

BANGLADESH NATIONAL HEALTH ACCOUNTS 2016-2019

SURVEY OF CITY CORPORATION/MUNICIPALITY 2020

GENERAL INSTRUCTIONS

- The Health Economics Unit, Health Services Division, Ministry of Health and Family Welfare conduct this survey in order to improve the availability of statistics on the contribution of city corporation/municipality to the health services in Bangladesh.
- Please be kind enough to fill in all questions which are appropriate to your institution. If question is not applicable, please mark it as N/A and kindly avoid leaving a blank space.
- We appreciate if you could complete the questionnaire by 31 October 2020. A research personnel from the Bangladesh National Health Accounts team will visit the respondent to collect the completed questionnaire.
- It is of great benefit if copies of any relevant documents e.g. brochures or leaflets with detailed information about your institution's/company's health expenditure policy can be attached to this questionnaire.
- We deeply appreciate your cooperation in completing this questionnaire. If you have any queries regarding this exercise, please contact:

For queries please contact:

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Confidential

The information collected in this survey will be strictly confidential and individual or firm level information will not be divulged by HEU to any person or agency. Only aggregate statistics are ever reported by HEU in Bangladesh National Health Accounts.

N.B. For your convenience a word copy of this questionnaire can be downloaded from the following link:
<https://>

A. Identification of interviewer

A1	Interviewer name:								
A2	Date of interview:								
		d	d	m	m	y	Y	y	y

B. Identification of Organization

B1	Name of City Corporation/Municipality	
B2	Address	
B3	Telephone no.	
B4	Mobile no.	
B5	Fax no.	
B6	Name of the Respondent	
B7	Designation of the Respondent Cell phone and email of Respondent	

C. Types of Service (AMOUNT IN LAC TAKA)

		2016	2017	2018	2019
C1	What was your total expenditure on health-related activities directly delivered by your organization? (<i>excluding Capital expenditure</i>)				

D. Which of the following health services did you deliver in these years? (Expenditure % share)

		2016	2017	2018	2019
D1	Inpatient curative care				
D2	Outpatient curative care				
D3	Occupational healthcare				
D4	Family Planning service				
D5	Immunization program (EPI)				
D6	Prevention of communicable diseases				
D7	Mosquito Control				
D8	Health Awareness creation				
D9	Other service (Specify) _____				
	Total	100%	100%	100%	100%

E. If you provide Outpatient care please specify the following:

		2016	2017	2018	2019
E1	Number of Outdoor clinics				
E2	Number of Outpatient visits				

F. If you directly delivered Inpatient services, please specify the following:

		2016	2017	2018	2019
F1	Number of Hospitals				
F2	Number of Hospital Beds				
F3	Number of Inpatients admitted				
F4	Bed Occupancy rate (%)				
	Employment profile				
F5	Number of full-time doctors				
F6	Number of part-time doctors				
F7	Number of nurses				
F8	Number of other medical staff				
F9	Number of non-medical staff				

G. Capital investment

		2016	2017	2018	2019
G1	Capital investment (in lac Taka)				
G2	Depreciation (in lac Taka)				

H. Sources of Income/ Funding (Health related)

(Amount in lac Taka)

	Sources	2016	2017	2018	2019
H1	Revenue Budget				
H2	Development Budget				
H3	Donations (Official Sources/ Donors)				
H4	Private Donations/Contributions				
H5	Outdoor Ticket				
H6	Admission Fees				
H7	Bed Rent				
H8	Surgery Charges				
H9	Imaging and Laboratory Charges				
H10	Medicine				
H11	Ambulance Rent				
H12	Other Charges (specify)_____				
	Total				