

Providing new tools for the M&E of health facilities



MEASURE Evaluation Fact sheet Health Facility Assessment: Methods and Indicators

At MEASURE Evaluation, we know that improved analysis and use of data lead to better health program decision making and, ultimately, improved health outcomes. This fact sheet introduces one of the innovative toolsets created for monitoring & evaluating public health interventions.

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Overview: An inventory of health-facility assessment methods and new standardized indicators will lead to better data about where people receive health care.

For evaluating the strengths and weaknesses of health facilities, public health specialists often rely on a handful of good health-facility assessment tools. But few specialists know how these tools differ in their approaches, how they might complement one another, or which are better suited to their program needs.

To help overcome this confusion, the MEASURE Evaluation-led International Health Facility Assessment Network (IHFAN) has released an inventory of health-facility assessment tools and standard indicators in monitoring and evaluating health facilities. These indicators and assessment tools can help provide a reliable picture of the health facilities of a nation or region, allowing public health stakeholders make better-informed, decisions.

New Indicators: In 2006, experts

from MEASURE Evaluation, World Health Organization (WHO), the Health Metrics Network (HMN), MEASURE DHS, USAID, WHO and other organizations met to ratify a set of simple, reliable, and informative indicators to serve as standards for assessing the readiness of health facilities to provide services. These indicators, 68 in all, assess nine aspects of a health facility: its infrastructure, infection control, services offered, staffing, health-service statistics, laboratories, guidelines, treatments, and supplies. Each indicator measures the percentage of health facilities in a country or region with or without the measured dimension. For example, infection-control indicators include the presence or absence of disposable syringes, sharps containers, and other equipment, while laboratory indicators measure whether or not a facility can test for

HIV, syphilis, TB, and other diseases.

Each indicator can be easily incorporated into the existing instruments for health facility data collection, although a more basic understanding of the health facility status is made possible when all indicators are present. A generic questionnaire and guidance that can be adapted to country contexts for collecting the core indicators have been developed and are available from MEASURE Evaluation.

Health Facility Assessment Tools: Public-health stakeholders with the need for health-facility assessment face the challenge of finding the best methods for any given context. Each method of assessment is imperfect; every method has limitations as well as advantages, and the best assessment tool may depend on priorities, deadlines, and financial resources. To help stakeholders make these decisions, IHFAN created a document that profiles internationally tested health-facility assessment tools. The current edition of *Profiles of Health Facility Assessment Methods* provides detailed descriptions of five instruments for assessing health facilities:

- Service Provision Assessment (SPA) — Developed by MEASURE DHS, the SPA can be used to assess the quality of services in a region or nation. SPA provides information about staff qualifications, adherence to standard practices, resources for given services, and other factors. The SPA method is useful for stakeholders who are investing in health systems or in the development of health services and who want to observe regional changes over time. Datasets are publicly available and can be obtained by visiting the MEASURE DHS Web site.
- Facility Audit of Service Quality (FASQ) — The FASQ provides low-cost monitoring of facility-based reproductive and child-health services at every government and private facility in a region. Information provided by FASQ includes the range of a health facility's operating hours, facility infrastructure, quality of care, and available services. FASQ is specifically designed to be useful in the context of decentralization and project-level M&E; it is recommended when projects or local officials need to quickly and inexpensively monitor health-facility service quality and availability.
- Health Facility Census (HFC) — Two census-sampled surveys are profiled: one developed by WHO (also known as Service Availability Mapping or SAM) and another by the Japan International Cooperation Agency (JICA).



The latter collects detailed information about the physical assets of all the public and semi-public health facilities in a region or nation. The information is then used to identify health facilities that do not meet criteria for providing health services in key functional areas: physical infrastructure, equipment; coverage of health service delivery points; and human resources. The gaps identified are used for deciding how to invest resources into an area.

■ The WHO-HFC and Prevention Service Availability Mapping (PSAM) are two systems designed to allow national and district planners to map and monitor health-system information. The WHO-HFC quantifies, estimates, and maps health services and resources, while PSAM quantifies, estimates, and maps HIV-prevention efforts. WHO-HFC and PSAM are facility-monitoring systems, and the HFC in particular is highly adaptable. HFC is usually conducted with electronic data capture technologies, such as global positioning systems (GPS), but may be paper based.

The Signature Domain and Geographic Coordinates: This is a standardized approach for identifying health facilities uniquely — it specifies key information required for uniquely identifying a health facility. Data elements include geographic coordinates (obtained using GPS receivers), facility name, date of survey, health facility country registry code, health facility survey ID, and health facility contact information. The tool also presents formats and core set of best-practices for collecting all data elements, including the GPS coordinates, in a standardized way.

Use of these innovative tools and standard indicators should facilitate cross-survey and cross-year comparisons of data and the harmonization of data across HFA approaches. Profiles of Health Facility Assessment Methods and other relevant publications are available from on the MEASURE Evaluation Web site, <http://www.cpc.unc.edu/measure/publications/index/php>.

For more Information

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