**Scope of Services**

**Sub Center Study in Andhra Pradesh**

**Research Objective**

The key objective of the study is to assess the readiness of the Sub Centers to become health and wellness centers and suggest the resources gaps which need to be addressed It is also to understand the health seeking of the people specifically the Out-of-Pocket Expenditure (OOPE) and where they seek care, what kind of services they are able to receive, etc.

**Key Responsibilities of Convergent:**

The key responsibilities of Convergent would include translation of tools, CAPI scripting, Staffing, Training, conducting the fieldwork, quality assurance and delivering the cleaned raw-data sets in the form of SPSS within the timelines that have been mutually agreed upon.

**Sample Size:**

A total of 150 sub-centers (48 from Tribal and 102 from Non-Tribal areas) and 350 Households within the same sub-center areas would be sampled. The distribution of the sample across the districts, which has been provided by Access Health, is presented herewith.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| District | Rural SCs selected | Tribal SCs selected | Total SCs | HH Sample |
| Ananthapuram | 8 | 0 | 8 | 19 |
| Chittoor | 11 | 0 | 11 | 26 |
| East Godavari | 12 | 9 | 21 | 49 |
| Guntur | 10 | 0 | 10 | 23 |
| Krishna | 9 | 0 | 9 | 21 |
| Kurnool | 7 | 4 | 11 | 26 |
| Prakasam | 7 | 0 | 7 | 17 |
| S.P.S Nellore | 7 | 0 | 7 | 16 |
| Srikakulam | 5 | 12 | 17 | 40 |
| Visakhapatnam | 6 | 10 | 16 | 37 |
| Vizianagaram | 5 | 8 | 13 | 30 |
| West Godavari | 9 | 5 | 14 | 32 |
| YSR Kadapa | 6 | 0 | 6 | 14 |
| Total | **102** | **48** | **150** | **350** |

**Sampling of the sub-centers and households:**

Sub-centers of the sampled would be done by Convergent using list of sub-centers in each of the districts as sampling frames using systematic sampling method. Separate sampling frames would be used for sub-centers from tribal and non-tribal areas. After selecting the 150 sub-centers in the above manner,

2-3 households (a total of 350) within each of the sub-center areas would be selected through snowball sampling. These would be households that would have utilized certain medical services which would be mutually agreed upon between Convergent and Access Health.

**Staffing and Training:**

A total of 10 interviewers, 2 supervisors, 1 field coordinator would be working on this study. All these field staff would have the experience of working in various market surveys.

All these field staff would be trained for a period 2 days in Vijayawada as per the dates that would be mutually agreed upon by Convergent and Access Health.

**CAPI Scripting:**

Convergent would also be responsible for developing CAPI script to be loaded onto the tablets which would be used by the 10 interviewers. The exercise would not include dashboard. However, Access Health would have access the raw-data during the fieldwork once a week.

**Deliverables:**

* Translated Tools
* CAPI Scripting
* Raw-data (cleaned) in SPSS/Stata

**Tentative Route Plan**

A tentative plan has been drawn herewith which would be finalized in consultation between Convergent and Access Health.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **District Name** | **FW start date** | **FW end date** |  | **District Name** | **FW start date** | **FW end date** |
| Anantapuram | 2nd May | 3rd May | Sri Potti Sriramulu Nellore | 26th April | 27th April |
| Chittoor | 29th April | 1st May | Srikakulam | 5th May | 9th May |
| East Godavari | 24th April | 28th April | Visakhapatnam | 30th April | 3rd may |
| Guntur | 23rd April | 24th April | Vizianagaram | 3rd May | 5th May |
| Krishna | 21st April | 22nd April | West Godavari | 21st April | 23rd April |
| Kurnool | 4th May | 6th May | YSR Kadapa | 1st May | 2nd May |
| Prakasam | 25th April | 26th April |  | | |

**Resources Required from Access Health:**

1. Prior to CAPI Scripting:
   1. Final research tools prior to the translations
2. Prior to initiation of field trainings:
   1. Final IRB approval and approval on sampling
   2. Advance payment
   3. Required authorization letter

**Tentative Timelines**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Activity No** | **Activity** | **By** | **Start Date** | **End Date** |
| 1 | Contract signing | Access Health | 19th April |  |
| 1 | Final tools in English and approval of sampled Sub-centres | Access Health | 12th April |  |
| 2 | Final Translations | Convergent | 10th April | 16th April |
| 3 | All required authorisation letters | Access Health | 10th April |  |
| 4 | CAPI Scripting | Convergent | 12th April | 17th April |
| 5 | Field Trainings | Convergent | 19th April | 20th April |
| 6 | Fieldwork | Convergent | 21st April | 11th May |
| 6 | Data cleaning and submission | Convergent | 11th May | 17th May |

**Compensation**

The total service fee of INR 7,50,000 plus applicable taxes will be paid to the service provider. The payment will be released only on the completion of deliverable and invoicing by the service provider.

Payment Terms

50% at the time of signing the contract and prior to initiation of the fieldwork

30% within one week on completion of the fieldwork

20% within 30 days from the date of completion of the fieldwork

**Term**

This engagement shall commence upon execution of this Agreement. The Agreement shall continue in full force and is effect from **April 27, 2021** to **May 30, 2021** and is extendable based on the Service Provider's performance of the services and mutual concurrence on revised terms of engagement.