

MSH/SEAM Tanzania

ADDO Program

Access to Medicines Evaluation

Data Collection Training

27-29 October 2004

Dar es Salaam

Tanzania

John Chalker



Data Collection Training
MSH ADDO Program
Access to Medicines Evaluation

OPENING REMARKS

John Chalker

Agenda: Day I Morning

Time	Activity	Responsible
9:00	Opening/welcome remarks	
9:10	Introductions	
9:30	Introduction to SEAM and ADDO Program	
10:00	Training Objectives – why are we conducting the training	
10:15	Expected Outputs	
10:25	How the data will be used	
10:30	Break	
11:00	An Overview of Data Collection forms	
11:30	Price & Availability Form	
12:00	Registration Status Form	

Agenda: Day 1 Afternoon

Time	Activity	Responsible
12:30	Lunch Break	
13:30	Satisfaction Form	
14:00	Satisfaction Form – role playing	
14:30	Malaria Simulated Client	
15:00	Malaria Simulated Client – role playing	
15:30	URTI Simulated Client	
16:00	URTI Simulated Client – role playing	
16:30	Content of Data Collection Kit	
17:00	Travel Logistics (Preliminary discussions)	
17:30	Plan for Day 2	

Agenda: Days 2 and 3

Day 2:

9:00 – 17:00

- Visit to facilities to pre-test exit interview and practice applying other data collection forms

Day 3:

9:00 – 17:00

- Lessons learned from Day 2 visits
- Finalize and agree on travel logistics
- Provide data collection forms, supplies, and information to Team Leaders

Introductions

All Attendees

MSH/SEAM Program

An Overview

SEAM Program

SEAM stands for:

- Strategies for Enhancing Access to Medicine
- Program is being executed by Management Sciences for Health (MSH)
- Funded by Bill & Melinda Foundation
- Programs are operating in Tanzania, Ghana, and El Salvador

SEAM Program Broad Objective

- To improve access to and use of quality essential medicines and commodities through local public & private sector partnerships.

Access Issues Addressed by Program

- Availability of medicines
- Affordability of medicines
- Geographical access to medicines
- Quality of medicines & services
- Service satisfaction/acceptability

Programs in Tanzania

- ADDO Program
 - Duka la Dawa Muhimu
- Prime Vendor Program
- Drug Quality Assurance Program

Setting Characteristics & Problems

- Public Primary Health Stock Outs – up to 30%
- High demand for private pharmacy services
- > 4,000 non-pharmacy drug (Part II) shops
- 80% of population have access to Part II shops

Problems

- Chronic violation of regulation
 - Unqualified Staff
 - Unknown drug quality
 - Selling PoM
- High drug prices
- Inadequate regulation

Intervention Approach

- Baseline Survey: Quality, Availability, Affordability, Regulatory adherence
- Modified legal and regulatory framework, including expanded drug list & decentralization
- Accreditation standards established by TFDA
 - Training – dispensers, owners, local inspectors
- Social Marketing program to promote behaviour change – consumers and owners
- Commercial incentives
- Supportive supervision

Data Collection Training Objectives

Why are We Conducting this Training?

Training Objectives:

- **Build capacity** to collect data accurately
- Provide **hands-on practice** in filling the forms
- **Ensure consistency** in data collection by giving everybody the same instructions and information
- **Assign roles and responsibilities** of each team member

At the End of this Training Everyone Should Have:

- Expertise in filling the forms – including role-plays and visits to facilities
- Proficiency in conducting client exit interviews – achieved through practice and role playing
- Proficiency in conducting the simulated client scenarios - achieved through practice and role playing
- Knowledge of the location of the facilities to be visited, what to do at the facilities, and how to collect the data

How will the Data be Used?

The data:

- Will be entered into a database – to facilitate fast and accurate analysis
- Will establish the current situation of access to medicines in shops, and can be used to compare change since the time of the baseline evaluation
- Provide information on a private sector intervention to improve access to affordable, quality medicines and services

Where will data be collected?

- ADDO facilities to be visited: 50 facilities
 - Evaluation to include the longest-standing ADDO facilities that were included in the baseline
 - Ruvuma
 - Songea Urban
 - Songea Rural
 - Namtumbo
- Duka la Dawa Baridis Comparison (Control): Up to 70 facilities:
 - Ruvuma: Up to 20
 - Up to 20 that did not convert to ADDOs
 - Singida: 50
 - 50 facilities from Singida, the region was visited in the first evaluation
- Each team will be assigned a set of shops to visit

Facility Visits

Each facility will be visited twice.

Visit 1 to each facility will include completing the following forms:

- 1 Malaria Simulated Client Scenario & Form
- 1 Price & Availability Form
- 1 Registration Status Form
- 5 Customer Satisfaction Exit Interview & Form

Visit 2 will include:

- 1 URTI Simulated Client Scenario & Form
- Any remaining Customer Satisfaction Exit Interviews, with the goal of completing five total at each facility

Overview of Data Collection Forms

Data Collection Forms (I)

- Five forms will be used in this evaluation:
 1. Malaria simulated client form
 2. Upper Respiratory Tract Infection (URTI) simulated client form
 3. Price and availability form
 4. Registration status form
 5. Satisfaction exit interview form
- Each form has been designed to collect data on access dimensions and service characteristics

Data Collection Forms (2)

- Seven key indicators will be captured in the five data collection forms. The indicators are intended to measure the level of access to medicines in drug shops. The indicators relate to :
 - Availability of medicines
 - Affordability of medicines
 - Quality of products
 - Quality of service
 - Service satisfaction
- The 7 key indicators are:

1 and 2. Simulated Client

Quality of Service:

In real life how does a counter attendant deal with a case of simple malaria and URTI

- % encounters where appropriate antimalarial for chloroquine-resistant malaria was sold
- % encounters where an antibiotic was sold for upper respiratory tract infection (URTI)
- % encounters where attendant provided instruction to patient/caregiver on how to take/give medication

Other Indicators and forms

Price & Availability Form

- **Availability:** % of a set of tracer items in stock
- **Affordability:** Average % difference in price to patients between ADDOs and DLDBs, for a set of tracer items

Registration Status Form

- **Quality of Products:** % of items sampled that are registered with the TFDA

Customer Satisfaction Exit Interview

- **Acceptability/ Satisfaction:** % of customers who express satisfaction with service

Sources of Data (example)

Where to Go	Whom to Ask	What to Get
Duka la Dawa Muhimu (ADDO) Duka la Dawa Baridi (DLDB)	Data collection is done as a simulation. Shop managers should be unaware of the process so no permission is needed.	Perform 1 malaria simulated client per facility Determine the prescribing practices in drug retail shops for a case of uncomplicated malaria for a child Determine the cost of treatment as prescribed in the shop

Basic Information on Completing in Each Form (I)

Fill out the top “Facility Information” section on each form. This section must be filled in completely for each form and facility. Example:

Price & Availability Data Collection Form Duka la Dawa Muhimu Final Evaluation

Data Collector:
Date of visit:

Facility Information:

Facility Name:	Region:
Facility Type (Check One):	District:
<input type="checkbox"/> Duka La Dawa Muhimu (ADDO)	Village/Ward:
<input type="checkbox"/> Duka La Dawa Baridi	Address:

In addition, write the facility name, your name, and date on each page in case a page falls out of order.

Basic Information on Completing in Each Form (2)

- Legibility: Use pens, not pencils or markers, to fill out the forms.
- Write in clear, legible script. All of the information that is collected will be put into a database, and the person entering the data will need to be able to read the handwriting.
- The facility name, name or code of data collector, etc., must be noted on each page of each form, to facilitate its proper placement in case a page is detached. A space to write this information is provided on each page.

At the Shop...

- Conduct the data collection in the following order:
 - Visit 1
 - Malaria Simulated Client
 - Data collector #1:
 - Price & Availability Form
 - Registration Status Form
 - Data Collector #2
 - Satisfaction Exit Interview Form (5 exit interviews)
 - Visit 2
 - URTI Simulated Client
 - Any remaining Satisfaction Interviews to complete 5 per facility

At the Shop...Visit I

- After finishing the malaria simulated client scenario, introduce yourself to the personnel at the shop and explain the purpose of your visit.
 - You may wish to present letters of introduction authorizing you to conduct the survey.
 - The malaria simulated client will need to be completed prior to introducing yourself at the shop.

Introductions

- Introduce yourself (example from Price & Availability form)

Hello, my name is _____. I am here on behalf of an international health organization that is working in Tanzania to improve access to medicines. As part of the program, an assessment has been organized to gather information on the availability and price of medicines. This facility was selected to participate. The data collected will remain confidential. We would like your staff to help us today in the following tasks:

- » Gather data on the stock and price 20 items in the shop
- » Review packaging information for 10 drugs in the facility stockroom.

Thank you very much for your help..

Introductions Translation

????UTAMBULISHO

Tunafanyakazi pamoja na Wizara ya Afya na Bodi ya Madawa Tanzania kufuatilia uboreshaji wa sekta ya madawa nchini.

Hatufanyi ukaguzi, ila ni utafiti na duka hili la dawa lilichaguliwa bila upendeleo. Duka hili ni mojawapo ya maduka machache teule katika mkoa wa Singida na Ruvuma.

Taarifa zitakazokusanywa zitakua ni siri na hazitatumika kupima utendaji wa duka la dawa hii bali kutoa picha halisi ya Tanzania.

Hii hapa ni barua ya utambulisho kutoka Wizara ya Afya kukuomba ushirikiano wako.

Tunaweza kuendelea?

Data Collection Forms

Data Collection Forms

We will be reviewing the following forms:

- Malaria Simulated Client
 - URTI Simulated Client
 - Price and Availability Form
 - Registration Status Form
 - Satisfaction Exit Interview Form
-
- Though the Malaria and URTI scenarios will be carried out on different days, the instructions are so similar that they will be reviewed together.

Malaria Simulated Client Scenario

- This form is used for the indicator listed below:
 - % encounters where the appropriate antimalarial for simple malaria was sold
 - % encounters where attendant provided instruction to patient/caregiver on how to take/give medication
- The information that we will review is:
 - Scenario for Malaria Simulated Client
 - Malaria Simulated Client Data Collection Form
 - Instructions for Completing Forms

Overview of Malaria Simulated Client Scenario

- What is the Simulated Client?
 - The simulated client case is a simulation of a purchase or mystery shopper at a drug shop.
 - The simulated client case is based on the National Guidelines for malaria diagnosis and treatment in Tanzanian 2000 for level I for health care delivery.
 - The client is a parent/relative of a 6 year old child with classic symptoms of uncomplicated malaria.
 - The ideal scenario would be for the shop keeper to ask the client questions about the symptoms and medication history. On the basis of this, the attendant may refer the parent to a health care professional or may recommend S/P in doses appropriate for a 6 year old child.
 - No antibiotics or injections of any kind are indicated

Malaria Scenario

- **Scenario:**
 - Present yourself as the caregiver of a 6 year-old girl who has had a fever on and off for a week.
 - Use local terms to describe the symptoms of the child.
 - The child may be a boy or a girl. Request advice regarding which products to give the child.
 - *Do not provide any additional information unless directly asked for more information.*
 - Purchase the drugs recommended by the retail drug seller and leave the shop.
 - Nina mwanangu ana miaka 6. Amekuwa na homa inayopanda na kushuka kwa wiki moja sasa. Utanisaidiaje?

How to Answer Questions

- If the drug seller asks these questions, reply as follows
 - ***The condition of the child:***
In addition to the fever the child has complained of a headache and aches and pains since last week. She has been feeling generally unwell for a week.
 - ***If the child took medication:***
Say that they took some Panadol a week ago. The fever went away after this, but returned three days later.
 - ***Can the child take food and/or liquids:***
Say he/she is able to take both liquids and food.
 - Do not appear too familiar with the names of the products recommended.

Cost of the Medications

- If the price of the medication(s) offered is more than 1000 TSh, tell the pharmacist “I have only 1000 TSh.” Wait to see what is offered.
- Buy what you can with 1000 TSh and remember the previous advice offered.
- For each drug sold by the drug seller, record the total price paid per drug. If you are not able to obtain the price per drug but are only able to obtain a price for the total treatment, fill in the total cost of treatment in the space provided at the bottom of the form (a space is provided titled “Total price for all drugs (if applicable).” We prefer to obtain the price per drug.

What to Notice about the Simulation (I)

- Notice and remember the following (you can ask the drug seller to repeat information):
 - What are the name(s) of the product(s) that were recommended but not purchased? Why were they not purchased?
 - Where any of the drugs that were recommended injections?
 - Did the drug seller ask about the symptoms of the child?
 - Did the drug seller ask about the medication history of the child?
 - Did the drug seller give instructions on how to take the medication?
 - Did the drug seller recommend that the child be seen by a health care professional?

Fill Out the Form After the Simulation

- Fill the data collection form after immediately after exiting the shop, but in such a way that the shop attendant is not aware.
- An example of the form follows.

A look at the form...

Malaria Simulated Client Data Collection Form							Data Collector:					
Duka la Dawa Muhimu Final Evaluation							Date of visit:					
Facility Information:												
Facility Name:							Region:					
Facility Type (Check One):							District:					
Duka La Dawa Muhimu (ADDO)							Village/Ward:					
Duka La Dawa Baridi							Address:					
#	Drug Name	Dosage Form	Strength	Total Quantity sold	Dosage Quantity	Frequency	Duration of Treatment	How to take	Price paid per drug	Full course prescribed	Generic name of drug	
	(example: Chloroquine)	(example: syrup)	(example: 10mg/ml)	(example: 1 bottle)	(example: 10 ml)	(example: 1 time per day)	(example: 3 days)	(example: with food)	(Example: 100 Tshs)	Yes/No/NA	Example: Chloroquine	
1												
2												
3												
4												
5												
Total price for all drugs (if applicable):												
Note: Data Collectors need not fill the gray shaded areas												

A look at the form...

Questions about interaction with the shop attendant:

1 What drugs were recommended but not purchased? (Circle the drug if it is an injection)

A _____
B _____
C _____

Why were these recommended drugs not purchased (circle one)

a) Too expensive

b) Not available

c) Other (please describe) _____

2 Did the drug seller ask about the symptoms of the child?

Yes

No

3 Did the drug seller ask about any other medications the child may have taken?

Yes

No

4 Did the drug seller give instructions on how to take the medications?

Yes

No

5 Did the drug seller give instructions on how to look for danger signs?

Yes

No

6 Did the drug seller recommend referral to a doctor or clinic?

Yes

No

7 Did the drug seller recommend referral to a doctor or clinic if danger signs arose?

Yes

No

8 Did the drug seller recommend returning if the symptoms did not get better?

Yes

No

Comments:

Facility Name:
Data Collector:
Date:

General Instructions for Filling the Form

- Fill in the form immediately after performing the scenario and exiting the shop, out of view of the attendant.
- Fill in the Facility information at the top of the form and at the bottom of the second page:
 - Facility name
 - Facility type
 - Region
 - District
 - Village
 - Address

Filling out the Form (I)

- **Fill in the names of the drugs that were recommended for purchase by the drug seller.** Record information on each drug recommended for purchase during the simulated purchase encounter.
 - Drug Name
 - Dosage form
 - Strength
 - Total Quantity Sold
 - Dosage Quantity (Quantity to be taken at a time)
 - Frequency
 - Duration of Treatment
 - How to Take
 - Price Paid per Drug
 - Total Price for All Drugs (if price per drug is not available)

Filling Out the Form (2)

NOTE TO SUPERVISORS:

- The MSH/Healthscope team will select in advance what constitutes a full/appropriate course of treatment and provide this information in data collector training
- Team leaders or supervisors should review all simulated client forms from their teams to check:
 - If full course prescribed (yes/no)
- Enter the generic name of all drugs purchased so that we can run the data analysis by generic name

Filling out the Form (3)

Questions about interaction: Immediately after completing the information about the drugs purchased and the prices paid, answer the eight (8) questions about your interaction with the shop attendant. These questions will provide information about the quality of the interaction with the attendant.

Please answer all eight questions

- What drugs were recommended but not purchased? (Note why they were not purchased)
- Did the drug seller ask about the symptoms of the child?
- Did the drug seller ask about any other medications the child might have taken?

Filling out the Form (4)

- Did the drug seller give instructions on how to take the medications?
- Did the drug seller give instructions on how to look for danger signs?
- Did the drug seller recommend that you see a health care professional?
- Did the drug seller recommend referral to a doctor or clinic if danger signs arose?
- Did the drug seller recommend returning if the symptoms did not get better?

Practice the Scenario (Role Play)

- Role play in front of the big group
 - Identify questions and what could go wrong
- Role play in small groups
 - Practice the scenario in groups of 2
 - 1 person acts as a drug seller
 - 1 person acts as the simulated client
 - Trade roles so that each person acts out the scenario.
 - Practice the scenario in the local language.
 - Practice filling out the forms after the roll play.

Review the Role Play

- Discuss the roll play as a large group and note questions/responses
 - Agree as a group on standard language and phrases to use (avoid saying too much).
 - Discuss how not to appear too educated/familiar with the drugs recommended in the shops.
 - Review the results of filling out the forms.

URTI Simulated Client Scenario

- This form is used for the indicator listed below:
 - % encounters where an antibiotic was sold for childhood upper respiratory tract infection (URTI)
 - % encounters where attendant provided instruction to patient/caregiver on how to take/give medication
- The information that we will review is:
 - Scenario for URTI Simulated Client
 - URTI Simulated Client Data Collection Form
 - Instructions for Completing Forms

Overview of URTI Simulated Client Scenario

- What is the Simulated Client?
 - The simulated client case is a simulation of a purchase at a drug shop.
 - The simulated client plays the role of a parent of a child with symptoms of acute respiratory infection.
 - The ideal scenario would be for the shop keeper to ask the client questions about the symptoms and medication history.
 - On the basis of this, the attendant may refer the client to a health care professional or may recommend a medicine in doses appropriate for the age and symptoms of the child.
 - No antibiotics or injections of any kind are indicated to be sold.

ARI Scenario

- One data collector goes into a private pharmacy or chemical sellers shop to purchase medicine for a sick daughter, using the scenario given on the simulated client data collection form:
 - “My little girl has fever, cough and a runny nose for 2 days. She has not slept well throughout the night. Can you offer me something?”
- Do not provide any additional information unless directly asked for more information.
- Remember any advice or instructions that the pharmacist or attendant gives you.

How to Answer Questions

If the drug seller asks these questions, reply as follows

- *How old is the girl?: 6 years old.*
- *Has the girl had any other problem, such as vomiting or diarrhea?: No.*
- *Has the girl been given any medication or any other remedy?: No, none yet.*
- *Can the girl take food and/or liquid?: Say the child is able to take both food and liquids, but it is painful due to her sore throat.*
- If the price of the medication(s) offered is more than 1000 TSh, tell the pharmacist “ I have only 1000 TSh.” Wait to see what is offered. Buy what you can with 1000 TSh and remember the previous advice offered.

What to Notice about the Simulation (I)

- Notice and remember the following (you can ask the drug seller to repeat information):
 - Whether the drug seller asked questions regarding the child's condition before making a treatment recommendation
 - Whether the drug seller gave instructions on how to administer the medication
 - Whether the drug seller told you about the warnings associated with the products
 - Whether the drug seller gave other advice or information on how to care for the child and treat the episode
 - The name(s) of the product(s) that were recommended to purchase
 - Were any of the drugs that were recommended injections?
 - Whether the drug seller recommended that the child be seen by a healthcare professional

Fill out the Form after the Simulation

- Do not appear too familiar with the names of the products recommended.
- Fill the data collection form after immediately after exiting the shop, but in such a way that the shop attendant is not aware.
- An example of the form follows.

A look at the form...

Upper Respiratory Tract Infection Simulated Client Data Collection Form											
Duka la Dawa Muhimu Final Evaluation								Data Collector:			
								Date of visit:			
Facility Information:											
Facility Name:						Region:					
Facility Type (Check One):						District:					
<input type="checkbox"/> Duka La Dawa Muhimu (ADDO)						Village/Ward:					
<input type="checkbox"/> Duka La Dawa Baridi						Address:					
#	Drug Name	Dosage Form	Strength	Total Quantity sold	Dosage Quantity	Frequency	Duration of Treatment	How to take	Price paid	Full course prescribed	Generic name of drug
	(example: Amoxicillin)	(example: suspension)	(example: 25 mg/ml)	(example: 1 bottle)	(example: 5 ml)	(example: 3 times per day)	(example: 5 days)	(example: with food)	(Example: 100 Tshs)	Yes/No/NA	
1											
2											
3											
4											
5											
Total price for all drugs (if applicable):											
Note: Data Collectors need not fill the gray shaded areas											

A look at the form...

Questions about interaction with the shop attendant:			
1	What drugs were recommended but not purchased? (Circle the drug if it is an injection)		
	A		
	B		
	C		
	Why were these recommended drugs not purchased? (Circle one)		
	a) Too expensive		
	b) Not available		
	c) Other (please describe): _____		
2	Did the drug seller ask about the symptoms of the child?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
3	Did the drug seller ask about any other medications the child may have taken?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
4	Did the drug seller give instructions on how to take the medications?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
5	Did the drug seller give instructions on how to look for danger signs?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
6	Did the drug seller recommend referral to a doctor or clinic?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
7	Did the drug seller recommend referral to a doctor or clinic if danger signs arose?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
8	Did the drug seller recommend returning if the symptoms did not get better?		
	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
	Comments:		
	Facility Name:		
	Data Collector:		
	Date:		

General Instructions for Filling the Form

- Fill in the form immediately after performing the scenario and exiting the shop, out of view of the attendant.
- Fill in the Facility information:
 - Facility name
 - Facility type
 - Region
 - District
 - Village
 - Address

Filling out the form

- **Fill in the names of the drugs that were recommended for purchase by the drug seller.** Record information on each drug recommended for purchase during the simulated purchase encounter.
 - Drug Name
 - Dosage form
 - Strength
 - Total Quantity Sold
 - Dosage Quantity (Quantity to be taken at a time)
 - Frequency
 - Duration of Treatment
 - How to Take
 - Price Paid per Drug
 - Total Price for All Drugs (if price per drug is not available)

Filling Out the Form (2)

NOTE TO SUPERVISORS:

- The MSH/Healthscope team will select in advance what constitutes a full/appropriate course of treatment and provide this information in data collector training
- Team leaders or supervisors should review all simulated client forms from their teams to check:
 - If full course prescribed (yes/no)
- Enter the generic name of all drugs purchased so that we can run the data analysis by generic name

Filling out the Form (3)

Questions about interaction: Immediately after completing the information about the drugs purchased and the prices paid, answer the eight (8) questions about your interaction with the shop attendant. These questions will provide information about the quality of the interaction with the attendant.

Please answer all eight questions

- What drugs were recommended but not purchased? (Note why they were not purchased)
- Did the drug seller ask about the symptoms of the child?
- Did the drug seller ask about any other medications the child might have taken?

Filling out the Form (4)

- Did the drug seller give instructions on how to take the medications?
- Did the drug seller give instructions on how to look for danger signs?
- Did the drug seller recommend that you see a health care professional?
- Did the drug seller recommend referral to a doctor or clinic if danger signs arose?
- Did the drug seller recommend returning if the symptoms did not get better?

Practice the Scenario (Role Play)

- Role play in front of the big group
 - Identify questions and what could go wrong
- Role play in small groups
 - Practice the scenario in groups of 2
 - 1 person acts as a attendant
 - 1 person acts as the simulated client
 - Trade roles so that each person acts out the scenario.
 - Practice the scenario in the local language.
 - Practice filling out the forms after the roll play.

Review the Role Play

- Discuss the roll play as a large group and note questions/responses
 - Agree as a group on standard language and phrases to use (avoid saying too much).
 - Discuss how to not appear too educated/familiar with the drugs recommended in the shops.
 - Review the results of filling out the forms.

Price and Availability Form

Please get a copy of this form from your training packet.

The form looks like the following slide...

Price & Availability Data Collection Form			Data Collector:			
Duka la Dawa Muhimu Final Evaluation			Date of visit:			
Facility Information:						
Facility Name:			Region:			
Facility Type (Check One):			District:			
	Duka La Dawa Muhimu (ADDO)		Village/Ward:			
	Duka La Dawa Baridi		Address:			
Availability and Price Information:						
Tracer Item Description			Availability		Price Information	
#	Product Name	Dosage Form	Available? (Yes or No)	Expired? (Yes or No)	Cheapest pack price	Number of Units per pack
1	Amodiaquine	T, 200mgs				
2	Amoxicillin	C, 250mg				
3	Benzyl Penicillin Powder Inj.	V, 5MUs				
4	Cotrimoxazole	T, 480mg				
5	Diclofenac	T, 50mg				
6	Doxycycline	C, 100mg				
7	Metronidazole	T, 200mg				
8	Nystatin Suspension	Suspension 100,000iu				
9	Praziquantel	T,600mgs				
10	Phenoxymethly-penicillin	T, 250mgs				
11	Procaine Penicillin Fortified	V, 4MUs				
12	Quinine	T,300mg				
13	Erythromycin	T, 250mgs				
14	Sulfadoxine + Pyrimethamine	T,525mgs				
15	Sulphametopyrazine + Pyrimethamine	T,525mgs				
16	Combined contraceptive pill	1 cycle				
17	Mebendazole	T, 100mg				
18	Salbutamol	T,4mg				
19	Paracetamol	T,500mg				
20	Indomethacin	T or C, 25mg				

Price and Availability Form: General Instructions

- What we are collecting: The form is designed to collect data on the availability of a key set of 20 medicines and supplies at each facility. We will also be collecting information on the price of each item.
- Introduce yourself
- Ask to see the items on the list that are in stock.
- Check to see if they are available or expired.
- Note the cheapest pack size and selling prices for each of the items.

Price and Availability Form: Filling out the Form (I)

- Fill in your information
 - Data collector name or code
 - Date of visit
- Fill in the Facility information:
 - Facility name
 - Facility type
 - Region
 - District
 - Village
 - Address

Price and Availability Form: Filling out the Form (2)

- Ask the attendant to show you the drugs on the list, one by one. Check to see that the item is expired. You may offer various name brands if the generic names are not known.
- When you have seen the item and confirmed that it is indeed the tracer item, write YES in the availability column to indicate that it is available.
- Look at the expiration date of the drug. If it is expired, it should be considered to be NOT AVAILABLE and write NO in the availability column.

Price and Availability Form: Filling out the Form (3)

- Fill in the price information
 - Ask the attendant to see the cheapest brand of each tracer item.
 - Write down the cheapest selling prices per pack for each of the tracer items on the form.
 - Fill in the number of units per pack for the cheapest packs.
 - For example, if a product costs 50 Tsh for a pack of 6, the pack price would be 50 Tsh and the number of units per pack would be 6
 - If the product is sold by individual units (for example, one table for 10 Tsh) rather than packs, mark 10 Tsh as the pack price and mark "1" for number of units per pack.

Troubleshooting

- The attendant is not familiar with the drug being requested –
 - Refer to the brand name equivalent list and use the brand name of the drug you are requesting.
- The tracer items are available, but not in the dosage form or strength listed on the sheet
 - If the dosage form and strength are different from the tracer list, the drug should not be considered available. Write NO in the availability column.
 - **There are seven drugs that have some exceptions to this rule:**
 - In some cases, alternative strengths are acceptable, and availability and price information can be gathered for those alternate strengths. The drugs for which alternate strengths are acceptable are on the next slide.

Acceptable alternate strengths for Tracer Drugs

Tracer Item			Acceptable Alternative Strengths
#	Product Name	Dosage Form/Strength	Alternate Strength
2	Amoxicillin	C, 250mg	500 mg
5	Diclofenac	T, 50mg	100 mg
7	Metronidazole	T, 200mg	250 mg
10	Phenoxymethly-penicillin	T, 250mgs	250 or 500 mg
13	Erythromycin	T, 250mgs	500 mg
19	Paracetamol	T,500mg	325 mg
20	Indomethacin	T or C, 25mg	50 mg

Drug Registration Status Form

Please get a copy of this form from your training packet.

The form looks like the following slide...

Drug Registration Status Data Collection Form				Data Collector:				
Duka la Dawa Muhimu Final Evaluation				Date of visit:				
Facility Information:								
Facility Name:			Region:					
Facility Type (Check One):			District:					
Duka La Dawa Muhimu (ADDO)			Village/Ward:					
Duka La Dawa Baridi			Address:					
Drug Registration Information								
Instructions: Select 10 brand name drug products in the alphabet range your team was assigned. Document all product details as they appear on the packaging.								
#	Brand Name	Dosage Form	Strength	Generic Name (if applicable)	Manufacturer	Country	Registration Number	Registered? (Yes or No)
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								
From letter _____			To letter: _____		Letter choices: A-E, F-L, M-Q, R-Z			
Additional Comments:								
Note: Data Collectors need not fill the gray shaded areas								

Drug Registration Status Form: General Instructions (I)

- What we are collecting: The form is designed to collect data on the registration status of 10 medicines at each facility.
- This information will indicate whether the medicines carried in the facilities are of known and verifiable quality as determined by the TFDA.
- You will ask to see the packaging materials that come with 10 medicines and you will write down the information contained on the packages.

Drug Registration Status Form: General Instructions (2)

- At each shop you visit, you will select drugs whose names begin with a letter within a defined alphabet range (A to E, F to L, M to Q or R to Z). You will cycle through the alphabet ranges, using a different range at each shop, so that the first shop you visit will use A-E, the second shop will use F-L, and so on.
- For the letters range selected, for example A-E, ask the attendant to show you any 10 branded drugs stocked by the shop with names starting with those letters.
- Record the brand name and the manufacturer exactly as they appear on the label for each of the 10 products.

Drug Registration Status Form: Filling out the Form (I)

- Fill in your information
 - Data collector name or code
 - Date of visit
- Fill in the Facility information:
 - Facility name
 - Facility type
 - Region
 - District
 - Village
 - Address

Drug Registration Status Form: Filling out the Form (2)

- Ask to see 10 drugs in the alphabet range your team will use at that shop:
 - either A to E, F to L, M to Q or R to Z.
- Document the packaging information exactly as it appears on the package.
 - Fill in the brand name (if any) that the medicine is sold under:
 - If the generic name is used, write “GENERIC” in the Brand Name column and enter the generic name in the Generic column.
 - Fill in the dosage form and strength of the drug
 - Fill in the generic name of the drug
 - Fill in the name of the manufacturer exactly as it appears on the package.
 - Fill in the country of origin (where the drug was produced) exactly as it appears on the package.

Drug Registration Status Form: Filling out the Form (3)

- Do not write in a registration number. This will be filled in later after data collection is complete.
- If there are any relevant comments that you believe are important, please note them in the shaded comments box.

Drug Registration Status Form: Filling out the Form (4)

- Note to Supervisors: One of the key pieces of information on the form is the generic name of the product. As with the simulated clients, it is important to make sure that the generic name of every drug listed in the registration form is included prior to data entry.
 - Team leaders or supervisors should review all registration status forms from their teams to enter the generic name of all drugs so that we can run the data analysis by generic name.

Troubleshooting (I)

- The package information is in a foreign language
 - If at all possible, write down the packaging information in the foreign language as best as possible.
 - Include a comment indicating that the packaging for that product is in a foreign language.
 - Be sure to include manufacturer and the country of origin if at all possible.

Troubleshooting (2)

- The packaging information is not available for 10 items in the assigned alphabet range
 - Collect information for drugs in the next alphabet range to get registration information for a total of 10 drug products. Information on the manufacturer and country of origin must come from your personal observation of the packaging, not from the statements of facility staff.

Satisfaction Questionnaire

Please get a copy of this questionnaire from your training packet.

We'll go through each question...

Satisfaction Questionnaire: General Instructions (I)

- What we are collecting: This form assesses the satisfaction and dissatisfaction of shop clients with services.
- Definition of Customer or Client: For the purposes of this interview “customer” or “client” refers to people leaving the shop after having entered to obtain products in the shop. An effort should be made to be personable and develop a rapport with the client.
- Interviews should be conducted as the client leaves the shop, not as they enter the shop.

Satisfaction Questionnaire: General Instructions (2)

- How to interview:
 - Introduce yourself, assure the customer of confidentiality, and work to establish a rapport with the customer.
 - Please carefully follow the questions listed on the form.
 - Please write down all of the answers while you are with the person.
 - Do not wait to write down the responses until after the interview, to avoid forgetting information.

Satisfaction Questionnaire: General Instructions (3)

- Number of interviews:
 - There are questions on satisfaction with drugs, non-drug products, and on the overall shop.
 - We require that there be five interviews with clients who purchased drugs.
- Role play: To ensure that this is done correctly and consistently by each one of you – we shall role play the interviews – in groups of two.

Satisfaction Questionnaire: Filling Out the Form

- **Facility Information:** Fill in the top section of the form. Write the facility name and the date the facility was visited on every sheet in the appropriate spaces, that way the sheets can be identified if they are separated.

Also, note the number of the exit interview per shop, numbering them from 1 to 5. For example, the first exit interview conducted at the shop would be #1.

- Fill in your information
 - Data collector name or code
 - Date of visit
- Fill in the Facility information:
 - Facility name
 - Facility type
 - Region
 - District
 - Village
 - Address

Introduction

- **Introduction:**

- Introduce yourself to the client leaving the facility after he/she has made a purchase.
- Explain the purpose of your visit.
- Explain that the information that will be gathered will be kept confidential and names will not be written or reported.
- Text for introductions is provided on the data collection form.

Section I: Initial Questions

- **Section I: Initial Questions.**
 - The first seven questions establish the reason the client visited the shop and the nature of their purchases.

Section I Questions

Section 1: Initial Questions

1. How often do you come to this shop?

First time Sometimes Many times

2. Why did you come to this store instead of going to others?

3. Do you prefer this store for purchasing drugs or supplies?

Yes No

Why? _____

4. What did you buy today?

Nothing Other: Write in: _____

5. Was it for a child under five years? Yes () No ()

IF NOTHING SKIP TO QUESTION 8

6. Did you get what you wanted?

Yes No

7. If not or if “nothing”, what was the reason?

Section I Questions Translated

Sehemu ya kwanza. Maswali ya wali

- 1 Je kwa kawaida unakuja mara ngapi katika duka hili
() Kwa mara ya kwanza () Sio kila mara () Mara nyingi
- 2 Je, kwanini umekuja kwenye duka hili na sio kwenda duka jingine ?
3. Je unapendelea duka hili zaidi kwa mahitaji yako ya dawa na vifaa vingine ?
() Ndiyo () Hapana

Kwa nini ?

- 4 Kwa siku ya leo umenunua nini?
() Hakuna () Kitu kingine: Andika _____
5. Dawa / kitu kingine kilikuwa kwa ajili ya mtoto chini ya miaka 5 ?
() Ndiyo () Hapana

KAMA HAKUNA KILICHONUNULIWA RUKA MPAKA SWALI LA 8

- 6 Je umepata ulichokua unakihitaji?
() Ndiyo () Hapana
- 7 Kama hapana , kwanini hukupata ulichotaka ?

Section 2: Questions about the Experience Today

- **Section 2: Questions about the experience today.**
 - Ask questions 8-10 of all clients. If no purchases were made, ask question 11, thank the client and end the interview.

Section 2 Questions

Section 2: Questions about the experience today

Thinking about your experience today, how would you rate the following?

8. The cleanliness and organization of the store.

Poor Average Good Excellent

9. The knowledge and expertise of the dispenser.

Poor Average Good Excellent

10. How respectful and caring the dispenser was when speaking with you.

Poor Average Good Excellent

IF THE CLIENT PURCHASED DRUGS, ASK THE QUESTIONS IN SECTION 3. IF THE CLIENT DID NOT PURCHASE DRUGS, SKIP TO SECTION 4. IF THE CLIENT DID NOT PURCHASE ANYTHING, ASK QUESTION (11) AND END THE INTERVIEW.

11. What would you change about this shop?

Section 2 Questions Translated

Sehemu ya 2. Maswali kuhusu matokeo ya siku ya leo

Ukifikiria uliyosikia na kuona katika duka hili kwa siku ya leo, unaweza kusema nini kuhusu yafuatayo?

8. Usafi na upangaji wa dawa katika duka ?

Hafifu Wastani Nzuri Nzuri sana

9. Ujuzi na uzoefu alionao muuzaji/mgawa wa dawa

Hafifu Wastani Nzuri Nzuri sana

10. Kiasi mtoa dawa alivyokuheshimu na kuonyesha kujali wakati akizungumza nawe ?

Hafifu Wastani Nzuri Nzuri sana

KAMA MTEJA ALINUNUA DAWA, ULIZA MASWALI SEHEMU YA 3. KAMA MTEJA HAKUNUA DAWA, ULIZA SWALI NAMBA (11) NA MALIZA MAHOJIANO.

11. Nini ungependekeza kabadilishwe katika duka hili ?

Section 3: Questions about Drug Purchases

- **Section 3: Questions about drug purchases.**
 - Ask questions 12-14 of all clients who purchased drug products during their visit to the store.
 - If they did not purchase drugs but instead purchased non-drug products (bednets, other supplies, etc), proceed to section 4.
 - If they purchased both drugs and non-drug products complete all sections.

Section 3 Questions

IF THE CLIENT PURCHASED DRUGS, ASK THE QUESTIONS IN SECTION 3. IF THE CLIENT DID NOT PURCHASE DRUGS, SKIP TO SECTION 4. IF THE CLIENT DID NOT PURCHASE ANYTHING, ASK QUESTION (11) AND END THE INTERVIEW.

Section 3: Questions about Drug Purchases

Thinking about your experience today, how would you rate the following?

12. The prices you paid for your DRUGS

Poor Average Good Excellent

Facility Name: _____ Data Collector: _____
Date: _____

13. The quality of the DRUGS.

Poor Average Good Excellent

14. The information you got about taking your DRUGS.

Poor Average Good Excellent

Section 3 Questions Translated

KAMA MTEJA ALINUNUA DAWA, ULIZA MASWALI SEHEMU YA 3. KAMA MTEJA HAKUNUA DAWA, ULIZA SWALI NAMBA (11) NA MALIZA MAHOJIANO.

Sehemu ya 3: Maswali kuhusu dawa zilizounuliwa

Ukifikiria uliyosikia na kuona katika duka hili kwa siku ya leo, unaweza kusema nini kuhusu yafuatayo?

12. Kiasi cha fedha ulizolipia au bei ya dawa ?

Mbaya Wastani Nzuri Nzuri sana

13. Ubora wa DAWA ulizonunua ?

Hafifu Wastani Nzuri Nzuri sana

14. Maelezo uliyopewa kuhusu namna ya kutumia DAWA

Hafifu Wastani Nzuri Nzuri sana

Section 4: Questions about Non-Drug Purchases

- **Section 4: Questions about non-drug purchases.**
 - Ask questions 15-17 of all clients who purchased non-drug products during their visit to the store.
 - If they did not purchase non-drug products (bednets, other supplies, etc), proceed to section 5

Section 4 Questions

IF THE CLIENT PURCHASED NON-DRUG PRODUCTS (OTHER COMMODITIES), ASK THE QUESTIONS IN SECTION 4. IF THE CLIENT ONLY PURCHASED-DRUG PRODUCTS, SKIP TO SECTION 5.

Section 4: Questions about Non-Drug Purchases

15. The prices you paid for your PRODUCTS

Poor Average Good Excellent

16. The quality of the PRODUCTS.

Poor Average Good Excellent

17. The information you got about your PRODUCTS.

Poor Average Good Excellent

Section 4 Questions Translated

KAMA MTEJA AMENUNUA VITU VINGINE NA SIO DAWA, ULIZA MASWALI SEHEMU YA 4. KAMA MTEJA AMENUNUA DAWA , NENDA SEHEMU YA 5.

Sehemu ya 4: Maswali kuhusu vitu vingine vilivyounuliwa

Ukifikiria uliyosikia na kuona katika duka hili kwa siku ya leo, unaweza kusema nini kuhusu yafuatayo?

15. Bei au gharama uliyolipia vitu hivyo ?

Mbaya Wastani Nzuri Nzuri sana

16. Ubora wa vifaa ulivyounua ?

Hafifu Wastani Nzuri Nzuri sana

17. Maelezo uliyopewa kuhusu namna ya kutumia vifaa

Hafifu Wastani Nzuri Nzuri sana

Section 5: Final Questions

- **Section 5: Final Questions.**
 - Ask questions 18-21 of all clients who purchased drug or non-drug products.
 - Be sure to write answers in full on the data collection form.
- **Ending the Interview:**
 - Thank the customer for his or her time and end the interview.

Section 5 Questions

ASK THE FOLLOWING QUESTIONS OF ALL CLIENTS WHO PURCHASED DRUGS OR NON-DRUG PRODUCTS DURING THEIR VISIT TO THE STORE:

Section 5: Final Questions

18. How would you describe your whole experience?

Poor Average Good Excellent

19. Have you ever had any problems with this store?

Yes No

20. If yes, what were the problems?

21. What would you change about this store?

Section 5 Questions Translated

ULIZA MASWALI YAFUATAYO KWA WATEJA WOTE
WALIONUNUA DAWA AU VIFAA VINGINE KUTOKA
DUKANI LEO.

18. Utaelezeaje matokeo ya kutembelea duka hili siku ya leo ?

Mbaya Wastani Nzuri Nzuri sana

19. Ulikwisha siku za nyuma kuwa na matatizo na duka hili ?

Ndiyo Hapana

20. Kama Ndiyo, tatizo lilikuwa ni nini ?

21. Ungependekeza nini kibadilike katika duka hili ?

Troubleshooting (I)

- It will be important that the you take the time to probe with these questions.
- The answers to these questions are not intended that they be yes/no answers, but that each customer has the opportunity to provide complete answers and observations.
- You should take very detailed notes that reflect the full content of her/his answers.
- Additional probing questions are welcome and encouraged.

Satisfaction Questionnaire: Group Work

Role-playing

Data Collection Kit

Checklist

Data Collection Kit and Checklist (I)

- Provide sufficient copies of data collection forms for each team
- Review method for applying alphabet ranges at shops visited
- Provide copies of Brand – Generic Name Equivalent List
- Provide team members with lists of facilities to be visited and letters of introduction
- List of Contact Persons and contact information

Data Collection Kit and Checklist (2)

- Review travel plans and transportation – location of facilities and how to get there, departure dates and time
- Pens & Paper
- Files/Envelopes

Thank you
for your participation