Date of Report: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Author of Report: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Workflow Requestor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Workflow: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Routine\_\_\_\_ One-time\_\_\_\_\_ (check one)

Date the Workflow Started: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date the Workflow Ended: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of Questions in Workflow: \_\_\_\_\_\_\_\_\_\_\_\_

Next Steps and Action Items from Analysis (include as many points as needed):

1.

2.

3.

Summary Data Analysis Table

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Question Number** | **Question Content** | **Number of Respondents** | **Location of Respondents** | **Results** | **Action Item** | **Comment** |
| *Q1* | *Are you experiencing a shortage of bed nets?* | *32 health workers*  | *3 facilities in Logo District* | *10% said yes**90% said no* | *Confirm data in LMIS system and follow up with those in the flow that said Yes to find out how many bed nets are needed* |  |
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