Surname First name

ATTENDANT'S DATA COLLECTION SPREADSHEET

ATTENDANT ENROLMENT QUESTIONS	
DEMOGRAPHIC DATA	
Attendant study number	*ATTLOS/PX..../ .....*
Age	
Sex	
Marital status	
Address	
Village	
District	
Primary occupation	
Primary source of income	
Highest level of education	
Mode of transportation and cost	Cost
Bus	
Taxi	
Ambulance	
Police car	
Boda boda (motorcycle)	
Personal vehicle/ friend	
Total transportation cost to hospital	UGX -
Where did you travel from?	
On what date did you arrive SRRH on this your current visit?	
How long did it take you to get to the hospital on this visit? (Mins)	
VISITATION DATA	
Date of first visit	01/01/17
Date of discharge	
FAMILY AND SOCIAL HISTORY	
What is your relationship with the patient?	
What is your position/ role in your immediate family?	
How many people are dependent on you?	
Other pertinient information (please specify)	
RESOURCE UTILIZATION	
AT SRRH, what do you use electricity for mostly?	
1. Charging your phone	
2. Charging your torch	
3. Radio	
4. Other (please specify)	
Do you **BUY** food or do you **COOK** it in the hospital?	
If you cook, where do they get the cooking fuel?	
Phone number	

MODE OF TRANSPORTATION	
Last day of visit/ stay	01/01/17
Mode of transportation and cost	Cost
Bus	
Taxi	
Ambulance	
Police car	
Boda boda (motorcycle)	
Personal vehicle/ friend	
Total transportation cost to hospital	UGX -

DAILY QUESTIONS	
OCCUPATION	
Are you able to do your primary work? YES/NO	
Other question(s)	
RESOURCE UTILIZATION	
Where did you sleep last night? (YES=1, NO= 0, 98= Not applicable)	
At home (not in the hospital)	
On a bed alone in the ward	
Shared a bed	
On the floor in the ward	
In a storage room/ other room	
Outside the ward (in the open)	
How much water did you use yesterday while at SRRH?	
Buckets	
Bottles	
Did you use the toilet in the hospital yesterday? (YES=1, NO=0, N/A= Not applicable)	
If No/ Not applicable	
Why?	
What alternative did you use?	
VISITATION DATA	
Arrival	
FILL IF ATTENDANT COMES AND GOES	
FILL IF ATTE Mode of transportation and cost	
FILL IF ATTE Bus	
FILL IF ATTE Taxi	
FILL IF ATTE Ambulance	
FILL IF ATTE Police car	
FILL IF ATTE Boda boda (motorcycle)	
FILL IF ATTE Walking	
FILL IF ATTE Personal vehicle/ friend	
FILL IF ATTE How much did it cost you to transport yourself to SRRH	
FILL IF ATTENDANT COMES AND GOES	
FILL IF ATTE **Departure**	
FILL IF ATTE Where are you going to	
FILL IF ATTE Mode of transportation and cost	
FILL IF ATTE Bus	
FILL IF ATTE Taxi	
FILL IF ATTE Ambulance	
FILL IF ATTE Police car	
FILL IF ATTE Boda boda (motorcycle)	
FILL IF ATTE Walking	
FILL IF ATTE Personal vehicle/ friend	
FILL IF ATTE Cost of transportation to SRRH	
FILL IF ATTE How much will/ did it cost you to transport yourself home?	

How has this hospital admission affected your family or life?	
How has this hospital admission affected your job?	
How has this hospital admission affected your finances?	
Did you or your family or relatives sell any property or make any hard sacrifices in order for you to access care?	