

MATERNAL AND NEWBORN QUALITY OF CARE FACILITY ASSESSMENT
Health Worker Interview & Knowledge Test

Cover Sheet

H1: Facility name	H2: Facility number
H3: Observer number	H4: Today's date (day/month/year)

EXPLAIN TO THE HEALTH WORKER THAT HIS/HER NAME WAS PROVIDED AS A KNOWLEDGEABLE MATERNAL AND/OR NEONATAL HEALTH PROVIDER AVAILABLE ON THAT DAY. VALIDATE WITH THE HEALTH WORKER THAT HE/SHE DOES PROVIDE SOME MATERNAL AND/OR NEONATAL HEALTH SERVICES IN THIS FACILITY. IF THIS IS A NEW RESPONDENT, OBTAIN INFORMED CONSENT BELOW. IF THE PERSON IS NOT A NEW RESPONDENT, PROCEED TO H5.

*READ ORAL CONSENT SCRIPT TO HEALTH WORKER.
 [insert text of consent script here]*

H5: Ask *health worker* Do I have your agreement to proceed?

- Yes, consent is given → go to H6
- No, consent is not given → observation of this health worker must END; if available, approach another health worker for participation.

H6: Health worker line number (from staff listing)	H7: Sex of health worker
	Male 1
	Female 2

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Section 1: Interview

READ THE FOLLOWING QUESTIONS TO THE HEALTH WORKER. IF HEALTH WORKER DOESN'T KNOW THE YEAR, PROBE USING PAST EVENTS AND RECORD YOUR BEST ESTIMATE.

Question	Code		
EDUCATION AND EXPERIENCE			
H8: What is your current professional/technical/medical qualification?			
Category 1	1		
	2		
	3		
	4		
	5		
	6		
	7		
	8		
	9		
Category 10	10		
H100: What year did you graduate (or complete) with this qualification?			
H101: In what year did you start working in this facility?			
H102: In what year did you start working in your current position in this facility?			
H103: What is your age? (<i>Observer: if health worker doesn't want to give age, ask them to give you a range, i.e. between age 40 and 50</i>)			
TRAINING AND SERVICES PROVIDED			
Question	Yes	No	Go to
H104: In your current position, and as a part of your work for this facility, do you personally provide any antenatal services?	1	0	No→H108
H105: How many years in total have you provided such services? Service may have been here or in another facility (<i>Observer: enter 00 if less than 1 year of service</i>)			
H106: During the past 3 years have you received any pre- or in-service training on subjects related to antenatal care?	1	0	No→H108
H107: In the past 3 years, did you receive any training on the following topics (<i>read each answer aloud</i>):	1	0	
01) ANC screening (e.g., blood pressure, urine glucose and protein)?	1	0	
02) Counseling for ANC (e.g., nutrition, FP and newborn care)?	1	0	
03) Emergency obstetric and newborn care (EmONC)	1	0	
04) Management of pre-eclampsia/eclampsia	1	0	
05) Any topic related to pregnancy and HIV/AIDS or PMTCT?	1	0	
H108: In your current position, and as a part of your work for this facility, do you personally provide any delivery services? By that I mean conducting the actual delivery of newborns	1	0	No→H114
H109: How many years in total have you provided such services? Service may have been here or in another facility (<i>Observer: enter 00 if less than 1 year of service</i>)			
Question	Code		
H110: How often do you use a partograph (<i>read each answer aloud</i>):			
Never	1		
Rarely	2		
Sometimes	3		
Most of the time	4		
Always	5		
H111: How often do you use active management of the third stage of labor (AMTSL) during normal vaginal births (<i>read each answer aloud</i>):			
Never	1		
Rarely	2		
Sometimes	3		
Most of the time	4		
Always	5		
Question	Yes	No	Go to
H112: During the past 3 years have you received any pre- or in-service training on subjects related to delivery care?	1	0	No→H114

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H113: In the past 3 years, did you receive any training on the following topics (<i>read each answer aloud</i>):	1	0	
01) Routine care for labor and normal vaginal delivery	1	0	
02) Use of partograph	1	0	
03) Active management of third stage of labor (AMTSL)	1	0	
04) Emergency obstetric care (EmOC)/Life saving skills (LSS) - in general	1	0	
05) Management of sepsis, including use of parenteral antibiotics	1	0	
06) Administer magnesium sulfate for the treatment of severe pre-eclampsia or eclampsia	1	0	
07) Management of postpartum hemorrhage	1	0	
08) Removal of placenta or products of conception? (D&C, vacuum aspiration, etc.)	1	0	
09) Manual removal of placenta	1	0	
10) Special delivery care practices for preventing mother-to-child transmission (PMTCT) of HIV/AIDS	1	0	
11) Assisted vaginal delivery (apply vacuum or forceps)	1	0	
12) Resuscitate a newborn with bag and mask	1	0	
13) Maternal death or near miss reviews/audits	1	0	
14) Quality improvement approaches such as standards based management	1	0	
H114: In your current position, and as a part of your work for this facility, do you personally provide care for newborns?	1	0	No→H118
H115: How many years in total have you provided such services? Service may have been here or in another facility (<i>Observer: enter 00 if less than 1 year of service</i>)			
H116: During the past 3 years have you received any pre- or in-service training on subjects related to newborn care?	1	0	No→H118
H117: In the past 3 years, did you receive any training on the following topics (<i>read each answer aloud</i>):	1	0	
01) Essential newborn care (e.g., cord care, warming, early and exclusive breastfeeding)	1	0	
02) Newborn resuscitation with bag and mask	1	0	
WORKING CONDITIONS IN FACILITY			
<i>NOW I WOULD LIKE TO ASK YOU SOME QUESTIONS ABOUT SUPERVISION YOU HAVE PERSONALLY RECEIVED. THIS SUPERVISION MAY HAVE BEEN FROM A SUPERVISOR EITHER IN THIS FACILITY, OR FROM OUTSIDE THE FACILITY.</i>			
H118: Do you receive technical support or supervision in your work at this facility?	1	0	No→H121
H119: Were you supervised in the past 3 months	1	0	No→H121
H120: The last time you were personally supervised, did your supervisor do any of the following (<i>read each aloud</i>):			
01) Check your records or reports	1	0	
02) Observe your work	1	0	
03) Give you verbal feedback about how you were doing your job	1	0	
04) Provide any written comment about how you were doing your job	1	0	
05) Provide updates on administrative or technical issues related to your work	1	0	
06) Discuss problems you have encountered	1	0	
07) Participate in quality of care improvement activities	1	0	
<i>FOR QUESTION H121, DO NOT READ THE ANSWER CHOICES ALOUD. IF YOU ARE NOT SURE WHETHER AN ANSWER GIVEN BY HEALTH WORKER MATCHES THAT LISTED, PROBE FOR MORE DETAIL. IF THEY GIVE AN ANSWER THAT IS NOT LISTED, MOVE ON TO THEIR NEXT ANSWER. USE THE PROBE TO ENCOURAGE HEALTH WORKER TO GIVE 3 ANSWERS. IF THEY CANNOT GIVE AN ANSWER, OR GIVE ONLY ANSWERS THAT DO NOT APPEAR IN LIST, CIRCLE DON'T KNOW.</i>			
H121: Among the various things related to your working situation that you would like to see improved, can you tell me the three that you think would most improve your ability to provide good quality of care services? (PROBE: Anything else?)	Code		
More support from supervisor	A		
More knowledge/ updates / training	B		
More supplies/drugs	C		
Better quality equipment / supplies	D		
Less workload (more staff)	E		
Better working hours / flexible times	F		
More incentives (salary, promotion, holidays)	G		
Increased security	H		
Better facility infrastructure	I		
More autonomy / independence	J		
Emotional support for staff	K		
More / better supervision	L		
More job aids / guidelines / standards	M		
Don't know / None of these	Z		

END OF SECTION 1

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Section 2: Maternal Health Knowledge Questions

FOR THE FOLLOWING QUESTIONS, READ THE QUESTION ALOUD TO THE HEALTH WORKER. DO NOT READ THE ANSWER CHOICES ALOUD. IF YOU ARE NOT SURE WHETHER AN ANSWER GIVEN BY HEALTH WORKER MATCHES THAT LISTED, PROBE FOR MORE DETAIL. IF THEY GIVE AN ANSWER THAT IS NOT LISTED, MOVE ON TO THEIR NEXT ANSWER. USE THE PROBE TO ENCOURAGE HEALTH WORKER TO GIVE AS MANY ANSWERS AS THEY CAN THINK OF. IF THEY CANNOT GIVE AN ANSWER, OR GIVE ONLY ANSWERS THAT DO NOT APPEAR IN LIST, CIRCLE DON'T KNOW.

READ ALOUD: Please answer the following questions on maternal health to the best of your knowledge. Most of the questions I ask you will require multiple responses from you. Assume all needed supplies, medications, and equipment are available. When thinking about your answers, you should include actions or interventions that could be done at your facility and at a referral facility. I will probe sometimes to help you remember some more information. Please provide all responses that come to mind.

Question		Code
H200: What actions during labor and delivery would you take in an HIV+ woman to prevent/ reduce mother-to-child transmission of the virus?		
	PMTCT counseling	A
(PROBE: Any other actions or interventions?)	Provide ARV prophylaxis to woman in early labor	B
	Wipe nose, mouth, eyes of newborn with gauze, avoid suction	C
	No routine episiotomy	D
	Minimize instrument delivery	E
	Hibitane vaginal cleansing	F
	Minimize vaginal exam	G
	Minimize artificial rupture of membranes	H
	Avoid milking cord/ immediate clamp cord	I
	Appropriate use of partograph	J
	Active mgt of 3rd stage labor	K
	Provide ARV prophylaxis to infant	L
	Don't know	Z
H201: What are the key steps for performing active management of the third stage of labor?		
	Administration of a uterotonic immediately/ within 1 minute of delivery	A
(PROBE: if health worker mentions uterotonic, ask when should uterotonic be given?)	Administration of a uterotonic with delivery of anterior shoulder	B
	Administration of a uterotonic after delivery of placenta	C
	Controlled cord traction	D
	Uterine massage	E
	Don't know	Z
H202: What actions are appropriate for a woman who presents with, or develops heavy bleeding postpartum from atonic/uncontracted uterus?		
	Massage the fundus	A
(PROBE: Any other actions or interventions?)	Empty urinary bladder	B
	Give uterotonics IM or IV	C
	Perform bimanual compression of uterus	D
	Perform abdominal compression of aorta	E
	Start IV fluids	F
	Take blood for hb, grouping and x-matching	G
	Refer to doctor or hospital	H
	Raise foot of bed	I
	Don't know	Z
H203: When should membranes be ruptured artificially by the provider?		
	At start of second stage	A
(PROBE: Any other times?)	Immediately prior to delivery when they are bulging in vagina	B
	Routinely during active phase of labor	C
	As part of augmentation of labor	D
	Upon admission for all women	E
	To check color of fluid/liquor when fetal distress is noted	F
	Not to be ruptured	G
	Don't know	Z
H204: What actions do you believe are most appropriate in managing a woman with severe pre-eclampsia at term?		
	Provide magnesium sulphate	A
(PROBE: Any other actions?)	Provide diazepam	B
	Provide anti-hypertensives	C
	Prepare to deliver within 48 hours	D
	Don't know	Z

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H205: Please tell me which antibiotics to give to a woman who is diagnosed with postpartum endometritis following a vaginal delivery?	Ampicillin			A
(PROBE: Anything else?)	Gentamicin			B
	Metronidazole			C
	Other antibiotic			X
	Don't know			Z
<i>READ ALOUD: Now I would like to present you with a scenario you might encounter in your practice.</i>				
A woman is brought to the emergency department of the district hospital by her husband after she complained of a severe headache and blurred vision. She is 20 years old, this is her first pregnancy, and she is 37 weeks gestation. She had 2 ANC visits and no problems. She denies upper abdominal pain or decreased urine output, and fetal movement is normal. Her BP is 160/120. Her examination is normal. She has contractions 2 in 10 minutes, lasting 20 seconds by palpation. Her urine has 3+ protein.				
H206: Given the information presented above, what is your working diagnosis? (<i>do not read answers aloud</i>)	Kidney infection			1
(CIRCLE <u>ONLY 1</u> ANSWER)	Severe pre-eclampsia			2
	Malaria			3
	Eclampsia			4
	In labor			5
	Don't know			8
<i>FOR QUESTION H207, READ THE QUESTION ALOUD TO THE HEALTH WORKER AND THEN READ EACH PROCEDURE ALOUD.</i>				
Question				Yes No DK
H207: Of the list of procedures I am going to read you, please tell me which procedures are carried out <u>routinely</u> during labor and delivery at your facility (<i>read each procedure aloud</i>):				
	01) Artificial rupture of membranes			1 0 8
	02) Active management of third stage of labor			1 0 8
	03) Episiotomy			1 0 8
	04) Perineal shaving			1 0 8
	05) Maternal blood pressure monitoring			1 0 8
	06) Administration of prophylactic antibiotics to women in labor			1 0 8
	07) Enema			1 0 8
	08) Suctioning nose and mouth of newborn			1 0 8
	09) Fetal heart rate monitoring			1 0 8
END OF SECTION 2				

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Section 3: Newborn Health Knowledge Questions

FOR THE FOLLOWING QUESTIONS, READ THE QUESTION ALOUD TO THE HEALTH WORKER. DO NOT READ THE ANSWER CHOICES ALOUD. IF YOU ARE NOT SURE WHETHER AN ANSWER GIVEN BY HEALTH WORKER MATCHES THAT LISTED, PROBE FOR MORE DETAIL. IF THEY GIVE AN ANSWER THAT IS NOT LISTED, MOVE ON TO THEIR NEXT ANSWER. USE THE PROBE TO ENCOURAGE HEALTH WORKER TO GIVE AS MANY ANSWERS AS THEY CAN THINK OF. IF THEY CANNOT GIVE AN ANSWER, OR GIVE ONLY ANSWERS THAT DO NOT APPEAR IN LIST, CIRCLE DON'T KNOW.

READ ALOUD: Please answer the following questions on newborn health to the best of your knowledge. Most of the questions I will be asking you will require multiple responses from you. Assume all needed supplies, medications, and equipment are available. When thinking about your answers, you should include actions or interventions that could be done at your facility and at a referral facility. I will probe sometimes to help you remember some more information. Please provide all responses that come to mind.

Question	Code
H301: What basic equipment and supplies must be available to ensure the baby receives appropriate <u>immediate care</u> after birth?	
(PROBE: Anything else?)	
2 dry warm towels or cloths	A
Sterile blade or scissors	B
Sterile or disposable cord ties/ clamps	C
Cap for baby	D
Source of warmth: heating lamp or incubator	E
Self-inflating ventilation bag	F
Newborn face mask size 1	G
Newborn face mask size 0	H
Mucus extractor/ suction/ bulb syringe	I
Flat surface	J
Clock or watch with seconds	K
Don't know	Z
H302: Please tell me, when a baby is delivered and there is no complication, what care is important to give them immediately after birth and in the first hour?	
(PROBE: Anything else?)	
Wipe face after birth of head	A
Ensure baby was breathing / crying	B
Provide thermal protection (skin to skin)	C
Bathe newborn shortly after birth	D
Suction newborn with bulb	E
Ensure mother initiates breast feeding within 1 hour	F
Assess/examine newborn within 1 hour	G
Weigh newborn	H
Provide eye prophylaxis / antibiotic ointment	I
Give prelacteal feed / water	J
Cut cord with sterile blade / scissors	K
Apply antiseptic or other material to cord stump	L
Don't know	Z
H303: Can you please tell me the signs and symptoms of severe infection (sepsis) in a newborn?	
(PROBE: Any other signs or symptoms?)	
Poor / no breastfeeding	A
Restlessness / irritability	B
Breathing difficulties	C
Hypothermia	D
Hyperthermia	E
Breathing rating >60/minute	F
Convulsions	G
Pus / redness around umbilicus	H
Abscess on any part of body	I
Skin pustules	J
Lethargy / no movement (conscious)	K
Unconscious	L
Don't know	Z

END OF SECTION 3

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Section 4: Newborn Resuscitation Simulation

PREPARE AND SET UP A SIMULATION AREA WITH THE FOLLOWING EQUIPMENT:

- | | |
|---|---------------------------------------|
| • NeoNatalie model (preferably filled with water) | • Self-inflating bag (newborn) |
| • Table or other suitable flat surface | • Infant face masks size 0 and size 1 |
| • 2 x cloth or baby blanket to wrap model | • Stethoscope |
| • 2 x cord ties (string) | • Timer (watch or clock) |
| • Suction apparatus | |

FOR SOME PROVIDERS, THIS WILL BE THEIR FIRST EXPOSURE TO THE NEONATALIE DOLL. BEFORE CONDUCTING THE SIMULATION, BRIEFLY DEMONSTRATE HOW THE DOLL WORKS (SHOW THAT IT RESPONDS TO PROVIDER ACTIONS) AND ALLOW THE PROVIDER TO TOUCH AND TRY IT OUT. DO NOT GIVE ANY INSTRUCTION ON HOW TO PERFORM THE RESUSCITATION. IF THE PROVIDER HAS NOT SEEN THE "PENGUIN" SUCTION DEVICE BEFORE, LET THEM TRY THAT ALSO.

READ ALOUD:

The purpose of this activity is to provide a simulated experience for service providers to demonstrate management of an asphyxiated newborn. During the simulation, you should do and say everything the same as you would during an actual resuscitation. Pretend that I am the newborn's mother.

Fatima has given birth to a 2,800 g baby boy after a prolonged second stage of labor. This was her second pregnancy. Her first baby is alive. At birth, the newborn is blue and limp and does not breathe.

RECORD WHETHER THE PROVIDER CARRIED OUT THE FOLLOWING STEPS AND/OR EXAMINATIONS:

Question	Yes	No	DK	Go to
H502: Clears the airway by suctioning the mouth first and then the nose	1	0	8	
H503: Stimulates baby with back rubbing	1	0	8	

TELL THE PROVIDER THAT THE NEWBORN IS NOT BREATHING AFTER SUCTIONING AND RUBBING THE BACK

H505: Calls for help	1	0	8	
H506: Ties or clamps cord immediately	1	0	8	
H507: Cuts cord with clean blade or clean scissors	1	0	8	
H508: Places the newborn on his/her back on a clean, warm surface or towel	1	0	8	
H509: Places the head in a slightly extended position to open the airway	1	0	8	
H510: Tells the woman (and her support person) what is going to be done	1	0	8	
H511: Listens to woman and provides support and reassurance	1	0	8	
H512: Checks mouth, back of throat and nose for secretions, and clears if necessary	1	0	8	
H513: Places the correct-sized mask on the newborn's face so that it covers the chin, mouth and nose (but not eyes)	1	0	8	
H514: Checks the seal by ventilating two times and observing the rise of the chest	1	0	8	
H515: OBSERVER: is the neonatalie model's chest rising?	1	0		Yes→H524
H516: Checks the position of the newborn's head to make sure that the neck is in a slightly extended position (not blocking the airway)	1	0	8	
H517: Checks mouth, back of throat and nose for secretions, and clears if necessary	1	0	8	
H518: Checks the seal by ventilating two times and observing the rise of the chest	1	0	8	
H519: OBSERVER: is the neonatalie model's chest rising?	1	0		Yes→H524
H520: Checks the position of the newborn's head again to make sure that the neck is in slightly extended position	1	0	8	
H521: Repeats suction of mouth and nose to clear secretions, if necessary	1	0	8	
H522: Checks the seal by ventilating two times and observing the rise of the chest	1	0	8	
H523: OBSERVER: is the neonatalie model's chest rising?	1	0		
H524: Ventilates at a rate of 30 to 50 breaths/minute	1	0	8	
Q525: Conducts assessment of newborn breathing after 1 minute of ventilation	1	0		

TELL THE PROVIDER THAT THE NEWBORN IS STILL NOT BREATHING AFTER 1 MINUTE OF RESUSCITATION

H527: Continues ventilation	1	0	8	
Q528: Conducts assessment of newborn breathing after prolonged ventilation (10 minutes)	1	0		

TELL THE PROVIDER THAT THE NEWBORN IS NOW BREATHING NORMALLY AFTER CONTINUED RESUSCITATION

H533: Arranges transfer to special care either in facility or to outside facility	1	0	8	
H534: Explains to the mother (and her support person if available) what happened	1	0	8	
H535: <i>PLEASE COMMENT ON HEALTH WORKER'S PERFORMANCE DURING THE SIMULATION:</i>				

REMEMBER TO THANK PROVIDER FOR THEIR PARTICIPATION IN THE STUDY

END OF HEALTH WORKER INTERVIEW & KNOWLEDGE TEST