HEALTH CENTER QUESTIONNAIRE

For each of the following modules, the first, and where possible the second, choice of individuals to be interviewed are specified. Please interview those individuals only. If the specified person/s are not available, find out when they will be there and return to the health center to complete the questionnaire.

IODULE 1	. FACILITY IDENTIFI	ERS	
HC1.1	Date (dd/mm/yy) Gregorian calendar	_ / _ / dd mm yy	HC1.1
HC1.2	Region Code		HC1.2
HC1.3	Zone Code		HC1.3
HC1.4	Woreda name		HC1.4
HC1.5	Woreda Code	II	HC1.5
HC1.6	PHCU Code		HC1.6
HC1.7	Unique ID (composed of the 2 digit region, 2 digit zonal, 2 digit woreda code, 2 digit PHCU code)	_ / / / Region Zone Woreda PHCU	HC1.7
HC1.8	GPS Latitude Take coordinates of health center		HC1.8
HC1.9	GPS Longitude Take coordinates of health center	:	HC1.9
HC1.10	Interviewer Initials		HC1.10
HC1.11	Did you read the consent form to the health center head?	1 = Yes 2 = No	HC1.11
HC1.12	Did the official agree to be interviewed?	1 = Yes – GO TO HC2.1 2 = No	HC1.12
HC1.13	If no, Why not?	End interview	HC1.13

MODULE 2. PHCU INFORMATION AND HEALTH CENTER STAFFING

INTERVIEWER: ASK <u>HEAD OF HEALTH CENTER</u> FOR THE INFORMATION BELOW.

Thank you very much for agreeing to respond to this survey. I first would like to ask some questions about the primary health care unit as well as health center staffing. I will first start with the PHCU population for the last 12 months.

HC2.1	Number of people living in the health cer last12 months?	nter's catchme	ent area in the	_	_	HC2.1
HC2.2	Number of households living in the healt last12 months?	_	_	HC2.2		
HC2.3	Total number of women of reproductive age living in the health center's catchment area in the last 12 months?]]	HC2.3
HC2.4	Total number of under 5 children living ir area in the last 12 months?	n the health ce	enter's catchment]]	HC2.4
HC2.5	How many health posts are under this health center?	En	ter number			HC2.5
HC2.6	How many Health Extension Workers (HEWs) in total work under this health center?	En	ter number			HC2.6
			Enter number for ea	ach or	ne	
		HC2.7	Nurse			HC2.7
Currently	how many of each of the following staff	HC2.8	Midwife			HC2.8
	health center?	HC2.9	Health officer			HC2.9
Read list.		HC2.10	Urban Health Extens Worker	sion		HC2.10
		HC2.11	Pharmacist/druggist			HC2.11
		HC2.12	Laboratory Technicia	an		HC2.12
HC2.13	Have the staff members in this health center been trained specifically in Integrated Management of Neonatal and Childhood Illnesses (IMNCI)?	1 = Yes 2 = No – Go	D TOHC 2.31		II	HC2.13
HC2.14	How many of the staff in this health center have been trained specifically in Integrated Management of Neonatal and Childhood Illnesses (IMNCI) ?	Enter num	ber			HC2.14
			Enter number for ea	ach or	ne	
W/biok	staffs have been trained in IMNCI?	HC2.15	Nurse			HC2.15
VVTIICI	r stans have been trained in hyincr?	HC2.16	Midwife			HC2.16
		HC2.17	Health officer			HC2.17
HC2.18	Since taking the IMNCI training, have any of them left this Health Center?	1 = Yes 2 = No – G0	O TO HC2.31			HC2.18
If YES, how Health Cer	v many of trained staffs have left this ter?		Enter number for ea	ach or	ne	
		HC2.19	Nurse			HC2.19
		HC2.20	Midwife			HC2.20
		HC2.21	Health officer		II	HC2.21

If YES, how many of the IMNCI trained staff that			-1	nter number for each o	one	
	ransferred, promoted or have moved	HC2.22	Tr	ansferred		HC2.22
	r organization?	HC2.23		omoted		HC2.23
		HC2.24		oved to another ganization		HC2.24
		HC2.25		her, specify (GO TO C2.26)		HC2.25
		HC2.26	Sp	pecify	·	HC2.26
HC2.27	Have you replaced the IMNCI trained staffs that left by other trained staffs?	1 = Yes 2 = No – G	ото	D HC 2.31		HC2.27
		Enter num	ber f	for each one		
	w many IMNCI trained staffs were	HC2.28	Nu	ırse		HC2.28
replaced?		HC2.29	Mi	dwife		HC2.29
		HC2.30	He	ealth officer		HC2.30
HC2.31	Have the staff members in this health center been trained specifically in Community Based Newborn Care (CBNC)?	1 = Yes 2 = No – G	ото	DHC2.49	II	HC2.31
HC2.32	How many of the staff in this health center have been trained specifically in Community Based Newborn Care (CBNC)?	Enter number		II	HC2.32	
		Enter num	ber f	for each one		
Which staf	fs have been trained in CBNC?	HC2.33		Nurse		HC2.33
		HC2.34		Midwife		HC2.34
		HC2.35		Health officer		HC2.35
HC2.36	Since taking the CBNC training, have any of them left this Health Center?	1 = Yes 2 = No – G	ото	D HC2.49		HC2.36
lf YES, hov Health Cer	w many of trained staffs have left this hter?	Enter num	ber 1	for each one		
		HC2.37	Nu	ırse		HC2.37
		HC2.38	Mi	dwife		HC2.38
		HC2.39	He	ealth office		HC2.39
If YES, How many of the CBNC trained staff that left were transferred, promoted or have moved to another organization?		HC2.40	Tr	ansferred		HC2.40
		HC2.41	Pr	omoted		HC2.41

		HC2.42	Moved to another organization		HC2.42
		HC2.43	Other ,specify—GO TO HC2.44		HC2.43
		HC2.44	Specify		HC2.44
HC2.45	Have you replaced the CBNC trained staffs that left by other trained staffs?	1 = Yes 2 = No – G	D TO HC2.49		HC2.45
If VES how	w many CBNC trained staffs were		Enter number for each o	one	
replaced?		HC2.46	Nurse		HC2.46
		HC2.47	Midwife		HC2.47
		HC2.48	Health officer		HC2.48
HC2.49	Have the HEWs in the health center's catchment area been trained specifically in Community Based Newborn Care (CBNC)?	1 = Yes 2 = No – G	60 TO HC2.55		HC2.49
HC2.50	How many of the HEWs in the health center's catchment have been trained specifically in Community Based Newborn Care (CBNC) ?		Enter number		HC2.50
HC2.51	Since taking the CBNC training, have any of the HEWs left among the HPs in this Health Center catchment or PHCU?	1 = Yes 2 = No – GO TO HC2.55			HC2.51
HC2.52	If YES, how many of the trained HEWs have left this Health Center's catchment?		Enter number		HC2.52
HC2.53	Have you replaced the CBNC trained HEWs who left by other trained HEWs?	1 = Yes 2 = No - G	60 TO HC2.55		HC2.53
HC2.54	If YES, how many of trained HEWs were replaced?		Enter number		HC2.54
HC2.55	Are there any other non-governmental organizations with maternal and newborn health initiatives happening at this health center?	1 = Yes 2 = No – G	O TO MODULE 3	II	HC2.55
HC2.56	If YES, what is/are the name(s) of the organization that is supporting this work?	Specify a b c			HC2.56
			For each: 1 = Yes 2 = I	No	
		HC2.57	ANC		HC2.57
	ent in the facula area?	HC2.58	Delivery	<u> </u>	HC2.58
11 TES, WN	at is the focus area?	HC2.59	PNC for baby		HC2.59
Read list.		HC2.60	Maternal post-partum		HC2.60
		HC2.61	Sick newborn care		HC2.61
		HC2.62	Other GOT TO HC2.63		HC2.62
		HC2.63	Specify		HC2.63

MODULE 3. SUPPORTIVE SUPERVISION CONDUCTED

INTERVIEWER:

PLEASE FIND A <u>HEALTH EXTENSION SUPERVISOR</u> TO ANSWER THE FOLLOWING QUESTIONS. IF NOT AVAILABLE ASK THE <u>U 5 FOCAL PERSON</u> FOR THIS SET OF QUESTIONS

I would now like to ask you some questions about maternal and newborn health related supportive supervision provided by the health center. By supportive supervision, I mean visits by health center staff to health posts to discuss, review and give feedback on HEWs work.

u150u55,	Teview and give recuback on TILWS wo	/ N .			
HC3.1	Has anyone in the health center conducted a supportive supervisory visit to health posts in the last 6 months?	1 = Yes 2 = No -	GO TO HC 3.27		HC3.1
HC3.2	If yes to HC3.1: How many of the health posts in your PHCU have been visited for supportive supervision in the last 6 months?	Enter nui 99 if don	mber of health posts, 't know.		HC3.2
HC3.3	Has anyone in the health center conducted a supportive supervisory visit to health posts in the last 3 months?	1 = Yes 2 = No -	1 = Yes 2 = No – GO TO HC 3.7		HC3.3
HC3.4	If yes to HC3.3 How many of the health posts in your PHCU have been visited for supportive supervision in the 3 months?	Enter number of health posts 99 if don't know.			HC3.4
HC3.5	Has anyone in the health center conducted a supportive supervisory visit to a health post in the last 1 month?	1 = Yes 2 = No – GO TO HC3.7		II	HC3.5
HC3.6	If yes to HC3.5 How many of the health posts in your PHCU have been visited for supportive supervision in the 1 months?	Enter number of health posts 99 if don't know.			HC3.6
If yes to any supervision in the last 6 months: Did that supportive supervision visit include any of the following? Read list.					
		HC3.7	Discussing on the reporting of early identification of pregnancy		HC3.7
		HC3.8	Discussing provision of Focused ANC		HC3.8

HG3.10 Discussing safe and clean delivery Image: Safe and clean leadwary Image: Safe and clean leadw		HC3.9	Discussing promotion of institutional delivery		HC3.9
HC3.11 newborn care including cord care (chrohoekidine) I		HC3.10			HC3.10
HC3.12 asphyxia, initial stimulation, and resuscitation of newborn babies I		HC3.11	newborn care including		HC3.11
HC3.13 management of hypothermia I		HC3.12	asphyxia, initial stimulation, and resuscitation of		HC3.12
HC3.14 pre-term and/or low birth weight neonates HC3.14 HC3.14 Weight neonates HC3.15 Discussing management of very severe disease in newborns HC3.16 HC3.16 Discussing HEW activities with WDA I		HC3.13	management of		HC3.13
HC3.15 very severe disease in newborns HC3.15 HC3.16 Discussing HEW activities with WDA HC3.16 HC3.17 Observing record keeping and reporting and reporting and reporting manuals, job aides, request for consistency and completeness, HC3.19 HC3.19 HC3.20 Delivering supplies/training manuals, job aides, request forms HC3.20 HC3.21 Observing client interaction HC3.21 HC3.22 Delivering supplies/training manuals, job aides, request forms HC3.21 HC3.20 HC3.21 Observing client interaction HC3.21 HC3.22 Delivering supplies/training manuals, job aides, request forms HC3.21 HC3.20 HC3.22 Deserving dient interaction HC3.21 HC3.23 Providing feedback to the HC3.23 HC3.24 HC3.24 HC3.24 HEWs on their work HC3.24 HC3.25 Other, specify Go to HC3.26 HC3.25 HC3.26 Specify _ HC3.26 _ HC3.26 Specify _ HC3.26 _ _		HC3.14	pre-term and/or low birth		HC3.14
HC3.16 with WDA ⁻ L HC3.17 HC3.17 Observing record keeping and reporting L HC3.17 HC3.18 Observing record keeping and reporting L HC3.17 HC3.18 Observing record keeping and reporting L HC3.17 HC3.18 Checking the register for consistency and completeness , L HC3.19 HC3.19 Checking supplies/training manuals.job aides, request forms L HC3.20 HC3.20 Delivering supplies/training manuals.job aides, request forms L		HC3.15	very severe disease in		HC3.15
HC3.17 and reporting IIII HC3.17 and reporting IIIII HC3.17 HC3.18 Checking the register for completeness, IIIII HC3.18 HC3.19 Checking supplies/training manuals, job aides, request forms IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		HC3.16			HC3.16
HC3.18 consistency and completeness , completenetenes , completeness , completeness , completen		HC3.17			HC3.17
HC3.19 manuals, job aides, request forms II HC3.19 HC3.20 Delivering supplies/training manuals, job aides, request forms II HC3.20 HC3.21 Delivering supplies/training manuals, job aides, request forms II HC3.20 HC3.21 Observing client interaction II HC3.21 HC3.22 Conducted postnatal household visits together to observe HEWs skill on checking general danger signs II HC3.22 HC3.23 Providing feedback to the HEWs on their work II HC3.23 HC3.24 Checking if they visited a sick neonate under treatment or that has been treated , II HC3.24 HC3.25 Other, specify Go to HC3.26 II HC3.25 HC3.26 Specify II HC3.27		HC3.18	consistency and		HC3.18
HC3.20 manuals, job aides, request forms HC3.20 HC3.21 Observing client interaction HC3.21 HC3.22 Conducted postnatal household visits together to observe HEWs skill on checking general danger signs HC3.22 HC3.23 Providing feedback to the HEWs on their work HC3.23 HC3.24 Checking if they visited a sick neonate under treatment or that has been treated , HC3.24 HC3.25 Other, specify Go to HC3.26 HC3.25 HC3.26 Specify HC3.26 HC3.26		HC3.19	manuals, job aides, request		HC3.19
HC3.22 Conducted postnatal household visits together to observe HEWs skill on checking general danger signs I HC3.22 HC3.23 Providing feedback to the HEWs on their work I HC3.23 HC3.24 Checking if they visited a sick neonate under treatment or that has been treated , I HC3.24 HC3.25 Other, specify Go to HC3.26 I HC3.25 HC3.26 Specify HC3.26		HC3.20	manuals, job aides, request		HC3.20
HC3.22 household visits together to observe HEWs skill on checking general danger signs HC3.22 HC3.23 Providing feedback to the HEWs on their work I HC3.23 Providing feedback to the HEWs on their work I HC3.24 Checking if they visited a sick neonate under treatment or that has been treated , I HC3.25 Other, specify Go to HC3.26 I HC3.26 Specify HC3.25 HC3.26 Specify HC3.26		HC3.21	Observing client interaction		HC3.21
HC3.23 HEWs on their work HC3.23 HC3.23 HEWs on their work HC3.23 HC3.24 Checking if they visited a sick neonate under treatment or that has been treated , IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		HC3.22	household visits together to observe HEWs skill on checking general danger		HC3.22
HC3.24 sick neonate under treatment or that has been treatment or that has been treated , HC3.24 HC3.24 HC3.25 Other, specify Go to HC3.26 IIII HC3.25 HC3.26 Specify IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		HC3.23			HC3.23
HC3.25 HC3.26 Implementation HC3.26 HC3.26 HC3.26 HC3.27 Have you provided supportive 1 = Yes		HC3.24	sick neonate under treatment or that has been		HC3.24
HC3 27 Have you provided supportive 1 = Yes		HC3.25		I	HC3.25
		HC3.26	Specify		HC3.26
	HC3.27		1		HC3.27

1	one month specifically for CBNC?		

INTERVIEWER:

ASK THE <u>HEAD OF THE HEALTH CENTER</u>. IF NOT AVAILABLE ASK THE <u>U 5 FOCAL PERSON</u> FOR THIS SET OF QUESTIONS

I would now like to ask you some questions about Performance Review and Clinical Mentoring Meeting (PRCMM) meeting. By performance review and refresher training, I mean when health center and health post staff meet together to discuss performance, targets, and ways to achieve targets with respect to ICCM and CBNC?

CDNC:					
HC3.28	In the past 6 months, have the health center and health post staff met together to discuss performance, targets, and ways to achieve targets (PRCMM)?	1 = Yes 2 = No –	GO TO Module 4		HC3.28
			For each:1 = Yes 2	= No	
		HC3.29	Early identification of pregnancy		HC3.29
		HC3.30	Focused ANC		HC3.30
		HC3.31	Promotion of institutional delivery		HC3.31
		HC3.32	Safe and clean delivery		HC3.32
		HC3.33	Immediate newborn care including cord care (chlorohexidine)		HC3.33
Diddhada		HC3.34	Recognition of asphyxia, initial stimulation and resuscitation of newborn babies		HC3.34
on the foll	neeting cover performance and targets owing?	HC3.35	Management of diarrhea among neonate		HC3.35
Read list		HC3.36	Breast feeding among neonate		HC3.36
		HC3.37	Immunization among neonate		HC3.37
		HC3.38	Prevention and management of hypothermia		HC3.38
		HC3.39	Management of pre-term and/or low birth weight neonates		HC3.39
		HC3.40	Management of neonatal/very severe disease		HC3.40
		HC3.41	Register review		HC3.41
		HC3.42	Community level observation		HC3.42
HC3.43	Did that meeting extract data from HEW's 0- 2 month (newborn) registers?	1 = Yes 2 = No			HC3.38
HC3.44	At that meeting, did your health center staff get a chance to offer skills mentoring (on newborn management)	1 = Yes 2 = No			HC3.39

directly to the HEWs under this health		
center?		

MODULE 4. FACILITY, EQUIPMENT, MEDICINES, AND JOB AIDS AT THE HEALTH CENTER

INTERVIEWER: FOR THE FIRST PART OF THIS SECTION, SPEAK WITH THE <u>HEAD OF THE HEALTH</u> <u>CENTER</u>. WALK AROUND THE FACILITY WITH THE RESPONDENT AND PERSONALLY CHECK THE AVAILABILITY OF EQUIPMENT AND STOCK.

READ THE FOLLOWING TO RESPONDENT:

I would now like to ask you questions about the facility, equipment, medicines, and job aids at this health center.

HC4.1	What is the main source of drinking water? Do not prompt	center 2 = Pipeo 3 = Publi 4 = Borel 5 = Prote 6 = Prote 7 = Rainy 8 = Surfa 9 = Open 10 = Unp 11 = Ven 12 = Bott	 1 = Piped connection into health center 2 = Piped connection into yard 3 = Public standpipes 4 = Boreholes 5 = Protected dug wells 6 = Protected springs 7 = Rainwater collection 8 = Surface water 9 = Open dug wells 10 = Unprotected springs 11 = Vendor provided water 12 = Bottled water 13 = Tanker 		HC4.1
HC4.2	Water supply available on day of survey?	1 = Yes 2 = No			HC4.2
			For each:1 = Yes 2 = No		
			Electricity connection or other power sources (example, gas/solar generator)		HC4.3
Does the	health center have:	HC4.4	Electricity supply on day of survey		HC4.4
		HC4.5	Functional sterilizer, cooker or stove		HC4.5
		HC4.6	Functional fridge		HC4.6
		HC4.7	Toilets accessible to facility users		HC4.7
HC4.8	Is there a cell phone signal at the health center?	1 = Yes 2 = No			HC4.8
HC4.9	Is there a cell phone signal at the health center today? Check a phone to ensure there is signal on that day	1 = Yes 2 = No			HC4.9
HC4.10	Does the health center have functional motorized transport for incoming referrals?	1 = Yes 2 = No -	GO TO HC4.15		HC4.10

HC4.11 HC4.12	If YES: How many motorbikes				
HC4.12	are available?	Enter nu	mber of motorbikes		HC4.11
	If YES: How many three- wheelers are available? <i>(e.g.</i> <i>Bajaj)</i>	Enter nu	mber of three-wheelers		HC4.12
HC4.13	If YES: How many cars/ambulances are available?	Enter nu	mber of cars/ambulances		HC4.13
HC4.14	If YES: Is the vehicle for referral in the facility now?	1 = Yes 2 = No			HC4.14
HC4.15	The last time there was an obstetric referral from a health post to the health center which transport was used?	 1 = Facility owned vehicle 2 = Woreda office owned vehicle 3 = Own personal vehicle 4 = Public transport 5 = Non-motorized vehicle 6 = Red Cross (NGO) ambulance 7 = Don't know 			HC4.15
			For each:1 = Yes 2 = No		
		HC4.16	Facility landline/mobile phone		HC4.16
Which means of c speak to another f	ommunication do you have to acility?	HC4.17	Staff member mobile phone		HC4.17
		HC4.18	Phone outside the facility		HC4.18
		HC4.19	Radio		HC4.19
		HC4.20	In person communication	i	HC4.20
		HC4.21	Other		HC4.21
			For each:1 = Yes 2 = No		
		HC4.22	Family health cards		HC4.22
		HC4.23	Vaccination cards		HC4.23
		HC4.24	Stock card/bin card		HC4.24
		HC4.25	HMIS forms (monthly and quarterly reporting)		HC4.25
Does the facility h	ave the following job aids and	HC4.26	Request and re-supply form		HC4.26
forms today?	0,110,000,000,000	HC4.27	Supervision checklist		HC4.27
Walk around the	facility with the respondent	HC4.28	Chart booklet		HC4.28
and personally verify the availability of job aids and forms		HC4.29	Birth Preparedness and Complication Readiness (BPCR) form		HC4.29
		HC4.30	PNC Registration book		HC4.30
		HC4.31	IMNCI registration book for 0- under 2 months		HC4.31
		HC4.32	IMNCI registration book 2 - 59 months		HC4.32
		HC4.33	Pregnant woman and outcome registration book		HC4.33

HC4.34	In the past three months, the last time you received gentamycin (20mg/2ml) to be distributed to the health posts, who delivered it to you?	1 = PFSA 2 = Woreda Health Office 3 = NGO (ex. L10K, IFHP, Save the Children 4 = UNICEF 5 = Other 6 = Have not received in the last 3	II	HC4.34
HC4.35	In the past three months, the last time you received the gentamycin did you receive it before stock-out?	1 = Yes 2 = No		HC4.35
HC4.36	In the past three months, the last time you received amoxicillin syrup (125mg/5ml) to be distributed to the health posts, who delivered it to you?	1 = PFSA 2 = Woreda Health Office 3 = NGO (ex. L10K, IFHP, Save the Children) 4 = UNICEF 5 = Other 6 = Have not received in the last 3 months – GO TO HC4.38		HC4.36
HC4.37	In the past three months, the last time you received the amoxicillin syrup (125 mg/5ml) , did you receive it before stock-out?	1 = Yes 2 = No	II	HC4.37
HC4.38	In the past three months, the last time you received amoxicillin tab, 125 mg (dispersible) to be distributed to the health posts, who delivered it to you?	1 = PFSA 2 = Woreda Health Office 3 = NGO (ex. L10K, IFHP, Save the Children) 4 = UNICEF 5 = Other 6 = Have not received in the last 3 months – GO TO HC4.40		HC4.38
HC4.39	In the past three months, the last time you received the amoxicillin tab, 125 mg (dispersible), did you receive it before stock-out?	1 = Yes 2 = No	II	HC4.39
HC4.40	In the past three months, the last time you received amoxicillin tab, 250 mg (dispersible) to be distributed to the health posts, who delivered it to you?	1 = PFSA 2 = Woreda Health Office 3 = NGO (ex. L10K, IFHP, Save the Children) 4 = UNICEF 5 = Other 6 = Have not received in the last 3 months – GO TO HC4.42		HC4.40
HC4.41	In the past three months, the last time you received the amoxicillin tab, 250 mg (dispersible), did you receive it before stock-out?	1 = Yes 2 = No		HC4.41
HC4.42	In the past three months, the last time you received chlorhexidine to be distributed to the health posts, who delivered it to you?	1 = PFSA 2 = Woreda Health Office 3 = NGO (ex. L10K, IFHP, Save the Children) 4 = UNICEF 5 = Other 6 =Have not received in the last 3 months – GO TO HC4.44		HC4.42

HC4.44 Vitamin k 1 mg HC4.44 HC4.45 Vitamin A 200,000 IU HC4.45 HC4.46 Vitamin A 100,000 IU HC4.46 HC4.47 TTC eye ointment HC4.47 HC4.48 Chlorohexidine HC4.48 HC4.49 Gentamycin 20 mg/2ml, box of 50 amp HC4.49 HC4.50 Gentamycin 80mg/2ml HC4.50 HC4.50 HC4.51 Amoxicillin suspension (125 mg/5 ml) HC4.51 HC4.52 Amoxicillin tab 250 (dispersible) HC4.52	HC4.43	In the past three months, the last time you received chlorhexidine, did you receive it before stock-out?	1 = Yes 2 = No	For each 4 Mag 2 No.		HC4.43
Does the facility have the following medicines today? HC4.45 Vitamin A 200,000 IU I HC4.45 HC4.46 Vitamin A 100,000 IU I HC4.47 TTC eye ointment I HC4.48 HC4.47 TTC eye ointment I HC4.48 HC4.49 Gentamycin 20 mg/2ml I HC4.45 HC4.49 Gentamycin 80mg/2ml HC4.50 HC4.51 Amoxicillin tab 150 mg I HC4.52 HC4.53 Amoxicillin tab 150 mg I HC4.53 HC4.54 Amoxicillin tab 150 mg I HC4.54 HC4.54 HC4.55 Uterotonics I HC4.54 HC4.55 Uterotonics I HC4.55 HC4.55 HC4.56 HC4.55 HC4.56 HC4.56<				For each:1 = Yes 2 = No		
Does the facility have the following medicines today? HC4.46 Vitamin A 100.000 IU I HC4.47 TCC eye ointment I HC4.47 TCC eye ointment I HC4.48 HC4.48 Chlorohexidine I HC4.49 HC4.49 HC4.49 box of 50 amp I HC4.49 Gentamycin 80mg/2ml HC4.50 HC4.51 HC4.50 Gentamycin 80mg/2ml I HC4.51 Amoxicillin tab 250 I HC4.52 Maxicillin tab 250 I I HC4.54 Amoxicillin tab 150 mg I HC4.54 HC4.51 Amoxicillin tab 150 mg I HC4.54 HC4.56 HC4.53 Maxicillin tab 150 mg I HC4.54 HC4.56 HC4.54 HC4.56 HC4.52 Amoxicillin tab 150 mg I HC4.54 HC4.56 HC4.56 HC4.50 Viterotnics I HC4.54 HC4.56 HC4.56 HC4.56 HC4.54 Ampicillin powder for inj. I HC4.56 HC4.56 HC4.56 HC4.60 HC4.56						
HC4.47 TTC eye ointment HC4.47 HC4.48 Chlorohexidine III HC4.48 HC4.49 Gentamycin 20 mg/2ml, box of 50 amp IIII HC4.49 HC4.50 Gentamycin 80mg/2ml HC4.50 HC4.50 HC4.51 AmoxicIllin tab spension (125 mg/5 ml) IIII HC4.51 HC4.52 AmoxicIllin tab 150 mg (dispersible) IIIII HC4.52 MC4.53 AmoxicIllin tab 150 mg (dispersible) IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	Ļ					
Does the facility have the following medicines today? HC4.48 Chlorohexidine III HC4.48 HC4.49 Gentamycin 20 mg/2ml IIII HC4.49 box of 50 amp IIII HC4.49 box of 50 amp IIIIII HC4.51 Amoxicillin suspension IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII						
HC4.49 Gentamycin 20 mg/2ml, box of 50 amp III HC4.49 HC4.50 Gentamycin 20 mg/2ml, box of 50 amp III HC4.50 HC4.50 Gentamycin 20 mg/2ml, tC4.51 IIII HC4.50 HC4.51 AmoxicIIIn suspension (125 mg/5 ml) IIII HC4.51 HC4.52 AmoxicIIIn tab 250 IIII HC4.52 Maik around the facility with the respondent and personally check the availability of medicine HC4.52 AmoxicIIIn suspension (dispersible) IIII HC4.54 HC4.55 Uterotonics IIII HC4.56 HC4.56 HC4.56 HC4.56 Viterotonics IIII HC4.56 HC4.56 HC4.56 HC4.56 Paracetamol III HC4.57 HC4.58 HC4.59 HC4.59 HC4.50 Folate III HC4.56 HC4.59 HC4.59 HC4.59 HC4.50 Folate III HC4.59 HC4.59 HC4.59 HC4.59 HC4.51 Anthielminths IIII HC4.59 HC4.60 Folate IIII HC4.61						
Does the facility have the following medicines HC4.49 box of 50 amp L HC4.79 HC4.50 Gentamycin 80mg/2ml HC4.50 HC4.51 HC4.50 HC4.51 Amoxicillin suspension (125 mg/5 ml) L HC4.51 HC4.52 Amoxicillin tab 250 (dispersible) L HC4.52 Maxicillin tab 250 (dispersible) L HC4.53 HC4.53 Maxicillin tab 250 (dispersible) L HC4.54 HC4.53 Maxicillin tab 250 (dispersible) L HC4.54 HC4.53 Maxicillin tab 250 (dispersible) L HC4.54 HC4.54 HC4.55 Uterotonics L HC4.54 HC4.55 Uterotonics L HC4.56 HC4.55 Uterotonics L HC4.56 HC4.56 Paracetamol L HC4.57 HC4.59 Iron L HC4.56 HC4.61 Antihelminths L HC4.62 HC4.62 BOito vaccine L HC4.62 HC4.62 Polio vaccine L			HC4.48			HC4.48
Does the facility have the following medicines today? HC4.51 Amoxicillin subsension (125 mg/5 m)) I				box of 50 amp		
Does the facility have the following medicines HC4.51 (125 mg/5 ml) III HC4.51 Walk around the facility with the respondent and personally check the availability of medicine HC4.53 Amoxicilin tab 150 mg (dispersible) IIII HC4.53 HC4.54 Amoxicilin tab 150 mg (dispersible) IIIII HC4.54 HC4.55 HC4.55 Walk around the facility with the respondent and personally check the availability of medicine HC4.54 Amoxicilin tab 150 mg (dispersible) HC4.54 HC4.55 Uterotonics IIIIII HC4.54 HC4.55 HC4.56 Uterotonics IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			HC4.50			HC4.50
Does the facility have the following medicines today? HC4.32 (dispersible) IIII HC4.32 Walk around the facility with the respondent and personally check the availability of medicine HC4.53 Amoxicillin tab 150 mg (dispersible) HC4.54 HC4.54 HC4.55 Uterotonics IIII HC4.54 HC4.55 HC4.55 HC4.54 Ampicillin powder for inj. 500 mg IIIII HC4.54 HC4.55 HC4.55 Uterotonics IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			HC4.51	(125 mg/5 ml)		HC4.51
today? HC4.53 Amoxicillin tab 150 mg (dispersible) HC4.53 Walk around the facility with the respondent and personally check the availability of medicine HC4.54 Ampicillin powder for inj, 500 mg HC4.54 HC4.55 Uterotonics Image:	Does the facility	have the following medicines	HC4.52			HC4.52
and personally check the availability of medicine HC4.54 500 mg HC4.54 HC4.54 become between the control of medicine HC4.55 HC4.55 Uterotonics HC4.55 HC4.56 Uterotonics IIII HC4.56 HC4.56 antibiotics for premature rapture of membrane (PROM) IIIII HC4.56 HC4.57 Magnesium Sulfate (MgS04) IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	today?		HC4.53			HC4.53
HC4.55 Uterotonics I	and personally		HC4.54			HC4.54
HC4.56 rapture of membrane (PROM) HC4.56 HC4.56 HC4.57 Magnesium Sulfate (MgS04) I HC4.57 HC4.57 Magnesium Sulfate (MgS04) I HC4.57 HC4.58 Paracetamol I HC4.58 HC4.59 Iron I HC4.59 HC4.60 Folate I HC4.61 HC4.62 BCG I HC4.62 HC4.63 Polio vaccine I HC4.63 MC4.63 Polio vaccine I HC4.63 Does the facility have the following functional equipment today? HC4.64 Ambu bag (full size 0 and 1)/Face mask HC4.65 HC4.65 Blood pressure cuff I HC4.66 HC4.66 Stethoscope I HC4.66 HC4.66 Stethoscope I HC4.66 HC4.68 Drape I HC4.68 HC4.69 Washable mackintosh I HC4.69 HC4.69 Washable mackintosh I HC4.67	medicine		HC4.55	Uterotonics		HC4.55
HC4.57 (MgS04) HC4.57 HC4.58 Paracetamol HC4.58 HC4.59 Iron HC4.59 HC4.60 Folate HC4.60 HC4.61 Antihelminths HC4.61 HC4.62 BCG _ HC4.62 HC4.63 Polio vaccine _ HC4.63 Ask the MCH Head for the questions below HC4.63 HC4.63 HC4.64 Does the facility have the following functional equipment today? HC4.65 Blood pressure cuff _ HC4.66 HC4.68 Stethoscope _ HC4.67 HC4.66 HC4.67 Walk around the facility with the respondent and personally verify k the availability of equipment. HC4.68 Drape _ HC4.67 HC4.69 Washable mackintosh _ HC4.69 HC4.69 HC4.69 HC4.67			HC4.56	rapture of membrane		HC4.56
HC4.59 Iron I HC4.59 HC4.60 Folate I HC4.60 HC4.61 Antihelminths I HC4.61 HC4.62 BCG I HC4.62 HC4.63 Polio vaccine I HC4.63 For each:1 = Yes2 = No Ask the MCH Head HC4.64 Ambu bag (full size 0 and 1)/Face mask I HC4.64 Does the facility have the following functional equipment today? HC4.65 Blood pressure cuff I HC4.66 HC4.66 Stethoscope I HC4.67 HC4.68 HC4.68 HC4.68 Drape I HC4.68 HC4.69 HC4.69 HC4.69 HC4.69 Washable mackintosh I HC4.69 HC4.67 HC4.69 HC4.67			HC4.57			HC4.57
HC4.60 Folate I HC4.60 HC4.61 Antihelminths I I HC4.61 HC4.62 BCG I I HC4.62 HC4.63 Polio vaccine I I HC4.63 Ask the MCH Head for the questions below For each:1 = Yes2 = No Image: MC4.64 Ambu bag (full size 0 and 1)/Face mask I I HC4.64 HC4.65 Blood pressure cuff I I HC4.65 HC4.66 Stethoscope I I HC4.66 HC4.66 Drape I I HC4.69 HC4.69 Washable mackintosh I I HC4.69 HC4.61 Drape I I HC4.69 HC4.62 Washable mackintosh I I I HC4.63 Drape I I HC4.69			HC4.58	Paracetamol		HC4.58
HC4.61 Antihelminths I HC4.61 HC4.62 BCG I HC4.62 HC4.63 Polio vaccine I HC4.63 HC4.63 Polio vaccine I HC4.63 Ask the MCH Head for the questions below I HC4.63 Ask the MCH Head for the questions below I HC4.64 Mark around the facility have the following functional equipment today? HC4.65 Blood pressure cuff I HC4.65 Walk around the facility with the respondent and personally verify k the availability of equipment. HC4.68 Drape I HC4.69 HC4.69 Washable mackintosh I HC4.69 HC4.69 HC4.69			HC4.59	Iron		HC4.59
HC4.62 BCG I HC4.62 HC4.63 Polio vaccine I HC4.63 Ask the MCH Head for the questions below I HC4.63 For each:1 = Yes2 = No Does the facility have the following functional equipment today? HC4.64 Ambu bag (full size 0 and 1)/Face mask I HC4.65 HC4.65 Blood pressure cuff I HC4.66 HC4.66 HC4.66 Stethoscope I HC4.66 HC4.68 Drape I HC4.68 HC4.69 Washable mackintosh I HC4.69 HC4.69 Washable mackintosh I HC4.69			HC4.60	Folate		HC4.60
HC4.63 Polio vaccine IIII HC4.63 Ask the MCH Head for the questions below For each:1 = Yes2 = No HC4.64 Ambu bag (full size 0 and 1)/Face mask IIIII HC4.64 Does the facility have the following functional equipment today? HC4.64 Ambu bag (full size 0 and 1)/Face mask IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			HC4.61	Antihelminths		HC4.61
Ask the MCH Head for the questions below For each:1 = Yes2 = No Does the facility have the following functional equipment today? HC4.64 Ambu bag (full size 0 and 1)/Face mask HC4.64 HC4.65 Blood pressure cuff I HC4.65 HC4.66 Stethoscope I HC4.66 HC4.67 Examination couch I HC4.67 HC4.68 Drape I HC4.68 HC4.69 Washable mackintosh I HC4.69 HC4.70 Dustbin I HC4.70 HC4.71 Sharps container I HC4.71			HC4.62	BCG		HC4.62
Big For each:1 = Yes2 = No Does the facility have the following functional equipment today? HC4.64 Ambu bag (full size 0 and 1)/Face mask I HC4.65 Walk around the facility with the respondent and personally verify k the availability of equipment. HC4.68 Drape I HC4.68 HC4.69 Washable mackintosh I HC4.69 HC4.70 HC4.70 HC4.71 Sharps container I HC4.71			HC4.63	Polio vaccine		HC4.63
Does the facility have the following functional equipment today? HC4.64 Ambu bag (full size 0 and 1)/Face mask I HC4.64 Walk around the facility with the respondent and personally verify k the availability of equipment. HC4.66 Stethoscope I HC4.67 HC4.69 Washable mackintosh I HC4.69 HC4.69 HC4.70 HC4.70 HC4.71 Sharps container I HC4.71 Sharps container I HC4.71		Ask the <u>MCH Head</u> f	or the que	stions below		
Does the facility have the following functional equipment today?IIIC4.641)/Face maskIIIIIIIIC4.64HC4.65Blood pressure cuffIIIIIHC4.65HC4.66StethoscopeIIIIIIHC4.66HC4.67Examination couchIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII				For each:1 = Yes2	= No	
Does the facility have the following functional equipment today? Walk around the facility with the respondent and personally verify k the availability of equipment. HC4.66 Stethoscope HC4.66 HC4.67 Examination couch HC4.67 HC4.68 Drape HC4.68 HC4.69 Washable mackintosh HC4.69 HC4.70 Dustbin HC4.70 HC4.71 Sharps container HC4.71			HC4.64			HC4.64
equipment today?HC4.66Stethoscope HC4.66Walk around the facility with the respondent and personally verify k the availability of equipment.HC4.67Examination couch HC4.67HC4.68Drape HC4.68HC4.69Washable mackintosh HC4.69HC4.70Dustbin HC4.70HC4.71Sharps container HC4.71	Doos the feelity	have the following functional	HC4.65	Blood pressure cuff		HC4.65
Walk around the facility with the respondent and personally verify k the availability of equipment.HC4.67Examination couch HC4.67HC4.68Drape HC4.68HC4.69Washable mackintosh HC4.69HC4.70Dustbin HC4.70HC4.71Sharps container HC4.71			HC4.66	Stethoscope		HC4.66
and personally verify k the availability of equipment. HC4.68 Drape HC4.68 HC4.69 Washable mackintosh HC4.69 HC4.70 Dustbin HC4.70 HC4.71 Sharps container HC4.71			HC4.67	Examination couch		HC4.67
equipment. HC4.69 Washable mackintosh HC4.69 HC4.70 Dustbin HC4.70 HC4.71 Sharps container HC4.71			HC4.68	Drape		HC4.68
HC4.71 Sharps container HC4.71			HC4.69	Washable mackintosh		HC4.69
			HC4.70	Dustbin		HC4.70
HC4.72 Chlorine bleach HC4.72			HC4.71	Sharps container		HC4.71
			HC4.72	Chlorine bleach		HC4.72

		HC4.73	Bucket for decontamination solution		HC4.73
		HC4.74	Contaminated waste container		HC4.74
		HC4.75	Soap and towel or handrub		HC4.75
		HC4.76	Alcohol-based hand rub		HC4.76
		HC4.77	Suction bulb for newborn care		HC4.77
		HC4.78	Warmer for newborn care		HC4.78
		HC4.79	Bed (for KMC)		HC4.79
		HC4.80	Clinical Thermometer, digital	II	HC4.80
		HC4.81	Infant scale		HC4.81
		HC4.82	Watch/ clock /mobile phone clock	II	HC4.82
		HC4.83	Tape measure		HC4.83
		HC4.84	Water for injection		HC4.84
		HC4.85	NG tube (Small)		HC4.85
		HC4.86	IV cannula (Butterfly)		HC4.86
		HC4.87	IV fluid 5% DW		HC4.87
		HC4.88	IV fluid 5% NS		HC4.88
		HC4.89	Surgical glove		HC4.89
		HC4.90	Clean glove		HC4.90
	-	HC4.91	Syringe with needle		HC4.91
HC4.92	When referring to Health Posts for maternal and newborn care, do you use referral forms? Probe: Check to see an official woreda/zonal/regional referral form	1 = Yes 2 = No			HC4.92
HC4.93	Do you receive any referral forms for maternal and newborn care for cases referred from Health Posts?	1 = Yes 2 = No			HC4.93
HC4.94	Do you conduct pregnant women conference in the community?	1 = Yes 2 = No G	O TO MODULE 5		HC4.94
HC4.95	How regularly do you conduct the pregnant women's conference?	3 = Once	a week / two weeks a month other month		HC4.95
HC4.96	Have you, had a planning meeting with a HEWs and 1-30 WDA leaders in the last 3 months?	1 = Yes 2 = No			HC4.96
HC4.97	How many times did you have a meeting as a group in the last 3 months?	Enter nur Enter 99	mber if don't know		HC4.97

MODULE 5. REGISTER REVIEW BY THE DATA COLLECTOR

INTERVIEWER:

For ANC and PNC data ask to see the registers at the MCH department and talk to the MCH focal person

For Newborn illness ask to see the IMNCI register in the <u>Under 5 department</u> and talk to Under 5 focal person

Collect information for last quarter preceding the date of the interview

Write number for each. Write 999 if not available

I would now like to look at your registers to extract information about the services provided.

	ata on expected number of pregnancies for the last quarter from MCH departed and ANC data from ANC register in MCH department	rtment wall	
HC5.1	Expected number of pregnancies in the health center catchment area in the last 3 months?		HC5.1
HC5.2	Number of women receiving 1 st ANC visit at the health center		HC5.2
HC5.3	Number of women receiving 2 nd ANC visit at the health center		HC5.3
HC5.4	Number of women receiving 3 rd ANC visit at the health center		HC5.4
HC5.5	Number of women receiving 4 th ANC visit at the health center		HC5.5
Obtain d	ata on expected facility deliveries for the last quarter from MCH departmen information from the delivery register in MCH department		nd delivery
HC5.6	Expected number of facility births in the health center in the last three months?		HC5.6
HC5.7	Number of total deliveries in the health center [Include all birth outcomes-still and live]		HC5.7
HC5.8	Number of live births in the health center		HC5.8
HC5.9	Number of still births in the health center	· · · · · · · · · · · · · · · · · · ·	HC5.9
	Obtain data for the following from PNC register in MCH department		
HC5.10	Number receiving 1 st PNC visits for the mother at the health center		HC5.10
HC5.11	Number receiving 2 nd PNC visits for the mother at the health center		HC5.11
HC5.12	Number receiving 3 rd PNC visits for the mother at the health center		HC5.12
HC5.13	Number receiving 1 st PNC visits for the child at the health center		HC5.13

				[
HC5.14	Number receiving 2 nd PNC visits for the	child at the health center		HC5.14
HC5.15	Number receiving 3 rd PNC visits for the o	child at the health center		HC5.15
HC5.16	Number of live births with birth weight <2 health center	2500 grammes (or <2.5kg) in the		HC5.16
HC5.17	Number of newborns treated for asphyxi in the health center	a,- initial stimulation, or resuscitation		HC5.17
HC5.18	Number of pre-term and/or low birth weig center – Kangaroo-Mother-Care (KMC)	ght neonates treated at the health		HC5.18
Ob	tain data for the following from 0-2 IMN	ICI register books in the Under 5 dep	artment	
HC5.19	Number of sick newborns from 0-2 mont last 3 months	hs seen at the health center in the		HC5.19
	of the newborn less than 2 months old record review.	seen at the health center (recorded	above) complet	e a
Record 1				
HC5.20	Name of child	First name		HC5.20
HC5.21	Address of child	Keble name		HC5.21
HC5.22	Date Seen Gregorian calendar	 / / (DD/MM/YY)		HC5.22
HC5.23	Age of baby at the time of consultation in weeks Record age of baby in weeks ranging from 1-8 weeks	weeks		HC5.23
HC5.24	Gender of baby	1 = Male 2 = Female		HC5.24
HC5.25	Weight on the day of consultation in grams If weight is given in KGs record in grams	grams If unknown 9999		HC5.25
HC5.26	<i>e.g 3.5 KG = 3500 grams.</i> Birth Weight (Written for those less than 7 days)	1. < 1,500 grams 2. 1,500 - < 2,500 grams 3. >/= 2,500 grams 4. Unknown		HC5.26

HC5.27	Gestational Age (in weeks)	2. 3 3. >	: 32 weeks 2 – 36 weeks /= 37 weeks Inknown		HC5.27
HC5.28	Temperature on the day of consultation in degree Celsius Record temperature to one decimal place e.g. 34.3 ℃		_ . ℃ If unknown 99.9		HC5.28
HC5.29	Respiratory Rate per minute on the day of consultation		 If unknown 999		HC5.29
			For each:1 = Yes 2 = No		
		HC5.30	Reduced feeding/unable to feed		HC5.30
		HC5.31	Convulsion		HC5.31
		HC5.32	Severe Chest in-drawing	,, 	HC5.32
		HC5.33	Vomiting	,,	HC5.33
		HC5.34	Fever	,,	HC5.34
		HC5.35	Diarrhea		HC5.35
		HC5.36	Fast breathing		HC5.36
		HC5.37	Coughing		HC5.37
		HC5.38	Grunting		HC5.38
		HC5.39	Skin pustules		HC5.39
		HC5.40	Yellow palms and soles		HC5.40
		HC5.41	Yellow eyes and skin		HC5.41
Signs and consultat	d symptoms of the newborn at the time of ion?	HC5.42	Red umbilicus or draining pus		HC5.42
	all that apply	HC5.43	Movement only when stimulated or no movement even when stimulated		HC5.43
		HC5.44	Lethargic/Unconscious		HC5.44
		HC5.45	Bulging fontanelle		HC5.45
		HC5.46	Restless/Irritable		HC5.46
		HC5.47	Sunken eyes		HC5.47
		HC5.48	Skin pinch goes back slowly		HC5.48
		HC5.49	Skin pinch goes back very slowly		HC5.49
		HC5.50	Diarrhea lasting 14 days or more		HC5.50
		HC5.51	Blood in the stool		HC5.51
		HC5.52	Not suckling well		HC5.52
		HC5.53	Less than 8 breast feeds in 24 hours		HC5.53
		HC5.54	Switching to another breast before one is emptied		HC5.54
		HC5.55	Not breast feeding more		HC5.55

HC5.56 Poor positioning during breast leading I HC5.56 HC5.57 Not well attached during breast leading I HC5.57 HC5.58 Raceives other foods or drinks (even water) I HC5.59 HC5.59 Low weight for age I HC5.59 HC5.60 Signs and symptoms not given I HC5.61 HC5.61 Other. Go to HC5.61a HC5.62 HC5.62 Very Preterm and/or very low birth weight I HC5.62 HC5.63 Preterm and/or very low birth weight I HC5.63 HC5.64 VSD I HC5.62 HC5.63 Preterm and/or low birth weight I HC5.63 HC5.64 VSD I HC5.64 HC5.65 Local bacterial infection I HC5.65 HC5.64 VSD I HC5.64 HC5.65 Soure Dehydration I HC5.65 HC5.66 Severe Dehydration I HC5.65 HC5.67 Some Dehydration I HC5.73 <t< th=""><th></th><th></th><th></th><th>frequently and longer during sickness</th><th></th><th></th></t<>				frequently and longer during sickness		
HC3.37 breast feeding breast feedin breast feedin			HC5.56	Poor positioning during		HC5.56
HC5.58 drinks (even water) Image in the image. Therealease in the image inthe image in the image in the			HC5.57			HC5.57
HC5.60 Thrush (ulcers or white patches in mouth) Image: mouth HC5.60 HC5.61 Other. Go to HC5.61a HC5.61 HC5.61 Other. Go to HC5.61a HC5.61 HC5.61 Other. Go to HC5.61a HC5.61 HC5.62 Specify HC5.62 HC5.63 Specify HC5.62 HC5.64 VSD Image: mode of the top of			HC5.58			HC5.58
No.5.00 patches in mouth) Impact (No.5.00) HC5.60a Signs and symptoms not given Impact (No.5.61) HC5.60a HC5.61 Other. Go to HC5.61a HC5.61a HC5.61 Other. Go to HC5.61a HC5.61a HC5.62 Very Pretern and/or very low birth weight Impact (No.5.62) HC5.62 Very Pretern and/or very low birth weight Impact (No.5.62) HC5.63 Pretern and/or low birth weight Impact (No.5.62) HC5.64 VSD Impact (No.5.62) HC5.65 Local bacterial infection Impact (No.5.62) HC5.66 Severe Dehydration Impact (No.5.62) HC5.67 Some Dehydration Impact (No.5.62) HC5.68 No Dehydration Impact (No.5.62) HC5.71 Jaundice Impact (No.5.72) HC5.72 Severe Persistent Diarrhea Impact (No.5.74) HC5.73 Malaria Impact (No.5.74) HC5.74 Gassification not given Impact (No.5.74) HC5.74 Classification not given Impact (No.5.74) HC5.74 Feeding probl			HC5.59	Low weight for age		HC5.59
HC5.00a given HC3.00a given HC3.00a R13.00a HC5.61 Other. Go to HC5.61a HC5.61 HC5.61 HC5.61 HC5.61 HC5.61 HC5.61 Specify			HC5.60			HC5.60
HC5.61 a Specify			HC5.60a			HC5.60a
a Specify			HC5.61	Other. Go to HC5.61a		HC5.61
HC5.62 Very Preterm and/or very low birth weight HC5.62 HC5.63 Preterm and/or low birth weight HC5.63 HC5.64 VSD HC5.63 HC5.65 Local bacterial infection HC5.66 HC5.66 Severe Dehydration HC5.67 HC5.67 Some Dehydration HC5.68 HC5.68 No Dehydration HC5.68 HC5.70 Dysentery HC5.70 HC5.71 Jaundice HC5.71 HC5.73 Malaria HC5.73 HC5.74 Classification not given HC5.75 HC5.75 Other, specifyGOTOHC 5.76 HC5.75 HC5.75 HC5.76 SpecifyGOTOHC 5.76 HC5.77 HC5.77 HC5.78 Mas newborn referred to a higher facility? 1 = Yes - GO TO HC5.80 2 = No				Specify		HC5.61a
HC3.62 low birth weight Image: classification of the newborn HC5.63 Preterm and/or low birth weight Image: classification of the newborn Record all that apply HC5.65 Local bacterial infection Image: classification of the newborn HC5.66 Severe Dehydration Image: classification of the newborn Record all that apply HC5.66 Severe Dehydration Image: classification of the newborn HC5.67 Some Dehydration Image: classification of the newborn HC5.70 Dysentery Image: classification of the newborn HC5.70 Dysentery Image: classification of the newborn HC5.71 Jaundice Image: classification not given Image: classification classification not given Image: classification not given I				For each:1 = Yes 2 = No		
HC5.63 weight I			HC5.62			HC5.62
HC5.65 Local bacterial infection _ HC5.65 Bisease classification of the newborn HC5.66 Severe Dehydration _ HC5.66 HC5.67 Some Dehydration _ HC5.66 HC5.67 Some Dehydration _ HC5.68 HC5.69 Severe Persistent Diarrhea _ HC5.69 HC5.70 Dysentery _ HC5.70 HC5.70 Dysentery _ HC5.70 HC5.71 Jaundice _ HC5.70 HC5.71 Jaundice _ HC5.71 HC5.73 Malaria _ HC5.74 HC5.73 Malaria _ HC5.74 Feeding problem or low weight _ HC5.74 HC5.75 Other, specifyGO TO HC HC5.75 HC5.76 HC5.76 HC5.76 HC5.76 Specify			HC5.63			HC5.63
Disease classification of the newborn HC5.66 Severe Dehydration _ HC5.66 Record all that apply HC5.67 Some Dehydration _ HC5.67 HC5.68 No Dehydration _ HC5.68 HC5.69 Severe Persistent Diarrhea _ HC5.69 HC5.70 Dysentery _ HC5.69 HC5.70 Dysentery _ HC5.70 HC5.71 Jaundice _ HC5.70 HC5.71 Jaundice _ HC5.72 HC5.73 Malaria _ HC5.73 Malaria _ HC5.74 HC5.74 Feeding problem or low weight _ HC5.75 HC5.76 HC5.76 HC5.75 Other, specifyGO TO HC HC5.76 HC5.76 HC5.77 HC5.76 HC5.78 Was newborn referred to a higher facility? 1 = Yes - GO TO HC5.80 _ HC5.77 HC5.79 If newborn had VSD and was treated at health center was gentamycin treatment completed? 1 = Yes ACT HC5.79 HC5.79			HC5.64	VSD		HC5.64
Disease classification of the newborn HC5.67 Some Dehydration HC5.67 Record all that apply HC5.68 No Dehydration HC5.68 HC5.69 Severe Persistent Diarrhea HC5.69 HC5.70 Dysentery HC5.70 HC5.71 Jaundice HC5.71 HC5.72 Severe Parsistent Diarrhea HC5.70 HC5.71 Jaundice HC5.72 HC5.72 Severe Jaundice HC5.72 HC5.73 Malaria HC5.73 HC5.74 Feeding problem or low weight HC5.74 HC5.75 Other, specifyGO TO HC S.76 HC5.75 HC5.76 Specify HC5.76 HC5.75 HC5.76 Specify HC5.76 HC5.77 HC5.78 Was newborn referred to a higher facility? 1= Yes - GO TO HC5.80 2 = No			HC5.65	Local bacterial infection		HC5.65
Disease classification of the newborn HC5.68 No Dehydration HC5.68 Record all that apply HC5.69 Severe Persistent Diarrhea HC5.69 HC5.70 Dysentery HC5.70 HC5.70 HC5.71 HC5.71 HC5.71 HC5.71 HC5.71 HC5.72 HC5.72 HC5.72 HC5.73 Malaria HC5.73 HC5.73 Malaria HC5.74 HC5.73 HC5.74 HC5.74 HC5.74 HC5.74 HC5.74 HC5.74 HC5.74 HC5.74 HC5.75 HC5.74 HC5.75 HC5.74 HC5.75 HC5.75 HC5.75 HC5.75 HC5.75 HC5.76 HC5.75 HC5.76 HC5.75 HC5.76 HC5.77 HC5.76 HC5.77 HC5.77 HC5.77 HC5.77 HC5.77 HC5.77 HC5.78 HC5.79			HC5.66	Severe Dehydration		HC5.66
Record all that apply HC5.68 No Dehydration I	Disease	lassification of the newborn	HC5.67	Some Dehydration		HC5.67
HC5.70 Dysentery HC5.70 HC5.71 Jaundice HC5.71 HC5.72 Severe Jaundice HC5.72 HC5.73 Malaria HC5.73 HC5.74 Feeding problem or low weight HC5.74 HC5.74 Feeding problem or low weight HC5.74 HC5.74 Classification not given HC5.75 HC5.76 Specify -GO TO HC HC5.76 HC5.76 Specify -GO TO HC HC5.76 HC5.78 Was newborn referred to a higher facility? 1 = Yes - GO TO HC5.80 2 = No HC5.78 HC5.79 If newborn had VSD and was treated at health center was gentamycin treatment completed? 1 = Yes 2 = No HC5.79			HC5.68	No Dehydration		HC5.68
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Image: I			HC5.72	Severe Jaundice		HC5.72
HC5.74 weight I			HC5.73	Malaria		HC5.73
HC5.75 Other, specifyGO TO HC HC5.75 HC5.76 Specify HC5.76 Treatment given to the newborn (if treatment not provided write none) HC5.77 Specify			HC5.74			HC5.74
HC5.75 5.76 HC5.75 HC5.75 HC5.76 Specify HC5.76 Treatment given to the newborn (if treatment not provided write none) HC5.77 Specify HC5.77 HC5.78 Was newborn referred to a higher facility? 1 = Yes - GO TO HC5.80 2 = No I HC5.78 HC5.79 If newborn had VSD and was treated at health center was gentamycin treatment completed? 1 = Yes 3 = Not VSD case I HC5.79			HC5.74a	Classification not given		i.74a
Treatment given to the newborn (if treatment not provided write none) HC5.77 Specify			HC5.75			HC5.75
(if treatment not provided write none)If control operationHC5.77HC5.77HC5.78Was newborn referred to a higher facility?1 = Yes - GO TO HC5.80 2 = No HC5.78HC5.79If newborn had VSD and was treated at health center was gentamycin treatment completed?1 = Yes 2 = No HC5.79			HC5.76	Specify		HC5.76
(if treatment not provided write none)If control operationHC5.77HC5.77HC5.78Was newborn referred to a higher facility?1 = Yes - GO TO HC5.80 2 = No HC5.78HC5.79If newborn had VSD and was treated at health center was gentamycin treatment completed?1 = Yes 2 = No HC5.79						
HC5.78 facility? 2 = No I HC5.78 HC5.79 If newborn had VSD and was treated at health center was gentamycin treatment completed? 1 = Yes IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			HC5.77	Specify		HC5.77
HC5.79at health center was gentamycin treatment completed?2 = No 3 = Not VSD case HC5.79	HC5.78	•		- GO TO HC5.80		HC5.78
Outcome of the newborn treatment East each 1 - Yes 2 - No	HC5.79	at health center was gentamycin	2 = No	'SD case		HC5.79
Culcome of the newborn treatment For each: I = res z = NO	Outcome	of the newborn treatment		For each:1 = Yes 2	= No	

HC5.80	Health improved/healed		HC5.80
HC5.81	Died		HC5.81
HC5.82	Worsened		HC5.82
HC5.83	Same		HC5.83
HC5.84	Unknown		HC5.84

MODULE 6. AVAILABILITY OF DIAGNOSTICS

INTERVIEWER: Ask laboratory department. Walk around the facility with the respondent and personally check the availability of laboratory equipment.

For drugs and test kits the definition of availability is if the drugs is available and have not expired. Therefore, the response should be a "yes". If the drug is not available or expired the response should be a "No"

HC6.1	Are pregnancy test kits available at this facility today?	1 = Yes 2 = No		HC6.1
HC6.2	Are proteinuriatest kits available at this facility today?	1 = Yes 2 = No		HC6.2
HC6.3	Does the facility have HIV rapid test- KHB in stock today?	1 = Yes 2 = No		HC6.3
HC6.4	Does the facility have HIV rapid test- Statpak in stock today?	1 = Yes 2 = No		HC6.4
HC6.5	Does the facility have HIV rapid test- Unigold in stock today?	1 = Yes 2 = No		HC6.5
HC6.6	Does the facility have syphilis RPR/VDRA syphilis tests in stock today?	1 = Yes 2 = No		HC6.6
HC6.7	Does the facility have syphilis rapid tests in stock today?	1 = Yes 2 = No		HC6.7
HC6.8	Does the facility have anemia test kit today? e .g.Haemoglobin, Hematocrit	1 = Yes 2 = No		HC6.8
HC6.9	Does the facility offer glucose level tests to assess gestational diabetes as part of ANC today?	1 = Yes 2 =No		HC6.9

MODULE 7. Additional Questions

INTERVIEWER: This is a question on trying to find out how the health center defines the 1st PNC. Ask the MCH department head

	1			
C7.1	Which PNC is recorded as the first PNC in this health center	 1 = Any care provided to the mother and newborn during their stay at the facility after delivery 2 = Any care provided to the mother and newborn after discharge and within 24 hours of delivery 	II	HC7.1

Thank the respondent for taking the time to take part in the survey.