# Baseline Data

| Record ID | ____________________________________ |
|-----------|---------------------------------------|
| Health Facility Name | ____________________________________ |
| Health Facility Ownership | ☐ MoH ☐ Private ☐ Faith Based ☐ NFP |
| Health Facility In-charge | ____________________________________ |
| Assessors | ____________________________________ |
| Date of Assessment | ____________________________________ |

## Part 1 - Case Load

| Number of paediatric beds | ____________________________________ |
| Number of neonatal beds | ____________________________________ |

## Part 1 - Case Load - Paeds

| For last 3 months, number of paediatric admissions - start date | ____________________________________ |
| For last 3 months, number of paediatric admissions - number | ____________________________________ |
| For last 3 months, number of paediatric admissions - number of females | ____________________________________ |
| For last 3 months, number of paediatric deaths | ____________________________________ |
### Part 1 Case Load - Neonates

For last 3 months, number of neonate admissions -
- Start date

For last 3 months, number of neonate admissions -
- Number

For last 3 months, number of neonate admissions -
- Number of females

For last 3 months, number of neonate deaths

### Part 1 - Case Load - Today

Today, how many children are receiving oxygen? Please document flow (l/min), number of days on oxygen and oxygen source

| Patient | Flow LPM | Duration on oxygen (days) | O2 source |
|---------|----------|---------------------------|-----------|
| Patient 1 |          |                           |           |
| Patient 2 |          |                           |           |
| Patient 3 |          |                           |           |
| Patient 4 |          |                           |           |
### Part 2 Catchment and Referral

**What catchment area does this facility serve?**

**What is the estimated catchment population?**

**What is the nearest health facility (Name)?**

**What is the distance to the nearest health facility?**

**Which other facilities refer patients to this facility? (Referral FROM)**

**Which facilities are patients from this facility sent to? (Referral TO)**

**Is transport available for referral of sick children to other facilities?**

- [ ] Yes
- [ ] No

**If yes, describe**

**Is oxygen available during transport?**

- [ ] Yes
- [ ] No

### Part 3 - Staffing

**How many staff does the health facility employ (both medical and non-medical)?**

**How many doctors?**

**How many midwives?**

**How many nurses?**

**How many CHW?**

**Describe day/night staffing, i.e. number of shifts and staffing**

**What is the average clinical staff capability in administering oxygen therapy?**

- [ ] Proficient
- [ ] Average
- [ ] Basic
- [ ] Other
How often do staff receive training on oxygen administration and monitoring?
- Monthly
- Quarterly
- Annually
- Never
- Other

Part 4 - Power Supply
What sources of power are available? Tick all that apply
- Mains
- Generator
- Solar
- Hydro
- Other

How many hours per day is power available on average
- < 6
- 6-12
- 12-18
- >18

How often is power interrupted?
- Monthly
- Weekly
- Daily
- Hourly

How many power outages are there per day/week/month depending on response in above question?

What is the average duration of each power outage?

Who pays for the power
- MoH
- Self
- NFP org
- Other

What is the average cost of power per month?
| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| What is the main source of oxygen?                                      |        |
|                                                                          |        |
| Other - describe                                                         |        |
|                                                                          |        |
| Is there a back-up source of oxygen? Yes/No                             |        |
|                                                                          |        |
| Is there a back-up source of oxygen? Please specify what this is.        |        |
|                                                                          |        |
| How many oxygen supply points are there at this point in time?          |        |
|                                                                          |        |
| Can you recall a day, in the last month, where oxygen was unavailable   |        |
| for a child who needed it? Why?                                         |        |
|                                                                          |        |
| Part 5 - Oxygen Supply - concentrators                                   |        |
| How many oxygen concentrators are available?                            |        |
|                                                                          |        |
| How many concentrators are being used?                                  |        |
|                                                                          |        |
| How many concentrators are producing &ge;85% O2 concentration (test      |        |
| using oxygen sensor)                                                    |        |
|                                                                          |        |
| Do the concentrators undergo regular servicing?                         |        |
|                                                                          |        |
| What is the frequency of servicing?                                     |        |
|                                                                          |        |
| Who conducts the servicing?                                             |        |
|                                                                          |        |
| What is the annual cost of servicing?                                  |        |
|                                                                          |        |
| Since installation, have any of the concentrators required repair?      |        |
|                                                                          |        |
**Part 5 - Oxygen Supply - Cylinders**

| Question                                                                 | Answer |
|--------------------------------------------------------------------------|--------|
| How many oxygen cylinders are available?                                  |        |
| Where are the cylinders filled? Include distance                         |        |
| What is the cost of refilling each cylinder?                             |        |
| What is the facility's average consumption/month in terms of cylinder usage? |        |
| Who is responsible for filling the cylinders?                            |        |
| How many cylinders on the children's ward are fully functioning on day of assessment? (has gas, regulator, tubing, canula) |        |
| What is the problem with the cylinders that are not working?             |        |

**Part 6 - Pulse Oximetry**

| Question                                                                 | Answer |
|--------------------------------------------------------------------------|--------|
| Is pulse oximetry available on the ward?                                 |        |
| If pulse oximetry is not available, how are oxygen requirements determined? |        |
| How many oximeters are available in the paediatric ward and entire facility? |        |
| How many pulse oximeters are functioning on day of assessment?           |        |
| Is pulse oximetry done on every paediatric admission?                    |        |
| Is pulse oximetry done on every child on oxygen?                         |        |
| How frequently per 24 hours is pulse oximetry done for children on oxygen? |        |
**Part 7 Asset and Equipment Status**

How is procurement and refills managed and by whom?

| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| Is the oxygen equipment accessible?                                    |        |
| Are equipment spare parts accessible?                                  |        |
| How is it stored and what are the conditions?                          |        |
| Is there an equipment register and is it up to date?                   |        |
| Is there 15 m² of external free space within 30 m of the paediatric ward? |        |
| Is there 3 m² of internal space                                        |        |
| Is there internet / 3G phone coverage?                                 |        |
| Does the facility have an ambulance?                                   |        |

**Part 8 - Oxygen Use**

In the last month, how many children received oxygen?

| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| In the last month, how many children had an admission SpO₂< 90%?       |        |
| In the last month, how long does it take prior to patient getting oxygen access (delay?) |        |
| In the last month, what is the average duration of oxygen access?      |        |
| In the last month, how many oxygen cylinders have been refilled?       |        |
| Install date Conc 1                                                     |        |
| Install date Conc 2                                                     |        |
Is there a protocol for oxygen administration?

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**Part 9 - Oxygen Cost**

What is the estimated annual cost of oxygen to the facility?

What is the breakdown of the spend (capex, opex e.g., new systems, refills, servicing, maintenance, transport)?

How much are patients being charged for oxygen (per hour / day or per litre / treatment)?

What is the total cost to the family of a 5-year-old admitted with pneumonia (assume average 3 days admission, include admission fees, medications, consumables, laboratory)?

What is the allocated budget for oxygen (and % of total budget)?

Who funds the oxygen supply? E.g. grant, government, patient fees

Who pays for staff training on oxygen therapy (if this is offered in the facility)?
### Part 10 - Supply Chain

| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| What is the ordering and receiving process for oxygen equipment and cylinder refills? |        |
| Who provides the supply chain services?                                 |        |
| How long does procurement take? e.g., refills                           |        |
| What is working well with the supply chain?                             |        |
| What is not working well with the supply chain?                         |        |

### Part 11 - Partners

| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| Who does the facility partner with? (funding, government, implementing, training) |        |
| Who does the facility have contract relationships with?                 |        |
| What's the nature of these partnerships?                                |        |
| What's working and not working with these relationships?                |        |

### Part 12 - Willingness to pay.

| Question                                                                 | Answer |
|-------------------------------------------------------------------------|--------|
| How much is the facility willing to pay for oxygen?                     |        |
| How would this be funded?                                               |        |
| Who's involved in the financial decision making?                        |        |
| Would the facility be willing to pay for oxygen training and systems maintenance? |        |
| What would they pay for training, maintenance?                          |        |
| Do they plan to charge the customer / patient in the future?            | Yes    |
| Does the facility have income generating activities?                    | Yes    |
| For your next budget, what are your top spending priorities?            |        |
### Part 12 - New Technologies

| Question                                                                 | Yes | No  |
|-------------------------------------------------------------------------|-----|-----|
| Are you familiar with the work underway in Uganda around solar powered oxygen concentrators? |     |     |
| Would the facility be willing to purchase newer / novel technologies such as solar powered oxygen concentrators? |     |     |
| Other - describe                                                       |     |     |
| Would the facility be willing to purchase newer / novel technologies such as local oxygen storage? |     |     |
| Other - describe                                                       |     |     |