Maternal Pre-discharge Recall Survey Session 7
Introduction to survey and interviewer training

Add date and place

Dorothy, Country teams

#EveryNewborn #Endingstillbirths #maternalhealth
Session Planning

- **Purpose:**
  Ensure all interviewers know and understand how to conduct high quality interviews, and know how to administer the maternal pre-discharge recall survey, in accordance with the project guidelines and training manual.

- **Target Audience:** Interviewers

- **Length of session:**
  Part I: Presentation (30 mins) + Activity O (30 mins)
  Part II: Presentation (45 mins) + Activity P (60 mins)
  Part III: Presentation (30 mins) + Activity Q (90 mins)
  Part IV: Activity R (120 mins)

- **Type of session:** classroom / practical

- **Resources / tools required:**
  Projector, slide deck, interviewer training manual module, supporting annexes, tablets with app installed (kit bag, MRS variable dictionary, visual prompt booklet, SOP for measuring head circumference, MRS paper version), marker pens and paper.
Aims & Learning Outcomes

1. To know how to conduct yourself and your work in accordance with the project guidelines and training manual.
2. To appreciate the value of administering high quality interviews
3. To ensure confidentiality while carrying out the interviews
4. To be familiar with the logistics of data collection for the survey
5. To know how to administer the MRS data collection app and gather the required inputs for data collection.
6. To understand what to do if a woman becomes upset during an interview
PART I: INTERVIEWING MOTHERS FOR MATERNAL RECALL SURVEY
SESSION 7.1 PRESENTATION
(30 MINUTES)
Maternal Recall Pre-discharge Survey

**Main aim:** To determine the accuracy of a mother’s recall of the practice and need to provide information about possible use in future surveys.

- The survey will determine if mothers at discharge can accurately recall coverage and content of care of the interventions received.

**Who:** Administered to ALL women who consented to the study that were observed and/or whose notes were verified and whose newborn received at least one of the following newborn interventions: antenatal corticosteroids, resuscitation, kangaroo mother care and neonatal infection.

- The Tracking Officer will assign women to interviewers through the tablet app.
Maternal Recall Pre-discharge Survey

The interviewer will ask survey questions about **ALL** of the study interventions, in addition to maternal information, birth registration and socioeconomic status.

<table>
<thead>
<tr>
<th>Section</th>
<th>Title</th>
<th>Sub-sections</th>
</tr>
</thead>
</table>
| **Section I** | Cover sheet and maternal information           | ➢ Interviewer Details  
               ➢ Maternal Details  
               ➢ Current pregnancy history  
               ➢ Perinatal data |
| **Section II** | L & D Recall survey                           | ➢ ACS  
               ➢ Uterotonics  
               ➢ Essential newborn care (ENC) practices  
               ➢ Newborn resuscitation  
               ➢ Cord care and chlorhexidine cord cleansing |
| **Section III** | Treatment of neonatal infection            |                                                                              |
| **Section IV** | KMC                                           |                                                                              |
| **Section V** | Socio-economic status (SES)                     |                                                                              |
| **Section VI** | Final status                                   |                                                                              |
Interviewer and woman

- Interviewer should be familiar with the layout of the facility and wards where the survey will be administered.
- It is important to be very comfortable with the content of the survey!

- Administered to ALL women who consented to the study that were observed and/or whose notes were verified and whose newborn received at least one of the following interventions: ACS, resuscitation, kangaroo mother care and neonatal infection.

- The Tracking Officer will assign women to interviewers through the tablet app.
Survey administered to women PRE-DISCHARGE

- Consented but not observed
  - Born else-where

L&D ward
- Admission Tracking Officer
- L&D observer
- Operating theatre
- L&D register extractor
- L&D ward indicators
- If GA<34 weeks - ACS note verifier
- Resus
- ENC
- Uterotonics
- PPH

Consented mothers

KMC ward
- KMC observer
- KMC register extractor
- KMC ward indicators

PNC ward
- TC
- TO
- Consented mothers
- TO

Sepsis ward
- TO
- Consented mothers
- TO

Discharge
- Interviewer
- Follow up info
- All interventions

KMC

L&D ward indicators
- Neonatal infection note verification
- Treatment of neonatal infection

Consented mothers
- Refused consent

Born else-where
Survey location and timing

Location: One of three locations in the health facility
- Post-natal care ward
- KMC ward
- Neonatal ward/Sepsis ward

Timing: Takes about 45-55 minutes to administer PRIOR to discharge

* Find a convenient time to interview the woman in a quieter private location if possible before she leaves the hospital*
Role of the interviewer

- **Central position** in the survey because he/she collects information from respondents.

- **Success** of the survey depends on the **quality** of each interviewer’s work.
Role of the interviewer - steps

1. Locate the women to be interviewed as assigned by the Tracking Officer
2. Confirm re-consent to the survey and seek consent to the Follow Up Study
3. Interview all allocated women using the version of the Maternal Recall pre-discharge survey loaded on your tablet
4. Check completed interviews to be sure that all questions were asked and the comments section is completed as appropriate
5. Follow the comments and prompts in the app and ensure all questions have a response
6. Upon completion of the survey, thank the woman for her time and complete the newborn’s head circumference measurement if mother consented to Follow Up Study
Role of the interviewer - process

- Tracking Officers will assign questionnaires using the mobile app before their discharge and handover information about the respondents to each interviewer.
- After logging in, interviewers will access the survey for the respondents who have been assigned.
- Mobile app questionnaire is synchronised using available internet connection (3G, etc.)
  - Questionnaires can be collected off-line if questionnaires are already downloaded.
  - Once interviewers have an opportunity to connect to the internet, they should synchronize their data.
- Completed questionnaires sent automatically to the supervisors.
Training of interviewers

In the classroom
- Demonstration interviews conducted in front of the class
- Practice reading the questionnaire aloud to another person
- Role play to practice by interviewing another trainee with the tablet app Instructions how to enter the responses into the mobile tablet app

In the health facility
- Practice interviewing actual interview respondents in the health facility by entering the data on the mobile tablet and performing checks
Training of interviewers

Training package

1. Maternal Pre-discharge Recall Survey Questionnaire (paper version of the survey programmed on the mobile tablet app)
2. Kit bag with Follow up consent folder, visual prompt picture packet and objects
3. Training Manual module with annexes
4. Tablet with the MRS data collection app

The training you receive as an interviewer does not end when the formal training period is completed!!

Your training is being continued each time a supervisor meets with you
**Supervision of interviewers**

**Team supervisor responsibilities**

- Spot-check some of the women selected for interviewing to be sure that you interviewed the correct women
- Review each questionnaire to be sure it is complete and consistent
- Observe some of your interviews to ensure that you are asking the questions in the right manner and recording the answers correctly
- Meet with you on a weekly basis to discuss performance
- Help you resolve any problems that you might have with finding the assigned women, understanding the questionnaire, or dealing with difficult respondents

*Very important role in continuing training and ensuring the quality of the data collected*
Conducting an interview

The art of interviewing

- Not a mechanical process
  - Each interview is a new source of information so make it interesting and pleasant
- Requires practice
- Basic principles for successful interview
  - Building rapport with a respondent
  - Conducting a successful interview
  - Language of the interview
Building rapport with a respondent

1. Make a good first impression
2. Reconfirm the respondent(s) consent to be interviewed
3. Always have a positive approach
4. Assure confidentiality of responses
5. Answer any questions from the respondent frankly
6. Interview the respondent alone
Tips for conducting an interview

1. Be neutral throughout the interview
2. Never suggest answers to the respondent
3. Do not change the wording or sequence of questions
4. Handle hesitant respondents tactfully
5. Do not form expectations
6. Do not hurry the interview
Protocol for managing distress during a maternal interview

**Distress**
- A respondent indicates they are experiencing a high level of stress or emotional distress OR
- Exhibit behaviours suggestive that the interview is too stressful such as uncontrolled crying, shaking, anger etc.

**Stage 1 Response**
- Pause the interview
- Respond appropriately to symptoms of distress
- Probe to see if interview should continue:
  - Do you need a break?
  - Do you feel you are able to go on with the interview?

**Review**
- If participant feels able to carry on, resume interview/discussion
- If participant is unable to carry on, Go to stage 2
Protocol for managing distress during a maternal interview

Stage 2 Response
- Stop interview with respondent, thank her for her time and accompany to her area in the facility
- Offer, with participant consent, for a member of the healthcare team treating her to follow up for further advice/support with information and services as available
- Notify your supervisor and her healthcare professional

Follow up
- Healthcare professional who is treating her to provide follow up for advice/support with information and services as available
Language of the interview

Local language will be used for survey

- Bengali, Nepali and Swahili
- Survey is also available in English

IF respondents do not speak your language:

- Thank the woman for her time
- Stop on app as indicated
- Record in interviewers comments
- Inform your supervisor
ACTIVITY O: Mock interviews

Objective: To have the opportunity to observe mock interviews to become more familiar with interview skills and building rapport with respondents

Time: 30 minutes

Trainee Materials: Paper version of the Maternal pre-discharge recall survey

Instructions:

PART 1
Trainers will complete mock interview for Survey section 1 (15 minutes) and section 5 (5 minutes).

PART 2
Discussion in plenary (10 minutes)
- How was the rapport between the interviewer and interviewee?
- What did you find worked well with the interview?
- What did you find didn’t work about the interview?
- What do you think might be challenging in the health facility setting?
- What are your views about stillbirths and neonatal deaths?
PART II: CONSENT, PROMPTS AND DATA TO BE COLLECTED

SESSION 7.3 PRESENTATION

(45 MINUTES)
Survey informed RE-consent

You must reconfirm the respondent’s informed consent for participation in the survey before you begin an interview

- Read re-consent statement at beginning of the survey

- Indicate YES/NO
  - If YES, continue the survey
  - If NO, stop the survey and thank her for her participation in the study
ENAP Metrics Follow Up Study

Follow-on study from this observational study where a cohort (group) of consenting mothers and their newborns will be followed up for a minimum of 2 years.

Main aim: To determine the developmental outcomes of infants at 2 years of age who received at least one of the following newborn interventions: antenatal corticosteroids, newborn resuscitation, kangaroo mother care and treatment for neonatal infection.

Your role

- Read the ENAP Metrics Follow Up Study information and consent form
- Ask the woman to sign/thumb print the form if she consents and put the completed consent form in the designated folder in the kit bag
- If consent is YES, after the MRS, measure the newborn’s head circumference following the SOP
SOP for measuring a newborn’s head circumference.

Materials and Equipment
- Tape measure
- Tablet with ENAP Metrics Facility-Based study App with the Follow Up module

Procedure
- Take a tape measure and show the mother, on yourself, what is about to happen when you measure her newborn’s head circumference
- Wrap the tape measure around the widest possible circumference of the head: around the most prominent part of the forehead and the widest part of the occipital
- Use the measurement to the nearest millimetre
- Record head circumference in observation book
Before administering the survey be aware of two cases ...

Stillbirth or neonatal death

- Tracking Officer will handover condition of newborn
  - Sensitive topic so very important to be aware of the condition of the baby prior to the interview
- Read aloud sympathetic introductory text if the baby is dead
- Interview will take about 10 minutes if the baby is dead as the woman will only answer a subset of the survey questions
- Be familiar with pre-programmed skip patterns

Multiple births

- Survey will only refer to the first birth
- Current condition of baby for the first birth should only be recorded
- Read aloud introductory text specific for multiple births
**Verbal and visual prompts**

**Verbal prompts**

- **Prompt text in UPPPER CASE** for you to read silently to yourself
  - Helps to remind you how to record the answer choice, if you need to read the answer choices or to use prompt text if needed etc.

- **Prompt text in lowercase** is for you to read aloud the actual text
  - Been agreed with working group
  - Helps to remind, cue or aid the woman’s understanding of the question, such as rephrasing the question or explaining what is meant by specific terminology

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**Section 1.4 Q27:** Was the baby born by vaginal delivery, forceps, vacuum, assisted breech or caesarean section?

PROMPT FOR FORCEPS: that is, an instrument to help pull the baby out
PROMPT FOR VACUUM: that is, a suction to help pull the baby out?
PROMPT FOR C SECTION: that is, did they cut your belly open to take the baby out?
USE VISUAL PROMPTS AS NEEDED FOR FORCEPS AND VACUUM EXTRACTION

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**Section I. 4 Q 39:** When are you planning to get your birth certificate?

DEPENDING ON MOTHER’S ANSWER, WRITE ANSWER IN EITHER WEEKS OR MONTHS

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**Section II.3 Q 16a:** How long after birth did you first put your baby to your breast?

IF LESS THAN 1 HOUR, RECORD ‘01’ HOURS;
IF LESS THAN 24 HOURS, RECORD HOURS;
OTHERWISE, RECORD DAYS
Verbal and visual prompts

Verbal probes

- Text read aloud as necessary to facilitate the woman’s understanding of the question to encourage her to say more in response to a question
- Been agreed so must only be used as stated

Section II.4 Q 20a: Was anything done to help your baby breathe?

PROBE IF NECESSARY: that is, did anyone try to help your baby to breathe?
Verbal and visual prompts

Visual prompts

- If question requires a visual prompt, the text is noted in UPPER CASE
- Typically refers to show a picture or actual object, such as a device or medicine or form
- Kit bag
  - Folder for Follow Up study informed consent forms
  - Visual prompt picture booklets
  - Visual prompt objects

Section II.4 Q 22: Did anyone use a plastic device to help your baby breathe?

PROMPT: SHOW PICTURE OF BAG AND MASK

Section I.4 Q33: In addition to this notification, a baby should also receive birth certification. Did you receive this form?

SHOW FORM
## Visual prompt pictures and devices/medicines/forms

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<thead>
<tr>
<th>Section</th>
<th>Sub-sections</th>
<th>Visual prompt pictures</th>
<th>Visual prompt devices, medicines or forms</th>
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</thead>
<tbody>
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<tr>
<td></td>
<td>Maternal Details</td>
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<tr>
<td></td>
<td>Current pregnancy history</td>
<td>Q18: GA measurement for 1) last menstrual period 2) fundal height 3) ultrasound</td>
<td>Q22: stethoscope, fetoscope or pinard</td>
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<tr>
<td></td>
<td>Perinatal data</td>
<td>Q22: Listening to baby’s heart rate with 1) doppler or other machine to hear fetal heart rate 2) any device where midwife listens with device such as stethoscope, fetoscope or pinard</td>
<td>Q36: Birth notification form</td>
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<td>Q27: Mode of delivery 1) baby born using forceps 2) baby born using vacuum extraction</td>
<td>Q37: Birth certification form</td>
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<td></td>
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<td>Q31: Type of weighing scale 1) analogue scale 2) electronic digital scale</td>
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<tr>
<td><strong>Section II: L &amp; D Recall survey</strong></td>
<td>ACS</td>
<td>--</td>
<td>Q04: Samples of ACS medicines</td>
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<td>Uterotonic</td>
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<td></td>
<td>Essential newborn care (ENC) practices</td>
<td>Q13: Skin to skin</td>
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<tr>
<td></td>
<td>Newborn resuscitation</td>
<td>Q22: Bag and mask</td>
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<tr>
<td></td>
<td>Cord care and chlorhexidine cord cleansing</td>
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<td>Q28a: Tube of chlorhexidine (only Nepal and Bangladesh)</td>
</tr>
<tr>
<td><strong>Section III: Treatment of neonatal infection</strong></td>
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<td>Q07: Baby receiving oxygen</td>
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<td>Q09: Feeding support 1) NG feed 2) IV in his/her hand/arm/foot/scalp 3) a cup</td>
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<td><strong>Section IV: KMC</strong></td>
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<tr>
<td><strong>Section V: Socio-economic status (SES)</strong></td>
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</table>

* IF A WOMAN does not know the answer after given a prompt or probe indicate the answer as usual as “Don’t know/don’t remember” and move onto the next question*
Kit bag

- Follow Up study consent forms and folder
- Visual prompt picture booklet
- Visual prompt devices, medicines and forms
Data to be collected

Collecting data from women who consent PRIOR to their discharge from the facility

Survey asks the woman recall questions about ...

- Her pregnancy history
- Her delivery experience
- The care for her newborn during the facility stay
- Other key areas, such as birth registration and socioeconomic questions
Data to be collected

6 main survey sections with sub-sections

1. Cover sheet and maternal information
2. L & D Recall survey
3. Treatment of neonatal infection
4. KMC
5. Socio-economic status (SES)
6. Final status
Section I: Cover sheet and maternal information

Interviewer to seek re-consent to the survey and consent for the ENAP metrics follow up study.

Section I.1 Interviewer Details
- Date of the interview
- Time of the interview
- Language used
- Current condition of the baby (only first born if multiple births)

Section I.2 Maternal Details
- Woman’s re-consent to the survey
- Woman’s birthdate and age
- Woman’s address
- Woman’s mobile number
- Her husband or family member’s mobile number
- Confirmation of the best way to contact her (Note: VERY important for follow up study)
Section I: Cover sheet and maternal information

Section I.3 Current pregnancy history
- Baby’s due date
- Gestational age methods
- When she received her first antenatal care (in weeks or months)
- How many antenatal check-ups she received during her pregnancy
- Gestational age at time of birth

Section I.4 Perinatal data
- Method for listening to the baby’s heart rate during labour
- Condition of baby during labour
- Place, date and time of delivery
- Type of birth (vaginal delivery, forceps, vacuum, assisted breech or caesarean section)
- C-section time and reason (as appropriate)
- Baby’s weight at birth
- Method of birth weight measurement
- Sex of baby
- Perceived size of baby (very large, larger than average, average, smaller than average, or very small)
- Birth complications
- Number of nights in hospital
- If birth notification and/or birth certificate form was received
- Woman’s knowledge about how to get a birth certificate for her baby
- When she plans to get birth certificate
- Her concerns about getting a birth certificate
**Section II: L & D Recall survey**

**Section II.1 ACS**
- If her baby was born too soon or early
- If the woman was at risk of or in threatened preterm or premature labour
- If any medicine was given because baby was at risk of being born too early
- If the woman was told the reason for the medicine
- Name of medicine
- Route and number of doses of the medicine
- When last dose was received before baby was born

**Section II.2 Uterotonics**
- If medicine was given immediately after delivery of baby
- Route and timing of medicine
- If health worker informed mother about medicine
- Name of medicine
- If the woman was told the reason for the medicine
- What was the reason for medicine
Section II: L & D Recall survey

Section II.3 Essential newborn care (ENC) practices
- If her baby was dried or wiped immediately after birth
- If her baby was placed on chest, naked against her skin
- Timing of skin to skin
- Where the baby was placed if not skin to skin
- Timing of first bath
- If the mother breastfed
- Timing of and assistance with breastfeeding
- Alternative drinks other than breastmilk

Section II.4 Newborn resuscitation
- If her baby cried after birth
- If her baby had trouble breathing after birth
- If her baby received help to breathe
- If her baby’s back was rubbed or any other stimulation provided
- If bag and mask was used and for how long
- If a suction was used to clean her baby’s airways
- If other actions were taken to help the baby breathe
- If the baby was admitted to the neonatal ward
- If a health worker explained what happened to the baby
- What was the explanation of what happened
Section II: L & D Recall survey

Section II.5 Cord care and chlorhexidine cord cleansing

- If anything was applied to stump of cord after it was cut
- What was applied to the cord
- Timing chlorhexidine was first applied and who applied it
- Reason why treatment was applied to the stump
- If given medicine to take home
Section III: Treatment of neonatal infection

- If her baby was admitted to neonatal ward
- If she knows the baby’s diagnosis and what it is
- Baby’s type of infection
- Baby’s weight at time of admission to unit
- If her baby had seizures and for how many days
- If her baby received injection/antibiotics, the name of medicine and how many days
- If she as antibiotics to take home
- If the baby received oxygen
- If diagnostics tests were completed and which ones
- If her baby received feeding support
- If her baby received phototherapy
- How long her baby was admitted to inpatient care
- If her baby was referred to another place or health facility
- Baby’s weight at time of discharge
Section IV: KMC

- If baby born before the expected date of delivery or born too soon or too small and had extra care and help to stay warm and be able to feed
- Baby’s weight at time of admission to unit
- If she was told about ways to help her baby
- If a health worker told her about KMC
- If her baby received KMC
- Who performed KMC
- Reasons for KMC
- KMC positioning
- KMC education
- Time baby in KMC position for last 24 hours
- Reasons why baby was not in KMC position
- Feeding methods in last 24 hours
- If she was told by health worker how to recognise if her baby was unwell
- What signs of the baby being unwell were discussed
- If she received pre-discharged counselling
- What was discussed in pre-discharge counselling
- Length of stay in the KMC section
- Baby’s weight at time of discharge
Section V: Socio-economic status (SES)

- Household items, specifying number of TVs owned
- Type of fuel household uses for cooking
- Main material of the floor
- Main material of the walls
- Main material of the roof
- Number of rooms in household used for sleeping
- Modes of transport owned
- If member of household has a bank/cooperative or other savings account
Section VI: Final status

- Status of the observation
- Explanation if partially complete or incomplete
ACTIVITY P: Reading the survey

**Objective:** To provide the opportunity to practice reading the maternal recall pre-discharge survey to become familiar with the content and terminology

**Time:** 1 hour

**Trainee Materials:** Paper version of the Maternal recall pre-discharge survey, stop watch

**Instructions:**

**PART 1**
In groups of 2 people, take turns reading aloud the paper version of the survey for 25 minutes each. Practice reading each question accurately and slowly so your partner can understand. Remember to follow the verbal prompts! This part of the activity should take about 50 minutes to complete.

Discuss with your partner:
- What did you find easy about reading the survey?
- What felt more challenging about reading the survey?
- Do you understand the overall survey?
- Are there any questions that you don’t understand?
- Are there any words that you are not able to pronounce?

**PART 2**
Share your answers and discuss in plenary as large group for 10 minutes
PART III: CONTENT AND FLOW
SESSION 7.5 PRESENTATION
(30 MINUTES)
Introduction to content and flow

ENAP Indicator Validation Study

MATERNAL RECALL SURVEY

DATA SYNC

EXIT
Labour and Delivery

Study ID 104000005
Hospital ID 89005433

rozlina
Age: 34 years
DHAKA, dhaka, dhaka, dhaka

Section I: Cover Sheet

Before beginning the survey please remind the mother that they previously gave informed consent to take part in this survey about her delivery experience before being discharged.

SAVE -> CONTINUE
Content and flow

- **Introductory text** to be read prior to starting the survey and before asking the questions in specific sections

  INSERT APP SCREEN SHOT OF INTRODUCTORY TEXT

- **Sequence of the questions** reflects the order of events during a woman’s stay
Content and flow

- **Answer selection options** will vary throughout the survey.

**REMEMBER** YOU MUST SELECT AN ANSWER OPTION FOR EVERY QUESTION.
**Content and flow**

- **Skip patterns** built into the survey app depending on certain answers selected to ensure that each woman answers only the survey sections that are most applicable to her stay.
**Content and flow**

- At the end of each survey section, **free text boxes** to enter interviewer Comments:
  - Observations about the woman’s answers
  - Observations about the woman’s behaviour
  - If the interview was interrupted
  - Any issues that need to be followed up with the supervisor.
Content and flow

- Closely review the **maternal pre-discharge recall survey variable dictionary** so you are familiar with each question, the order, the answer selection.

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<thead>
<tr>
<th>Var #</th>
<th>Description</th>
<th>Var Type</th>
<th>Var Option</th>
<th>Tool Type</th>
<th>Comments/Instruction</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Section I: Cover Sheet</td>
<td>Headline</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td>Data ID</td>
<td>Automatically filled</td>
<td>NA</td>
<td>Data ID will be automatically generated by the AHR.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Participant ID</td>
<td>Automatically filled</td>
<td>NA</td>
<td>Participant ID will be automatically generated</td>
<td></td>
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</tr>
<tr>
<td>2</td>
<td>Before beginning the survey please remind the mother that they previously gave informed consent to take part in this survey about her delivery experience before being discharged.</td>
<td>Radio Button</td>
<td>1.Yes 2.No</td>
<td>Before beginning the survey show the Admission consent form in hard copy where she gave her previous consent. After taking consent again to participate in interview section, mark “Yes” from the Radio Button, and if she is not agreed to give interview select “No” and stop the registration process.</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>INTRODUCE ENAP FOLLOW UP STUDY INFORMATION SHEET AND CONSENT FORM: Does she consent to taking part in the follow up study?</td>
<td>Radio Button</td>
<td>1.Yes 2.No</td>
<td>Mark the “Yes” in Radio Button if she consents in taking part the follow up study</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td><strong>Section I.1</strong> Interviewer Details</td>
<td>Headline</td>
<td>NA</td>
<td>NA</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Date of Interview</td>
<td>Calendar</td>
<td>DD/MM/YYYY</td>
<td>6</td>
<td>Record the Date of interview using the App Calendar. First two digits represent days, the next two digits represent months and the last four digits represent year.</td>
</tr>
</tbody>
</table>

#EveryNewborn
### Labour and Delivery

#### Study ID:
- rozil
- 104000005
- Age: 34 years
- Hospital ID: 890605433

#### Hospital ID:
- DHAKA, dhaka, dhaka, dhaka

<table>
<thead>
<tr>
<th>COVER SHEET</th>
<th>L &amp; D</th>
<th>NEONATAL INFECTION</th>
<th>KMC</th>
<th>SOCIO-ECONOMIC STATUS</th>
<th>FINAL STATUS</th>
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</thead>
</table>

#### Section I: Cover Sheet

Before beginning the survey please remind the mother that they previously gave informed consent to take part in this survey about her delivery experience before being discharged.

INTRODUCE ENAP FOLLOW UP STUDY WITH FOLLOW UP INFORMATION SHEET AND CONSENT FORM: Does she consent to taking part in the follow up survey?

- [ ] Yes
- [ ] No

#### Questions:

22. Did a birth attendant listen for baby’s heart sounds during labour with an electric device (Doppler) or cone-shaped stethoscope placed on the abdomen? USE VISUAL PROMPT AND DESCRIBE THE USE OF A CONE-LIKE INSTRUMENT.

- [ ] Yes, doppler or other machine to hear fetal heart rate
- [ ] Yes, any device where midwife listens with device such as stethoscope, fetoscope or pinard
- [ ] No
- [ ] Don’t know/don’t remember

23. Were you told about the condition of your baby?

- [ ] Yes
- [ ] No
- [ ] Don’t know/don’t remember

24. Where did you deliver your baby?

- [ ] Hospital: Admission room
- [ ] Hospital: Labour room
- [ ] Hospital: Operation theatre
- [ ] MNISC
- [ ] Out of hospital

25. What date was your baby born? (dd/mm/yy)

- [ ] Don’t know/don’t remember

26. What time was your baby born? (24 hrs clock)

- [ ] Don’t know/don’t remember

27. Was the baby born by vaginal delivery, forceps, vacuum, assisted breech or caesarean section? PROMPT FOR FORCEPS: that is, an instrument to help pull the baby out. PROMPT FOR FORCEPS.

- [ ] Yes
- [ ] No
- [ ] Don’t know/don’t remember
### Labour and Delivery

<table>
<thead>
<tr>
<th>Study ID</th>
<th>rozlin 1049000065</th>
<th>Age: 34 years</th>
</tr>
</thead>
<tbody>
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#### Section II.3 Essential Newborn Care Practices

12. Was your baby dried or wiped immediately after birth (within a few minutes)?
   - [ ] Yes
   - [ ] No
   - [ ] Don't know/don't remember

13. Was your baby placed on your chest, naked against your skin? PROMPT: WITH PICTURE IF NECESSARY
   - [ ] Yes
   - [ ] No
   - [ ] Don't know/don't remember

15. How long after the birth was your baby bathed for the first time?
   - [ ] Immediately
   - [ ] Hours
   - [ ] Days
   - [ ] Don't know/don't remember

16. Did you ever breastfeed your baby?
   - [ ] Yes
   - [ ] No
   - [ ] Don't know/don't remember

17. In the time after delivery when you were still in hospital, was your baby given anything to drink other than breast milk? PROMPT: Such as water, formula, tea but not including tablets/medicines?
   - [ ] a) Water
   - [ ] b) Tea
   - [ ] c) Formula
   - [ ] d) Other
   - [ ] e) No
   - [ ] f) Don't know/don't remember
### Section III: Treatment of Neonatal Infection

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
<th>Don't know/don't remember</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.  Was your baby admitted to neonatal care unit/paediatric ward for a problem?</td>
<td></td>
<td></td>
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<tr>
<td>2.  Do you know your baby's problem?</td>
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<tr>
<td>3.  Do you know your baby's weight at time of admission to this unit?</td>
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<tr>
<td>4.  Did your baby have any seizures during the hospital stay?</td>
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<tr>
<td>5.  Do you know if your baby received any injection/antibiotics?</td>
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<tr>
<td>6.  Do you have any antibiotics to give your baby when you go home?</td>
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<tr>
<td>7.  Did your baby receive oxygen during hospital stay? (PROMPT: SHOW PICTURE IF NECESSARY)</td>
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<tr>
<td>8.  Were diagnostic tests completed with your baby?</td>
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</tbody>
</table>
### Labour and Delivery

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<tbody>
<tr>
<td>04. Did your baby receive KMC?</td>
<td></td>
<td></td>
<td>Yes</td>
<td>No</td>
<td>Don't know/don't remember</td>
</tr>
<tr>
<td>PROMPT: By KMC I mean that you tied the baby to your front for most of the day for lots of days</td>
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<td>05. Who did KMC with your baby?</td>
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<tr>
<td>06. What did the health worker tell you was the reason for putting your baby in KMC?</td>
<td></td>
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<tr>
<td>a) Keeping your small baby warm</td>
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<tr>
<td>b) Helping you to bond with your baby</td>
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<tr>
<td>c) Protecting your baby from infection</td>
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<tr>
<td>d) Helping you and your baby with breastfeeding</td>
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<tr>
<td>e) Helping your baby to grow</td>
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<td>f) Other</td>
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<td>g) Don't know/don't remember</td>
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<td>07. Can you describe to me what position your baby should be in for KMC?</td>
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<tr>
<td>a) The baby is vertical</td>
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<tr>
<td>b) The baby is in direct skin to skin contact on the mother's chest</td>
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<td>c) The legs are flexed in a frog position</td>
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<tr>
<td>d) The cheek of the baby is in contact with the mother's chest</td>
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<tr>
<td>e) The baby is wearing a hat</td>
<td></td>
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### Labour and Delivery

- **Study ID**: rozin
- **Hospital ID**: DHAKA, dhaka, dhaka, dhaka

#### COVER SHEET

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**02. What type of fuel does your household mainly use for cooking?**

- a) Electricity  
  - Yes  
  - No
- b) Gas  
  - Yes  
  - No
- c) Kerosene  
  - Yes  
  - No
- d) Animal dung  
  - Yes  
  - No
- e) Charcoal/coal  
  - Yes  
  - No
- f) Wood  
  - Yes  
  - No
- g) No food cooked in household  
  - Yes  
  - No
- h) Other  
  - Yes  
  - No

**03. Main material of the floor.**

- a) Natural floor, such as dirt, earth, sand, dung  
  - Yes  
  - No
- b) Rudimentary floor, such as wood, palm/bamboo  
  - Yes  
  - No
- c) Finished floor, such as cement, polished wood, vinyl strips, tiles  
  - Yes  
  - No
- d) Other, specify, such as carpet:  
  - Yes  
  - No

**04 Main material of the walls.**

- a) Natural walls, such as no walls, dirt, cane/palm/trunks  
  - Yes  
  - No
Content and flow – Section VI

### Labour and Delivery

**Study ID**
- rozlin
- 104000005

**Hospital ID**
- DHAKA, dhaka, dhaka, dhaka

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<tbody>
<tr>
<td>1. What is the final status of the Recall Survey for this patient</td>
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<td></td>
<td>Complete</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td>Partially incomplete</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Totally incomplete/Patient not found</td>
<td></td>
</tr>
</tbody>
</table>

2. Why partially incomplete or totally incomplete?
   - Provider related
   - Patient related
   - Observer related
   - Tab or App related

3. Please mention

[SAVE -> CONTINUE]
Content and flow – Follow Up Module

INSERT APP SCREEN SHOT OF FOLLOW UP MODULE
**ACTIVITY Q: Variable dictionary**

**Objective:** To become more familiar with the content and flow of the survey through detailed review of the variable dictionary

**Time:** 1.5 hour

**Trainee Materials:** Maternal recall survey section of the variable dictionary, kit bag

**Instructions:**

**PART 1**
In groups of 4 people, review the Maternal recall survey section of the variable dictionary. Aim to review each section so you are familiar with the introductory text, each question, the order, the answer selection options, related skip patterns and the associated visual and verbal prompts. This part of the activity should take about 75 minutes to complete.

Discuss with your group:
- What did you find easy about reviewing the survey?
- What felt more challenging about reviewing the survey?
- Do you understand the skip patterns?
- Are there any parts of the survey that you don’t understand?

**PART 2**
Share your answers and discuss in plenary as large group for 15 minutes
PART IV: ACTIVITY R
SESSION 7.7 ROLE PLAY OF SURVEY
(120 MINUTES)
ACTIVITY R: Role play of survey

Objective: To practice administering the full maternal recall pre-discharge survey using the app on tablets and kit bag

Time: 2 hours

Trainee Materials: Tablet with mobile app, stop watch, Kit bag

Instructions:

PART 1
In groups of 2 people, complete role play activity in which you practice by interviewing another trainee using the tablet. This part of the activity should roughly take about 1.5 hours. One person should be the interviewer, and one person would be the interviewee. Be sure to have your kit bag so you can fully administer the survey. Time the interviews and record this information.

Discuss with your partner:
- How long did the interview take you? Was this longer or shorter than you expected? Why?
- What did you find easy about administering the survey?
- What felt more challenging about administering the survey?
- Are there parts of the survey that you don’t understand?
- Are there parts of the app that you don’t understand?

PART 2
Share your answers and discuss in plenary as large group for 30 minutes