

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

SECTION 1: FACILITY IDENTIFIERS

1.1	Date	____/____/____
1.2	State Code	____
1.3	LGA name select from list	_____
1.3a	Ward name select from list	_____
1.4	EA name select from list	_____
1.5	EA number Automatic on PDA	____
1.5a	Facility name Enter in facility name	_____
1.5b	Facility type (1) Primary (2) Secondary	____
1.6	Facility level (1)Primary care facility type I (2)Primary care facility type II (3)Primary care facility type III (4)Secondary level (5) Tertiary level	____
1.7	Facility Ownership (1)Government (2)Mission (3)NGO	____
1.7a	What is the gender of the facility in-charge? 1. Male 2. Female	____
1.7b	What is the age of the facility in-charge (in years)?	____
1.7c	What is the cadre of the facility in-charge? 1. Medical doctor 2. Pharmacist or Pharmacy Technician 3. Community Health Worker 4. Nurse and/or Midwife 5. Laboratory scientist and/or Technician 6. Radiographer 7. Dentist/Dental Assistant 8. Health Information Officer 9. Physiotherapist 10. Hospital Administrator or Manager 11. Others (Please specify)	____
1.7d	How long have you been working in your current role? (in completed years, if less than one-year input "0")	____
1.7e	How long have you been working in this facility? (in completed years, if less than one-year input "0")	____
1.8	GPS Longitude	____:____:____
1.9	GPS Latitude	____:____:____
1.10	Interviewer Initials	____

SECTION 2. EQUIPMENT, DRUGS AND VACCINES

Walk around the facility with the in-charge (or representative) and personally check the availability of equipment and stock. Essential support services

	Does the facility have the following essential support services? <i>Ko wannan cibiyar kiwon lafiyar na da wadannan muhimman abubuwan domin tallafawa aiki?</i>	
2.1	Source of clean running water (eg bucket+plug; piped water) (1)Yes (2)No <i>anyar samun tsabtatcen ruwa (Misali tsabtatatcen ruwa daga injin, ruwan famfo)</i> 1)Yes (2)No	____
2.2	Electricity connection: <i>Wutar lantarki</i>	____

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	(1)Yes (2)No	
2.3	Electricity supply on day of survey : (1)Yes (2)No <i>Wutar lantarki ranar da aka zo wannan aikin nazarin</i> (1)Yes (2)No	<input type="checkbox"/>
2.3a	Does the facility have an alternative power supply (generator or solar) (1)Yes (2)No <i>Ko cibiyar kiwon lafiyar tana da wata hanyar samun wutar lantarki daban (Kamar janareto ko lantarki daga makamashin zafin rana)</i> (1)Yes (2)No	<input type="checkbox"/>
2.4	Functional sterilizer, cooker or stove or autoclave (1)Yes (2)No <i>Ko akwai na'urar tsabtace kayan aiki, murhun girki na zamani ko risho?</i> (1)Yes (2)No	<input type="checkbox"/>
2.5	Functional fridge for vaccine storage (1)Yes (2)No <i>Na'urar sanyaya ruwa mai aiki (Firiji)</i> (1)Yes (2)No	<input type="checkbox"/>
2.6	Toilets accessible to female facility users (1)Yes (2)No <i>Dakunan bahaya domin masu zuwa cibiyar kiwon lafiyar</i> (1)Yes (2)No	<input type="checkbox"/>
2.7	Motorised transport for referral (1)Yes (2)No (go to 2.8) <i>Mota ko babur din daukar majinyata domin turawa zuwa gaba don neman lafiya</i> (1)Yes (2)No (go to 2.8)	<input type="checkbox"/>
2.7a	If yes: How many motorbikes are available? <i>Enter number of motor bikes</i> If yes, <i>Adadin babura nawa ne cibiyar take da su?</i> <i>Enter number of motor bikes</i>	<input type="checkbox"/>
2.7b	If yes: How many cars/ambulances are available? <i>Enter number of cars/ambulances</i> If yes, <i>Adadin motoci/motar daukar majinyata nawa ne cibiyar kiwon lafiyar take da su? Enter number of cars/ambulances</i>	<input type="checkbox"/>
2.7c	If yes: Is there a functional motorised transport for referral in the facility now? (1)yes (2)no If yes, <i>A yanzu o akwai motar daukar majinyata cibiyar, domin turawa gaba domin neman lafiya?</i> (1)yes (2)no	<input type="checkbox"/>
2.8	The last time there was an obstetric referral which transport was used? (1) facility owned vehicle (2) district office owned vehicle (3) she used her own vehicle (4) public transport (5) non-motorised vehicle (6) don't know <i>A baya-bayan nan wane irin sufuri akayi amfani da shi domin tura mace mai juna biyu ko haihuwa ko jago zuwa gaba domin neman lafiya?</i> (1) facility owned vehicle (2) district office owned vehicle (3) she used her own vehicle (4) public transport (5) non-motorised vehicle (6) don't know	<input type="checkbox"/>
2.9	Which means of communication do you have to speak to another facility? Select all (1) Facility landline/mobile phone (2) Staff member mobile phone; (3) Phone outside the facility; (4) Radio; (5) No means of communication <i>Wace irin hanyar sadarwa ake amfani da ita wajen yin magana da wata cibiyar kiwon lafiya (asibitin)?</i> (1) Facility landline/mobile phone (2) Staff member mobile phone; (3) Phone outside the facility; (4) Radio; (5) No means of communication	<input type="checkbox"/>
2.10	The last time a woman was referred to another facility for treatment did you speak to the facility directly? (1) Yes (2) No (go to 2.12)	<input type="checkbox"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

	<i>A lokacin da aka tura wata mata zuwa wani babban asibiti domin jinya a baya-bayan nan an yi magana da asibitin kai tsaye?</i> (1) Yes (2) No (go to 2.12)	
2.11	If yes, Which means of communication did you use? (1) Facility landline/mobile phone (2) Staff member mobile phone; (3) Phone outside the facility; (4) Radio <i>Wace irin hanyar sadarwa aka yi amfani da ita?</i> (1) Facility landline/mobile phone (2) Staff member mobile phone; (3) Phone outside the facility; (4) Radio	<input type="checkbox"/>
2.12	The last time a woman was referred to another facility for maternity care did a staff member accompany her? (1) yes (2) no (go to 2.14) <i>A lokacin da aka tura wata mata zuwa wani asibiti domin samun kulawar ciki, haihuwa ko jega a baya-bayan nan, akwai jami'in kiwon lafiya da ya/tayi mata rakiya? (1) yes (2) no (go to 2.14)</i>	<input type="checkbox"/>
2.13	If yes: Which cadre of staff member accompanied her? (1) CHEW; (2) CHO; (3) Registered nurse/midwife; (4) Enrolled nurse/midwife; (5) Doctor (6) Other If yes, Wanne irin jami'in kiwon lafiya ne ya raka matar? (1) CHEW; (2) CHO; (3) Registered nurse/midwife; (4) Enrolled nurse/midwife; (5) Doctor (6) Other	<input type="checkbox"/>

Equipment

AVAILABLE IN THE MATERNITY CARE/ANC/FP SERVICE AREA		
2.14	Accessible and working baby scale <i>Sikelin gwada nauyin jarirai mai inganci wanda ke samuwa a ko da yausha</i>	<input type="checkbox"/>
2.15	Family health cards/vaccination cards <i>Katunan asibiti na lafiya domin iyali/katunan rigakafi</i>	<input type="checkbox"/>
2.16	Fetoscope <i>Na'urar sauraron bugun zuciyar dan da ke ciki</i>	<input type="checkbox"/>
2.17	Stethoscope <i>Na'urar auna bugun zuciya</i>	<input type="checkbox"/>
2.18	Blood pressure machine (sphygmomanometer) <i>Na'urar awon bugun jini</i>	<input type="checkbox"/>
2.19	Single use needles and syringes for vaccinations <i>Alurai da sirinjin da ake amfani dasu sau daya kawai yayin karban alluran rigakafi</i>	<input type="checkbox"/>
2.20	Suture material with needles <i>Zare da alluren dinki da ake amfani dasu a tiyata ko dinke rauni</i>	<input type="checkbox"/>
2.21	Needle holder: <i>Abinda ake riƙe allurardinkin dashi</i>	<input type="checkbox"/>
2.22	Sterile scissors or blade: <i>Tsabtatatcen almakasai ko reza</i>	<input type="checkbox"/>
2.23	Sharps boxes: <i>Akwatin da ake ajiye kayayyakin aiki masu kaifi/tsini da aka gama amfani dasu</i>	<input type="checkbox"/>
2.24	Soap: <i>Sabulu</i>	<input type="checkbox"/>
2.24a	Alcohol based hand rub <i>Sinadarin wanke hannu mai kasha kwayoyin cuta</i>	<input type="checkbox"/>
2.25	Accessible and working adult scale: <i>Sikelin gwada nauyin manya mai inganci</i>	<input type="checkbox"/>
2.26	Working watch or timing device : <i>Agogon yin aiki ko duba lokaci</i>	<input type="checkbox"/>
2.27	Antenatal cards: <i>Katin mata na zuwa awon juna biyu</i>	<input type="checkbox"/>
2.28	Supplies to mix ORS, cups and spoons: <i>Kayayyakin hada sinadarin da suga, kofuna da cokula</i>	<input type="checkbox"/>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

2.29	Height stick: <i>Sandar gwada tsayi</i>	<input type="checkbox"/>
2.30	Disposable gloves: <i>Safar hannu da ake zubbawa bayan aiki</i>	<input type="checkbox"/>
2.31	Single-use hand drying towels: <i>Tawul din tsane hannaye da ake amfani dashi sau daya</i>	<input type="checkbox"/>
2.32	Waste receptacle with lid and plastic liner: <i>Kwanon zuba juji mai marfi da shumfudin roba</i>	<input type="checkbox"/>
2.33	Disinfectant: <i>Sinadarin kashe kwayoyin cuta</i>	<input type="checkbox"/>
2.33a	Container to hold water for hand washing is inside the labour room	<input type="checkbox"/>
2.33b	Water for the purpose of hand washing is inside the labour room	<input type="checkbox"/>
2.34	Room giving visual privacy during labour: <i>Dakin nakudamai sirri</i>	<input type="checkbox"/>
2.35	24- hour functioning light source: <i>Tushen samun wutar lantarki dare da rana</i>	<input type="checkbox"/>
2.36	Thermometer: <i>Na'urar gwada dumin jiki</i>	<input type="checkbox"/>
2.37	Intravenous fluids with infusion set : <i>Ruwa da kayan karin ruwa</i>	<input type="checkbox"/>
2.38	Manual vacuum aspirator for abortion care: <i>Na'urar tsotse sauran gudar jini ko tsoka daga cikin uwa lokacin bari</i>	<input type="checkbox"/>
2.39	Speculum <i>Karfen bude farjin mata</i>	<input type="checkbox"/>
2.40	Aspiration kit <i>Na'urar tsotse majina da yawu daga aki/hanci akogoro</i>	<input type="checkbox"/>
2.41	Oxygen <i>Iskar shaka</i>	<input type="checkbox"/>
2.42	Blank partographs <i>Takardun rubuta yadda nakuda ke gudana</i>	<input type="checkbox"/>
2.43	Vacuum extractor (for vacuum delivery/assisted delivery) <i>Na'urar zuko da daga cikin uwa</i>	<input type="checkbox"/>
2.44	Newborn suction device <i>Na'urar tsotse majina da yawu daga aki/anciakogoro jarirai</i>	<input type="checkbox"/>
2.45	Functioning newborn resuscitation device – Bag and mask size 0 (for preterms) <i>Na'urar busa wa jarirai iska zuwa cikin huhu</i>	<input type="checkbox"/>
2.45a	Functioning newborn resuscitation device - bag and mask size 1 (for term babies) <i>Na'urar farfado da numfashin jarirai</i>	<input type="checkbox"/>
2.46	Mucus trap/suction machine <i>Na'urar tsotse majina da yawu daga aki/anciakogoro jarirai</i>	<input type="checkbox"/>
2.47	Clamp or umbilical tie <i>Zaren ko robar matse cibiya</i>	<input type="checkbox"/>
2.48	Gentian violet paint <i>GB</i>	<input type="checkbox"/>
2.49	ORS <i>Ruwan gishiri da suga wanda ake baiwa marasa lafiya ta jijiya /ruwan gishiri da suga wanda ake sha ta baki</i>	<input type="checkbox"/>
2.50	Utensils for breastmilk expression and cup feeding <i>Kwanukan tatse nonon uwa da kofin shayarwa</i>	<input type="checkbox"/>
2.51	Nasogastric tubes/20ml syringes <i>Bututun ciyarwa da sirinjin sa</i>	<input type="checkbox"/>
2.52	Binders for Kangaroo Mother Care (KMC) <i>Zanin goyon na KMC</i>	<input type="checkbox"/>
2.53	Blanket to wrap newborn <i>Bargo domin kudundune jariri</i>	<input type="checkbox"/>
2.53a	Towel to dry the newborn at birth <i>Tawul domin tsane jariri/jaririya lokacin haihuwa</i>	<input type="checkbox"/>
2.54	Baby warmer/heat lamp <i>Na'urar dumama jariri/jaririya/fitilar duma daki</i>	<input type="checkbox"/>
2.55	Phototherapy <i>Na'urar haske mai maganin ciwon shawaran jarirai</i>	<input type="checkbox"/>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

2.56	What number of rooms are there at the facility? <i>Enter number; include all rooms</i> <i>Dakuna nawa ne jimla a asibitin? Enter number; include all rooms</i>	<input type="text"/>
2.57	What number of beds available in the maternity area? <i>Enter the number</i> <i>Gadaje nawa ne a bangaren haihuwa na asibitin? Enter the number</i>	<input type="text"/>
	What method is available to assess gestation weeks of a pregnancy in this facility? Select all available methods <i>Wadanne hanyoyi ne ake amfani dasu a wannan asibitin domin gano watannin ciki?</i>	
2.57a	Ultrasound : <i>Daukar hoton ciki da na'ura</i>	<input type="text"/>
2.57b	Fundal height/physical examination : <i>Duba girman ciki a zahirance</i>	<input type="text"/>
2.57c	Menstrual calendar : <i>Jadawalin al'adar mata ta yin hila</i>	<input type="text"/>
2.57d	No method: <i>Babu wata hanya</i>	<input type="text"/>
2.57e	Does the facility have a written policy available on respectful maternity care. Check even if the policy is displayed on a wall or kept in an office. <i>Ko wannan asibitin nada dokar da ke tabbatar girmamawa da mutuntawa yayin lura da mata masu juna biyu</i>	<input type="text"/>
2.57f	Does the facility have a written policy available on infection prevention? <i>Ko wannan asibitin nada dokar da ke tabbatar da kare yaduwar kwayoyin cututtuka</i>	<input type="text"/>

Check the facility stocks. Answer the following questions based on what you see.

Current availability of drugs

	Does the facility have the following drugs available today? (1)Yes (2)No (3)Not possible to access drug store <i>Ko wannan cibiyar kiwon lafiyar/ asibitin tana da wadannan magungunan a yau?</i> 1)Yes (2)No (3)Not possible to access drug store	
2.58	Sulphadoxine Pyrimethamine for IPTp <i>Kwayar magani mai rigakafin zazzabin cizon sauro</i>	<input type="text"/>
2.59	Vitamin A <i>Sinadarin baitamin A</i>	<input type="text"/>
2.60	Ferrous Sulphate <i>Maganing karin jini jajaye</i>	<input type="text"/>
2.61	Folic Acid <i>Maganing karin jini masu ruwan dorowa</i>	<input type="text"/>
2.62	Combined ferrous/folate <i>Maganing karin jini wadda ya hada jajaye da masu ruwan dorowa</i>	<input type="text"/>
2.63	Benzyl penicillin <i>Allural maganin kwayoyin cututtuka (misali tari lamonia)</i>	<input type="text"/>
2.63a	Benzathine penicillin	<input type="text"/>
2.64	Diazepam (IM or IV) <i>Allurar sa barci da hana taune-taune</i>	<input type="text"/>
2.65	Mebendazol <i>Maganin tsutsan ciki</i>	<input type="text"/>
2.66	Amoxicillin dispersible <i>Maganin kwayoyin cututtuka (misali tari lamonia, zawo)</i>	<input type="text"/>
2.67	Oral Penicillin <i>Maganin kwayoyin cututtuka na fenicilin</i>	<input type="text"/>
2.67a	Cefotaxime	<input type="text"/>
2.67b	Ampicillin Cloxacillin (injection)	<input type="text"/>
2.68	Calcium gluconate	<input type="text"/>
2.69	Cotrimoxizole	<input type="text"/>
2.70	Tetracycline ointment or silver nitrate eye drops <i>Maganin ciwon idon mai kamar kwantsa</i>	<input type="text"/>
2.71	Corticosteroids (for preterm labour) <i>Maganin da ake baiwa mata masu nakudar da bata kai cikakken lokaci ba domin nunar</i>	<input type="text"/>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	<i>da huhun jariri/jaririya</i>	
2.73	Oxytocin <i>Allurar kare/tsaida yankewar jini ta Ozitosin</i>	<input type="checkbox"/>
2.74	Misoprostol <i>Maganin tsaida yankewar jini ta Miso</i>	<input type="checkbox"/>
2.75a	IV Penicilin	
2.75	IV Ampicillin <i>Allurar ampicillin da ake bayarwa ta hanyar jijiya</i>	<input type="checkbox"/>
2.76	IV Gentamycin <i>Allurar Jenta</i>	<input type="checkbox"/>
2.76a	Injectable Gentamycin	<input type="checkbox"/>
2.77	IV Metronidazole	<input type="checkbox"/>
2.78	Local anaesthetics (such as lidocaine) <i>Allurar kashe jin zafi a fata</i>	<input type="checkbox"/>
2.79	Zinc tablets <i>Sinadarin maganin zawo na yara</i>	<input type="checkbox"/>
2.80	Nevirapine <i>Maganin daake baiwa jarirai domin kare su daga kwayar cutar kanjamau in uwar d'auke da kwayar cutar</i>	<input type="checkbox"/>
2.80a	ARV for mother (e.g. TDF/3TC/EFV) <i>Maganin da ake baiwa uwar da ke d'auke da cutar kanjamau domin bada kariya ga jariransu</i>	<input type="checkbox"/>
2.80b	Chlorhexidine <i>Sinadarin kashe kwayoyin cuttuka da ake shafawa cibiya</i>	<input type="checkbox"/>
2.80c	Magnesium sulphate	<input type="checkbox"/>
2.80d	Erythromycin for preventing infections in cases of Premature Rupture of Membranes (PROM)	<input type="checkbox"/>

Current availability of vaccines

	Does the facility have the following vaccines in stock today? (1) Yes (2) No (3) No access <i>Ko wannan asibitin na da wadannan alluran rigakafin a ajiye a yau?</i> (1) Yes (2) No (3) No access	
2.81	TT vaccine: <i>Allurar bada kariya ta cutar sarkewa</i>	<input type="checkbox"/>
2.82	Vitamin K <i>Allurar tsaida yakewar jinin jarirai</i>	<input type="checkbox"/>
2.83	BCG: <i>Allurar bada kariya daga tarin fuka (BCG)</i>	<input type="checkbox"/>
2.84	OPV: <i>Allurar bada kariya ta cutar shan inna</i>	<input type="checkbox"/>
2.84a	Measles: <i>Allurar bada kariya ta cutar kyanda</i>	<input type="checkbox"/>
2.84b	Pentavalent (DPT/HSV/Influenza)	<input type="checkbox"/>
2.84c	IPV (Inactivated Poliovirus Vaccine)	<input type="checkbox"/>

Current availability of diagnostics

	Which of the following test kits are available in this clinic today? <i>Wane irin kayan gwaji kuke dashi daga cikin wadannan a wannan asibitin/ cibiyar kiwon lafiya yau?</i>	
2.85	Pregnancy test kit (1) Yes (2) No <i>Kayan gwajin tabbatar da samun juna biyu</i> (1) Yes (2) No	<input type="checkbox"/>
2.86	Proteinuria (dipsticks or Multistix) (1) Yes (2) No	<input type="checkbox"/>
2.87	Rapid test for malaria (1) Yes (2) No <i>Awon zazzabin cizon sauro na gaggawa</i> (1) Yes (2) No	<input type="checkbox"/>
2.88	Does the facility offer HIV diagnostics in this clinic? (1) Yes; (2) No (go to 2.90)	<input type="checkbox"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

	<i>Ko ana gwajin binciken kamuwa da kwayar cutar kanjamau a wannan asibitin?</i> (1)Yes; (2) No(go to 2.90)	
2.89	If yes: Does the facility have HIV rapid tests in stock today?(1)yes (2)no (e.g. Dialab, SD Bioline, Determine, Retroscreen, Vikia, HIV Quick Check, Oraquick, DPP, Statpak, Unigold) If yes: Ko wannan asibitin na da kayan gwajin kanjamau na gaggawa a yau? (1)yes (2)no (e.g. Dialab, SD Bioline, Determine, Retroscreen, Vikia, HIV Quick Check, Oraquick, DPP, Statpak, Unigold)	<input type="checkbox"/>
2.90	Does the facility offer syphilis diagnosis? (1)Yes at this clinic; (2) No, not at this clinic(go to 2.93) <i>Ko ana gwajin ciwon sanyi a wannan asibitin?</i> (1)Yes at this clinic; (2) No, not at this clinic(go to 2.93)	<input type="checkbox"/>
2.91	If 2.90yes: Does the facility have syphilis RPR syphilis tests in stock today? (1)Yes (2)No If 2.90yes: Ko akwai kayan aikin gwajin ciwon sanyi a wannan asibitin yau? (1)Yes (2)No	<input type="checkbox"/>
2.92	If 2.90 yes: Does the facility have syphilis rapid tests in stock today? (1)Yes (2)No If 2.90 yes: Ko akwai kayan aikin gwajin ciwon sanyi na gaggawa a wannan asibitin yau?(1)Yes (2)No	<input type="checkbox"/>
2.93	Does the facility have anaemia tests available today, e.g.Haemoglobin colour scale/Tallquist/Hematocrit(1) Yes (2) No <i>Ko akwai kayan aikin gwajin jini a asibitin nan yau?</i> e.g.Haemoglobin colour scale/Tallquist/Hematocrit(1) Yes (2) No	<input type="checkbox"/>

SECTION 3 FACILITY SERVICES

Discuss with the head of facility to determine which services are routinely offered.

Services available

3.1	How many days per week is the facility open? Write number of days <i>Sau nawa a sati ake bude wannan asibitin? Write number of days</i>	<input type="checkbox"/>
	What services are routinely offered at this clinic? <i>Wadanne ayyuka ne ake yi ko yausha a wannan asibitin?</i>	
3.2	Antenatal registration and counselling (1)yes (2)no <i>Rijistar masu zuwan awon ciki da basu shawarwari</i> (1)yes (2)no	<input type="checkbox"/>
3.3	If yes: are antenatal services available today?(1)yes (2)no If yes, Ko an gudanar da ayyukan awon ciki a yau(1)yes (2)no	<input type="checkbox"/>
3.4	Vaccination (1)yes (2)no <i>Alluran rigakafi</i> (1)yes (2)no	<input type="checkbox"/>
3.5	If yes: are vaccination services available today? (1)yes (2)no If yes: Ko anyi alluran riga kafi a yau? (1)yes (2)no	<input type="checkbox"/>
3.6	PMTCT(1)yes (2)no <i>Ko akwai ayyukan bada kariya daga yaduwar ciwon kanjamau daga uwa zuwa da'ya</i> (1)yes (2)no	<input type="checkbox"/>
3.7	If yes: are PMTCT services available today?(1)yes (2)no If yes: Ko akwai ayyukan bada kariya daga yaduwar ciwon kanjamau daga uwa zuwa da'ya a wannan asibitin a yau? (1)yes (2)no	<input type="checkbox"/>
3.8	Family planning counselling(1)yes (2)no <i>Shawarwari domin bada tazarar haihuwa/tsarin iyali</i> (1)yes (2)no	<input type="checkbox"/>
3.9	If yes: is family planning counselling available today? (1)yes (2)no If yes: Ko ana bada shawarwarin bada tazarar haihuwa/ tsarin iyali a yau? (1)yes (2)no	<input type="checkbox"/>
3.10	Post-natal health checks for mother and newborn(1)yes (2)no <i>Binciken lafiya na bayan haihuwa ga uwa da sabon haihuwa</i> (1)yes (2)no	<input type="checkbox"/>
3.11	If yes: are PNC available today? (1)yes (2)no If yes, Ko akwai ayyukan bada shawarwari akan kulawar bayan haihuwa ga iyaye	<input type="checkbox"/>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	<i>da jarirai da aka aiwatar a yau? (1)yes (2)no</i>	
3.12	Maternity/Intra-partum/Delivery care (1)yes (2)no <i>Kulawar renon ciki/kulawar tsakanin haihuwa da jego/kulawar lokacin haihuwa (1)yes (2)no</i>	<input type="checkbox"/>
3.13	If yes: is delivery care available today? (1)yes (2)no If yes: <i>Ko akwai ayyukan kulawar renon ciki/kulawar lokacin haihuwa a yau? (1)yes (2)no</i>	<input type="checkbox"/>
3.14	If delivery services are offered: How many days per week are delivery services available? <i>Kwanaki nawa ne a sati ake gudanar da ayyukan renon ciki/kulawar lokacin haihuwa?</i>	<input type="checkbox"/>
3.15	If delivery services are offered: How many days per week are delivery services available 24 hours/day? Enter number of days <i>Kwanaki nawa ne a cikin sati ake gudanar da ayyukan kulawa da haihuwa a kowace rana? Enter number of days</i>	<input type="checkbox"/>
3.15 a-i	If yes: Does this facility routinely administer oxytocin injection immediately after birth to all women for the prevention of post-partum haemorrhage? (1)yes (2)no <i>Ko a wannan asibitin akan yi mata allurar tsaida jini jim kadan bayan haihuwa domin kariya ga kwararar jini</i>	<input type="checkbox"/>
	Please tell me if any of the following interventions for the management of complications during and after pregnancy and childbirth have been carried out in the last 3 months (1 st May 2019 - 31 st July 2019) by providers of delivery services as part of their work in this facility. Int: try to verify from record books in addition to asking the respondent <i>Ka/ki gaya min ko aiwatar da wadannan taimakon domin kare matsaloli da ke iya faruwa lokacin goyon ciki, ko lokacin nakuda ko bayan haihuwa a kan ayyukan da suke yi a wannan asibiti?</i>	
3.15b	Parenteral administration of antibiotics (IV or IM) (1)yes (2)no	<input type="checkbox"/>
3.15c	Parenteral administration of oxytocic for treatment of post-partum haemorrhage (IV or IM) <i>Yin allurar tsaida jini ta hanyar jijiya domin tsaida kwararar jini byan haihuwa (1)yes (2)no</i>	<input type="checkbox"/>
3.15d	Parenteral administration of anticonvulsants for pre-eclampsia and eclampsia (i.e. magnesium sulphate) IV or IM) <i>Yin allurar magnesium sulfate ta hanyar jijiya domin tsaida ciwon taune-taune (1)yes (2)no</i>	<input type="checkbox"/>
3.15e	Perform assisted vaginal delivery (e.g. vacuum extraction, forceps delivery) <i>Yin amfani da na'urar zuko jariri ko karfen jawo jariri daga hanyar haihuwa (1)yes (2)no</i>	<input type="checkbox"/>
3.15f	Perform manual removal of placenta <i>Zakulo uwar maihaifa da hannu (1)yes (2)no</i>	<input type="checkbox"/>
3.15g	Perform removal of retained products of conception <i>Zakulo sauran uwar maihaifa ko tantanin da suka rege a baya (1)yes (2)no</i>	<input type="checkbox"/>
3.15h	Perform neonatal resuscitation (e.g. with a bag and mask) <i>Farfado numfashin jariri misali da bututu iska (1)yes (2)no</i>	<input type="checkbox"/>
3.15i	Perform surgery (e.g. caesarean section) <i>Yin tiata domin ciro jariri (1)yes (2)no</i>	<input type="checkbox"/>
3.15j	Perform blood transfusion <i>Karin jini (1)yes (2)no</i>	<input type="checkbox"/>
3.16	Abortion services	<input type="checkbox"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

	<i>Taimako da ake bayarwa idan mace tayi bari</i> (1)yes (2)no (1)yes (2)no	
3.17	If yes: are abortion services available today? (1)yes (2)no If yes: <i>Ayau, ana bda taimako idan mace tayi bari</i> <i>? (1)yes (2)no</i>	_
3.17a	If yes: what is the cost of routine abortion services? <i>Enter total in Naira</i> 0 if free If yes: <i>Nawa ne kudin da ake biya wajen bada taimako idan mace tayi bari? Enter</i> <i>total in Naira</i> 0 if free	_ _ _ _ _ _ _
3.18	Are there ever any meetings where service statistics for delivery services are discussed with staff working at this facility? (1)yes (2)no <i>An taba gabatarda zauren tattaunawa akan alkaluman ayyukan haihuwa a wannan</i> <i>asibiti? (1)yes (2)no</i>	_
3.19	Does the facility practise Kangaroo Mother Care (KMC)? (1)yes (2)no <i>Ko wannan asibitin nagudanar da ayyukan dumama bakwaini? (1)yes (2)no</i>	_
3.19a	If yes: Does the facility have a space available specifically for mothers to practise KMC? <i>A wannan asibitin akwai waje na musamman da aka ware domi koyarda hanyoyin</i> <i>da ake dumama jaririrai</i> (1)yes (2)no	_

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

Health staff on the day of survey:

Ask the in-charge to tell you the following about the staff at the facility. Enter the number. Under 'other' include all other staff at the facility, even non-health staff e.g. cleaners

	HOW MANY STAFF:	Medical Doctors	Nurses	Midwives / nurse- midwives	(CHW) Community Health Workers (JCHEW, CHEW, CHO)	(EHW) Environm ental Health Workers (EHA, EHT, EHW)	Other	Total
	Employed in the facility? <i>Nawa aka dauka aiki a wannan asibitin?</i>	3.20	3.21	3.22	3.23	3.24	3.25	3.26
	Trained in clean and safe delivery (including training in AMSTL and use of uterotonics)? <i>Nawa aka horar akan hanya mafi tsabta kuma marar hadari wajen amsar haihuwa?</i>	3.27	3.28	3.29	3.30	3.31	3.32	3.33
	Trained in essential newborn care/PNC? <i>Nawa aka horar akan ayyukan karbar haihuwa da kula da su na musamman?</i>	3.34	3.35	3.36	3.37	3.38	3.39	3.40
	Trained in PMTCT? <i>Nawa aka horar kan ayyukan bada kariyar yaduwar kanjamau daga uwa zuwa 'da/ya?</i>	3.41	3.42	3.43	3.44	3.45	3.46	3.47
	Trained in syphilis screening? <i>Nawa aka horar akan ayyukan tantance kamuwa da ciwon sanyi?</i>	3.48	3.49	3.50	3.51	3.52	3.53	3.54
	Trained in IMCI? <i>Nawa aka horar akan gamayyar ayyukan kula da cutuktukan yara?</i>	3.54a	3.54b	3.54c	3.54d	3.54e	3.54f	3.54g
	Trained in KMC? <i>Nawa aka horar akan ayyukan dunduma bakwaini?</i>	3.54h	3.54i	3.54j	3.54k	3.54l	3.54m	3.54n
	Trained in newborn resuscitation? <i>Nawa aka horar akan farfado da nunfashin jariri?</i>	3.54o	3.54p	3.54q	3.54r	3.54s	3.54t	3.54u
	Trained in post-partum family planning <i>Nawa aka horar akan ayyukan tazarar haihuwa lokacin jego?</i>	3.54v	3.54w	3.54x	3.54y	3.54z	3.54za	3.54zb
	Trained in 'helping babies breathe' (resuscitation)?	3.54zc	3.54zd	3.54ze	3.54zf	3.54zg	3.54zh	3.54zi
	Provide antenatal care? <i>Nawa aka horar akan</i>	3.55	3.56	3.57	3.58	3.59	3.60	3.61

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	<i>ayyukan bada kulawar awon ciki?</i>							
	Attend deliveries? <i>Nawa aka horar domin amsar haihuwa?</i>	3.62	3.63	3.64	3.65	3.66	3.67	3.68
	Provide essential newborn care? <i>Nawa ne aka horar akan bada ayyukan kulawar sabon haihuwa?</i>	3.69	3.70	3.71	3.72	3.73	3.74	3.75
	At work today? <i>Nawa ne suka zo aiki yau?</i>	3.76	3.77	3.78	3.79	3.80	3.81	3.82
3.82a	In the last seven days did this facility have at least one midwife/clinician available 24 hours a day, 7 days a week? <i>A cikin kwanaki bakwai na baya-bayan nan, akwai kwararriyar ngozoma (midwife) ko likita wanda ke nan a cikin kowane sa'a na ranakunun sati bakwai.</i> (yes) (2) no							<input type="checkbox"/>

Supervision

Ask the In-Charge about supervision visits (NOT PASSING THROUGH VISIT) received over the last six months (1st February 2019 – 31st July 2019), plus details about the last visit. If respondent is unsure, try looking in the visitors' book

3.83	Did the facility receive a supervision visit in the last six months? (1)yes (2)no <i>A cikin watanni shida da suke wuce, ko an kawo ziyarar binciken nagartar aiki a wannan asibitin?(1)yes (2)no</i>	<input type="checkbox"/>
3.84	When was the last supervision visit? Enter date <i>Yaushe ne aka kawo ziyarar binciken nagartar aiki ta karshe? Enter date</i>	<input type="text"/>
	Now please think about the last supervision visit. Which supervisors came on the last visit? (tick all that apply) Wadanne jami'an ziyarar binciken nagartar aiki ne suka zo a ziyara ta karshe? (tick all that apply)	(1)Yes (2)No
3.85	Federal Ministry of health team <i>Kungiya daga ma'aikatar kiwon lafiya ta kasa</i>	<input type="checkbox"/>
3.86	State Ministry of health team <i>Kungiya daga ma'aikatar kiwon lafiya ta Jiha</i>	<input type="checkbox"/>
3.87	LGA health office team <i>Kungiya daga ma'aikatar kiwon lafiya ta karamar hukuma</i>	<input type="checkbox"/>
3.88	Other Medical doctor <i>Wasu likitocin daban</i>	<input type="checkbox"/>
3.89	Project visitor [e.g] SFH) (specify) <i>Jami'i mai lura da aikin binciken nagartar aiki, misali daga Kungiyar kula da lafiyar lyali (SHF)</i>	<input type="checkbox"/>
3.90	Vaccine official(non-government) <i>Jami'in bada allurar riga kafi (wanda ba daga gwamnati ba)</i>	<input type="checkbox"/>
3.90a	Ward Development Committee	<input type="checkbox"/>
3.91	Other (specify) <i>Wani abun daban</i>	<input type="checkbox"/>

Appropriate technology and usual practice

Ask the In-Charge - or head of the maternity ward - about usual practice during deliveries.

	Which of the following are routine practise during deliveries in this clinic: <i>Wadanne abubuwa ne, ayyukan yau da kullum da akeyi lokacin haihuwa a wannan asibitin</i>	(1)=Yes(2)=No
3.92	Use of partograph <i>da take cigaba/rashin cigaban</i>	<input type="checkbox"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

3.93	Active management of 3 rd stage of labour (AMTSL) <i>Ayyukan kare hatsarin gabar karshe ta haihuwa</i>	<input type="checkbox"/>
3.94	Newborn stays with mother in the same room <i>Sabon haihuwa na zama da uwa a daki daya</i>	<input type="checkbox"/>
3.95	Mother receives vitamin K before discharge <i>Uwa ta karbi sinadrin vitamin K kafin sallama</i>	<input type="checkbox"/>
3.96	Newborns are weighed immediately <i>Gwada nauyin sababbin haihuwa da zaran an yi haihuwar</i>	<input type="checkbox"/>
3.97	Newborns are fully bathed within 24 hours of birth <i>Yi ma sababbin haihuwa wanka cikin awa 24 bayan haihuwa</i>	<input type="checkbox"/>
3.98	Newborn given OPV vaccine prior to discharge <i>Baiwa sabon haihuwa allurar rigakafin polio kafin sallama</i>	<input type="checkbox"/>
3.99	Newborn given BCG vaccine prior to discharge <i>Baiwa sabon haihuwa allurar rigakafin BCG kafin sallama</i>	<input type="checkbox"/>
3.99a	Application of chlorhexidine on newborn cord <i>Ana sa wa sabon haihuwa sinadarin chlohexidine a cibiya bayan haihuwa</i>	<input type="checkbox"/>

Management

Ask the in-charge – about how the facility is run and managed

Now I'd like to ask a few questions about the way the facility is run and managed.

Yanzu ina son in yi wassu 'yan tambayoyi dangane da yadda ake gudanar da asibitin

Question name		
3.100	Does the facility have a triage system – (a system in which every patient who enters the facility is assessed (their vitals) whether they need to be seen urgently?) 1) Yes 2) No SKIP to 3.101 <i>Shin asibitin nan na da tsarin ware majinyata a kan zafin ciwon su?</i> 1) Yes 2) No SKIP to 3.101	<input type="checkbox"/>
3.100a	If 3.105 is yes. Who does this check? 1) assessed by health professional (e.g. nurse) 2) assessed by unqualified person (e.g. receptionist) <i>In akwai waye yake wannan binciken/kimantawa</i> 1. Kwararren ma'aikacin jinya 2. Ma'aikatan jinyan da basu kware ba (Misali- mai karban marasa lafiya)	
3.101	Do you use patient records? (These are files containing the medical history of a patient that do not leave the health facility.) 1) Patient record for all patients 2) Patient record for some patients 3) No patient records system <i>Kuna amfani da rubutattun bayanai jinya? (Wadannan fayiloli ne dauke da tarihin marassa lafiya da likita ya rubuta wa'yanda ba'a barin su bar cibiyar kiwon lafiya)</i> 1. Akwai bayanai jinya rubutattu na duka majinyaci 2. Akwai bayanai jinya rubutattu na wasu daga cikin majinyaci 3. Babu bayanai jinya rubutattu kowane majinyaci	<input type="checkbox"/>
3.102	Are there patients who you don't create a patient record for?	<input type="checkbox"/>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	<p>1) Yes 2) No</p> <p><i>Akwai majinyatan da ba'a bude musu kundin tattara bayanan jinyar su?</i></p> <p>1) Yes 2) No</p>	
3.103	<p>Do you submit information on patient cases to HMIS – the government's health management information system?</p> <p>1) Yes 2) No</p> <p><i>Kuna bayar da bayanen masu jinya da aka tattara zuwa gas sashen tattara bayanai na gwamnati (HMIS)?</i></p> <p>1) Yes 2) No</p>	<input type="checkbox"/>
3.104	<p>Do you monitor any patient indicators at this facility other than those submitted to HMIS? <i>By patient indicators, I mean numbers which you measure to tell you something about whether the facility is providing quality services. For example, you might monitor the number of women referred to PMTCT.</i></p> <p>1) Yes 2) No SKIP to 3.107</p> <p><i>Kuna lura da duk wani manuniya (indicator) na majinyata a wannan asibitin ban da wadanda aka biwa sashen tattara bayanai na gwamnati (HMIS)? Ina nufin wadansu manuniya da ke nuna cewa asibitin na bada ingantaccen kulawa misali yawan mata da aka tura cibiyar hana yaduwar cutar kanjamau (HIV) daga iyaye mata zuwa ga jariri</i></p> <p>1) Yes 2) No SKIP to 3.107</p>	<input type="checkbox"/>
3.105	<p>How many indicators do you monitor?</p> <p>1) 1-2 patient indicators 2) 3-9 patient indicators 3) 10+ patient indicators</p> <p><i>Manuniya nawa kuke lura da su?</i></p> <p>1) Daya zuwa biyu 2) Uku zuwa tara 3) Fiye da goma</p>	<input type="checkbox"/>
3.105a	<p>Can you list some of the patient indicators you monitor in this facility?</p> <p><i>Ko zaka/ki irga manuniya da ake lura da su na majinyata?</i></p>	<hr/> <hr/> <hr/>
3.106	<p>Do you regularly produce a report reviewing these patient indicators? <i>By report, I mean a document in which you have tables or graphs to help your team review the performance of this facility.</i></p> <p>1) Yes 2) No</p> <p><i>Kuna yin rahoto akai-akai game da wadannan manuniyar majinyata? Ta hanyar rahoton, ina nufin takardun da kake da bayanai, da alkaluma don taimakawa tawagar ku don duba kokarin da asibitin ke yi.</i></p> <p>1) Yes</p>	<input type="checkbox"/>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	2) No	
3.107	<p>Do you monitor any business performance indicators at this facility? <i>For example, you might monitor the income from NHIS or cash patients. These are numbers which tell you about the business performance of the facility.</i></p> <p>1) Yes 2) No SKIP to 3.111</p> <p><i>Kuna lura da duk alamun (manuniya) kwazon kasuwancin asibitin? Alal misali, zaku iya saka idanu akan samun kuɗi daga NHIS ko daga marasa lafiya. Wadannan lambobi ne waɗanda suke gaya maka kwazon kasuwancin asoibitin</i></p> <p>1) Yes 2) No SKIP to 3.111</p>	<input type="checkbox"/>
3.108	<p>How many business indicators do you monitor?</p> <p>1) 1-2 business indicators 2) 3-9 business indicators 3) 10+ business indicators</p> <p><i>Alamomi (manuniya) kasuwanci nawa kuke lura da su?</i></p> <p>1) Daya zuwa biyu 2) Uku zuwa tara 3) Fiye da goma</p>	<input type="checkbox"/>
3.108b	<p>Can you list some of the business indicators you monitor in this facility?</p> <p><i>Ko zaka/ki irga alamomi (manuniya) kasuwanci nawa kuke lura da su?</i></p>	<hr/> <hr/> <hr/> <hr/>
3.109	<p>Do you regularly produce a report reviewing these business performance indicators?</p> <p>1) Yes 2) No</p> <p><i>Kuna yin rahoto akai-akai game da waɗannan alamun (manuniya) aikin kasuwanci?</i></p>	<input type="checkbox"/>
3.110	<p>How frequently do you produce this report (Business performance report)?</p> <p>1) Yearly 2) Quarterly 3) Monthly 4) Weekly</p> <p><i>Kamar sau nawa kuke samar da wannan rahoto?</i></p> <p>1) Ko wane shekara 2) Kowane wata uku 3) Kowane wata 4) Kowane sati</p>	<input type="checkbox"/>
3.111	<p>Do you set targets for this facility to achieve? <i>By targets, I mean specific numerical or quantitative goals which you aim for the facility to reach in the future.</i></p> <p>1) Yes 2) No SKIP to 3.113</p> <p><i>A wannan asibitin, kuna saita zangon da kuke so ku cimma? Ina nufin wassu alkaluma ko yawan aiki da asibitin ke son ta cimma zuwa nan gaba.</i></p>	<input type="checkbox"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

	1) Yes 2) No SKIP to 3.113	
3.112	What kind of targets do you set and over what period of time are they set? 1) <i>Main focus is on short term (up to one year) targets</i> 2) <i>Main focus is on long term (over one year) targets</i> 3) <i>Combination of short-term and long-term targets</i> <i>Wane irin zangon alkalumma kuke shiryawa</i> 1) <i>Munfi mayar da hankali akan gajeren zango (har zuwa shekara daya)</i> 2) <i>Munfi mayar da hankali akan dogon zango (fiye da shekara daya)</i> 3) <i>Mu kan hada gajeru da dogayen zango</i>	<input type="text"/>
3.113	Do you have a training plan in place to improve the skills of your health workers going forward? 1) Yes 2) No SKIP to 3.115 <i>Kuna da rubutaccen shirin horar da ma'aikatan jinya don inganta kwarewar su a gaba?</i> 1) Yes 2) No	<input type="text"/>
3.114	How many years does this plan cover? 1) <i>Long term plan (more than one year) in place</i> 2) <i>Short term plan (one year or less) in place</i> <i>Rubutaccen tsarin na shekaru nawa ne?</i> 1) <i>Dogon zango (fiye da shekara) muke da shi</i> 2) <i>Gajeren zango (shekara daya ko kasa da haka)</i>	<input type="text"/>
3.115	Do healthcare workers in the facility receive a fixed monthly salary? Does the salary vary from month to month based on facility or individual performance? 1) Fixed monthly salary 2) Share of facility revenue 3) Bonus based on targets of patient numbers 4) Bonus based on other measures of performance 5) Others (Please specify) <i>Shin ma'aikatan kiwon lafiya a asibitin suna samun kayyadedden alabashi a kowane wata? Shin alabashi ya bambanta daga wata zuwa wata bisa ga aikin asibitin ko aikin mutum?</i> 1) <i>Kayyadedden alabashi ko wane wata</i> 2) <i>Ana raba kudin shiga na asibitin</i> 3) <i>Busa na kudi bisa ga cimma adadin marassa lafiya da aka yarda da shi</i> 4) <i>Busa na kudi bisa ga wa'yansu ma'aunai na kokari ko Nazari</i> 5) <i>Wani abu dabam (amabata)</i>	<input type="text"/>
3.115a	If the salary vary from month to month based on facility or individual performance? can you explain further? <i>In albashin ya kan bambanta daga wata zuwa wata bisa ga aikin asibitin ko aikin mutum? Yi Karin bayani a kayi</i>	<hr/> <hr/>
3.116	Do you have any formal system to appraise the performance of healthcare workers? 1. <i>Formal appraisal system exists</i>	<input type="text"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

	<p>2. No formal and regular appraisal system</p> <p><i>Kuna da wani tsari na musamman domin auna nazarin aikin ma'aikatan kiwon lafiya?</i></p> <p>1. Akwai tsari na musamman domin auna nazarin aikin ma'aikatan</p> <p>2. Babu wani tsari na musamman domin auna nazarin aikin ma'aikatan</p>	
3.117	<p>Do you keep an inventory of your drug stock? That is, do you physically count how many of each drug you have from time to time?</p> <p><i>Kuna ajiye alkalumman yawan magunguna a asibitin? Ma'ana kidaya yawan kowane nau'in magani da ake da shi a asibitin daga lokaci zuwa lokaci?</i></p> <p>1) Yes</p> <p>2) No SKIP to 3.118</p>	<input type="checkbox"/>
3.117a	<p>How often do you carry out an inventory of your stock?</p> <p>1. Every quarter or more frequently</p> <p>2. Every six months</p> <p>3. Every year</p> <p><i>Sau nawa kuke gudanar kidayar kayan ku?</i></p> <p>1. Kowane wata uku ko kasa da haka</p> <p>2. Kowane wata shida</p> <p>3. Kowane shekara</p>	<input type="checkbox"/>
3.118	<p>Do you have an annual budget of the likely costs the health facility will face over the next year?</p> <p>1) Yes</p> <p>2) No</p> <p><i>Ko akwai kasafin kudin da yake nuna wayan kudade da asibitin ke bukata a kowane shekara</i></p> <p>1) Yes</p> <p>2) No</p>	<input type="checkbox"/>
3.119	<p>Do you produce an annual statement of the facility revenue and expenditure?</p> <p>1) Yes</p> <p>2) No</p> <p><i>Ko kuna wallafa bayanan kudin shiga da fita a kowane shekara?</i></p> <p>1) Yes</p> <p>2) No</p>	<input type="checkbox"/>

Section 4 FACILITY RECORDS

**Number of deliveries and number of live births in the last 6 months
(1st February 2019 – 31st July 2019)**

Ask the health worker assisting to see all the Facility Registers for the previous 6 completed months. i.e. [provide correct date range]

		N of events
	During the last six months:	
4.1	<p>What was the total number of deliveries in the clinic? Include all birth outcomes. Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin haihuwar da aka yi a wannan asibitin?</i></p> <p>Write the number, or write 999 if information not available</p>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
4.2	<p>What was the number of unassisted deliveries in the clinic?</p> <p>Write the number, or write 999 if information not available</p>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

**IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019**

	<p><i>Nawa ne adadin haihuwar da ba a taimaka wa mai jego ba wajen karbar a wannan asibitin?</i> Write the number, or write 999 if information not available</p>	
4.3	<p>What was the number of caesarean sections in the clinic? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin haihuwar da aka yi ta hanyar yin aikin tiyata domin ciro jariri a wannan asibitin?</i> Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.4	<p>What was the number of maternal fatalities in the clinic? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin matan da suka rasa rayukar su a sanadiyan juna biyu/haihuwa/jego a wannan asibitin?</i> Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.5	<p>What was the number of maternal fatalities due to obstructed labour in the clinic? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin matan da suka rasa rayukan su a sanadiya doguwar nakuda a wannan asibitin?</i> Include all birth outcomes. Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.6	<p>What was the number of maternal fatalities due to eclampsia/pre-eclampsia? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin matan da suka rasa rayukan su a sanadiyarcutar taune-taune a wannan asibitin?</i> Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.7	<p>What was the number of maternal fatalities due to puerperal sepsis? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin matan da suka rasa rayukan su a sanadiyar kamuwa da kwayoyin cutuktuka a wannan asibitin?</i> Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.8	<p>What was the number of live births in the clinic? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin jariran da aka haifa da rai a wannan asibitin?</i> Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.9	<p>What was the number of still births in the clinic? Write the number, or write 999 if information not available</p> <p><i>Nawa ne adadin jariran da aka haifa a wannan asibitin waɗanda basu zo da rai ba?</i> Write the number, or write 999 if information not available</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.21	<p>What was the number of live births with birth weight <2500 grammes (or <2.5kg)? Write the number or write 999 if information not available</p> <p><i>Nawa ne adadin jariran da aka haifa da rai waɗanda nauyin su ya gaza <2500 ko <2.5 kg) Write the number or write 999 if information not available</i></p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.22	<p>How many live birth records did not have birth weight recorded? Write the number of missing birth weight records</p> <p><i>Nawa ne adadin haihuwar da ta zo da rai wadda ba'a rubuta nauyin jariran ba?</i> Write the number of missing birth weight records</p>	<div> <div></div> <div></div> <div></div> <div></div> </div>
4.22a	<p>What was the number of live births recorded as preterm births (<37 weeks gestation)?Write the number or write 999 if information not available</p> <p><i>Nawa ne adadin jariran da aka haifa waɗanda watannin cikin su bai cika bai?</i> Write the number or write 999 if information not available</p>	
4.22b	<p>What was the number of live births with no gestational age recorded? Write the number of missing gestational age records</p> <p><i>Nawa ne adadin jarirai da aka haifa masu rai waɗanda ba'a rubuta</i></p>	<div> <div></div> <div></div> <div></div> <div></div> </div>

IDEAS Phase 2 HEALTH FACILITY SURVEY
Gombe State, Nigeria, August 2019

	<i>watanninzaman su a cikin uwa ba?</i> Write the number of missing gestational age records	
4.23	What number of newborns were referred for treatment/extra care? Write the number of newborns referred for treatment <i>Nawa ne adadin jariran da aka tura zuwa gaba domin samun magani/kulawa ta musamman?</i> Write the number of newborns referred for treatment	_ _ _
4.23a	What number of newborns were started on KMC in the facility?	_ _ _
4.24	What number of newborns were admitted for treatment/extra care? Write the number or write 999 if information not available <i>Nawa ne adadin jariran da aka kwantar a wannan asibitin domin samun magani/kulawa ta musamman?</i> Write the number or write 999 if information not available	_ _ _
4.25	Are the maternity record books completely up to date until the day before survey? (1) Yes (2) No <i>Ko akwai cikakken bayani kan al'kaluman haihuwa a rubuce kafin ranar da aka fara wannan binciken ko tambayoyi?</i> (1) Yes (2) No	_
4.26	What is the date of the most recent birth recorded in the maternity register? Date: look up on PDA <i>Wace ranace ta baya-bayan nan da aka rubutata sabon haihuwar da aka samu a wannan asibitin?</i> Date: look up on PDA	_ _ / _ _ _ _