



## Terms of Reference

### Title: Service Provider to conduct the “Patient Satisfaction Index” Survey in Primary Health Care Services in Albania

#### 1. BACKGROUND

The overall goal of the Health for All Project (HAP-2 Project) in Albania is to ensure better health for the Albanian population thanks to improved primary health care services while supporting the MOHSP and its regional entities improve stewardship, management, and effectiveness of primary health care. Improve of primary care service quality is in the focus of the project, and this is achieved in close collaboration with MOHSP subordinated structures, such as the Agency of Quality Assurance of Health and Social Care (AQAHSC), here and after the Agency.

The Agency, recently established as per Council of Minister Decision, No. 637, date 27.10.2021, aims at ensuring quality and safety of the health and social services through accreditation of health and social services and continuous education of health and social care professionals. Following this mandate, the Agency is interested to assess the patient satisfaction, as an indication to further improve the health system.

To assess the “Patient Satisfaction Index” in Primary Health Care Services, the Agency in close collaboration with the Institute of Public Health, elaborated a study protocol and questionnaire for data collection, to assess the “Patient Satisfaction Index” in Primary Care. The study protocol describes the methodology of the survey, sample distribution and sample size, data collection approach through an exit interview of the PHC patients, and the regions where data will be collected - Tirana, Fier and Diber regions. The study protocol was approved by the Ethics Committee, (document Nr. 131/37 prot), date 26.07.2022.

HAP is responding to the request of the Agency for supporting the study implementation (*conducting electronic data collection*) and preparation of the study’s report (*data processing and analysis and report writing*).

#### 2. AIM AND SPECIFIC OBJECTIVES

The aim of the consultancy is to conduct electronic data collection for “Patient Satisfaction Index” in Albania and prepare the study report at latest by end of October 2022.

##### ***Specific objectives for the service provider:***

- Ensure needed human resources and their full availability for data collection, data analysis and preparing the study report, as per TORs requirements.
- Facilitate and actively participate in the training of data collectors prior to data collection as per specificities defined in the study protocol. The Agency and IPH are the main responsible actors for the training content.
- Ensure the logistics of the pre-test: *for questionnaire used, approach of data collection, data transferring, define time for collecting data, application of protocol specificities from data collectors, application of informed consent, etc.*
- Develop pre-handled plan/s of data collection and agree that with HAP before implementation.
- Ensure quality and safety of data collected for the entire process.

- Ensure confidentiality of data collected according to Albanian Law on preservation of personal data.
- Conduct data processing and analysis.
- Elaborate the study report.

### 3. APPROACH

Data collection will be conducted at Primary Care facility level. The target population are all users of primary health care services aged 18 and over in Tirana, Fier and Dibër regions, exiting the facility on the day of data collection. A **patient exit interview will be used as the approach of data collected**. Written informed consent will be received prior to data collected for each patient exiting the primary care facility.

Depending on the number of exit interviews per facility, the team of data collection will be composed by one or two persons per facility during one working day. The data collection will start at 8.00 in the morning and end up at 14.45. The interviewing process will continue until the defined number of users/patients is reached in each HC as per protocol definitions.

Data will be collected in specific health centres in Tirana, Fier and Diber regions. Data collection will be finalised by end of September 2022. The process of data collection will be supervised by field supervisors, in three regions. A breakdown of exit interviews per municipality/Health Centres is presented in the following table:

Region	Local Government Units	Number of users to be interviewed	Days in Urban areas	Days in Rural areas
Diber	Peshkopi	42	13	29
	Burrel	37	21	16
	Klos	17	0	17
	Bulqize	19	5	14
<b>I</b>	<b>Sub-total</b>	<b>115</b>	<b>39</b>	<b>76</b>
Fier	Fier	166	100	66
	Lushnje	88	49	39
	Patos	35	25	10
	Roskovec	16	0	16
	Divjake	33	14	19
	Mallakaster	14	6	8
<b>II</b>	<b>Sub-total</b>	<b>353</b>	<b>194</b>	<b>158</b>
Tirane	Kamez	113	43	70
	Tirane	889	295	592
	Vore	32	20	12
<b>III</b>	<b>Sub-total</b>	<b>1032</b>	<b>358</b>	<b>674</b>
	<b>Total of exit interviews</b>	<b>1500</b>	<b>591</b>	<b>908</b>

The consultant should know that the number of exit interviews is disseminated according to sample calculations on respective health centres in these municipalities.

### 4. TO IMPLEMENT THIS SURVEY, THE SERVICE PROVIDER SHALL PROVIDE THE FOLLOWING SERVICES:

The service provider should know that implementation of data collection will be under the guidance / supervision and in close collaboration the **Agency of Quality Assurance of Health and Social Care, and the Institute of Public Health**. These two institutions are the authors of the

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study protocol, and their experts are in charge for the technicalities of the survey. HAP provides the financial support for the logistics of data collection, data analysis and elaboration of the report.

To implement the data collection the service provider should:

- **Select the adequate number of interviewers** (data collectors) and back-ups for each municipality as per Table 1 of these TORs. The interviewers must participate in the training regarding data collection. The interviewers should have a background in nursing, public health, social sciences, or related fields.
- Contract the selected data collectors for the envisaged tasks and will remunerate them and cover associated costs for that contract.
- Conduct training of data collectors in collaboration with Agency and IPH designated staff (*1 day training including pre-test*). The service provider is expected to cover parts of the training related to use and maintenance of tablets, safety and security of data collected, data transferring and data quality logistics organization and supervision of data collection.
- Set up the server at the Agency of Quality and create electronic data collection form.
- Ensure connection of the electronic form with the server of the of Agency of Quality Assurance of Health and Social Care.
- Ensure technical support with the software of data collection and address of changes in the questionnaire based on the pre-testing process.
- Develop and update available field work plans for data collection for approval by HAP, Agency and IPH.
- Organize logistic and technically contribute to pre-testing and finalizing field work plans.
- Conduct data collection in full compliance with the guidelines mentioned in the study protocol, including ethical requirements.
- Oversight of field data operations (implementation of work plan).
- Ensure timely transmission of electronic data to the central server (on daily basis).
- Take actions, as required, and requested, to improve data quality through supervision, feedback from previous data collection days, etc.
- Ensure back up of data collected on daily bases.
- Provide all administrative and logistic support for data collection including transport, accommodation, per diems etc., (if needed).
- Provide tablets (*back-up tablets as well*) and sim cards and technical support for electronic data collection.

To prepare the study report the service provider should:

- Download all (at least 1500 interviews) data collected from server to an excel file and make them available to the data analyst.
- Analyze the data through a Statistical Analysing Software (SPSS or STATA, etc.)
- Prepare the study report and share for comments with the Agency and IPH.
- Address the comments in the report and finalize the study report.
- Submit the final study report at the Agency, IPH and HAP.

## **5. TO IMPLEMENT THE SURVEY THE SERVICE PROVIDER SHALL PROVIDE THE FOLLOWING STAFF WITH THE RESPECTIVE QUALIFICATIONS:**

### **5.1.1 A Study Coordinator responsible for:**

- Coordinating all activities and communication between Agency, IPH, and HAP the service provider, and the team members on the side of the service provider, specifically the field supervisors and data collectors.
- Ensuring all contractual agreements and standards, and that the data collection follows the procedures outlined in the study protocol.
- Coordinating the study logistics and ensures quality of data collected.
- Coordinating with field supervisors on daily basis, adapt the work plan, ensure supervision of data collected and safety and quality of data.
- Communicating with the Agency and IPH daily in relation to data collection process and challenges.
- Collaborating with the Agency and IPH in co-training of data collectors and field supervisors, as described above.
- Develop the study work-plan together with field supervisors and agree with HAP, Agency and IPH.
- Submit a short summary report on the field work for data collection process.
- Conduct data processing and analysis (eventually in collaboration with a biostatistician).
- Elaborate the final study report.

*5.1.2 The study coordinator should have the following profile:*

- Experience in quantitative primary, ideally electronic, data collection
- Experience in data analysis, and familiar with statistic software
- Advanced skills in research report writing, is a must. Have analytical and synthetic skills to support report writing, for the Patient Satisfaction Index.
- Experience with similar tasks, related to quality-of-care surveys is preferable.
- Track record in data collection of similar scope and complexity.
- Management of data collection teams
- Good understanding of methodological aspects and data management
- Well-developed communication skills

**5.2 Data manager with IT background and experience with creation of electronic forms for data collection.** The data manager is responsible for the technical implementation of the electronic data collection, including the creation of data collection form, selecting of data collection form software, connection of the data collection form with the server, the set-up of tablets and assistance in case of technical problems during data collection. *He/she should ensure:*

- Collaborate closely with the Agency to prepare and adapt the Agency's server for the purpose of electronic data collection.
- Create the data collection form and connection with the server of the Agency.
- Assist the Agency and IPH to electronically accommodate the modified questionnaire, as per training needs (pre-test included), etc.,
- Support technically the electronic data collection (tablet support, etc.).
- Ensure that all tablet data are sent on the server adequately, at the end of the working day.
- Assist the Agency and IPH in daily quality check of the data where needed.
- Closely collaborate with the Agency and IPH on technical issues.

Data Manager should have the following profile:

- **IT background or extensive experience with electronic data collection, server man-**

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**agement, data (and database) management and equipment (ex: tablet) management.**

- Previous experience as electronic data manager for primary data collection.
- Good understanding of methodological aspects and data management.
- Advance technical skills in the use of tablets.

*5.3 For quality control the service provider organization will recruit **three field-based supervisors**, one for each region, to fulfill the following services:*

- Field supervisors are involved in the day-to-day data collection. They ensure that the work plan is implemented as foreseen and that local authorities (health center directors) are informed and approve the data collection.
- Conduct field supervisory visits for quality assurance.
- Be available and answer to questions from data collectors regarding implementation of the survey.
- Communicate with the Agency and IPH survey team on daily basis for the conduct of the survey as well as with data collectors.
- Verify feasibility of field work plans and ensure that they are implemented as planned.
- Ensure that data collection is done in full compliance with the guidelines mentioned in the study protocol, including ethical requirements.
- Take actions, as required, and requested, to improve data quality. Transmit on real time the feedback from the previous day of data collection provided by Agency and IPH survey team.
- Communicate regularly (at least once per day) with the study coordinator and should ensure the functionality and appropriate use of tablets.

The field supervisors should have the following profile:

- Previous supervision experiences and involvement in primary data collection
- Technical skills and literacy in the use of tablets
- Good understanding of methodological aspects and data management
- Willingness to travel also to remote places
- Well-developed communication skills

#### *5.4 Data Collectors*

- Data collectors are responsible to collect the data according to the procedures outlined in the study protocol.
- They are assisted, and supported by supervisors, data manager and study coordinator.
- They are obliged to keep regular and intensive communication with study coordinator, data manager, and supervisors as per emerging needs.

The Agency, IPH and HAP enjoy the right to interrupt the work of selected data collector(s) in case of heavy ethical violation rules and conditions.

*The data collectors should have the following profiles:*

- Nursing, public health, communication and/or social sciences background, or related field.
- Technical skills and literacy in the use of tablets
- Willingness to travel to remote places for 1-2 weeks
- Well-developed communication skills

- Ideally: previous data collection experience.

**6. The following services are NOT required from the service provider and will be provided by the Agency, and IPH.**

- Design of survey and data collection tool(s)
- Provision of server
- Sampling of Health Centers
- Identification of facility for pretest
- Prepare the training of interviewers
- Logistic costs related to training of data collectors, field supervisors, data manager & study coordinator (lunch, dinner, coffee break, training room rent, if needed)
- Ethical approval of the survey

The Agency, IPH and HAP reserve the right to be directly involved in all activities of the survey implementation, specifically in quality assurance activities, which these institutions might carry out in parallel and independently from the service provider.

**7. For this bid, the service provider shall provide the following outline specifying the following aspects, which will have the respective % of evaluation (max. 5 pages, excluding annexes (attached CV of staff, data collectors, or legal documents required according to procurement's rules):**

- Demonstrate through a **company CV** previous experience in surveys, facility-based is preferred, including electronic data collection using tablets (10%)
- Developed **plan of activities and logistics** to achieve the objectives listed in these TORs (10%)
- **Financial offer** (40%), please refer to Annex A
- **CVs of key staff** and assigned positions: **Full CVs of Study Coordinator and Data Manager**, demonstrating the ability to handle and qualitatively ensure the fulfillment of the above requirements. **Short CVs of three field supervisors**, demonstrating mainly similar works in the past. (40%)
- Company's registration documents (NIPT, Extract of QKB, etc) and Certificate of tax liability, stating whether it is subject to VAT or not
- A Document certifying that (your subject):
  - has met its fiscal obligations, issued by the Tax Administration.
  - has paid all social insurance obligations, issued by the Tax Administration
  - Certification by the Tax Administration which indicates the annual turnover for the last 3 years

The deadline for submission is **7<sup>th</sup> of September 2022, 4pm**. We estimate that the selection of the service provider will take place within 10 working days after the deadline.

**8. Timeframes and Deliverables**

The tentative timeframes are:

- Training for the interviewers will take place within two weeks following the signature of the contract.
- Data collection will start immediately after the training of data collectors and last approximately 3 weeks, including Saturdays but not **Sundays**.
- Submission of the final study report not later than end of October 2022.

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**The deliverables are:**

- The database with the data collected as per TORs, containing at least 1500 exit interviews as per sample distribution.
- Submit a short summary report on the field work for data collection process, including documentation of possible qualitative observations and a supervision aspect.
- The study final report on the “Patient Satisfaction Index” in Albania.

**9. Financial Offer**

The service provider should submit a Financial Offer as described in **Annex A**.

**Part 10: Other business**

A contract between HAP (Health for All Project) and the service provider will be established covering the activities defined in these TORs and the respective remuneration.

**The application package (in hard copies and scanned in CD/USB) should be sent until 7<sup>th</sup> of September 2022 at the mailing address: HAP Centre, Rruga Themistokli Gërmenji St. Pallati Helios Ap.5 Tirana, Albania.**

In case potential applicants may have any questions related to these TORs, please send an email within **30<sup>th</sup> of August 2022** at [info@hap.org.al](mailto:info@hap.org.al). Questions sent after this date, won't be replied.

## ANNEX A

### Financial Offer for conduct the “Patient Satisfaction Index” Survey in Primary Health Care Services in Albania

In the **Financial Offer calculation of Part 1: Field Work**, the company should take in consideration to include:

- all expenses, fees, and taxes, for all positions **that will be involved**.
- cost for transport and other administrative costs (i.e., accommodation if required).

NOTE: For transport cost calculation, consider that 25% of the rural areas (where the data should be collected) are in the farthest distance from the respective Local Government Units (municipalities).

The Financial offer should be submitted in ALL, VAT/TAX included, expressed in cost for each interview for the part I and in lumpsum, explaining and justifying the proposed amount, for part II.

No.	Region	Municipality	Number of users to be interviewed	Cost for each interview	Total Cost
<b>I Field Work</b>					
<b>1</b>	<b>Diber</b>	Peshkopi	42		
		Burrel	37		
		Klos	17		
		Bulqize	19		
	<b>I</b>	<b>Sub-total</b>	<b>115</b>		
<b>2</b>	<b>Fier</b>	Fier	166		
		Lushnje	88		
		Patos	35		
		Roskovec	16		
		Divjake	33		
		Mallakaster	14		
	<b>II</b>	<b>Sub-total</b>	<b>353</b>		
<b>3</b>	<b>Tirana</b>	Kamez	113		
		Tirana	889		
		Vore	32		
	<b>III</b>	<b>Sub-total</b>	<b>1032</b>		
		<b>Total of exit interviews</b>	<b>1500</b>		
<b>II Analyzing and Reporting</b>					
Data analysis (in lumpsum, explaining and justifying the proposed amount )					
Report writing (in lumpsum, explaining and justifying the proposed amount)					
<b>Total without VAT (I+II)</b>					
<b>VAT (if VAT is applicable)</b>					



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<b>Total included VAT</b>	
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