

KNOWLEDGE-ATTITUDE-PRACTICE STUDY INTERVIEW DATA COLLECTION FORM

ADMINISTRATION		
1	Date	[Date format]
2	Location	[Options list]
3	Interviewer	[Options list]
4	Consent form number	[Number]
5	Permission to record	<input type="radio"/> Yes <input type="radio"/> No
DEMOGRAPHICS		
6	Initials (do not identify interviewee)	[Free text]
7	Sex	<input type="radio"/> Male <input type="radio"/> Female
8	Role	<input type="radio"/> Nurse <input type="radio"/> Nurse manager <input type="radio"/> Facility manger <input type="radio"/> Other...
9	Highest education	<input type="radio"/> College / university <input type="radio"/> High school <input type="radio"/> Other...
10	Years of experience with SI-SSS	[Number]
CLINIC INFRASTRUCTURE FOR SURVEILLANCE		
11	Does the facility have a functioning phone (landline or cell phone) at all times?	<input type="radio"/> Yes, all the time <input type="radio"/> Yes, but not all the time <input type="radio"/> No <input type="radio"/> Don't know
12	Does the facility have a functioning computer?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know
13	Is there access to internet within the facility today?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know
14	Do you have experience using the internet?	<input type="radio"/> Yes, a lot <input type="radio"/> Yes, a little <input type="radio"/> No
15	Do you have private access to the internet?	<input type="radio"/> Yes, on phone / tablet <input type="radio"/> Yes, on computer <input type="radio"/> No
16	How many days it the clinic open?	[Number]
17	How many days does the clinic offer general out-patient clinic?	[Number]
18	On average, how many patients are seen by the clinic?	[Number]
19	How many clinical staff that have a role in surveillance working at the clinic?	[Number]
KNOWLEDGE OF SURVEILLANCE PURPOSE AND PRACTICE		
20	What do you see as the main functions of a disease surveillance system?	[Free text]
21	What do you understand to be the main purpose of the SI-SSS?	[Free text]
22	Do you see the SI-SSS having any other (secondary) purposes?	[Free text]
22	How accurate to you feel the current burden of infectious diseases in your area is captured by the SI-SSS?	<input type="radio"/> 1 Not at all <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 Very accurate
	Why do you say this? How could it be improved?	[Free text]
23	How useful do you feel the SI-SSS is for identify outbreaks?	<input type="radio"/> 1 Not at all <input type="radio"/> 2 <input type="radio"/> 3

		<input type="radio"/> 4 <input type="radio"/> 5 Very useful
ATTITUDE AND MOTIVATION		
24	In general, how do you feel about the SI-SSS?	[Free text]
25	Personally, how do you feel about being asked to collect data for the system?	[Free text]
26	What, if anything, makes your surveillance role challenging or difficult?	[Free text]
27	What do you see has / would motivate nurses to participate in the SI-SSS?	[Free text]
29	Do you have any other suggestions for ways staff may be encouraged / supported to collect data for the SI-SSS?	[Free text]
30	What discourages staff from participating in the SI-SSS?	[Free text]
31	Overall, how well do you think SI EWSS is performing regarding its primary purpose of detection outbreaks?	<input type="radio"/> 1 Poorly <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 Very well
DATA COLLECTION AND REPORTING PRACTICE		
32	Do you have written copies of the SSS case definitions?	<input type="radio"/> Yes, on display in clinic <input type="radio"/> Yes, but not on display <input type="radio"/> No
33	In your view, are the case definitions clear (unambiguous)?	<input type="radio"/> Yes <input type="radio"/> No
34	Do you (or the facilities staff) have any problem applying the case definitions?	<input type="radio"/> Yes <input type="radio"/> No
35	If yes, what are they?	[Free text]
36	In your view, how consistently are the case definitions applied by staff at your facility?	<input type="radio"/> 1 Poorly <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 Very well
	If not consistently, what inhibits their use?	[Free text]
37	At what point (time) are case definition applied?	<input type="radio"/> When patient is seen <input type="radio"/> At the end of the day <input type="radio"/> At the end of the week by clinic staff <input type="radio"/> At the end of the week by MHMS <input type="radio"/> Don't know <input type="radio"/> Other....
38	If at the end of the day/week, how are case definition applied accurately?	[Free text]

39	In your view, how accurate is the count of case reported by your facility?	<input type="radio"/> 1 Very poor <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 Very accurate
40	Is data ever checked for its accuracy?	<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Don't know
41	How is surveillance data transmitted to MHMS?	<input type="radio"/> Phone call <input type="radio"/> Email <input type="radio"/> SMS/TXT <input type="radio"/> Delivered in person <input type="radio"/> Picked up by MHMS
42	How reliable is this method?	<input type="radio"/> Very <input type="radio"/> Somewhat <input type="radio"/> Not very / poor
43	What inhibits (gets in the road) of on time data collection and reporting?	[Free text]
ELECTRONIC DATA COLLECTION		
44	Do you see value in electronic data transfer of EWSS data?	<input type="radio"/> Yes, a lot <input type="radio"/> Yes, some <input type="radio"/> No
45	If yes, what value do you see?	[Free text]
46	What barriers do you see?	[Free text]
47	Would it be feasible to report data more frequently?	<input type="radio"/> Yes, daily <input type="radio"/> Yes, twice weekly <input type="radio"/> No
48	If not, why?	[Free text]
49	Do you have any other comments you'd like to add?	[Free text]
FEEDBACK		
50	Would you like to receive feedback on the results of this study?	<input type="radio"/> Yes <input type="radio"/> No
51	If Yes, provide contact details	