Progress Survey

Item Explanation Reference Guide

This reference guide provides the purpose/rationale behind each question of the Leader version of the Context Assessment Progress Survey. It is designed to support translation of the survey into local languages. It can also serve as a reference for survey administrators to use when answering questions from facility participants.

Definitions of key terms and survey response choices appear below. The rest of the document contains the survey items in order with the explanation of that survey item directly next to it.

# Definitions for Key Terms

**Implementation/Implementing:** The series of planned activities or tasks related to introducing a practice change.

**Improvement Work:** A planned and continuous effort that leads to measurable change in the way we work or provide patient care

**Practice Change:** A change to the way we normally work or how we normally care for patients.

**Promotion/Promoting:** Describing to others why the practice change matters to patient care or their work and encouraging others to actively participate.

**Facility:** Place where the improvement work will be done.

**Staff:** People in clinical and non-clinical roles who will do something different in their day-to-day work as a result of this improvement.

**Leaders:** People with formal leadership or management roles in the facility.

**Implementation Team:** People who are part of the group that carries out the improvement work activities such as: developing the implementation strategy, planning or leading trainings, providing ongoing support (e.g. coaching/ mentoring), measuring and using data about the implementation.

# Definitions for Likert Scale Response Options

**Agree:** You agree with this statement > 75% of the time.

**Somewhat Agree:** You agree with this statement 50% to 75% of the time.

**Somewhat Disagree:** You agree with this statement 25% to 50% of the time.

**Disagree:** You agree with this statement < 25% of the time.

**Don’t Know:** You do not have the information or experience necessary to answer this question.

### Instructions: Please enter the date and time before you start the survey.

Date (month/day/year): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Start time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Section 1

| Question | Purpose |
| --- | --- |
| 1. Select the role(s) that best describe you: | To identify the respondent’s role in the health facility |
| 1. What is your gender? | To identify the respondent’s gender. |
| 1. We are doing this improvement work because of: (select all that apply) | To understand why respondents think the improvement work is being done at the facility. |
| 1. In your facility, who is encouraging making changes for this improvement work? (select all that apply) | To identify the roles that are encouraging the practice changes. |

## 

## Indicate the amount you agree or disagree with the following statements.

| Item | Purpose |
| --- | --- |
| 1. There is a clear goal for this improvement work. | To identify if the respondent knows what specific part of the broader problem the improvement work is trying to address. |
| 1. I know what problem this improvement is trying to solve. | To identify if the respondent knows what problem the practice change is trying to solve. |
| 1. The problem this improvement work is trying to solve is one of our top priorities. | To understand how important this change is compared to other work being done at the facility; to identify if this is one of the most important things being done at the facility. |
| 1. This improvement work is the right solution to help solve the problem. | To understand if respondents think this improvement work is going to appropriately address the identified problem. |
| 1. This improvement work aligns with other goals we are working towards in our organization. | To understand if addressing this challenge/doing this practice change fits with the overall goals and priorities at the health facility. |
| 1. There are no other changes underway or planned that will compete with this improvement work for resources, time or personnel. | To understand if there is other work happening at the facility that would be competing for limited time, resources, or personnel and prevent the improvement work from being completed successfully. |
| 1. We have enough staff to make the necessary changes for this improvement work. | To understand if staffing issues may create a problem for doing this work successfully. |
| 1. Difficulties with travel are not impacting the success of this improvement work. | To understand if weather, landscape, or distance to site is impacting access to the site and creating a challenge for implementing this intervention. |
| 1. Seasonal factors such as weather or holidays will not impact the success of this improvement work. | To understand if seasonal factors (weather, holidays, wedding season) may pose a challenge to doing this work successfully. |
| 1. Community leaders have no concerns about this improvement work. | To identify how leaders in the community feel about the improvement work. |
| 1. Neither patients nor their families have concerns about this improvement being used. | To identify how the patient community feels about the improvement work. |
| 1. I devote time to promoting this intervention to health care workers at my facility. | To understand if leaders are encouraging staff at their site to make necessary changes to patient care. |
| 1. We have doctors who are promoting this improvement work. | To understand if doctors are encouraging the implementation of the practice change. |
| 1. We have nurses who are promoting this improvement work. | To understand if nurses are encouraging the implementation of the practice change. |
| 1. I provide dedicated time for staff to work on implementing this improvement work. | To understand if the respondent has set aside time for staff to work on this practice change. |
| 1. I provide dedicated time for staff to participate in trainings for this improvement work. | To understand if the respondent has set aside time for staff to participate in training for this practice change. |
| 1. We have a staff member with dedicated time to provide operational support for this improvement work. | To understand if the respondent plans to have staff who provide operational support for the implementation and the staff will have time set aside specifically for providing this support. |
| 1. Staff are receiving the help they need as we implement this improvement work. | To understand if the respondent thinks that they ensure that staff receive enough support when changes are introduced at the facility. |
| 1. Staff have the supplies, medicines and equipment they need to be able to do this improvement work. | To understand if all of the resources needed by staff to do this practice change are available. |
| 1. Leaders are held responsible for making sure that the improvement work is successful. | To understand if facility leaders are held responsible for the success of the improvement work. |
| 1. Staff are monitored to see if they are making the correct changes to patient care. | To understand if staff are being monitored and held responsible for making the necessary changes to patient care. |
| 1. People have the support needed to learn the skills required for this improvement. | To identify if people at the site need more support with the skills needed for improving patient care. |
| 1. I have the support I need to learn the skills required for this improvement. | To identify if people at the site need more support with the skills needed for improving patient care. |
| 1. We use data to identify changes we need to make to this improvement work. | To understand if data is being used to influence to progress of implementation. |

## Indicate the amount you agree or disagree with the following statements.

| Item | Purpose |
| --- | --- |
| 1. Electricity is always available when we need it. | To understand the infrastructure at the health facility. Is electricity consistently available? |
| 1. Clean water is always available when we need it. | To understand the infrastructure at the health facility. Is clean water consistently available? |
| 1. Functioning phone service (can include mobile phones) is always available when we need it. | To understand the infrastructure at the health facility. Is phone service consistently available? |
| 1. A functioning computer or other similar device is always available when we need it. | To understand the infrastructure at the health facility. Is a computer consistently available? |

# Section 2

1. Do you provide direct clinical care to patients?

Yes — continue the survey

No — go to [SECTION 3](#_Section_3_1)

| Item | Purpose |
| --- | --- |
| 1. When I work with other staff to provide care to a patient, I know my role and responsibilities. | To understand if the respondent is clear on their roles and responsibilities on their care teams; do they know what is expected of them. |
| 1. When I work with other staff to provide care to a patient, everyone shares important information as it becomes available. | To understand if relevant information about patients is shared with all necessary people in a timely manner. |

# Section 3

1. We consider the implementation team to be the person(s) introducing the practice change by participating in activities such as: designing the practice change, developing the implementation strategy, planning or leading trainings, providing ongoing support (e.g., coaching/mentoring), measuring and using data about the implementation. These activities are distinct from doing the practice change as part of patient care.  
     
   Are you part of the implementation team for this improvement work? (see definition above)

Yes — continue the survey

No — go to [Section 4](#_Section_4)

Don’t know — go to [Section 4](#_Section_4)

| Item | Purpose |
| --- | --- |
| 1. I have enough time to work on implementing this improvement work. | To understand if the respondent feels that they have enough time to work on the activities to implement the improvement work. |
| 1. The implementation team has a leader who moves the work forward. | To understand if there is a person assigned to formally lead the implementation. |
| 1. The implementation team has a plan for how to implement this improvement work. | To understand if there is a plan that details how the improvement work will be implemented. |
| 1. The implementation team meets at frequent intervals to discuss progress towards goals. | To understand if the implementation team has meetings that are scheduled (not just as-needed) and that occur on a regular basis. |
| 1. The staffing on our implementation team has not changed. | To understand if there has been staffing changes to the implementation team. |

# Section 4

1. Do you think this survey asks about things that could impact the success of a new program?

Yes

No

Don’t know

1. The time it took to complete this survey was:

Reasonable

Too long

### Instructions: Please enter the time that you completed this survey.

End time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

## Thank you for completing this survey!