

# **Field test of quality of care indicators in clinic-based family planning program**

## **Client Exit Interview**

**ZIMBABWE**

Washington, DC

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# Rationale of Overall Study

- ☞ To field test the indicators, instruments and methodologies of monitoring Quality of Care (QOC)
- ☞ To evaluate quality of FP initiatives in Zimbabwe SEATS subprojects

# Methodology of Study

Instrument	Sample Size
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Client exit	742
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Observation	753
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Facility audit	39
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# Exit Instruments

## Advantages

- Relative ease of application: training, data collection, data entry, etc.
- Relative low cost
- Input from client's perspective

## Disadvantages

- Courtesy bias
- Information limited to areas known to clients

# Indicators Measured by Client Exit Interview

Provider:

- I-1**     *Demonstrates good counseling skills*
- I-3**     *Asks client about reproductive intentions*
- I-4**     *Discusses with client which method she would prefer*
- I-5**     *Mentions HIV/AIDS or responds to questions about HIV/AIDS*
- I-6**     *Promotes dual method*

# Indicators Measured by Client Exit Interview

Provider:

- I-7**     *Tries to make interaction respectful*
- I-8**     **Tailors key information to the particular needs of the specific client**
- I-9**     *Gives instructions on when to return*
- I-10**    **Gives accurate information on the method accepted (how to use, what to do if having problems or side effects)**

# Indicators Measured by Client Exit Interview

Staff:

**I-14** Treats clients with dignity and respect

Client:

**I-15** *Participates actively in discussion and selection of method (is “empowered”)*

**I-16** *Receive her (his) method of choice*

**I-17** **Client believes the staff will keep her information confidential**

**I-20** *Offers privacy for pelvic exam/IUD insertion (no one can see)*

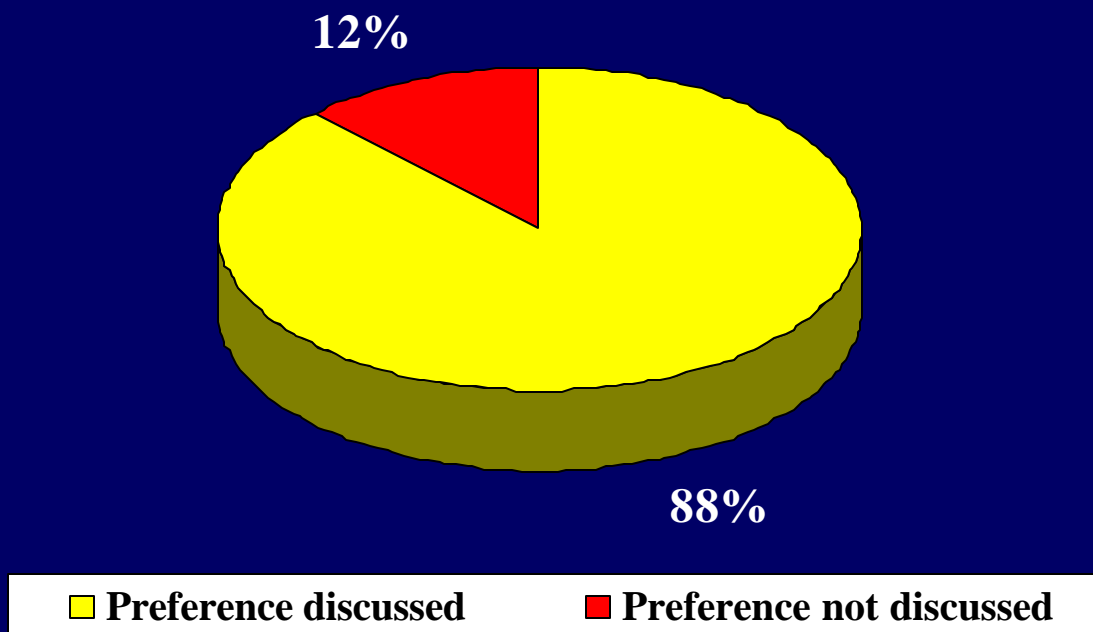


MEASURE  
Evaluation



# Indicator 4: Discusses with clients which method she would prefer

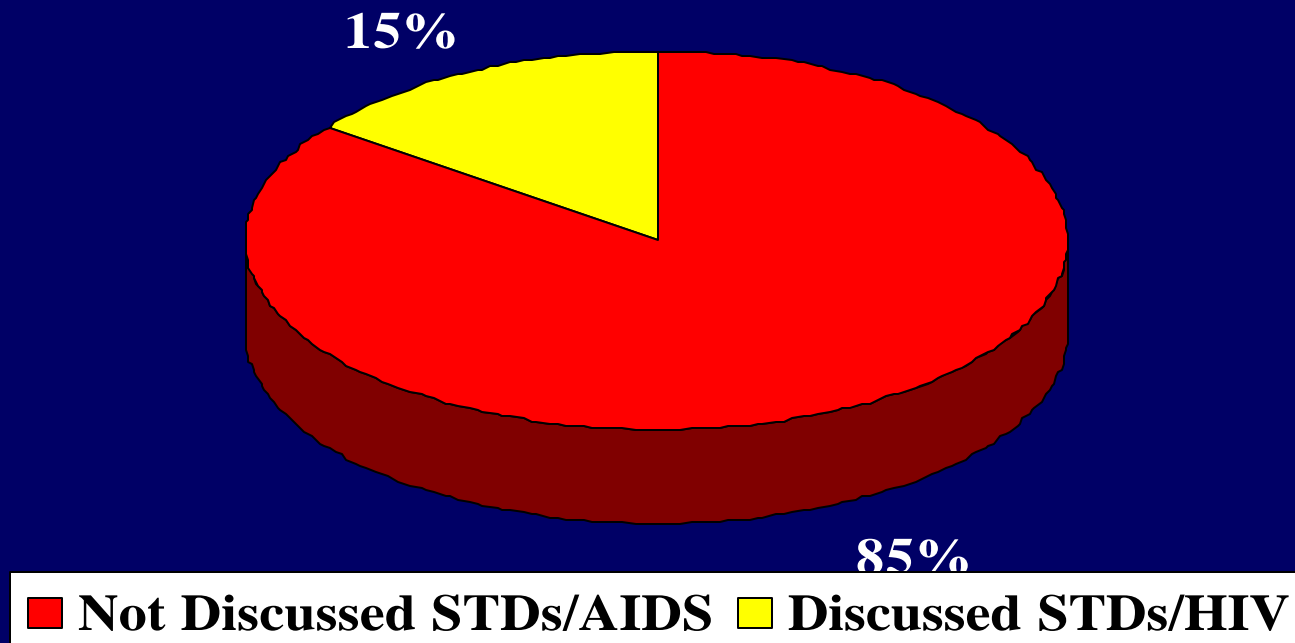
Percent distribution of client that discussed method with provider (n=211)





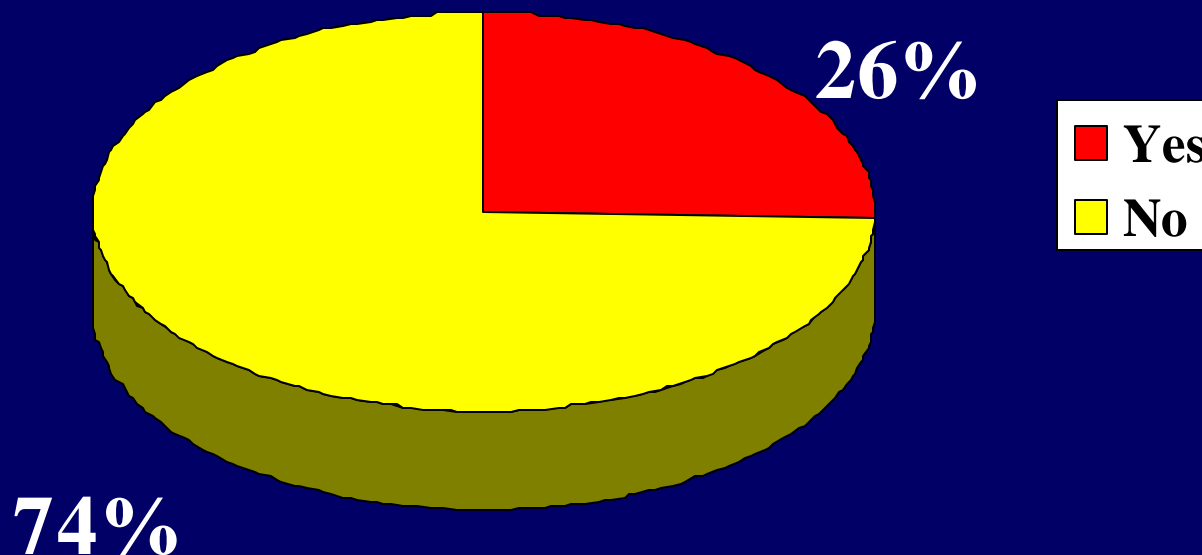
# Indicator 5: Mentions HIV/AIDS or responds to questions about HIV/AIDS

**Percent distribution of clients that indicate that providers discussed STDs/AIDS issues (n=742)**



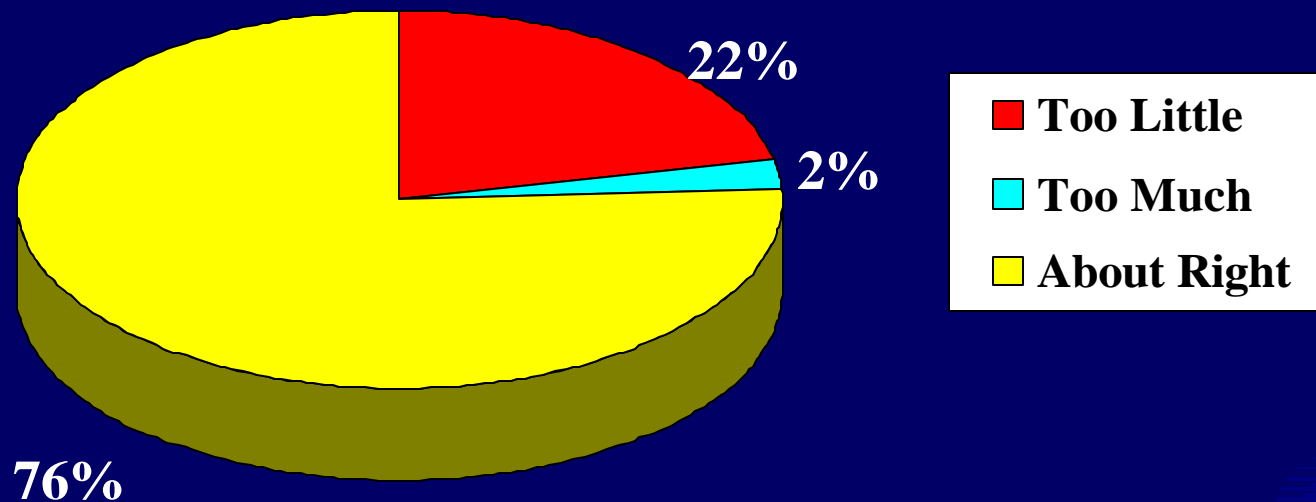
# Indicator 6: Promotes dual method use

Percent distribution of clients encouraged to use condom at the same time as the FP method chosen or currently using (n=713)



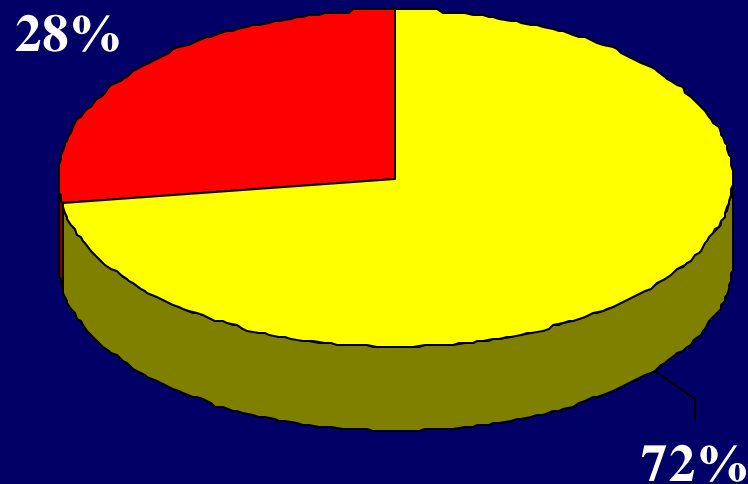
# Indicator 8: Tailors key information to the particular needs of the specific client

**Percent distribution of clients who feel information provided is too little, too much or about right (n=742)**



# Indicator 9: Gives instruction on when to return

Percent distribution of clients who are told when to return for follow-up visit (n=742)

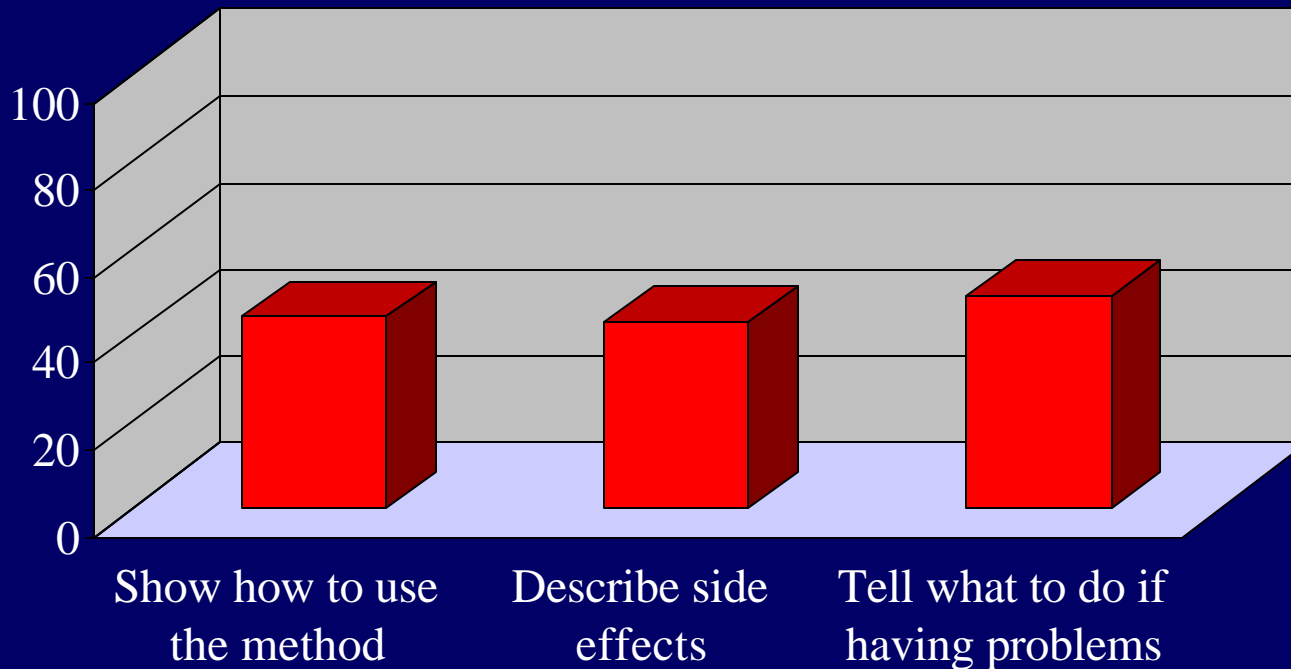


■ Told when to return

■ Not told when to return

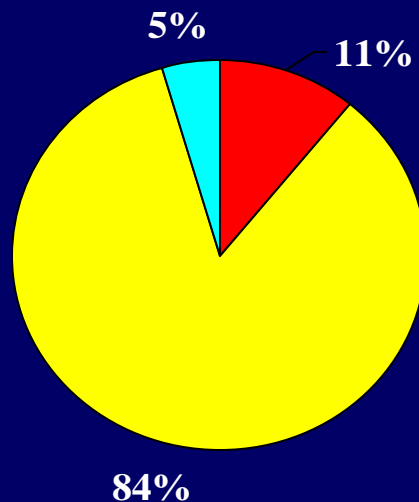
# Indicator 10: Gives accurate information on the method accepted

Proportion of clients that indicate that providers gave information on the method accepted (n=716)

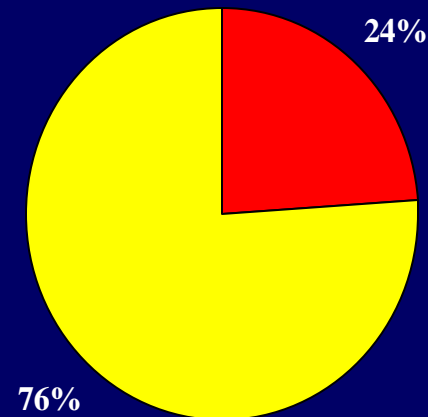


# Indicator 14: Treat client with dignity and respect

Percent distribution of client who are treated with respect by provider or staff



Other Staff



Provider

Very well

Well

NVW/Poorly

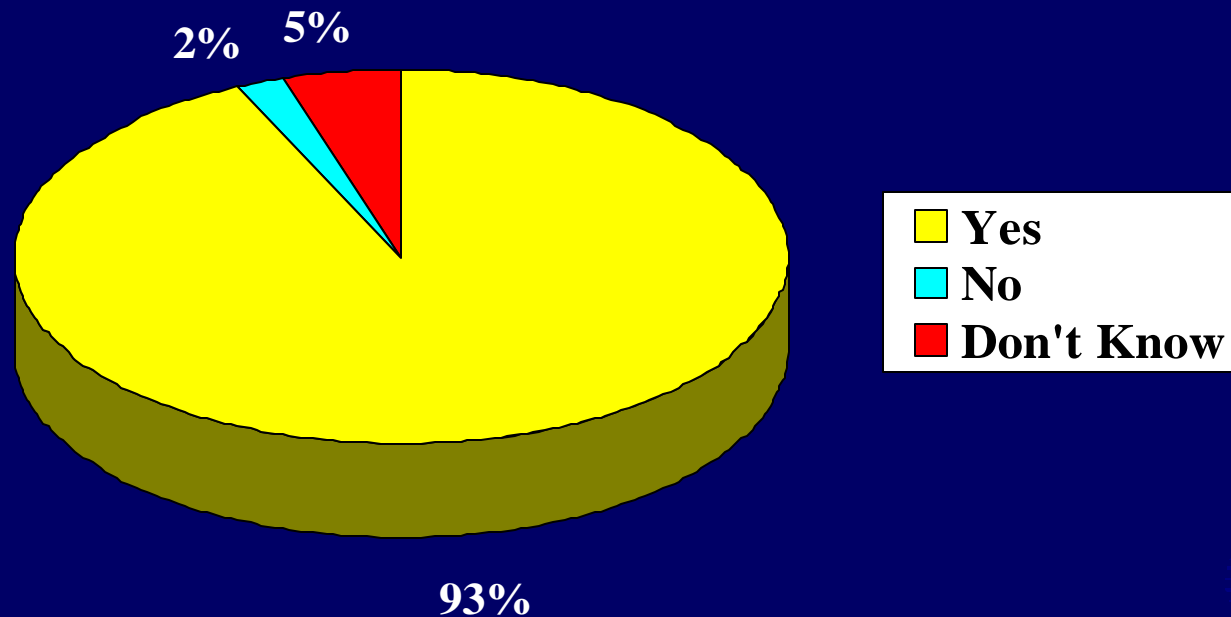


MEASURE  
Evaluation



# Indicator 17: Client believes provider will keep her information confidential

**Percent distribution of clients who believe that provider will keep information shared during counseling confidential (n=742)**



# Extra Indicator (I-10): Gives accurate information on the method accepted

Percent distribution of clients who accurately mentioned how a method is used

