was not available to give/provide to clients at this SDP</p> <p>(* Please recall SDP level as recorded in in item 006 above)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	<p>1 Yes; this method is currently out-of-stock (STOCK-OUT) at this SDP <input type="checkbox"/></p> <p>2 No; this method is currently not out-of-stock (NO STOCK OUT) at this SDP <input type="checkbox"/></p> <p>(Tick only one option)</p>	
<p>023 From responses provided to Item 022above, please discuss with respondent and record the conclusion by ticking one of the following statements</p>	<p>One or more of the contraceptive methods offered by this SDP is currently out-of- stock at this SDP.</p> <p>Therefore, this SDP is experiencing stock out on the day the survey [STOCK-OUT ON DAY OF SYRVEY] <input type="checkbox"/></p>			<p>ALL contraceptive method offered by this SDP are currently in-stock/available at this SDP.</p> <p>Therefore, this SDP did not experiencing stock out on the day of the survey [NO-STOCK-OUT ON DAY OF SYRVEY] <input type="checkbox"/></p>						



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<p>024 If “Yes” to Item 22 (that this method is out-of-stock STOCK OUT) at this SDP (in line with current national guidelines, etc.) please indicate the main reason</p> <p><i>(Tick only one option [as the main reason] for each contraceptive)</i></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	<p>1 Delays on the part of main source institution/warehouse to re-supply this contraceptive <input type="checkbox"/></p>	
	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>	<p>2 Delays by this SDP to request for supply of the contraceptive <input type="checkbox"/></p>
	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>	<p>3 The contraceptive is not available in the market for the SDP to procure <input type="checkbox"/></p>
	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>	<p>4 Low or no client demand for the contraceptive <input type="checkbox"/></p>
	<p>7. Any other Reason (please specify).....</p>	<p>7. Any other Reason (please specify).....</p>	<p>7. Any other Reason (please specify).....</p>	<p>7. Any other Reason (please specify).....</p>	<p>7. Any other Reason (please specify).....</p>	<p>7. Any other Reason (please specify).....</p>	<p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p>	<p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p>	<p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p>	<p>5 No train staff to provide this contraceptive at the SDP <input type="checkbox"/></p> <p>6. Lack of equipment for the provision of this contraceptive <input type="checkbox"/></p>

INTERVIEWER VERIFICATION for ITEM 022

Contraceptive	(1) Male condoms	(2) Oral Contraception	(3) IUDs	(4) Implants	(5) Injectables	(6) Female Condoms	(7) Sterilisation for Male	(8) Sterilisation for Females	(9) Emergency contraception
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For each response provided for item 022 , the interviewer should validate the response by a physical Inventory and note the appropriate finding	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock	<input type="checkbox"/> Inventory taken, contraceptive is in stock
	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock	<input type="checkbox"/> Inventory taken, contraceptive is NOT in stock

MODULE 2:

FACILITY RESOURCES



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SECTION 6: SUPPLY CHAIN <i>[To be responded to by all SDPs]</i>	
025 Who is the main person responsible for ordering medical supplies at this facility? <i>(Tick only one option)</i>	Medical Doctor 1 <input type="checkbox"/> Clinical Officer 2 <input type="checkbox"/> Pharmacist 3 <input type="checkbox"/> Nurse 4 <input type="checkbox"/> Other (specify) _____ 5 <input type="checkbox"/>
026 How are the resupplies for contraceptives for this facility determined? <i>(Tick only one option)</i>	Staff member(s) of this facility makes request based on calculation of quantity needed using a formula 1 <input type="checkbox"/> Quantity is determined by the institution/warehouse responsible for supplying this SDP 2 <input type="checkbox"/> Any other method used (please specify) 3 <input type="checkbox"/>
027 Does this SDP use any logistics forms for reporting and ordering supplies? <i>(Tick only one option)</i>	Yes (<i>enumerator verifies the availability of forms</i>) 1 <input type="checkbox"/> Yes (<i>but availability not observed by enumerator</i>) 2 <input type="checkbox"/> No; there are no logistics forms in use 3 <input type="checkbox"/>
028 What is the main source of your routine medicines and supplies? <i>(Tick only one option)</i>	Central Medical Stores 1 <input type="checkbox"/> Regional/district Warehouse or institution 2 <input type="checkbox"/> Local medical store on the same site 3 <input type="checkbox"/> NGO 4 <input type="checkbox"/> Donors 5 <input type="checkbox"/> Private Sources 6 <input type="checkbox"/>
029 Who is responsible for transporting products to your facility? <i>(Tick only one option)</i>	National/central government 2 <input type="checkbox"/> Local/District administration 1 <input type="checkbox"/> This Facility Collects 3 <input type="checkbox"/> Other(Specify) _____ 4 <input type="checkbox"/>
030 On average, approximately how long does it take between ordering and receiving products? <i>(Tick only one option)</i>	Less than two weeks 1 <input type="checkbox"/> More than two weeks but not up to one month 2 <input type="checkbox"/> More than one month but not up to two months 3 <input type="checkbox"/> More than two months but not up to four months 4 <input type="checkbox"/> More than four months but not up to six months 5 <input type="checkbox"/> More than six months 6 <input type="checkbox"/>



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031 On average, how frequently is the facility resupplied? <i>(Tick only one option)</i>	Once every two weeks 1 <input type="checkbox"/> Once every month 2 <input type="checkbox"/> Once every three months 3 <input type="checkbox"/> Once every six months 4 <input type="checkbox"/> Once a year 5 <input type="checkbox"/>
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SECTION 7: EXISTENCE OF COLD CHAIN AT SDP
[To be responded to by all SDPs]

032 Does this SDP have its own cold chain to store medicines or items? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/> Not Applicable (no to 032 above) 3 <input type="checkbox"/>
033 If yes to 032, please give a list of the reproductive/ maternal health medicines or items that this SDP stores in cold chain?	_____
034 If yes to 032; what type of cold chain does the SDP have? <i>(Tick only one option)</i>	Electric Fridge 1 <input type="checkbox"/> Ice box (SDP have to regularly replenish ice supply) 2 <input type="checkbox"/> Other (specify) _____ 3 <input type="checkbox"/> Not Applicable (no to 032 above) 4 <input type="checkbox"/>
035 If the type of cold chain (in 034) is a fridge please indicate the source of power for this <i>(Tick only one option)</i>	Electricity from national grid 1 <input type="checkbox"/> Generator plant at the SDP 2 <input type="checkbox"/> Portable generator at the SDP 3 <input type="checkbox"/> Kerosene/paraffin fuel 1 <input type="checkbox"/> Any Other (specify) _____ 3 <input type="checkbox"/> Not Applicable (no to 030 above) 4 <input type="checkbox"/>
036 If the SDP does not have its own cold chain, how does it preserve items that are supposed to be in cold chain?	_____

SECTION 8: STAFF TRAINING FAMILY PLANNING
[To be responded to by all SDPs]

037 Are there staff working at this SDP who are trained to provide family planning services? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
038 If yes; please indicate how many staff members are trained in provision of family planning services	[.....]
039 Is any staff member trained for the insertion and removal of implant contraceptive, specifically? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
040 If yes; please indicate how many staff members are trained for the insertion and removal of implant contraceptive	[.....]
041 Are the trained staff actually providing FP services <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>



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042 If no to item 041 please indicate the reason why the staff is NOT actually providing FP services (<i>Tick only one option</i>)	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
043 When last did any staff at this SDP receive training in provision of family planning services (<i>Tick only one option</i>)	In the last two months 1 <input type="checkbox"/> Between two and six months ago 2 <input type="checkbox"/> Between six month and one year ago 3 <input type="checkbox"/> More than one year ago 4 <input type="checkbox"/>
044 Did the training exercise include the insertion and removal of implant contraceptive (<i>Tick only one option</i>)	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>

SECTION 9: STAFF SUPERVISION FOR REPRODUCTIVE HEALTH INCLUDING FAMILY PLANNING

[To be responded to by all SDPs]

045 When was the last time this facility was visited by a supervisory authority in the past 12 months? (<i>Tick only one option</i>)	In less than one Month 1 <input type="checkbox"/> between one and three Months ago 2 <input type="checkbox"/> Between three and six months ago 3 <input type="checkbox"/> Between six month and one year ago 4 <input type="checkbox"/> Not supervised in the past 12 month 5 <input type="checkbox"/>
046 How frequently does this facility receive visits from supervisory authorities? (<i>Tick only one option</i>)	Weekly 1 <input type="checkbox"/> Monthly 2 <input type="checkbox"/> Every three months 3 <input type="checkbox"/> Every six months 4 <input type="checkbox"/> Once a year 5 <input type="checkbox"/> Never 6 <input type="checkbox"/>
047 Which of the following were included in the supervision (<i>Tick only one option</i>)	Staff clinical practices 1 <input type="checkbox"/> Drug stock out and expiry 2 <input type="checkbox"/> Staff availability and training 3 <input type="checkbox"/> Data completeness, quality, and timely reporting 4 <input type="checkbox"/> Review use of specific guideline or job aid for reproductive health 5 <input type="checkbox"/> Any other please specify..... 6 <input type="checkbox"/>

SECTION 10: AVAILABILITY OF GUIDELINES, check-lists and Job aid

[To be responded to by all SDPs]

048 This facility has available any <u>family planning guidelines</u> (national or WHO)? (<i>Tick only one option</i>)	Yes (enumerator verifies the availability of guidelines 1 <input type="checkbox"/> Yes availability of guideline not verified 2 <input type="checkbox"/> Not available 3 <input type="checkbox"/>
049 This facility has available any <u>family planning check-lists and/or job-aids</u> ? (<i>Tick only one option</i>)	Yes (enumerator verifies the availability of guidelines 1 <input type="checkbox"/> Yes availability of guideline not verified 2 <input type="checkbox"/> Not available 3 <input type="checkbox"/>
050 This facility has available any <u>ANC guidelines</u> (national or WHO)? (<i>Tick only one option</i>)	Yes (enumerator verifies the availability of guidelines 1 <input type="checkbox"/> Yes availability of guideline not verified 2 <input type="checkbox"/> Not available 3 <input type="checkbox"/>
051	Yes (enumerator verifies the availability of guidelines 1 <input type="checkbox"/> Yes availability of guideline not verified 2 <input type="checkbox"/> Not available 3 <input type="checkbox"/>



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This facility has available any ANC check-lists and/or job-aids? <i>(Tick only one option)</i>	
052 This facility has available any <u>Waste disposal guideline</u> ? <i>(Tick only one option)</i>	Yes (enumerator verifies the availability of guidelines 1 <input type="checkbox"/> Yes availability of guideline not verified 2 <input type="checkbox"/> Not available 3 <input type="checkbox"/>

SECTION 11: AVAILABILITY AND USE OF INFORMATION COMMUNICATION TECHNOLOGY (ICT)
[To be responded to by all SDPs]

053 Does this facility use any form of Information Communication Technologies (ICT) System <i>(see list in 054 below)</i> - <i>(Tick only one option)</i>	Yes (enumerator verifies availability) 1 <input type="checkbox"/> Yes (availability not verified) 2 <input type="checkbox"/> No ICT is not used 3 <input type="checkbox"/>
054 If Yes; which of the following types ICTs are used in the SDP <i>(Tick ALL the options that apply)</i>	Computer 1 <input type="checkbox"/> Mobile phones - basic handsets 2 <input type="checkbox"/> Mobile phones - smart phones 3 <input type="checkbox"/> Tablets 4 <input type="checkbox"/> Internet facilities – LAN 5 <input type="checkbox"/> Internet facilities - Wi-Fi 6 <input type="checkbox"/> Other.....(specify) 7 <input type="checkbox"/>
055 How did the SDP acquire the ICT? <i>(Tick ALL the options that apply)</i>	Staff members personal item 1 <input type="checkbox"/> Provided by government 2 <input type="checkbox"/> Provided by proprietor of SDP 3 <input type="checkbox"/> Received as Donation 4 <input type="checkbox"/> Other.....(specify) 5 <input type="checkbox"/>
056 What is the main purpose for which the SDP uses the? <i>(Tick ALL the options that apply)</i>	Patient registration 1 <input type="checkbox"/> Facility record keeping 2 <input type="checkbox"/> Individual patient records/Electronic Medical Record 3 <input type="checkbox"/> Health Insurance Claims and Reimbursement System 4 <input type="checkbox"/> Mobile money cash transfers and payments 5 <input type="checkbox"/> Routine communication 6 <input type="checkbox"/> Awareness and demand creation activities 8 <input type="checkbox"/> Supply chain management/stock control 9 <input type="checkbox"/> Health worker training 10 <input type="checkbox"/> Clinical consultation (long distance communication with experts) 7 <input type="checkbox"/> Other (specify)..... 11 <input type="checkbox"/>

SECTION 12: WASTE DISPOSAL
[To be responded to by all SDPs]

057 How does the SDP dispose of health waste? <i>(Tick only one option)</i>	Burning on the grounds of the SDP 1 <input type="checkbox"/> Bury in special dump pits on the grounds of the SDP 2 <input type="checkbox"/> Use of Incinerators 3 <input type="checkbox"/> Centrally collected by specific agency for disposal away from the SDP 4 <input type="checkbox"/> Disposed with regular garbage 5 <input type="checkbox"/>
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MODULE 3:

EXIT INTERVIEW - CLIENTS' PERCEPTION AND APPRAISAL OF COST FOR FP SERVICES

NOTE

Please inform the respondent that;

- You are not a staff member of the SDP but here to talk to ask their opinion about the services they have just received
- Although the staff of the SDP have been informed about, and have given permission for the exercise; they will not be told anything that the respondent says
- The questions are not personal and his/her name or particulars will not be recorded
- His/her response will not be used against anybody
- He/she may refuse to answer any question or choose to stop the interview at any time. However, you hope he/she will answer the questions, which will be useful to improve on the services that are provided.
- If he/she has any questions about the study he/she can ask at this stage

The interviewer can then ask client, if he/she agrees to proceed with the interview. Once the consent of the interviewee has been obtained, then the interviewer can proceed with the interview.



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SECTION 14: EXIT INTERVIEW - CLIENTS' PERCEPTION

[To be administered to clients at SDPs offering FP services (indicating 'Yes' to Item 008 above)]

14.1 Respondents Background	
064 Age	/_/_/
065 Sex <i>(Tick only one option)</i>	Male 1 <input type="checkbox"/> Female 2 <input type="checkbox"/>
066 Marital status <i>(Tick only one option)</i>	Never Married or in union 1 <input type="checkbox"/> Currently Married or in Union 2 <input type="checkbox"/> Formerly Married (Divorced/separated/widowed) 3 <input type="checkbox"/>
067 Level of Education <i>(Tick only one option)</i>	No Education 1 <input type="checkbox"/> Primary 2 <input type="checkbox"/> Secondary and higher level 3 <input type="checkbox"/>
068 How often do you visit this SDP for FP services? <i>(Tick only one option)</i>	Once a month 1 <input type="checkbox"/> Once every 2 months 2 <input type="checkbox"/> Once every 3 months 3 <input type="checkbox"/> Others (please specify) 4 <input type="checkbox"/>
14.2 Provider adherence to technical aspects	
069 Were you provided with the family planning method of your choice at this SDP? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
070 Did the family service provider take your preference and wishes into consideration in deciding on the family planning method you received? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
071 Did the health worker teach you how to use the family planning method? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
072 Were you told about the common side effects of the family planning method? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
073 Did the health worker inform you about what you can do regarding the side effects of the family planning method should they occur? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
074 Did the health worker inform you about any serious complications that can occur, as a result of using the family planning method, for which you should come back to the SDP should such occur? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
075 Were you given any date when you should come back for check-up and/or additional supplies? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
14.3 Organizational aspect	
076 In your opinion did you wait too long for the service to be provided to you? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
077 Are you satisfied with the cleanliness of the health facility? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
078 Are you satisfied with the privacy at the exam room? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
079 Are you satisfied with the time that was allotted to your case by the health care provider? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>



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14.4 Interpersonal aspect	
080 Did staff at the health facility treat you with courtesy and respect <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
081 Did any of the health service providers force you to accept or insisted that you should accept the family planning method that you received today? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
082 Are you satisfied with the attitude of the health provider towards you generally? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
14.5 Outcome aspect	
083 Are you satisfied with the service you received? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
084 Will you continue visiting this SDP in future? <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
085 Would you recommend your relatives or friends to come to this clinic <i>(Tick only one option)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>

SECTION 15: EXIT INTERVIEW – CLIENTS’ APPRAISAL OF COST FOR FP SERVICES

[To be administered to clients at SDPs offering FP services (indicating ‘Yes’ to Item 008 above)]

15.1 Family Planning service payment	
086 For today’s visit did you pay to receive any family planning service? <i>(Tick only one option) - (If yes then continue with 087, but if no please skip to 088)</i>	Yes 1 <input type="checkbox"/> No 2 <input type="checkbox"/>
087 If you paid for anything today please how much did you pay for the following method (amount in local currency)? <i>(Indicate for ALL that apply)</i>	
Card 1 <input type="checkbox"/> /_____/	Laboratory test/x-ray 2 <input type="checkbox"/> /_____/
Contraceptive purchased from pharmacy 4 <input type="checkbox"/> /_____/	Consultation fee 5 <input type="checkbox"/> /_____/
	Contraceptive received from service provider 3 <input type="checkbox"/> /_____/
	Others (please specify) 6 <input type="checkbox"/> /_____/
15.2 Travel cost	
088 What was the <u>main</u> mode of transportation for you to travel from your place of residence to this SDP <i>(Tick only one option)</i>	
Walked 1 <input type="checkbox"/> <i>(if this is selected then skip to 091)</i>	Bicycle 2 <input type="checkbox"/>
Bus/taxi 4 <input type="checkbox"/>	Private vehicle 5 <input type="checkbox"/>
	Motorcycle 3 <input type="checkbox"/>
	Others (please specify) 6 <input type="checkbox"/> /_____/
089 What distance did you travel from your place of residence to this SDP /_____/ 1 Kilometers <input type="checkbox"/> 2 Mile <input type="checkbox"/> <i>(Tick only one option)</i>	
090 How much did it cost you to travel from your residence to this SDP /_____/ (amount in local currency)	
091 How much will it cost you to travel from your this SDP back to your residence /_____/ (amount in local currency)	
15.3 Family Planning time spent and cost	
092 How long did it take for you to travel from your place of residence to this SDP today /_____/ Hours ; /_____/ Minutes	
093 How long did it take for you to get the service at this SDP (time it took between your arrival at this SDP and the time you got the service today) /_____/ Hours ; /_____/ Minutes	
094 How long will it take you to travel back to your place of residence /_____/ Hours ; /_____/ Minutes	
095 What is the main thing you would have been doing during the time you have been here receiving FP services at this SDP today <i>(Tick only one option)</i>	
Household chores 1 <input type="checkbox"/>	Working on household farm 2 <input type="checkbox"/>
Selling in the market/trading 3 <input type="checkbox"/>	Employed as unskilled labourer 4 <input type="checkbox"/>



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Employed as skilled labourer 5 <input type="checkbox"/>		Clerical or professional work 6 <input type="checkbox"/>		Others (please specify) 7 <input type="checkbox"/>	
0096					
From the activity you referred to in 095, who took over this activity? <i>(Tick only one option)</i>					
Family member 1 <input type="checkbox"/>		Co-worker 2 <input type="checkbox"/>		Nobody 3 <input type="checkbox"/>	
				Other (please specify) 4 <input type="checkbox"/>	
0097					
Did you have to pay the person who took over the activity on your behalf <i>(Tick only one option)</i>					
				Yes 1 <input type="checkbox"/>	
				No 2 <input type="checkbox"/>	
0098					
If yes please indicate or estimate the monetary value of the payment <i>(Tick only one option)</i>					
				/_____/ (amount in local currency)	
15.4 Financing for FP					
0099					
Please indicate the where you obtain the resources to pay for the cost of FP services you have received today? <i>(Tick ALL the options that apply) - Please refer only to payments mentioned under 087 -(service payment)</i>					
Paid for by myself 1 <input type="checkbox"/>		Spouse (husband or wife) 2 <input type="checkbox"/>		Family Members other than spouse (husband or wife) 3 <input type="checkbox"/>	
				Others (please specify) 4 <input type="checkbox"/>	
0100					
Please indicate the amount for each of the sources mentioned in 099 for payment for the cost of FP services you have received today? <i>(Indicate for ALL the options that apply) – Indicate with reference to payments mentioned under 087 - service payment</i>					
Paid for by myself 1 <input type="checkbox"/>		Spouse (husband or wife) 2 <input type="checkbox"/>		Family Members other than spouse (husband or wife) 3 <input type="checkbox"/>	
/_____/ (amount in local currency)		/_____/ (amount in local currency)		/_____/ (amount in local currency)	
				Others (please specify) 4 <input type="checkbox"/>	
				/_____/ (amount in local currency)	

NOTE:

At this stage;

- 1) Inform him/her that the interview has ended, and**
- 2) Thank the interviewer for his/her time and for the information provided**



SECTION VIII: ANNEX B – ANNOTATED OUTLINE OF REPORT

2013 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICES

ANNOTATED OUTLINE FOR SURVEY REPORT

I. INTRODUCTION

Currently, the survey is proposed to be conducted in 46 countries and has been expanded to cover both the availability of RH commodities and salient aspects of service delivery facilities that underpin good RH programmes. In addition to assessing the availability and stock out of RH commodities, the survey will address supply chain (including cold chain); staff training and supervision; availability of guidelines and protocols, Information Communication Technology, method of waste disposal and user fee. In addition the survey will also obtain the views of clients about the services.

This annotated outline provides an activity plan for the conduct of the survey, a table of contents as a standard format for the report. Each country is therefore expected to closely follow the annotated outline so that cross country comparison of the findings can be assured.

I.1 Revision for 2015 (in any)

Please note that the timeframe for the indicator on “no stock out” (Part 3.4.2 of the annotated outline) has been revised from “stock out in the last six (6) months” to focus on “**no stock out in the last THREE months**”. The questionnaire has been revised accordingly to reflect a focus of stock out in the **LAST THREE MONTHS**.

II. REFERENCE TO NATIONAL GUIDELINES, PROTOCOLS AND LAWS

An important principle on which the sections of the survey focusing on availability and stock out of reproductive health medicines is that the assessment should be done with reference to the guidelines, protocols and laws that currently exist in a particular country relating to the provision of contraceptives and maternal/RH medicines. This principle has been emphasised in the questionnaire and should therefore be strictly adhered to by the researchers. For this reason, each survey report must provide a summary of the national



protocols, guidelines and laws which underline the provision of contraceptive and maternal/RH commodities in the different categories of SDPs. A section is provided in the proposed table of content in Annex A for the provision of this information.

As in the past years, the for the maternal/RH medicines it should be noted that a) Magnesium Sulphate and Oxytocin is mandatory; b) the any other 5 medicines should include any of the others bearing in mind that Sodium chloride and Sodium lactate compound solution are alternate; and that also Dexamethasone is an alternate to Betamethasone and in each of these two cases both medicines count as one.

III. OUTLINES OF THE REPORT

A chapter outline for the sections discussed below is attached to this outline as Annex A.

The report will be divided into:

a) *The preliminary pages of the report*

The will contain;

- The Forward and Acknowledgement will each be at most one page
- The Meaning of abbreviations used in the document will be compiled and presented in alphabetical order in the Acronyms.
- Lists of tables, charts, boxes and appendices will be provided alongside the table of contents.
- A succinct summary of the main findings of the report will be presented in the Executive Summary.

b) *The main body of the report*

The main body of the report will contain;

- Part I – which will discuss the introductory issues of the report. This will provide country background information; rationale and objective of the survey; research methodology including sampling procedure, questionnaire, fieldwork/data collection and data analysis; and, the limitations of the study.
- Part II will provide a summary of the national protocols, guidelines and laws which underline the provision of contraceptive and maternal/RH commodities in the different categories of SDPs in each country.
- Part III will focus on the findings of the survey with respect to key sections of the questionnaire. These will be as follows



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- General information about health facilities relating to the classification of facilities, and providing information on the management and location. Where this is possible, a map on the geographic locations of the facilities in each region could be presented.
- Information on SDPs offering modern contraceptive methods will be provided including information for the national and sub-national availability of three modern methods of contraceptives at primary SDP level and 5 modern contraceptives at secondary and tertiary SDP Levels. Also reasons why three modern methods of contraceptives are not provided in some facilities will be discussed. In addition to giving a general picture, peculiar reasons and as they related to specific methods could be highlighted.
- The availability of maternal RH medicines bringing out the national and sub national dimensions will be discussed. The discussion will also capture the key essence of the indicator (availability of the 7 medicines) in the various types/categories of SDPs in the country. Again tables and diagrams will be used to further explain the research findings. In this section, the reasons why the medicines are not available will be provided; bringing out the sub national dimension and the peculiarity of these reasons to specific service delivery points.
- Information on the incidence of ‘no stock out’ of modern contraceptives, bearing in mind that ‘no stock out’ is taken to mean a situation in which a family planning service delivery facility/service delivery point in a country does not run out of supplies of any one or more of the modern methods of contraceptives (that the service delivery point is expected/supposed to provide to clients in line with national guidelines and protocols) at any point in time over the last/previous **THREE (3) months**. The section will focus on the occurrence of ‘no stock out’ in last **THREE (3) months** as well as the occurrence of ‘no stock out’ on the day/moment of the survey. In addition the occurrence of product specific ‘no stock out’ for each contraceptive method will be examined; where possible with the aid of tables, diagrams and maps. Also, the reasons why the stock outs occurred will be analysed.
- Aspects of supply chain including sources of supplies; use of logistics forms; method of determining commodity needs; frequency and transportation of supplies and existence of cold chain will be discussed
- Information on staff training for family planning and their supervision (including frequency and purposes of supervisory visits)
- The availability of guidelines, check-lists and job aids at SDPs
- Information on the availability and use of information communication technologies; as well as method of waste disposal used by the SDPs
- Items for which the facility charges fees (including for consultation, commodities and for services) and instances where exemptions are made will also be examined
- Part IV of the report will focus on the results of the exit interview and will therefore discuss;
 - Information from the exit interview for clients perception regarding various aspects of service delivery; and
 - Clients’ estimation of the cost of FP.
- Part V of the report will contain the conclusions and key recommendations, based on the findings of the survey.

A list of possible tables to be generated for the analysis is presented in Annex B and the structures of the tables are indicated in Annex E.

As much as possible you can use this exercise to do a mapping of the service delivery points by obtaining the geographic coordinates of the SDPs. This will support spatial analysis and the use of maps for presentation of the results of the survey.



c) Closing part of the report

The closing part will contain lists of documents consulted and cited under the bibliography; methodological explanatory notes; the survey instrument; and additional tables and diagrams, etc., generated from the survey; add as annex to the report.

IV. TIMELINE

The survey will be conducted in accordance with planned timetable and the survey report that will be submitted to CSB in time for the preparation a consolidated summary report; input into the GPRHCS Annual 2021 Report; and, the update of data/information for the Performance Monitoring Framework of the GPRHCS II.

A proposed activity plan is presented in Annex C and a summary time table is added in Annex D.



ANNEX A

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- Acknowledgement**
- Acronyms**
- Contents**
- List of Tables and Graphs**
- List of Boxes and Diagrams**
- Executive Summary**

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- 1.2 Rationale and Objective of the study
- 1.3 Survey organization and management
- 1.4 Methodology and limitations
 - 1.4.1 Survey design and sampling of facilities
 - 1.4.2 Data collection
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ANNEXES



ANNEX B
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2. Percentage distribution of service delivery points offering at least three modern contraceptive methods by Administrative Unit (Region)
3. Percentage distribution of service delivery points offering at least three modern contraceptive methods by urban/rural residence
4. Percentage distribution of service delivery points offering at least three modern contraceptive methods by management of facility
5. Percentage distribution of service delivery points offering at least three modern contraceptive methods by distance from nearest warehouse/source of supplies

Modern contraceptives offered by secondary and tertiary facilities

1. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by type of facility
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4. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by management of facility
5. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by distance from nearest warehouse/source of supplies

Availability of Maternal and RH Medicines

6. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by type of facility
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8. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by urban/rural residence
9. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by management of facility

10. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by distance from nearest warehouse/source of supplies

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Supply Chain, including cold chain

21. Percentage distribution of SDPs with persons responsible for ordering medical supplies by type of SDPs
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23. Percentage distribution of SDPs with persons responsible for ordering medical supplies by urban/rural residence
24. Percentage distribution of SDPs with persons responsible for ordering medical supplies by management of facility
25. How re-supply is quantified by type of SDPs
26. How re-supply is quantified by Administrative Unit (Region)
27. How re-supply is quantified by urban/rural residence
28. How re-supply is quantified by management of facility
29. Main source of supplies type of SDPs
30. Main source of supplies by Administrative Unit (Region)
31. Main source of supplies by urban/rural residence
32. Main source of supplies by management of facility
33. Responsibility for transportation of supplies by type of SDPs
34. Responsibility for transportation of supplies by Administrative Unit (Region)
35. Responsibility for transportation of supplies by urban/rural residence
36. Responsibility for transportation of supplies by management of facility
37. Estimated length of time between order and receiving of supplies by type of SDPs
38. Estimated length of time between order and receiving of supplies by Administrative Unit (Region)
39. Estimated length of time between order and receiving of supplies by urban/rural residence

40. Estimated length of time between order and receiving of supplies by management of facility
41. Frequency of resupply by type of SDPs
42. Frequency of resupply by Administrative Unit (Region)
43. Frequency of resupply by urban/rural residence
44. Frequency of resupply by management of facility
45. Availability of cold chain by type of SDP
46. Availability of cold chain by Administrative Unit (Region)
47. Availability of cold chain by urban/rural residence
48. Availability of cold chain by management of facility
49. Source of power for Fridges used for cold chain by type of SDP
50. Source of power for Fridges used for cold chain by Administrative Unit (Region)
51. Source of power for Fridges used for cold chain by urban/rural residence
52. Source of power for Fridges used for cold chain by management of facility

Staff training and supervision

53. Percentage of SDPs with staff trained to provide FP services and for the insertion and removal of Implants



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54. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by type of SDP
55. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by Administrative Unit (Region)
56. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by urban/rural residence
57. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by management of facility
58. Percentage distribution of the last time staff received training for FP including for provision of implants by type of SDP
59. Percentage distribution of the last time staff received training for FP including for provision of implants by Administrative Unit (Region)
60. Percentage distribution of the last time staff received training for FP including for provision of implants by urban/rural residence
61. Percentage distribution of the last time staff received training for FP including for provision of implants by management of facility
62. Percentage distribution of the last time the facility was supervised in the past 12 months by type of SDP
63. Percentage distribution of the last time the facility was supervised in the past 12 months by Administrative Unit (Region)
64. Percentage distribution of the last time the facility was supervised in the past 12 months by urban/rural residence
65. Percentage distribution of the last time the facility was supervised in the past 12 months by management of facility
66. Percentage distribution of the frequency of supervisory visits by type of SDP
67. Percentage distribution of the frequency of supervisory visits by Administrative Unit (Region)
68. Percentage distribution of the frequency of supervisory visits by urban/rural residence
69. Percentage distribution of the frequency of supervisory visits by management of facility
70. Percentage of SDPs with issues included in supervisory visits by type of SDP
71. Percentage of SDPs with issues included in supervisory visits by Administrative Unit (Region)
72. Percentage of SDPs with issues included in supervisory visits by urban/rural residence
73. Percentage of issues included in supervisory visits by management of facility

Availability of guidelines, check-lists and job aids

74. Percentage of SDPs with guidelines, check-lists and job aids

Use of Information Communication Technology (ICT)

75. Percentage of SDPs with types of Information Communication Technology available
76. Percentage of SDPs by how ICT was acquired
77. Percentage of SDPs by main purpose for which ICT is used

Waste disposal

78. Percentage distribution of SDPs by how health wastes are disposed

Charges for user fees

79. Percentage distribution of SDPs by issues for which user fee is charged for consultation



- 80. Percentage distribution of SDPs by issues for which user fee is charged for medication
- 81. Percentage distribution of SDPs by issues for which user fee is charged for services provided by a qualified health care provider

CLIENTS EXIT INTERVIEW

Background characteristics of Clients

- 82. Sex distribution of clients
- 83. Age distribution of clients
- 84. Marital status of clients
- 85. Percentage distribution of clients by education level
- 86. Percentage distribution of clients by frequency of visit to the SDP for FP services

Clients' perception of family planning service provision

- 87. Percentage distribution of clients perspective of FP service provider's adherence to technical issues
- 88. Percentage distribution of clients perspective of FP service organizational aspects
- 89. Percentage distribution of clients perspective of FP service inter-personal aspects
- 90. Percentage distribution of clients perspective of FP service outcome aspects

Clients' appraisal of cost of family planning services

- 91. Percentage of clients reporting paying for service and average amount paid by type of SDP
- 92. Percentage of clients reporting paying for service and average amount paid by Administrative Unit (Region)
- 93. Percentage of clients reporting paying for service and average amount paid by urban/rural residence
- 94. Percentage of clients reporting paying for service and average amount paid visits by management of facility
- 95. Percentage distribution of clients by mode of transportation, distance travelled and cost of transportation
- 96. Average time spent by client for FP services
- 97. Percentage distribution of clients by activities they would have engaged in during the time spent receiving FP services
- 98. Percentage distribution of clients by persons indicated to have performed activities on their behalf while they were away receiving FP Services and the estimated average payment
- 99. Average amount paid to persons who performed activities on behalf of clients by activities performed while client was away receiving FP services
- 100. Percentage distribution of clients by source of funds used to pay for FP services
- 101. Average amount paid from each source by background characteristics of clients
- 102. Percentage distribution of service delivery points offering modern contraceptive method
- 103. Percentage distribution of service delivery points with any Maternal/RH Medicine Available
- 104. Percentage distribution of service delivery points with any modern contraceptive method in stock (NO STOCK OUT) in the last six months



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105. Percentage distribution of service delivery points with modern contraceptive method in stock (NO STOCK-OUT) at the time of the survey

ANNEX C
TENTATIVE ACTIVITY PLAN

Major and Sub-activity	Responsible Parties	Place	Time/Duration	Activity Outputs
1.0 Establish survey implementation mechanisms at country level				
1.1 Establish a survey committee at country level	Countries	Various		National committees established with TOR
1.2 Undertake consultations with partners at the country level	Countries	Various		Reports/minutes of consultations
1.3 Establish a survey virtual follow-up mechanism	CSB, Regional offices, Countries	Various		Virtual follow-up mechanism established with TOR
1.4 Develop and make available Listing of Health Facilities by category and administrative unit	Countries	Various		Number of listing forms printed
1.5 Use recommended sampling procedure to select samples for the survey from the list of health facilities	Countries	Various		List of sampled facilities for each category of health facility for each administrative unit
1.6 Prepare manuals and forms for the receipt, checking and storage of completed questionnaires	Countries	Various		Number of supervisors and enumerators manuals forms printed
2.0 Pre-test and Finalize Survey Instruments				
2.1 Recruit and train field staff enumerators and supervisors; and data entry staff	Countries	Various		Final lists trained field staff
2.2 Adapt and pre-test the survey questionnaire (using some trained staff)	Countries	Various		Reports and recommendations on re-test of questionnaire
2.3 Finalize survey questionnaires, forms and manuals	Countries	Various		Finalized questionnaires, manuals and forms
2.4 Print adequate number of questionnaires for the survey	Countries	Various		Number of survey questionnaires printed



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Major and Sub-activity	Responsible Parties	Place	Time/Duration	Activity Outputs
3.0 Undertake Field data collection				
3.1 Undertake Field data collection	Countries	Various		Number of completed and edited questionnaires
3.2 Receive, verify and store completed questionnaires	Countries	Various		Number of questionnaires received, verified and stored
4.0 Undertake Data Processing and produce final tables				
4.1 Undertake data entry	Countries	Various		Number of questionnaires edited and entered into computer programme
4.2 Produce and check preliminary tables	Countries	Various		Preliminary tables produced
4.3 Produce final tables	Countries	Various		Final tables produced
5.0 Undertake In-depth Analysis and Preparation of Final Report				
5.1 Undertake report writing and prepare first draft of survey report	Countries	Various		First draft report prepared
5.2 Circulate first draft for comments from partners	Countries	Various		Copies of comments from partners
5.3 Review and revise first draft and taken into consideration comments from partners	Countries	Various		The reviewed copy of first draft report
5.4 Finalise survey report	Countries	Various		Final copy of survey report
6.0 Disseminate Survey Findings				
6.1 Send Survey Report to respective Regional Offices with copy to CSB	Countries	Various		Final copy of survey reports available at ROs and CSB
6.2 Disseminate survey findings widely and promote its utilisation in country	Countries	Various		Forums organized to disseminate survey findings

ANNEX D
TENTATIVE SUMMARY TIME TABLE

Main Activity	Month															
	1				2				3				4			
	1 st Week	2 nd Week	3 rd Week	4 th Week	1 st Week	2 nd Week	3 rd Week	4 th Week	1 st Week	2 nd Week	3 rd Week	4 th Week	1 st Week	2 nd Week	3 rd Week	4 th Week
1.0 Establish survey implementation mechanisms at country level																
2.0 Pre-test and Finalize Survey Instruments																
3.0 Undertake Field data collection																
4.0 Undertake Data Processing and produce final tables																
5.0 Undertake In-depth Analysis and Preparation of Final Report																
6.0 Disseminate Survey Findings																

ANNEX E PROPOSED STRUCTURE FOR TABLES

AVAILABILITY OF COMMODITIES AND SERVICES

Modern contraceptives offered by primary facilities

1. Percentage distribution of primary service delivery points offering at least three modern contraceptive methods by type of facility

Type of Facility	Percentage		
	Offering at least three modern contraceptive methods	Not offering at least three modern contraceptive methods	Total
Primary Level Care SDPs/facilities/hospitals (or equivalent to country context)			

2. Percentage distribution of primary service delivery points offering at least three modern contraceptive methods by Administrative Unit (Region)

Administrative Unit (Region)	Percentage		
	Offering at least three modern contraceptive methods	Not offering at least three modern contraceptive methods	Total
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Total			

3. Percentage distribution of primary service delivery points offering at least three modern contraceptive methods by urban/rural residence

Residence	Percentage		
	Offering at least three modern contraceptive methods	Not offering at least three modern contraceptive methods	Total
Urban			
Rural			
Total			

4. Percentage distribution of primary service delivery points offering at least three modern contraceptive methods by management of facility

Management of facility	Percentage		
	Offering at least three modern contraceptive methods	Not offering at least three modern contraceptive methods	Total
Government			
NGO			
Others			
Total			

5. Percentage distribution of primary service delivery points offering at least three modern contraceptive methods by distance from nearest warehouse/source of supplies

Distance from nearest warehouse/source of supplies (in Km)	Percentage		
	Offering at least three modern contraceptive methods	Not offering at least three modern contraceptive methods	Total
0-4			
5-9			
10-14			
15-19			
20-24			
25-29			
30-35			
35-39			
40-45			
45-49			
50 and over			
Total			

Modern contraceptives offered by secondary and tertiary facilities

6. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by type of facility

Type of Facility	Percentage		
	Offering at least five modern contraceptive methods	Not offering at least five modern contraceptive methods	Total
Secondary level care SDPs/facilities/hospitals (or equivalent)			
Tertiary level care SDPs/facilities/hospitals (or equivalent)			
Total			

7. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by Administrative Unit (Region)

Administrative Unit (Region)	Percentage		
	Offering at least five modern contraceptive methods	Not offering at least five modern contraceptive methods	Total
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Total			

8. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by urban/rural residence

Residence	Percentage		
	Offering at least five modern contraceptive methods	Not offering at least five modern contraceptive methods	Total
Urban			
Rural			
Total			

9. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by management of facility

Management of facility	Percentage		
	Offering at least five modern contraceptive methods	Not offering at least five modern contraceptive methods	Total
Government			
NGO			
Others			
Total			

10. Percentage distribution of secondary and tertiary service delivery points offering at least five modern contraceptive methods by distance from nearest warehouse/source of supplies

Distance from nearest warehouse/source of supplies (in Km)	Percentage		
	Offering at least five modern contraceptive methods	Not offering at least five modern contraceptive methods	Total
0-4			
5-9			
10-14			
15-19			
20-24			
25-29			
30-35			
35-39			
40-45			
45-49			
50 and over			
Total			

Availability of Maternal and RH Medicines

11. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by type of facility

Type of Facility	Percentage		Total
	Seven (including 2 essential) life-saving maternal/reproductive health medicines available	Seven (including 2 essential) life-saving maternal/reproductive health medicines not available	
Type 1			
Type 2			
Type 3			
Total			

12. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by Administrative Unit (Region)

Administrative Unit (Region)	Percentage		Total
	Seven (including 2 essential) life-saving maternal/reproductive health medicines available	Seven (including 2 essential) life-saving maternal/reproductive health medicines not available	
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Total			



13. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by urban/rural residence

Residence	Percentage		
	Seven (including 2 essential) life-saving maternal/reproductive health medicines available	Seven (including 2 essential) life-saving maternal/reproductive health medicines not available	Total
Urban			
Rural			
Total			

14. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by management of facility

Management of facility	Percentage		
	Seven (including 2 essential) life-saving maternal/reproductive health medicines available	Seven (including 2 essential) life-saving maternal/reproductive health medicines not available	Total
Government			
NGO			
Others			
Total			

15. Percentage distribution of service delivery points with seven (including 2 essential) life-saving maternal/reproductive health medicines available by distance from nearest warehouse/source of supplies

Distance from nearest warehouse/source of supplies (in Km))	Percentage		
	Seven (including 2 essential) life-saving maternal/reproductive health medicines available	Seven (including 2 essential) life-saving maternal/reproductive health medicines not available	Total
0-4			
5-9			
10-14			
15-19			
20-24			
25-29			
30-35			
35-39			
40-45			
45-49			
50 and over			
Total			

Incidence of 'No Stock Out' of modern contraceptives in the last three months

16. Percentage distribution of service delivery points with 'no stock out' of a modern contraceptive method in the last three months by type of facility

Type of Facility	Percentage		
	Modern contraceptive method in stock [<i>'no stock out'</i>] in the last three month	Modern contraceptive method not in stock [<i>'stock out'</i>] in the last three month	Total
Type 1			
Type 2			
Type 3			
Total			

17. Percentage distribution of service delivery points with 'no stock out' of a modern contraceptive method in the last three months by Administrative Unit (Region)

Administrative Unit (Region)	Percentage		
	Modern contraceptive method in stock [<i>'no stock out'</i>] in the last three month	Modern contraceptive method not in stock [<i>'stock out'</i>] in the last three month	Total
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Total			

18. Percentage distribution of service delivery points with 'no stock out' of a modern contraceptive method in the last three months by urban/rural residence

Residence	Percentage		
	Modern contraceptive method in stock [<i>'no stock out'</i>] in the last three month	Modern contraceptive method not in stock [<i>'stock out'</i>] in the last three month	Total
Urban			
Rural			
Total			

19. Percentage distribution of service delivery points with 'no stock out' of a modern contraceptive method in the last three months by management of facility

Management of facility	Percentage		
	Modern contraceptive method in stock [<i>'no stock out'</i>] in the last three month	Modern contraceptive method not in stock [<i>'stock out'</i>] in the last three month	Total
Government			
NGO			
Others			
Total			

20. Percentage distribution of service delivery points with 'no stock out' of a modern contraceptive method in the last three months by distance from nearest warehouse/source of supplies

Distance from nearest warehouse/source of supplies (in Km)	Percentage		
	Modern contraceptive method in stock [<i>'no stock out'</i>] in the last three month	Modern contraceptive method not in stock [<i>'stock out'</i>] in the last three month	Total
0-4			
5-9			
10-14			
15-19			
20-24			
25-29			
30-35			
35-39			
40-45			
45-49			
50 and over			
Total			

Incidence of ‘No Stock Out’ of modern contraceptives on the day of the survey

21. Percentage distribution of service delivery points with ‘no stock out’ of modern contraceptive methods at the time of the survey by type of facility

Type of Facility	Percentage		Total
	Modern contraceptive method in stock at the time of the survey [<i>‘no stock out’</i>]	Modern contraceptive method not in stock at the time of the survey [<i>‘stock out’</i>]	
Type 1			
Type 2			
Type 3			
Total			

22. Percentage distribution of service delivery points with ‘no stock out’ of modern contraceptive methods at the time of the survey by Administrative Unit (Region)

Administrative Unit (Region)	Percentage		Total
	Modern contraceptive method in stock at the time of the survey [<i>‘no stock out’</i>]	Modern contraceptive method not in stock at the time of the survey [<i>‘stock out’</i>]	
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Total			

23. Percentage distribution of service delivery points with ‘no stock out’ of modern contraceptive methods at the time of the survey by urban/rural residence

Residence	Percentage		
	Modern contraceptive method in stock at the time of the survey [<i>‘no stock out’</i>]	Modern contraceptive method not in stock at the time of the survey [<i>‘stock out’</i>]	Total
Urban			
Rural			
Total			

24. Percentage distribution of service delivery points with ‘no stock out’ of modern contraceptive methods at the time of the survey by management of facility

Management of facility	Percentage		
	Modern contraceptive method in stock at the time of the survey [<i>‘no stock out’</i>]	Modern contraceptive method not in stock at the time of the survey [<i>‘stock out’</i>]	Total
Government			
NGO			
Others			
Total			



25. Percentage distribution of service delivery points with 'no stock out' of modern contraceptive methods at the time of the survey by distance from nearest warehouse/source of supplies

Distance from nearest warehouse/source of supplies (in Km)	Percentage		
	Modern contraceptive method in stock at the time of the survey <i>['no stock out']</i>	Modern contraceptive method not in stock at the time of the survey <i>['stock out']</i>	Total
0-4			
5-9			
10-14			
15-19			
20-24			
25-29			
30-35			
35-39			
40-45			
45-49			
50 and over			
Total			

Supply Chain, including cold chain

26. Percentage distribution of SDPs with persons responsible for ordering medical supplies by type of SDPs

Type of Facility	Percentage					
	Medical Doctor	Clinical Officer	Pharmacist	Nurse	Others	Total
Type 1						
Type 2						
Type 3						
Total						

27. Percentage distribution of SDPs with persons responsible for ordering medical supplies by Administrative Unit (Region)

Administrative Unit (Region)	Percentage					
	Medical Doctor	Clinical Officer	Pharmacist	Nurse	Others	Total
Region 1						
Region 2						
Region 3						
Region 4						
Region 5						
Region 6						
Region 7						
Region 8						
Region 9						
Region 10						
Total						

28. Percentage distribution of SDPs with persons responsible for ordering medical supplies by urban/rural residence

Residence	Percentage					
	Medical Doctor	Clinical Officer	Pharmacist	Nurse	Others	Total
Urban						
Rural						
Total						

29. Percentage distribution of SDPs with persons responsible for ordering medical supplies by management of facility

Management of facility	Percentage					Total
	Medical Doctor	Clinical Officer	Pharmacist	Nurse	Others	
Government						
NGO						
Others						
Total						

30. How re-supply is quantified by type of SDPs

Type of Facility	Percentage			Total
	By staff member of the SDP	By institution or warehouse responsible for re-supply	Others	
Type 1				
Type 2				
Type 3				
Total				

31. How re-supply is quantified by Administrative Unit (Region)

Administrative Unit (Region)	Percentage			Total
	By staff member of the SDP	By institution or warehouse responsible for re-supply	Others	
Region 1				
Region 2				
Region 3				
Region 4				
Region 5				
Region 6				
Region 7				
Region 8				
Region 9				
Region 10				
Total				

32. How re-supply is quantified by urban/rural residence

Residence	Percentage			
	By staff member of the SDP	By institution or warehouse responsible for re-supply	Others	Total
Urban				
Rural				
Total				

33. How re-supply is quantified by management of facility

Management of facility	Percentage			
	By staff member of the SDP	By institution or warehouse responsible for re-supply	Others	Total
Government				
NGO				
Others				
Total				

34. Main source of supplies type of SDPs

Type of Facility	Percentage						Total
	Central Medical stores	Regional/district warehouse	Local medical store on site	NGO	Donors	Private source	
Type 1							
Type 2							
Type 3							
Total							

35. Main source of supplies by Administrative Unit (Region)

Administrative Unit (Region)	Percentage						
	Central Medical stores	Regional/district warehouse	Local medical store on site	NGO	Donors	Private source	Total
Region 1							
Region 2							
Region 3							
Region 4							
Region 5							
Region 6							
Region 7							
Region 8							
Region 9							
Region 10							
Total							

36. Main source of supplies by urban/rural residence

Residence	Percentage						
	Central Medical stores	Regional/district warehouse	Local medical store on site	NGO	Donors	Private source	Total
Urban							
Rural							
Total							

37. Main source of supplies by management of facility

Management of facility	Percentage						
	Central Medical stores	Regional/district warehouse	Local medical store on site	NGO	Donors	Private source	Total
Government							
NGO							
Others							
Total							

38. Responsibility for transportation of supplies by type of SDPs

Type of Facility	Percentage				
	National/central government	Local/district administration	By the facility	Others	Total
Type 1					
Type 2					
Type 3					
Total					

39. Responsibility for transportation of supplies by Administrative Unit (Region)

Administrative Unit (Region)	Percentage				
	National/central government	Local/district administration	By the facility	Others	Total
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Total					

40. Responsibility for transportation of supplies by urban/rural residence

Residence	Percentage				
	National/central government	Local/district administration	By the facility	Others	Total
Urban					
Rural					
Total					

41. Responsibility for transportation of supplies by management of facility

Management of facility	Percentage				
	National/central government	Local/district administration	By the facility	Others	Total
Government					
NGO					
Others					
Total					

42. Estimated length of time between order and receiving of supplies by type of SDPs

Type of Facility	Percentage						Total
	Less than 2 weeks	More than 2 weeks but not up to 1 month	More than 1 month but not up to 2 months	More than 1 months but not up to 4 months	More than 4 months but not up to 6 months	More than 6 months	
Type 1							
Type 2							
Type 3							
Total							

43. Estimated length of time between order and receiving of supplies by Administrative Unit (Region)

Administrative Unit (Region)	Percentage						Total
	Less than 2 weeks	More than 2 weeks but not up to 1 month	More than 1 month but not up to 2 months	More than 1 months but not up to 4 months	More than 4 months but not up to 6 months	More than 6 months	
Region 1							
Region 2							
Region 3							
Region 4							
Region 5							
Region 6							
Region 7							
Region 8							
Region 9							
Region 10							
Total							

44. Estimated length of time between order and receiving of supplies by urban/rural residence

Residence	Percentage						Total
	Less than 2 weeks	More than 2 weeks but not up to 1 month	More than 1 month but not up to 2 months	More than 1 months but not up to 4 months	More than 4 months but not up to 6 months	More than 6 months	
Urban							
Rural							
Total							

45. Estimated length of time between order and receiving of supplies by management of facility

Management of facility	Percentage						Total
	Less than 2 weeks	More than 2 weeks but not up to 1 month	More than 1 month but not up to 2 months	More than 1 months but not up to 4 months	More than 4 months but not up to 6 months	More than 6 months	
Government							
NGO							
Others							
Total							

46. Frequency of resupply by type of SDPs

Type of Facility	Percentage					Total
	Once every two weeks	Once every month	Once every three months	Once every six months	Once a year	
Type 1						
Type 2						
Type 3						
Total						

47. Frequency of resupply by Administrative Unit (Region)

Administrative Unit (Region)	Percentage					Total
	Once every two weeks	Once every month	Once every three months	Once every six months	Once a year	
Region 1						
Region 2						
Region 3						
Region 4						
Region 5						
Region 6						
Region 7						
Region 8						
Region 9						
Region 10						
Total						

48. Frequency of resupply by urban/rural residence

Residence	Percentage					Total
	Once every two weeks	Once every month	Once every three months	Once every six months	Once a year	
Urban						
Rural						
Total						

49. Frequency of resupply by management of facility

Management of facility	Percentage					Total
	Once every two weeks	Once every month	Once every three months	Once every six months	Once a year	
Government						
NGO						
Others						
Total						

50. Availability of cold chain by type of SDP

Type of Facility	Percentage				Total
	No cold chain available	Type of cold chain available			
		Electric Fridge	Ice box (SDP have to regularly replenish ice supply)	Other (specify)	
Type 1					
Type 2					
Type 3					
Total					

51. Availability of cold chain by Administrative Unit (Region)

Administrative Unit (Region)	Percentage				Total
	No cold chain available	Type of cold chain available			
		Electric Fridge	Ice box (SDP have to regularly replenish ice supply)	Other (specify)	
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Total					

52. Availability of cold chain by urban/rural residence

Residence	Percentage				Total
	No cold chain available	Type of cold chain available			
		Electric Fridge	Ice box (SDP have to regularly replenish ice supply)	Other (specify)	
Rural					
Urban					
Total					

53. Availability of cold chain by management of facility

Management of facility	Percentage				Total
	No cold chain available	Type of cold chain available			
		Electric Fridge	Ice box (SDP have to regularly replenish ice supply)	Other (specify)	
Government					
NGO					
Others					
Total					

54. Source of power for Fridges used for cold chain by type of SDP

Type of Facility	Percentage					Total
	Electricity from national grid	Generator plant at the SDP	Portable generator at the SDP	Kerosene/paraffin fuel	Other (specify)	
Type 1						
Type 2						
Type 3						
Total						

55. Source of power for Fridges used for cold chain by Administrative Unit (Region)

Administrative Unit (Region)	Percentage					Total
	Electricity from national grid	Generator plant at the SDP	Portable generator at the SDP	Kerosene/paraffin fuel	Other (specify)	
Region 1						
Region 2						
Region 3						
Region 4						
Region 5						
Region 6						
Region 7						
Region 8						
Region 9						
Region 10						
Total						

56. Source of power for Fridges used for cold chain by urban/rural residence

Residence	Percentage					Total
	Electricity from national grid	Generator plant at the SDP	Portable generator at the SDP	Kerosene/ paraffin fuel	Other (specify)	
Rural						
Urban						
Total						

57. Source of power for Fridges used for cold chain by management of facility

Management of facility	Percentage					Total
	Electricity from national grid	Generator plant at the SDP	Portable generator at the SDP	Kerosene/ paraffin fuel	Other (specify)	
Government						
NGO						
Others						
Total						

Staff training and supervision

58. Percentage of SDPs with staff trained to provide FP services and for the insertion and removal of Implants

Characteristics	Percentage of SDPs with staff trained	
	To provide FP services	For the insertion and removal of Implants
Type of Facility		
Type 1		
Type 2		
Type 3		
Region		
Region 1		
Region 2		
Region 3		
Region 4		
Region 5		
Region 6		
Region 7		
Region 8		
Region 9		
Region 10		
Residence		
Urban		
Rural		
Management		
Government		
NGO		
Others		
Total		

59. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by type of SDP

Type of Facility	Percentage of SDPs with staff trained	
	To provide FP services	For the insertion and removal of Implants
Type 1		
Type 2		
Type 3		
Total		

60. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by Administrative Unit (Region)

Administrative Unit (Region)	Percentage of SDPs with staff trained	
	To provide FP services	For the insertion and removal of Implants
Region 1		
Region 2		
Region 3		
Region 4		
Region 5		
Region 6		
Region 7		
Region 8		
Region 9		
Region 10		
Total		

61. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by urban/rural residence

Residence	Percentage of SDPs with staff trained	
	To provide FP services	For the insertion and removal of Implants
Rural		
Urban		
Total		

62. Percentage distribution of staff trained to provide FP services and for the insertion and removal of Implants by management of facility

Management of facility	Percentage of SDPs with staff trained	
	To provide FP services	For the insertion and removal of Implants
Government		
NGO		
Others		
Total		

63. Percentage distribution of the last time staff received training for FP including for provision of implants by type of SDP

Type of Facility	Most recent training for FP				Training exercise include the insertion and removal of implant contraceptive
	In the last two months	Between two and six months ago	Between six month and one year ago	More than one year ago	
Type 1					
Type 2					
Type 3					
Total					

64. Percentage distribution of the last time staff received training for FP including for provision of implants by Administrative Unit (Region)

Administrative Unit (Region)	Most recent training for FP				Training exercise include the insertion and removal of implant contraceptive
	In the last two months	Between two and six months ago	Between six month and one year ago	More than one year ago	
Region 1					
Region 2					
Region 3					
Region 4					



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Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Total					

65. Percentage distribution of the last time staff received training for FP including for provision of implants by urban/rural residence

Residence	Most recent training for FP				Training exercise include the insertion and removal of implant contraceptive
	In the last two months	Between two and six months ago	Between six month and one year ago	More than one year ago	
Rural					
Urban					
Total					

66. Percentage distribution of the last time staff received training for FP including for provision of implants by management of facility

Management of facility	Most recent training for FP				Training exercise include the insertion and removal of implant contraceptive
	In the last two months	Between two and six months ago	Between six month and one year ago	More than one year ago	
Government					
NGO					
Others					
Total					

67. Percentage distribution of the last time the facility was supervised in the past 12 months by type of SDP

Type of Facility	Last time the facility was supervised in the past 12 months				Not supervised in the past 12 month
	In less than one Month	Between one and three Months ago	Between three and six months ago	Between six month and one year ago	
Type 1					
Type 2					
Type 3					
Total					



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68. Percentage distribution of the last time the facility was supervised in the past 12 months by Administrative Unit (Region)

Administrative Unit (Region)	Last time the facility was supervised in the past 12 months				Not supervised in the past 12 month
	In less than one Month	Between one and three Months ago	Between three and six months ago	Between six month and one year ago	
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Total					

69. Percentage distribution of the last time the facility was supervised in the past 12 months by urban/rural residence

Residence	Last time the facility was supervised in the past 12 months				Not supervised in the past 12 month
	In less than one Month	Between one and three Months ago	Between three and six months ago	Between six month and one year ago	
Rural					
Urban					
Total					

70. Percentage distribution of the last time the facility was supervised in the past 12 months by management of facility

Management of facility	Last time the facility was supervised in the past 12 months				Not supervised in the past 12 month
	In less than one Month	Between one and three Months ago	Between three and six months ago	Between six month and one year ago	
Government					
NGO					
Others					
Total					

71. Percentage distribution of the frequency of supervisory visits by type of SDP

Type of Facility	Frequency of supervisory visits					Not supervised
	Weekly	Monthly	Every three months	Every six months	Once a year Never	
Type 1						
Type 2						
Type 3						
Total						

72. Percentage distribution of the frequency of supervisory visits by Administrative Unit (Region)

Administrative Unit (Region)	Frequency of supervisory visits					Not supervised
	Weekly	Monthly	Every three months	Every six months	Once a year Never	
Region 1						
Region 2						
Region 3						
Region 4						
Region 5						
Region 6						
Region 7						
Region 8						
Region 9						
Region 10						
Total						

73. Percentage distribution of the frequency of supervisory visits by urban/rural residence

Residence	Frequency of supervisory visits					Not supervised
	Weekly	Monthly	Every three months	Every six months	Once a year Never	
Rural						
Urban						
Total						

74. Percentage distribution of the frequency of supervisory visits by management of facility

Management of facility	Frequency of supervisory visits					Not supervised
	Weekly	Monthly	Every three months	Every six months	Once a year Never	
Government						
NGO						
Others						
Total						

75. Percentage of SDPs with issues included in supervisory visits by type of SDP

Type of Facility	Frequency of supervisory visits						Total
	Staff clinical practices	Drug stock out and expiry	Staff availability and training	Data completeness, quality, and timely reporting	Review use of specific guideline or job aid for reproductive health	Others	
Type 1							
Type 2							
Type 3							
Total							

76. Percentage of SDPs with issues included in supervisory visits by Administrative Unit (Region)

Administrative Unit (Region)	Frequency of supervisory visits						Total
	Staff clinical practices	Drug stock out and expiry	Staff availability and training	Data completeness, quality, and timely reporting	Review use of specific guideline or job aid for reproductive health	Others	
Region 1							
Region 2							
Region 3							
Region 4							
Region 5							
Region 6							
Region 7							
Region 8							
Region 9							
Region 10							
Total							

77. Percentage of SDPs with issues included in supervisory visits by urban/rural residence

Residence	Frequency of supervisory visits						Total
	Staff clinical practices	Drug stock out and expiry	Staff availability and training	Data completeness, quality, and timely reporting	Review use of specific guideline or job aid for reproductive health	Others	
Rural							
Urban							
Total							

78. Percentage of issues included in supervisory visits by management of facility

Management of facility	Frequency of supervisory visits						Total
	Staff clinical practices	Drug stock out and expiry	Staff availability and training	Data completeness, quality, and timely reporting	Review use of specific guideline or job aid for reproductive health	Others	
Government							
NGO							
Others							
Total							



Availability of guidelines, check-lists and job aids

79. Percentage of SDPs with guidelines, check-lists and job aids

Characteristics	Percentage				
	Family planning guidelines (national or WHO)	Family planning check-lists and/or job-aids	ANC guidelines (national or WHO)	ANC check-lists and/or job-aids	Waste disposal guideline
Type of Facility					
Type 1					
Type 2					
Type 3					
Region					
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Residence					
Urban					
Rural					
Management					
Government					
NGO					
Others					
Total					

Use of Information Communication Technology (ICT)

80. Percentage of SDPs with types of Information Communication Technology available

Characteristics	Percentage					
	Computer	Mobile phones - basic handsets	Mobile phones - smart phones	Tablets Internet facilities – through Local Area Network (LAN)	Internet facilities – through Wi-Fi	Others
Type of Facility						
Type 1						
Type 2						
Type 3						
Region						
Region 1						
Region 2						
Region 3						
Region 4						
Region 5						
Region 6						
Region 7						
Region 8						
Region 9						
Region 10						
Residence						
Urban						
Rural						
Management						
Government						
NGO						
Others						
Total						

81. Percentage of SDPs by how ICT was acquired

Characteristics	Percentage				
	Personal item of staff member	Provided by government	Provided by proprietor of SDP	Received as Donation	Others
Type of Facility					
Type 1					
Type 2					
Type 3					
Region					
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Residence					
Urban					
Rural					
Management					
Government					
NGO					
Others					
Total					

82. Percentage of SDPs by main purpose for which ICT is used

Characteristics	Percentage										
	Patient registration	Facility record keeping	Individual patient records/ Electronic Medical Record	Health Insurance Claims and Reimbursement System	Mobile money cash transfers and payments	Routine communication	Awareness and demand creation activities	Supply chain management/stock control	Health worker training	Clinical consultation (long distance)	Others
Type of Facility											
Type 1											
Type 2											
Type 3											
Region											
Region 1											
Region 2											
Region 3											
Region 4											
Region 5											
Region 6											
Region 7											
Region 8											
Region 9											
Region 10											
Residence											
Urban											
Rural											
Management											
Government											
NGO											
Others											
Total											



Waste disposal

83. Percentage distribution of SDPs by how health wastes are disposed

Characteristics	Percentage				
	Burning on the grounds of the SDP	Bury in special dump pits on the grounds of the SDP	Use of Incinerators	Centrally collected by specific agency for disposal away from the SDP	Disposed with regular garbage
Type of Facility					
Type 1					
Type 2					
Type 3					
Region					
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Residence					
Urban					
Rural					
Management					
Government					
NGO					
Others					
Total					

Charges for user fees

84. Percentage distribution of SDPs by issues for which user fee is charged for consultation

Characteristics	Percentage							
	Family planning services	Antenatal care services	Delivery services	Post natal care services	Newborn care services	Care of sick children under 5 years	HIV care (e.g. HTC and ART)	Other (specify)
Type of Facility								
Type 1								
Type 2								
Type 3								
Region								
Region 1								
Region 2								
Region 3								
Region 4								
Region 5								
Region 6								
Region 7								
Region 8								
Region 9								
Region 10								
Residence								
Urban								
Rural								
Management								
Government								
NGO								
Others								
Total								

85. Percentage distribution of SDPs by issues for which user fee is charged for medication

Characteristics	Percentage				Other (specify)
	Family planning commodities	Maternal Health medicines	Child health medicines	HIV Drugs	
Type of Facility					
Type 1					
Type 2					
Type 3					
Region					
Region 1					
Region 2					
Region 3					
Region 4					
Region 5					
Region 6					
Region 7					
Region 8					
Region 9					
Region 10					
Residence					
Urban					
Rural					
Management					
Government					
NGO					
Others					
Total					



86. Percentage distribution of SDPs by issues for which user fee is charged for services provided by a qualified health care provider

Characteristics	Percentage								
	Family planning services	Antenatal care services	Delivery services	Post natal care services	Newborn care services	Care of sick children under 5 years	HIV care	Caesarean Section	Other (specify)
Type of Facility									
Type 1									
Type 2									
Type 3									
Region									
Region 1									
Region 2									
Region 3									
Region 4									
Region 5									
Region 6									
Region 7									
Region 8									
Region 9									
Region 10									
Residence									
Urban									
Rural									
Management									
Government									
NGO									
Others									
Total									



CLIENTS EXIT INTERVIEW

Background characteristics of Clients

87. Sex distribution of clients

Characteristics	Percentage	
	Male	Female
Type of Facility		
Type 1		
Type 2		
Type 3		
Region		
Region 1		
Region 2		
Region 3		
Region 4		
Region 5		
Region 6		
Region 7		
Region 8		
Region 9		
Region 10		
Residence		
Urban		
Rural		
Management		
Government		
NGO		
Others		
Total		

88. Age distribution of clients

Characteristics	Age group									
	10-14	15-19	20-24	45-49	25-29	30-34	35-39	40-44	45-49	50+
Type of Facility										
Type1										
Type 2										
Type 3										
Region										
Region 1										
Region 2										
Region 3										
Region 4										
Region 5										
Region 6										
Region 7										
Region 8										
Region 9										
Region 10										
Residence										
Urban										
Rural										
Management										
Government										
NGO										
Others										
Total										



89. Marital status of clients

Characteristics	Percentage		
	Never Married or in union	Currently Married or in Union	Formerly Married (Divorced/separated/widowed)
Type of Facility			
Type 1			
Type 2			
Type 3			
Region			
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Residence			
Urban			
Rural			
Management			
Government			
NGO			
Others			
Total			

90. Percentage distribution of clients by education level

Characteristics	Percentage		
	No Education	Primary	Secondary and higher level
Type of Facility			
Type 1			
Type 2			
Type 3			
Region			
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Residence			
Urban			
Rural			
Management			
Government			
NGO			
Others			
Total			



91. Percentage distribution of clients by frequency of visit to the SDP for FP services

Characteristics	Percentage			
	Once a month	Once every 2 months	Once every 3 months	Others (please specify)
Type of Facility				
Type 1				
Type 2				
Type 3				
Region				
Region 1				
Region 2				
Region 3				
Region 4				
Region 5				
Region 6				
Region 7				
Region 8				
Region 9				
Region 10				
Residence				
Urban				
Rural				
Management				
Government				
NGO				
Others				
Total				



Clients' perception of family planning service provision

92. Percentage distribution of clients perspective of FP service provider's adherence to technical issues

Characteristics	Percentage						
	Provided with method of their choice	Provider took clients preference and wishes into consideration	Client taught how to use the method	Client told about the common side effects of the method	Provider informed client about what can be done regarding the side effects of the method	Provider informed client about what to do in case any serious complications occur	Client given date to return to SDP for check up and /or additional supplies
Type of Facility							
Type 1							
Type 2							
Type 3							
Region							
Region 1							
Region 2							
Region 3							
Region 4							
Region 5							
Region 6							
Region 7							
Region 8							
Region 9							
Region 10							
Residence							
Urban							
Rural							
Management							
Government							
NGO							
Others							
Total							

93. Percentage distribution of clients perspective of FP service organizational aspects

Characteristics	Percentage			
	Client perceived waiting time as too long	Client satisfied with the cleanliness of the health facility	Client satisfied with the privacy at the exam room	Client satisfied with the time that was allotted to his/her case
Type of Facility				
Type 1				
Type 2				
Type 3				
Region				
Region 1				
Region 2				
Region 3				
Region 4				
Region 5				
Region 6				
Region 7				
Region 8				
Region 9				
Region 10				
Residence				
Urban				
Rural				
Management				
Government				
NGO				
Others				
Total				

94. Percentage distribution of clients perspective of FP service inter-personal aspects

Characteristics	Percentage		
	Client indicated he/she was treated with courtesy and respect by staff at the SDP	Client indicated he/she health service providers force him/her to accept or insisted he/she should accept FP method	Client satisfied with the attitude of the health provider towards him/her generally
Type of Facility			
Type 1			
Type 2			
Type 3			
Region			
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Residence			
Urban			
Rural			
Management			
Government			
NGO			
Others			
Total			

95. Percentage distribution of clients perspective of FP service outcome aspects

Characteristics	Percentage		
	Client satisfied with the service received	Client will continue visiting this SDP in future	Client would recommend this SDP to relatives or friends
Type of Facility			
Type 1			
Type 2			
Type 3			
Region			
Region 1			
Region 2			
Region 3			
Region 4			
Region 5			
Region 6			
Region 7			
Region 8			
Region 9			
Region 10			
Residence			
Urban			
Rural			
Management			
Government			
NGO			
Others			
Total			

Clients' appraisal of cost of family planning services

96. Percentage of clients reporting paying for service and average amount paid by type of SDP

Type of Facility	Percentage of clients reporting paying for service	Average amount paid (in national currency)					
		Card	Laboratory test/x-ray	Contraceptive received from service provider	Contraceptive purchased from pharmacy	Consultation fee	Others
Type 1							
Type 2							
Type 3							
Total							



97. Percentage of clients reporting paying for service and average amount paid by Administrative Unit (Region)

Administrative Unit (Region)	Percentage of clients reporting paying for service	Average amount paid for (in national currency)					
		Card	Laboratory test/x-ray	Contraceptive received from service provider	Contraceptive purchased from pharmacy	Consultation fee	Others
Region 1							
Region 2							
Region 3							
Region 4							
Region 5							
Region 6							
Region 7							
Region 8							
Region 9							
Region 10							
Total							

98. Percentage of clients reporting paying for service and average amount paid by urban/rural residence

Residence	Percentage of clients reporting paying for service	Average amount paid for (in national currency)					
		Card	Laboratory test/x-ray	Contraceptive received from service provider	Contraceptive purchased from pharmacy	Consultation fee	Others
Rural							
Urban							
Total							

99. Percentage of clients reporting paying for service and average amount paid visits by management of facility

Management of facility	Percentage of clients reporting paying for service	Average amount paid for (in national currency)					
		Card	Laboratory test/x-ray	Contraceptive received from service provider	Contraceptive purchased from pharmacy	Consultation fee	Others
Government							
NGO							
Others							
Total							

100. Percentage distribution of clients by mode of transportation, distance travelled and cost of transportation

Characteristics	Percentage							
	Mode of transportation						Distance travelled	Average travel cost (to and from SDP)
	Walked	Bicycle	Motor cycle	Bus/taxi	Private vehicle	Others		
Type of Facility								
Type 1								
Type 2								
Type 3								
Region								
Region 1								
Region 2								
Region 3								
Region 4								
Region 5								
Region 6								
Region 7								
Region 8								
Region 9								
Region 10								
Residence								
Urban								
Rural								
Management								
Government								
NGO								
Others								
Total								

101. Average time spent by client for FP services

Characteristics	Average Time Spent			Total
	Travelling from place of residence to the SDP	Waiting for and Receiving Services	Traveling from the SDP to place of residence	
Type of Facility				
Type 1				
Type 2				
Type 3				
Region				
Region 1				
Region 2				
Region 3				
Region 4				
Region 5				
Region 6				
Region 7				
Region 8				
Region 9				
Region 10				
Residence				
Urban				
Rural				
Management				
Government				
NGO				
Others				
Total				



102. Percentage distribution of clients by activities they would have engaged in during the time spent receiving FP services

Respondents Background Characteristics	Average Time Spent					
	Household chores	Working on household farm	Employed as unskilled labourer	Employed as skilled labourer	Clerical or professional work	Others (please specify)
Sex						
Male						
Female						
Age						
10-14						
15-19						
20-24						
45-49						
25-29						
30-34						
35-39						
40-44						
45-49						
50+						
Marital status						
Never Married or in union						
Currently Married or in Union						
Formerly Married (Divorced/ separated/widowed)						
Marital status						
Never Married or in union						
Currently Married or in Union						
Formerly Married (Divorced/ separated/widowed)						
Total						

103. Percentage distribution of clients by persons indicated to have performed activities on their behalf while they were away receiving FP Services and the estimated average payment

Respondents Background Characteristics	Person who performed activities on behalf of client				
	Family Member	Co-worker	Nobody	Others	Average amount paid by client
Sex					
Male					
Female					
Age					
10-14					
15-19					
20-24					
45-49					
25-29					
30-34					
35-39					
40-44					
45-49					
50+					
Marital status					
Never Married or in union					
Currently Married or in Union					
Formerly Married (Divorced/ separated/widowed)					
Marital status					
Never Married or in union					
Currently Married or in Union					
Formerly Married (Divorced/ separated/widowed)					
Total					

104. Average amount paid to persons who performed activities on behalf of clients by activities performed while client was away receiving FP services

Respondents Background Characteristics	Average Amount paid to persons (in national currency)				
	Family Member	Co-worker	Nobody	Others	Total Average Amount
Household chores					
Working on household farm					
Employed as unskilled labourer					
Employed as skilled labourer					
Clerical or professional work					
Others (please specify)					
Total					

105. Percentage distribution of clients by source of funds used to pay for FP services

Respondents Background Characteristics	Source of funds used to pay for FP services				
	Client (self)	Spouse	Family Members other than spouse (husband or wife)	Others	Total
Sex					
Male					
Female					
Age					
10-14					
15-19					
20-24					
45-49					
25-29					
30-34					
35-39					
40-44					
45-49					
50+					
Marital status					
Never Married or in union					
Currently Married or in Union					
Formerly Married (Divorced/ separated/widowed)					
Marital status					
Never Married or in union					
Currently Married or in Union					
Formerly Married (Divorced/ separated/widowed)					
Total					

106. Average amount paid from each source by background characteristics of clients

Respondents Background Characteristics	Average amount from each source used to pay for FP (in national currency)				
	Client (self)	Spouse	Family Members other than spouse (husband or wife)	Others	Total
Sex					
Male					
Female					
Age					
10-14					
15-19					
20-24					
45-49					
25-29					
30-34					
35-39					
40-44					
45-49					
50+					
Marital status					
Never Married or in union					
Currently Married or in Union					
Formerly Married (Divorced/ separated/widowed)					
Marital status					
Never Married or in union					



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Currently Married or in Union					
Formerly Married (Divorced/ separated/widowed)					
Total					

SUMMARY TABLES FOR AVAILABILITY AND STOCK OUT OF CONTRACEPTIVES

107. Percentage distribution of service delivery points offering modern contraceptive method

Characteristics	Modern contraceptive method							
	Male Condoms	Female Condoms	Oral Pills	Injectables	IUDs	Implants	Sterilization for Females	Sterilization for Males
Type of Facility								
Type 1								
Type 2								
Type 3								
Administrative Unit (Region)								
Region 1								
Region 2								
Region 3								
Region 4								
Region 5								
Region 6								
Region 7								
Region 8								
Region 9								
Region 10								
Residence								
Urban								
Rural								
Management								
Government								
NGO								
Others								
Distance from nearest warehouse/source of supplies (in Km)								
0-4								
5-9								
10-14								
15-19								
20-24								
25-29								
30-35								
35-39								
40-45								
45-49								
50 and over								
Total								

108. Percentage distribution of service delivery points with any Maternal/RH Medicine Available

Characteristics	Maternal/RH Medicines																
	(1) Amoxicillin	(2) Azithromycin	(3) Doxycycline	(4) Either Betamethasone	(5) Calcium gluconate	(6) Cefixime	(7) Ceftriaxone	(8) Hydrocortisone	(9) Magnesium sulfate	(10) Metformin	(11) Metronidazole	(12) Mifeprestone	(13) Miconazole	(14) Nifedipine	(15) Oxytocin	(16) Either Sodium chloride	(17) Tetanus toxoid
Type of Facility																	
Type 1																	
Type 2																	



Type 3																				
Region																				
Region 1																				
Region 2																				
Region 3																				
Region 4																				
Region 5																				
Region 6																				
Region 7																				
Region 8																				
Region 9																				
Region 10																				
Residence																				
Urban																				
Rural																				
Management																				
Government																				
NGO																				
Others																				
Distance from nearest warehouse/source of supplies (in Km)																				
0-4																				
5-9																				
10-14																				
15-19																				
20-24																				
25-29																				
30-35																				
35-39																				
40-45																				
45-49																				
50 and over																				
Total																				

109. Percentage distribution of service delivery points with any modern contraceptive method in stock (NO STOCK OUT) in the last three months

Characteristics	No stock out of any modern contraceptive method in the last three months							
	Male Condoms	Female Condoms	Oral Pills	Injectables	IUDs	Implants	Sterilization for Females	Sterilization for Males
Type of Facility								
Type 1								
Type 2								
Type 3								
Region								
Region 1								
Region 2								
Region 3								
Region 4								

Region 5								
Region 6								
Region 7								
Region 8								
Region 9								
Region 10								
Residence								
Urban								
Rural								
Management								
Government								
NGO								
Others								
Distance from nearest warehouse/source of supplies (in Km)								
0-4								
5-9								
10-14								
15-19								
20-24								
25-29								
30-35								
35-39								
40-45								
45-49								
50 and over								
Total								

110. Percentage distribution of service delivery points with modern contraceptive method in stock (NO STOCK-OUT) at the time of the survey

Characteristics	No stock out of Modern contraceptive method at the time of the survey							
	Male Condoms	Female Condoms	Oral Pills	Injectables	IUDs	Implants	Sterilization for Females	Sterilization for Males
Type of Facility								
Type 1								
Type 2								
Type 3								
Region								
Region 1								
Region 2								
Region 3								
Region 4								
Region 5								
Region 6								
Region 7								
Region 8								
Region 9								
Region 10								
Residence								
Urban								
Rural								
Management								
Government								
NGO								
Others								



Distance from nearest warehouse/source of supplies (in Km)									
0-4									
5-9									
10-14									
15-19									
20-24									
25-29									
30-35									
35-39									
40-45									
45-49									
50 and over									
Total									

SECTION VIII: ANNEX C – SURVEY METHODOLOGY FOR GPRHCS

2013 FACILITY ASSESSMENT FOR REPRODUCTIVE HEALTH COMMODITIES AND SERVICE

SURVEY METHODOLOGY FOR GPRHCS

1.0 INTRODUCTION

From 2010 to 2012 UNFPA, through the Global Programme to enhance Reproductive Health Commodity Security (GPRHCS), has supported the conduct of an annual survey on the availability and stock-out of contraceptives and maternal health medicines in 12 GPRHCS Stream 1 countries. The focus of the past survey was on three outcome indicators in the monitoring and evaluation framework of the GPRHCS which focused on a) Service Delivery Points (SDPs) offering at least three modern methods of contraceptives; b) 7 life-saving maternal/RH medicines (Magnesium Sulphate and Oxytocin plus any other five) from the WHO list¹⁰ available in all facilities providing delivery services; c) ‘no stock outs’ of contraceptives within last 6 months.

Starting 2013, the survey has been expanded in three fronts; a) to focus on availability of three modern contraceptive methods at primary service delivery points, and five modern contraceptive methods at both secondary and tertiary service delivery points; b) to cover 46 countries, and c) to include other key issues related to family planning service delivery.

1.1 Revision for 2015 (in any)

Please note that the timeframe for the indicator on “no stock out” (Section 5 under Module 1 of the questionnaire) has been revised from “stock out in the last six (6) months” to focus on “**no stock out in the last THREE months**”. The questionnaire has been revised accordingly to reflect a focus of stock out in the **LAST THREE MONTHS**.

2.0 THE QUESTIONNAIRE

The Questionnaire (which is an annex to this document) is divided into the following three modules and 15 sections:

MODULE 1: AVAILABILITY OF COMMODITIES AND SERVICES

- Section 1: Facility Identification (Name, Location and Distance)
- Section 2: SDP type and services provided
- Section 3: Modern contraceptive methods offered at SDP
- Section 4: Availability of maternal/RH medicines
- Section 5: No stock-out of modern contraceptive methods at SDP

MODULE 2: HEALTH FACILITY RESOURCES

- Section 6: Supply chain
- Section 7: Existence of cold chain at SDP

¹⁰ According to the WHO Priority life-saving medicines, for women and children, 2012; the priority medicines are: i) Oxytocin, ii) Misoprostol, iii) Sodium chloride, iv) Sodium lactate compound solution, v) Magnesium sulphate, vi) Calcium gluconate, vii) Hydralazine, viii) Methyldopa, ix) Ampicillin, x) Gentamicin, xi) Metronidazole, xii) Mifepristone, xiii) Azithromycin, xiv) Cefixime, xv) Benzathine Benzylpenicillin, xvi) Nifedipine, xvii) Dexamethasone, xviii) Betamethasone, and ix) Tetanus toxoid. The list can be accessed at http://www.who.int/reproductivehealth/publications/general/emp_mar2012.1/en/index.html



- Section 8: Staff training for family planning
- Section 9: Staff supervision for reproductive health including family planning
- Section 10: Availability of guidelines check-lists and job aids
- Section 11: Availability and use of Information Communication Technology (ICT)
- Section 12: Waste disposal
- Section 13: Charging of user fee

MODULE 3: EXIT INTERVIEW - CLIENTS' PERCEPTION AND APPRAISAL OF COST FOR FP SERVICES

- Section 14: Exit Interview - Clients' perception
- Section 15: Exit Interview - Clients' appraisal of cost for FP services

2.1 Reference to national guidelines, protocols and laws

As in the previous surveys, the focus for Sections 3, 4 and 5 of the questionnaire is that the current national guidelines, protocols and laws should be the yardsticks against which the SDPs should be assessed in terms of the commodities (contraceptives and maternal health medicines) they provide. Therefore, the questionnaire now makes reference to this and requires; first, an investigation into which commodities the SDPs are expected to offer or have available; and second, which of those (they are expected or mandated to offer or have available) do they actually offer or have available.

For instance, where the guideline, protocol and/or law prohibit the provision of a particular contraceptive at a given level of service delivery, the SDP should not be assessed as not offering the contraceptive. Rather an appropriate response is that the issue is *"not applicable – as per national guidelines, protocols and/or laws"*. An option to this effect is now provided for in the tool. The survey team is therefore required to be fully conversant with the existing national guidelines, protocols, and/or laws governing family planning service provision relevant to their country. To underscore the importance of the guidelines, protocols and laws, the survey report as provided for in Section II of the Annotated Outline document (which is an annex to this document), now requires a brief summary of the national guideline, protocols, and/or laws regarding the provision of contraceptives and maternal/RH medicines at various SDPs levels for each country.

2.2 Caution for assessing availability of male/female sterilisation and contraceptives

The availability and stock out of female or male sterilization should be based on the fact that a client would walk into the SDP and be able to receive male/female sterilization if he/she demands it. It should not be restricted to the availability of the equipment and medicines alone. Also important to note is that the availability or stock out of medicines and contraceptives should not be judged base on the brand, dosage or hormonal constitution.

2.3 Analysis of responses

The sections relating to the availability of contraceptives and their stock out should be analysed with reference to only those sampled SDPs that offer family planning services. Similarly, the section relating to the availability of maternal/RH medicines should be analysed with reference to the sampled SDPs that offer delivery services.

3.0 LIST OF PRIORITY LIFE-SAVING MEDICINES

A major section of the survey instrument which has been revised is Section D, which relates to the essential life-saving maternal/RH medicines list. On the new list of WHO priority life-saving medicines for women and children 2012, there are now *19 individual medicines which can be constituted into 17*

component¹¹ of medicines compared to ten on the previous list. This list is also included as annex to this document. A notable deletion from the list is *Ergometrine* which was previous one of the three mandatory drugs.

The related GPRHCS indicator has been duly revised and the questionnaire adapted accordingly to include all the medicines on the new list. As per the new indicator definition SDPs are expected to have available seven (7) life-saving maternal/RH medicines which must include two mandatory medicines (Magnesium Sulphate and Oxytocin) and any other 5 medicines on the WHO list.

4.0 SAMPLING DESIGN AND SAMPLE SELECTION

The survey will consider the following broad categories of Service Delivery Points (SDPs) that provide modern methods of contraceptives and maternal/RH services as stratum:

- a) Primary Level Care SDPs/facilities (or equivalent to country context)
- b) Secondary level care SDPs/facilities/hospitals (or equivalent)
- c) Tertiary level care SDPs/facilities/hospitals (or equivalent)

In addition to the distribution of these SDPs in the administrative units of each country, the type of services they provide (some may provide one and some both) will be relevant to the study. The aim of this procedure is to provide a standardised framework for all the GPRHCS Stream 1 Countries for the conduct of the survey.

4.1 Sampling Frame

Ideally, the ministry in charge of health or an appropriate government agency should have a list of all service delivery points (providing Family Planning and Maternal Health services) in each of the administrative units of the country. This list will serve as a frame for the selection of samples in each country.

4.2 Use of Sampling Formula to obtain Sample Size

Taken the types of the SDPs (primary, secondary and tertiary or equivalent) as the main attributes, therefore the total sample should contain a minimal number of each type of facility to support good estimation of the parameters of the population. It is in this respect that the following formula is proposed:

$$n = \frac{Z^2 p(1 - p)}{d^2}$$

Where	n	=	minimal sample size for each domain
	Z	=	Z score that corresponds to a confidence interval
	p	=	the proportion of the attribute (<i>type of SDP</i>) expressed in decimal
	d	=	per cent confidence level in decimal

This proposal is made because facility-based surveys often take into consideration the categories of health service delivery points, which may vary from country to country, in the selection of an

¹¹ Please note that although there are 19 individual medicines on the WHO list; a) Sodium chloride and Sodium lactate compound solution are alternates; and that b) Dexamethasone is an alternate to Betamethasone. This therefore applies to this survey; hence the reference to 17 components maternal/RH medicines

appropriate sample size. In some instances, facility data are linked with data on clients and service providers which affect the sample size and the manner in which it is chosen. The proposed study focuses on the type of facilities as ‘standalones’ and therefore does not collect data on staff, clients or the population. The formula is used to obtain the minimal sample size for the proportions of each category of SDPs under the assumptions of normal distribution and hence lends the data to comparison between populations.

The formula adopts an approach that gives large (tertiary and secondary facilities) a higher probability of inclusion in the survey because of their small number and provides a guide for choosing a sample of the primary facilities.

Following are step by step guide for using the formula to derive sample sizes.

5.0 ILLUSTRATION FOR SAMPLING FACILITIES

To illustrate the use of the formula, it has been applied to data on Ethiopia (see Tables 1), provided by country office staff.

Table 1: Types of Service Delivery Point providing modern methods in Ethiopia by Administrative Units

Administrative Units	Types of Service Delivery Points			
	Tertiary level care SDPs/facilities/hospitals (or equivalent)	Secondary level care SDPs/facilities/hospitals (or equivalent)	Primary Level Care SDPs/facilities (or equivalent to country context)	Total
Addis Ababa	12	0	64	76
Afar Region	1	1	16	18
Amhara Region	3	11	160	174
Benishangul-Gumuz Region	1	1	16	18
Dire Dawa	0	1	7	8
Gambela Region	1	0	10	11
Harari Region	4	0	7	11
Oromiya Region	12	13	212	237
Somali Region	1	3	11	15
Southern Nations, Nationalities and Peoples' Region	3	12	153	168
Tigray Region	3	5	55	63
TOTAL	41	47	711	799

5.1 Steps for Sampling SDPs for the GPRHCS Survey

5.1.1 Step 1) Calculate relative proportion for the types of SDPs

The relative proportion for Tertiary level SDPs is calculated as follows:

$[\text{Total number of tertiary SDPs}] \div [\text{Total number of SDPs on the sample frame}]$. From the information in Table 1 this is $41 \div 799 = 0.05$. The procedure is repeated for secondary and primary institutions and the results presented in Table 3.

Table 3: Relative Proportion of Categories of SDPs in Ethiopia

	Tertiary level care SDPs/facilities/hospitals (or equivalent)	Secondary level care SDPs/facilities/hospitals (or equivalent)	Primary Level Care SDPs/facilities (or equivalent to country context)	Total
Number of SDPs	41	47	711	799
Relative Proportion	0.05	0.06	0.89	1.00

5.1.2 Step 2) Apply the formula above to obtain the minimal sample size for each Type of SDP

By proposing the use of a confidence interval, the formula provides a range of values where a given true population parameter is likely to be. The range of value is also determined by the confidence limit or the precision of the estimated value. In the example below the confidence interval is set at Z-score = 95 per cent and 5 per cent confidence limit.

Minimal sample size for Tertiary level care SDPs/facilities/hospitals (or equivalent) (95% confidence interval and 5% confidence limit)

$$n = \frac{Z^2 p(1-p)}{D^2} \qquad n = \frac{(1.96)^2 \times (0.05)(1-0.05)}{(0.05)^2}$$

$$n = \frac{3.8416 \times .0475}{0.0025} \qquad n = 73$$

Minimal sample size Secondary level care SDPs/facilities/hospitals (or equivalent) (95% confidence interval and 5% confidence limit)

$$n = \frac{Z^2 p(1-p)}{D^2} \qquad n = \frac{(1.96)^2 \times (0.06)(1-0.06)}{(0.05)^2}$$

$$n = \frac{3.8416 \times 0.0564}{0.0025} \qquad n = 87$$

Minimal sample size for Primary Level Care SDPs/facilities (or equivalent to country context) (99% confidence interval and 5% confidence limit)

$$n = \frac{Z^2 p(1-p)}{D^2} \qquad n = \frac{(1.96)^2 \times (0.89)(1-0.89)}{(0.05)^2}$$

$$n = \frac{3.8416 \times 0.0979}{0.0025} \qquad n = 150$$

Table 3: Minimal sample sizes for Ethiopia based on 95 per cent confidence interval (Z-score = 1.96) and 5 per cent confidence limit)

Confidence Interval and Confidence Limit	Minimal Sample Size of Service Delivery Point			
	Tertiary level care SDPs/facilities/hospitals (or equivalent)	Secondary level care SDPs/facilities/hospitals (or equivalent)	Primary Level Care SDPs/facilities (or equivalent to country context)	Total
[95% confidence interval (Z = 1.96) and 5% confidence limit (d = 0.05)]	73	87	150	310

The highlighted cells in Table 3 show that the minimal sample size obtained is more than the population size (in table 1). This should be corrected

5.1.3 Step 3: Correction for abnormal-oversize samples

Where the minimal sample size obtained is greater than the population size as in Table 3, the whole population of the category under consideration should be included in the sample. This abnormality usually occurs when the size of the population is too small for the assumptions of normal distribution of the population to prevail using a given confidence interval and confidence limit.

The abnormal sample size is therefore corrected by replacing the oversized samples by the population sizes shown in Table 4. The total sample size for all categories should also be recalculated to reflect this correction.

Table 4: Corrected minimal sample sizes for Ethiopia based on the 95 per cent confidence interval and 5 per cent confidence limit

Confidence Interval and Confidence Limit	Corrected Minimal Sample Size of Service Delivery Point			
	Tertiary level care SDPs/facilities/hospitals (or equivalent)	Secondary level care SDPs/facilities/hospitals (or equivalent)	Primary Level Care SDPs/facilities (or equivalent to country context)	Total
[95% confidence interval (Z = 1.96) and 5% confidence limit (D = 0.05)]	41	47	150	238

This means that for Ethiopia;

- All the 41 Tertiary level care SDPs/facilities/hospitals (or equivalent) will be included in the sample
- All the 47 Secondary level care SDPs/facilities/hospitals (or equivalent) will be included in the sample
- 150 of the 711 Primary Level Care SDPs/facilities (or equivalent to country context) will be included in the sample
- Thus a total of 238 SDPs will be sampled from the population of 799 SDP

5.1.4 Step 4: Distribution of Sample Sizes for Administrative Units

The total sample size for each category of SDPs has to be distributed among the administrative units according to the administrative unit's share of a particular category of SDP. This requires the calculation of the relative proportions for each domain. For example the Proportion of Referral and Regional Hospital in Addis Ababa = Number of Tertiary level care SDPs/facilities/hospitals (or equivalent) in Addis Ababa ÷ Total of Tertiary level care SDPs/facilities/hospitals (or equivalent) = 12 ÷ 41 = 0.2927 (This indicates that 29.27 per cent of all 'Tertiary level care SDPs/facilities/hospitals (or equivalent)' are located in Addis Ababa.) The results are presented in Table 5.

Table 5: Proportion of Categories of Service delivery Points by Administrative Units

Administrative Units	Category of Service Delivery Point			
	Tertiary level care SDPs/facilities/hospitals (or equivalent)	Secondary level care SDPs/facilities/hospitals (or equivalent)	Primary Level Care SDPs/facilities (or equivalent to country context)	Total
Addis Ababa	0.2927	0.0000	0.0900	0.0951
Afar Region	0.0244	0.0213	0.0225	0.0225
Amhara Region	0.0732	0.2340	0.2250	0.2178
Benishangul-Gumuz Region	0.0244	0.0213	0.0225	0.0225
Dire Dawa	0.0000	0.0213	0.0098	0.0100
Gambela Region	0.0244	0.0000	0.0141	0.0138
Harari Region	0.0976	0.0000	0.0098	0.0138
Oromiya Region	0.2927	0.2766	0.2982	0.2966
Somali Region	0.0244	0.0638	0.0155	0.0188
Southern Nations, Nationalities and Peoples' Region	0.0732	0.2553	0.2152	0.2103
Tigray Region	0.0732	0.1064	0.0774	0.0788
TOTAL	1.0000	1.0000	1.0000	1.0000

5.1.5 Step 5: Distribution of Sample Sizes for Administrative Units

The samples for each category of SDP are distributed among the various administrative regions by applying the proportions in Table 5 to the minimal sample sizes for each type of SDP indicated in Table 4. The results are presented in Table 6 for Ethiopia.

Table 6: Distribution of minimal sample sizes for each category of SDPs in Ethiopia $Z_{(95\% 0.05)}$

Administrative Sub Region	Category of Service Delivery Point			Total
	Tertiary level care SDPs/facilities/hospitals (or equivalent)	Secondary level care SDPs/facilities/hospitals (or equivalent)	Primary Level Care SDPs/facilities (or equivalent to country context)	
Addis Ababa	12	0	14	26
Afar Region	1	1	3	5
Amhara Region	3	11	34	48
Benishangul-Gumuz Region	1	1	3	5
Dire Dawa	0	1	1	2
Gambela Region	1	0	2	3
Harari Region	4	0	1	5
Oromiya Region	12	13	45	70
Somali Region	1	3	2	6
Southern Nations, Nationalities and Peoples' Region	3	12	32	47
Tigray Region	3	5	12	20
TOTAL	41	47	149*	237*

* difference as a result of rounding off

Table 6 presents the minimal samples size for each type of SDPs that are to be sampled from each administrative unit in Ethiopia (under Z score for 95 per cent confidence interval and 5 per cent confidence limit). The outcome of the procedure means that all the Tertiary level SDPs/facilities/hospitals (or equivalent) and the Secondary level SDPs/facilities/hospitals (or equivalent) should be included in the sample and surveyed. Likewise, 14 of the 64 Primary Level Care SDPs/facilities (or equivalent to country context) in Addis Ababa should be systematically selected; and, 2 out of the 10 Primary Level Care SDPs/facilities (or equivalent to country context) in Gambela Region should be systematically selected for inclusion in the sample of SDPs to be canvassed.

6.0 FINAL STEP: SYSTEMATIC RANDOM SAMPLING OF TYPES OF SDPS FOR EACH ADMINISTRATIVE UNIT

With the list of SDPs for each domain at hand, the final step is to choose the specific SDPs to be included in the study. The following steps can be followed:

1. For each domain the facilities should be listed without any order or regard to any characteristics
2. A Sampling Interval (i) should be determined for each domain. This is done by dividing the total number of facilities in the domain by the sample size for that domain:

$$i = \frac{N}{n}$$

Where: i = sampling interval for the domain
N = number of SDPs in the domain
n = sample size for that domain

3. Select a starting point K by randomly selecting a number between 1 and i (the sample interval). Note that K becomes the first SPD in the domain to be chosen.
4. Then select successive SPDs for inclusion in the sample by moving at the interval $K+i$; $K+2i$; $K+3i$; $K+4i$; $K+5i$; etc until you have chosen the required sample size from the domain.
5. Steps 1 to 4 should be repeated for each domain in the population

7.0 RECOMMENDED CONFIDENCE INTERVAL AND CONFIDENCE LIMIT

It is recommended that all GPRHCS Stream 1 countries should carry out the sampling procedure based on Z value for 95 per cent confidence level and at 5 per cent confidence limit.

8.0 FACTOR TO INFLATE SAMPLE SIZE

NOTE: Allowance should be made to compensate for possible non-response or non-existence of SPDs that provide a particular service (contraceptive or delivery). In such a case, and where necessary, the sample size could be slightly inflated by a factor (say 10 per cent).

9.0 ASSOCIATED DOCUMENTATION

A questionnaire and a report outline have been prepared by CSB and made available to GPRHCS implementing countries for the conduct of the survey.

10: GUIDE FOR CLIENT INTERVIEW

The clients of SPDs are interviewed as they leave the health facility learn about their opinion and satisfaction with the service received, and their appraisal of various cost elements related to accessing FP services. The information will assist in gaging some aspects of the quality of care and cost for FP services from the client's perspective'. The authorities of the SPDs must be informed, and their permission obtained before the client interview section can be completed for a particular SPD. It would be advisable for the survey team to advocate with MOH and other civil authorities, where necessary, to ensure the management of SPDs support the conduct of the exit interview.

Most importantly the consent of the individual clients must be obtained. The interviewer must inform the client about the purpose of the client interview. The interview must be conducted in private. Steps should be taken to ensure that no other person is present for the interview. Confidentiality must be ensured; so the interviewers should not discuss the respondents' answers with anyone, except their survey supervisors. Also, no particulars of the clients should be recorded.

Although client exit interviews are not expected to be based on representative samples of the population, however, efforts must be made to ensure that they are representative of those who visit the facility on that day. In this respect the interviewer should ensure that those interviewed are systematically selected. Therefore:

- A: In primary SPDs, the interviewer should talk to all the clients visiting the facility on the day the client interview is conducted.
- B: For secondary and tertiary SPDs, with high attendance, the interviewer can talk to a sample of clients. The sample should be chosen systematically (every N th client can be chosen). It is proposed here that the 3rd respondent be chosen from the family planning attendees leaving the SPD on the day.

Where possible it is necessary to interview at least 5 attendees per primary SPDs and 20 per secondary or tertiary SPDs. It should be recognised that these limits depend on the number who attend SPD at the time of the survey. It is therefore left to the survey team of each country to device strategies for



collecting information from as many persons as possible. Depending on the country and region, specific times of the day (e.g., morning hours); specific days (market days for some rural communities); or designated clinic days etc., can be explored to reach as many attendees as possible.



SECTION VIII: ANNEX D – LIST OF NATIONAL HEALTH FACILITIES ACCORDING TO THE MINISTRY OF HEALTH OF SOMALIA

To access the list of health facilities list, please utilize the following link:

<https://docs.google.com/spreadsheets/d/1fxboj3v-ZmdO5FHhU7M6e7Hl0MazWnbC/edit#gid=236936485>