

**HEALTH FACILITY SURVEY ON THE QUALITY OF OUTPATIENT CHILD CARE
SERVICES**

(“IMCI HEALTH FACILITY SURVEY”)

**Survey Procedures
and
Question-by-Question
Explanations**

*Adaptation for the survey in Sudan
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**World Health Organization
Regional Office for the Eastern Mediterranean
Child and Adolescent Health and Development Unit**

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- ☞ **N.B. All information should be recorded on the forms very clearly (please, PRINT), using *English* for words and *Arabic numbers* (1, 2, 3, etc.) for numbers, unless otherwise stated.**

❖ PROCEDURES

- As soon as the survey team arrives at the facility, the supervisor will:
 - Introduce the team and objectives of the visit to the facility director;
 - Identify staff who are seeing sick children below 5 years old;
 - Identify a room for the exit interview and re-examination of the child;
 - Request for preparation of selected information of Form 4;
 - Clearly instruct the nurse or other support staff (if present) to wait to weigh children enrolled in the survey until the surveyor is present; and
 - Agree with the director on the estimated time set for feedback.
- Stop observation of case management (Form 1) of any case after 1.00 p.m..
- If no child is present at the time the survey team arrives at the health facility, enrol any child - meeting the 2 enrolment requirements - who is taken to the facility and seen by the provider by 1.00 p.m.;
- Provide feedback to health facility staff by 2.00 p.m..

EC. Enrolment card

The supervisor completes the enrolment card for each child less than five years old taken to the facility for an initial visit for any non-surgical complaint. The card therefore serves to screen all children in order to identify those meeting the entry criteria for the survey before the health provider sees them. The card is also used to track progress of the child through the facility. After completing the card and enrolling the child in the survey, the supervisor gives the card to the caretaker. The caretaker carries the card with her/him, showing it to the first surveyor (observation of case management) and then to the second surveyor (exit-interview and re-examination of child). When the child has been re-examined and the caretaker is about to leave the facility, the card is collected by the supervisor or the second surveyor and stapled together with the other completed forms for the same child. If a caretaker has more than one child included in the survey, then each child should have a separate enrolment form.

- ❖ *The following information may be recorded before arriving at the facility:*

-
- **Date:** Fill in the date of the visit ("today's date"): day and month (the year is already printed)
 - **State:** Write the full name of the State.
 - **District:** Write the full name of the District clearly.
 - **Facility Code:** The facility code is a two-digit number assigned to each health facility by the survey coordinator. The codes are available from the survey list of facilities in advance.

- **Facility Name:** Write the full name of the health facility in Arabic.
- **Facility type:** Tick one of the three types pre-listed on the form (HOSP = Rural hospital, HC = health centre, D/DS = dispensary or dressing station), based on what is indicated in the survey list of facilities given to you by the survey coordinator in advance.

❖ *All the following information will be recorded at the facility:*

- **Child's Name:** Write the *child's name* in Arabic in the space provided.
- **Child's ID:** Every child enrolled in the survey will be given a two-digit number, as they come to the facility. At *each* health facility, the child's ID numbers start with 01 for the first child enrolled, followed by 02 for the second, and so on. [The only exception is a child with a severe condition that is sent straight to the doctor]. At each health facility visited, the first child seen is always 01. The same Child ID number written on the enrolment form will be used by surveyors to complete the child ID boxes on forms 1, 2 and 3.
- **Questionnaire #:** this is a four-digit number. The first two digits are the Facility Code and the two last digits are the Child ID number. For example, if the facility code is **14**, and the child's ID number is **05**, the Questionnaire number will be: **1405**.
- **Child's birth date:** Write the day, month and year of the child's birth date (dd/mm/yyyy). Use two digits for the day and month and four digits for the year. If the caretaker gives you the age (for example, "three years"), probe for the birth date. If the caretaker does not know the birth date, check other documents such as the birth certificate or health card or vaccination card. If the birth date is unknown, record the age of the child in months in the next field.
- **Age (months):** The age of every child selected should be recorded in months (already completed), using two digits. The range is from 02 to 59 months. For example, a child who will become 3 years old next week should be recorded as 35 months today. A child less than 2 months old (e.g., 1 month and 29 days old) should not be included in the survey. You must enter an age in months for all children, even if it is just your best estimate.

 **Rule on ticking answers: always place the tick ✓ within the square brackets**

(Example: [Y✓s]).

- **Child sex:** Write down the sex of the child. Tick **[M]** if the child is a boy (M = male) and **[F]** if it is a girl (F = female).

Include in the survey only children who are 2 months up to 5 years old. To be sure, write the date of the visit to the facility in the spaces provided and then check whether the child's birth date is within the two dates shown on the Enrolment Card, as explained during training.

- **EC1:** Ask the child's caretaker whether this visit is the first, initial visit for the child's current illness. Include only initial visits. If this is a follow-up visit for the same illness, stop here, do not include that child in the survey and go to the next child.

- **EC2:** Ask the caretaker the reason why she has taken the child to the health facility. Tick all signs mentioned. For each of the signs listed on the form, tick [Yes] if the caretaker mentions it and [No] if the caretaker does not mention it. Probe only by asking: “Any other problems?”. Then ask a second time: “Any other problems?”. However, do not read to the caretaker the signs listed on the form.
 - **B1. Fever:** If the caretaker mentions “fever”, then write in the space provided to the right the exact word/s used by the caretaker for “fever”.
 - **D1. Fast/difficult breathing/pneumonia:** Similarly, if the caretaker mentions any of these respiratory problems, write in the space provided to the right the exact word/s used by the caretaker. Do not attempt to translate what the caretaker says using your own medical terms. Just record what she/he tells you.
 - **D2. Time to care-seeking:** If the caretaker has mentioned a breathing problem (see “D” above)), then ask how long s/he waited to seek care from this facility from the time she realised the child had the breathing problem (and not just from the time the child had cough, for example).
 - **F1. Unable to drink...:** If the child has any of these danger signs, ask the same question as D2. Remember: the stress here is on the time waited since the danger sign appeared, not since the child simply became sick.
 - **G. Other (specify):** If the caretaker mentions a sign that is not included in the list provided above from A to F, then tick [✓Yes] and write the complaint (e.g., skin rash, abdominal pain, etc.).
- **EC3:** Ask the caretaker what was the sign that worried her/him so much to prompt her/him to take the child to the facility today. Write only one sign. If the caretaker mentions more than one sign, then ask which of the signs that she/he has mentioned actually worried her/him most. Write the sign using exactly the same words that the caretaker uses. To the right, in brackets, place the approximate translation of the meaning in English.

Caretaker agreement to participate: Read to the caretaker the statement in Arabic about the survey provided separately. Tick [✓Yes] or [✓No] according to whether the caretaker consents or does not consent to participate and write your initials. If the caretaker consents, enrol the child in the survey. If the caretaker does not consent, keep the enrolment card: for the analysis of the data, we need to keep track of how many eligible children were not enrolled in the survey.

- **Weight and temperature:** Surveyor 1 will write here the weight of the child in Kilos and the temperature in degrees Celsius, based on the weight and temperature taken by the facility staff. If the temperature is in Fahrenheit, convert it to Celsius using the conversion table. If no weight and/or temperature are taken, write “NA”. [Surveyor 2 will weigh the child if the weight has not been taken but take the temperature again for each child and record them on form 3.]


- **Form 1, 2, 3:** Each of these three items is ticked by surveyors as the survey forms are completed.

Surveyors copy the questionnaire number from the enrolment form onto the field provided on the top margin, right hand side, of every page of Forms 1, 2 and 3. Writing the questionnaire number on every page of the questionnaire forms helps identify each page of the forms in case some pages become loose and separated from the other pages of the forms.

- **Time:** Write at the bottom of the form the approximate time in minutes taken for the examination of this child.

1. FORM 1 (OBSERVATION CHECK-LIST FOR THE SICK CHILD)

Upon arrival at the facility, the survey team will identify the health provider/s that they will observe managing cases.

 **General rule about recording answers: whenever you are unsure about how to record an answer, write a note on the form for discussion with the survey team supervisor and survey coordinator later on.**

1.1 Overview of Form 1

Organisation

Form 1 is used to record observations about the health provider's management of the child. It is organised into four sections:

1. General information - the surveyor records general information about the health facility, the health provider and the sick child being observed;
2. Assessment module (A) - the surveyor observes and records the assessment tasks completed by the health provider;
3. Classification module (C) - the surveyor observes and records the classification/s made by the health provider;
4. Treatment module (T) - the surveyor observes and records the treatment given by the health provider;
5. Counselling module (CM) - the surveyor observes and records counselling tasks conducted by the health provider.

Methods for using Form 1

The surveyor who completes the observation checklist (Form 1) sits in the same consultation room as the health provider who sees sick children. The surveyor must be able to observe what the health provider says and does, but should not interfere with normal practice. Because this is an observation of practice, the surveyor should not speak or interrupt the consultation at any time. Surveyors should not express opinions or give advice.

Sometimes the classifications made or treatment given are not clear by the end of the consultation, because the health provider has not discussed them with the caretaker. In this situation, the surveyor may ask the health provider the classification and treatment given when the consultation is over. This is the only time when the surveyor is allowed to ask the health provider a direct question.

Children identified for Form 1 (observation)

All sick children aged 2 to 59 months of age presenting for the first time at that facility during the clinic hours have been included and accompanied by the supervisor to the room where the health provider sees the children. All children for inclusion in the survey

have therefore been identified in advance by the supervisor and given the enrolment form. *For each child enrolled in the survey, the surveyor must complete a Form 1.*

Children enrolled in the survey are observed sequentially, starting with the child with "Child ID" <01>, then continuing with the child with the ID <02> and so on, until the last child has been seen. If a caretaker has more than one child enrolled, then a Form 1 must be completed for each child.

Procedures for observing case management tasks in enrolled children

The general rule is that the surveyors will follow the sick child enrolled in the survey from beginning to end, irrespective of how many health providers deal with the same child. In large health facilities, it is in fact possible that more than a health provider sees a sick child, e.g., for weighing, taking the temperature, examination, counselling, etc.: *the surveyors will observe and record the clinical management of each sick child, regardless of the health provider who sees the child.* This is because this survey focuses on the quality of care provided to sick children coming to the facility.

During the survey period, health providers at the facility surveyed should *wait* to start the clinical consultation with a child enrolled in the survey (i.e., with an Enrolment Card) *until* the surveyor conducting the observation is present in the room.

Completing Form 1 (observation checklist)

1. Complete the identifying information at the top of Form 1, copying the relevant information from the Enrolment Card and completing the information on the health provider. Copy the questionnaire number from the Enrolment Form onto the top, right hand side of all the pages of Form 1. It is important to do this before the observation begins. (Some of this information may have been recorded in advance).
2. Observe the clinical management and complete Form 1. It is important to listen and observe carefully and record exactly what the health provider says and does. It is very common for health providers to ask questions, conduct the examination or give counselling or treatment advice in a non-sequential manner. For example, the health provider may carry out a few assessment tasks while asking a few questions on the history, then do some counselling, then continue with more assessment tasks and so on. Tasks often do not follow the order presented in the Form. For this reason, *surveyors must be prepared to jump around the Form and complete it in a non-sequential fashion.* In order to do this effectively, surveyors must be very familiar with the content of the Form.

A strategy used commonly is to complete first all the questions with positive or 'yes' responses, as well as the classification and treatment sections. Then, at the end of the consultation, one may go back and complete all the negative or 'no' responses. This approach is more likely to produce valid and reliable information, since attempting to complete all the questions during the clinical interaction is time-consuming and may distract from the observation.

3. Check all the questions at the end of the clinical observation. Ask the health provider to wait to call the next child until you have fully reviewed the completed Form 1. So, as soon as the clinical interaction is over, go back and complete every question. Every question should usually have an answer ticked ✓ – [✓Yes] , [✓No] or [✓Don't know] -, except for those that have a skipping pattern. If information on classification and treatment was not available during the observation, surveyors may ask the health provider about it now.

4. The supervisor will ensure that the caretaker and child are taken to the surveyor who conducts the exit interview and re-examination - or to an area where they can sit and wait to have Forms 2 and 3 completed.

1.2 General information

- **Questionnaire Number:** Take the four-digit questionnaire number from the Enrolment Card for that child and copy it on top of each page of Form 1.
 - ❖ *The following information may be recorded before arriving at the facility:*
 - **Date:** Enter today's date.
 - **Facility Code:** The facility code is a two-digit number assigned to each health facility by the survey coordinator. The code is available from the survey list of facilities in advance.
 - **Facility type:** Tick one of the three types pre-listed on the form (HOSP = Rural hospital, HC = health centre, D/DS = dispensary or dressing station), based on what is indicated in the survey list of facilities given to you by the survey coordinator in advance.
 - ❖ *The following information on child's name and age is taken during the interview and crosschecked with the information recorded on the Enrolment Form. In case of discrepancy, check with the caretaker at the end of the consultation, mark it and discuss it with the supervisor when you have finished observing the management of all the enrolled cases.*
 - **Child's Name**
 - **Child's ID**
 - **Child's Birth Date**
 - **Child's Age in months**
- See the instructions above for the Enrolment Card
- **Surveyor ID Number:** Write the two-digit number. An individual number will be assigned to each member of the survey team.
 - **Health provider's name:** Write the provider's name in Arabic.
 - **Health provider ID:** Write the one-digit number. In facilities with only one health provider managing children, the health provider ID will be 1. In facilities with more than one health provider with case management responsibilities, a consecutive ID number (1, 2, and so on) will be assigned to each health provider by the survey supervisor.
 - **Health provider sex:** Tick the sex of the health provider, **[M]** for male, **[F]** for female.
 - **Health provider type:** Tick as appropriate. If more than one provider sees the child, tick the type of the provider who carries most of tasks, especially the clinical examination and treatment, and makes the final decision.

- **I1. Health provider trained in IMCI?:** Tick **[Yes]**, if the provider has been trained in an IMCI training course. If the provider has not, tick **[No]** and skip to question # A1.
- **I2. When trained in IMCI:** Record the month and the year in which the health provider was trained in IMCI. In the first two digits (“Day”), record today’s date.
- **I3. Followed up after training?:** Tick **[Yes]**, if the provider who was trained in an IMCI training course received an IMCI follow-up visit. Do not include supervisory visits. If the provider did not receive follow-up after training, tick **[No]** and skip to question # A1.
- **I4. How many follow-up (not supervisory) visits after the training course?:** Record the number of follow-up visits after IMCI training that the provider received.
- **I5. How long after the training course the 1st follow-up visit?:** If the provider was followed up after IMCI training, tick the appropriate box that refers to the time elapsed from the end of the IMCI training and the 1st follow-up visit.

1.3 Assessment module

WEIGHT AND TEMPERATURE

- **A1. Does the health provider, or another staff, weigh the child today?** Tick as appropriate. To tick **[Yes]**, the child must have been weighed on the day of the visit - and this information must be available to the health provider examining the child. The child may have been weighed by another health provider in advance, or may be weighed by the health provider during the consultation: in any case, the surveyor should follow the child, so as to observe all the tasks. If the child is not weighted, tick **[No]** and go to question A4.
- **A1a. Who has taken the weight?** Tick whether the category of provider who has taken the weight. If more than a person has taken the weight, tick the one who took the weight initially.
- **A1b. Is the weight taken correctly?** Tick **[Yes]** if the child is lightly dressed or undressed (no coat, no sweater, no shoes) when the weight is taken and weighing is done according to the technique agreed during the surveyor training, that is: a baby scale is used for children less than 24 months old or children found to weigh less than the max index shown on the scale. Tick **[Don’t know]** if you were accidentally not present when the weight was taken. This should not happen...!
- **A1c. Is the weight recorded?** Tick **[Yes]** if the weight is recorded on the child health or vaccination card or the register. *Record the weight on the Enrolment Card.*
- **A4. Does the health provider, or another staff, check the temperature of the child today (with thermometer)?** Tick **[Yes]** if the child's temperature is taken on the day of the visit using a thermometer. As noted for the weight, the temperature may have been taken by another health provider in advance or may be assessed by the health provider during the clinical consultation. Just follow the child to observe all tasks. If the temperature is taken by the health provider feeling the child with the back of the hand, tick **[No]**. If the temperature is not taken as described and you

have ticked [No], go to question A6.

- **A4a. Who has taken the temperature?** Tick as appropriate.
- **A4b. Is the temperature taken correctly?** Tick [Yes] if the thermometer is shaken first, then correctly placed under the child's axilla and kept in place for at least 2 minutes or [placed in the child's mouth and kept in place for 1 minute. If any of these tasks is not done as described here, tick [No]. Tick [Don't know] if you were accidentally not present when the temperature was taken.

Note on assessment questions A6. - A24.: In the assessment questions, the surveyor observes and records whether and how the health provider performs the assessment tasks. The surveyor does not record the findings of the assessment itself (except for the respiratory rate) but just observes and records whether or not the health provider performs the assessment tasks.

DANGER SIGNS

- **A6. Does the health provider ask *and* correctly check whether the child is able to drink or breastfeed?** Tick [Yes] if the health provider does both of the following: asks the caretaker if the child is able to drink or breastfeed (or the caretaker spontaneously reports it) *and*, if the caretaker says <no>, offers something to drink to the child to check whether the child is unable to drink. Tick [No] if the health provider does not do these tasks. Tick [Child breastfeeding now] if the child is breastfeeding during the examination.
- **A7. Does the health provider ask and correctly check whether the child vomits everything?** See A6.
- **A8. Does the health provider ask and correctly check whether the child has convulsions (related to this episode of illness)?** Tick [Yes] if the health provider does both of the following: asks about convulsions (or the caretaker spontaneously reports them) *and*, if the caretaker says yes, asks a follow-up question to verify whether the convulsions are related to this episode of illness. If the child is convulsing at the time of the consultation, tick [Child convulsing now]. If the provider asks about convulsions and the caretaker answers that the child has had no convulsions, then tick [Yes]. Tick [No] if, when the health provider asks about convulsions (or the caretaker spontaneously reports them) and the caretaker says yes, the provider does not ask a follow-up question to verify whether the convulsions are related to this episode of illness
- **A9. Is the child visibly awake?** Tick [Yes] if the child is visibly awake and then *skip to question A11*, as the health provider does not need to check the level of consciousness (question A10). If the child is not awake or appears to be sleeping, then tick [No] and proceed to question A10.
- **A10. Does the health provider check for lethargy or unconsciousness?** This question is checked only if the child is NOT visibly awake (that is [✓No] is ticked in question A9). Tick [Yes] if the health provider makes attempts to wake up the child (e.g., clapping hands) and tick [No] if he/she does not.

COUGH OR DIFFICULT BREATHING

- **A11. Does the health provider ask for cough or difficult breathing?** Tick **[Yes]** if either the health provider asks for these symptoms or the caretaker spontaneously reports them. In the latter case the information is already made available to the health provider by the caretaker and there is therefore no need to ask for it. If the provider does not ask for cough or difficult breathing (or the caretaker does not report it), then tick **[No]** and go to *question A12 - DIARRHOEA*. Note: If the provider asks about cough, the caretaker says no and the provider does not ask about difficult breathing after that, then tick **[No]**.
- **A11a. Does the child have cough or difficult breathing?** Tick **[Yes]** if the caretaker answers that the child has cough or difficult breathing or spontaneously reports it. If the child does not have cough or difficult breathing, tick **[No]** and go to *question A12 - DIARRHOEA*.
- **A11b. Does the health provider count the respiratory rate?** If the caretaker has said that the child has cough or difficult breathing, tick **[Yes]** if the health provider counts the breathing rate of the child. If the provider does not count it, tick **[No]** and go to *question A12 - DIARRHOEA*.
- **A11c. Child calm before and during the count?** If the child was calm at least for 10 minutes before being examined and remained calm when the respiratory rate was counted, tick **[Yes]**. Otherwise, tick **[No]**.
- **A11d. Respiratory rate counted correctly?** If the provider counts the respiratory rate, tick **[Yes]** if the provider counts it correctly, that is if the child's chest is undressed, the child is calm and the provider counts for a full minute. Tick **[No]** if the child is not calm or his/her chest is dressed while the provider counts the respiratory rate or if the provider counts for less than 1 minute.
- **A11e. Write the respiratory rate/min. counted by the health provider.** Record the count per minute of the health provider (not yours). Take this information from the child record form if the provider has recorded it there.

DIARRHOEA

- **A12. Does the health provider ask for diarrhoea?** Tick **[Yes]** if either the health provider asks for diarrhoea or the caretaker spontaneously reports it. If the provider does not ask for diarrhoea (or the caretaker does not report it), then tick **[No]** and go to *question A121 - EAR PROBLEM*.
- **A12a. Does the child have diarrhoea?** Tick **[Yes]** if the caretaker answers that the child has diarrhoea or spontaneously reports it. If the child does not have diarrhoea, tick **[No]** and go to *question A121 – EAR PROBLEM*.
- **A12b. Does the health worker ask for how long the child has been having diarrhoea?** Tick **[Yes]** if the provider asks when or how many days ago the child started having diarrhoea or the caretaker provides the information spontaneously; tick **[No]** if he/she does not.
- **A12c. Does the health provider ask if there is blood in the stools?** Tick **[Yes]** if the provider asks whether there is blood in the stools, and **[No]** if he/she does not.

- **A12d. Does the health worker offer the child something to drink or observe breastfeeding?** This question is similar to question A6. If the caretaker has said that the child has diarrhoea, tick **[Yes]** if the health provider offers the child something to drink. Tick **[Yes]** also if the child was offered something to drink initially, to test danger signs. If none of these happens, tick **[No]**.
- **A12e. Does the health provider pinch the abdomen skin?** Tick **[Yes]** if the health provider pinches the child's skin over the abdomen. Tick **[No]** and *go to question A121* if the provider does not pinch the child's skin or pinches the child's skin but not over the abdomen.
- **A12f. Does the health provider pinch the skin correctly?** Tick **[Yes]** if the health provider pinches the abdomen skin halfway between the umbilicus and the side of the abdomen holding the skin firmly for one second between the thumb and 1st finger (not the fingertips) in line up and down the child's body and not across it.

EAR PROBLEM

- **A121. Does the health provider ask if the child has an ear problem?** Tick **[Yes]** if the health provider specifically asks the caretaker if the child has an ear problem or the caretaker spontaneously reports it. If the provider does not ask and the caretaker has not reported an ear problem, then tick **[No]** and *go to question A13 - FEVER*.
- **A121a. Does the child have an ear problem?** Tick **[Yes]** if the caretaker answers that the child has an ear problem or spontaneously reports it. If the child does not have an ear problem, tick **[No]** and *go to question A13 - FEVER*. Tick **[Don't know]** if the caretaker does not know – e.g., he/she is just a neighbour who has volunteered to take the child to the facility -
- **A121b. Does the health provider look at both ears of the child?** If the caretaker has said that the child has an ear problem, tick **[Yes]** if the health provider examines both the ears of the child. Tick **[No]** if the health provider looks at only one of the ears or does not examine the child's ears at all.
- **A121c. Does the health provider feel for swelling behind both ears of the child?** Tick **[1]Yes** if the health provider feels for swelling behind both ears.

FEVER

- **A13. Does the health provider ask/feel for fever (or refer to temperature if taken previously)?** Tick **[Yes]** if: the caretaker spontaneously reports that the child has fever; or the health provider asks if the child has any fever or feels if the child is 'hot to the touch'; or the child card has an axillary temperature of 37.5°C or above taken at the facility on the same day. If none of these applies, tick **[No]** and *go to question A14 – WASTING*.
- **A13a. Does the child have fever ($\geq 37.5^{\circ}\text{C}$ axillary temperature) or history of fever?** Tick **[Yes]** if the caretaker answers that the child has fever or spontaneously reports it, or the child's facility temperature record shows a temperature of $\geq 37.5^{\circ}\text{C}$ or the child is 'hot to the touch'. If the child does not have fever, tick **[No]** and *go to question A14 – WASTING*.

- **A13b. Does the health provider ask if the child had measles within the last 3 months?** Tick **[Yes]** if, in a child with fever, the health provider asks about measles in the previous 3 months or this information is spontaneously reported by the caretaker.

WASTING

- **A14 . Does the health provider check for visible severe wasting?** Tick **[Yes]** if the health provider undresses the child and looks at the legs, arms, buttocks and trunk. If these parts of the child's body are not undressed, then it is not possible to tick **[Yes]**. If you are unsure if the health provider checked for visible severe wasting, then tick **[Don't know]**.

PALMAR PALLOR

- **A15. Does the health provider look for palmar pallor?** Tick **[Yes]** if the health provider takes the child's hand (gently) and looks at the palm. Tick **[No]** otherwise.

OEDEMA

- **A16. Does the health provider look for oedema of both feet?** Tick **[Yes]** if the health provider removes the child's shoes and socks on both feet and firmly presses the skin of the feet to look for swelling. Tick **[No]** if the provider does not remove the shoes and socks or checks only one foot.

WEIGHT AGAINST GROWTH CHART (Road-to-health card)

- **A17. Does the health provider check the child's weight against a growth chart?** Tick **[Yes]** if: a) The child has been weighed at the facility during this consultation ('Yes' ticked on A1); and b) the child's weight is checked against a standard growth chart, even if it is not necessarily plotted. If the weight has been plotted on the growth chart (on the child health or vaccination card), automatically tick **[Yes]**. If the caretaker does not have the child's health card – with the growth chart -, the health provider needs to check the child's weight against a standard chart – e.g., on the back of the IMCI chart booklet - and then record the finding in the child's record form. The purpose of this question is to determine whether, in addition to taking the weight, the health provider takes the weight of the child into account during the assessment. If the health provider does not check the weight against a growth chart, tick **[No]** and *go to question 18a*.
- **A17a. Who has checked the weight against the growth chart?** If the weight has been checked against, or plotted on, the growth chart, tick who has done it

VACCINATION CARD

- **A18a. Does the health provider ask for the child's health or vaccination card?** Tick **[Yes]** if the health provider asks the caretaker if she/he has the child's health or vaccination card or if the caretaker spontaneously gives it to the provider during the consultation. If not, tick **[No]** and *go to question A20*.
- **A19. Does the caretaker have the child's health or vaccination card?** Tick **[Yes]** if the caretaker has the child's card with her/him and shows it to the provider. If

she/he has no card, then tick **[No]** and go to question A20.

- **A19a. Does the health provider check the child's health or vaccination card?** Tick **[Yes]** if the health provider looks at the vaccination card of the child; then go to question A21. If the provider does not check the vaccination card, tick **[No]** and proceed with next question.
- **A20. Does the health provider try to find out from the caretaker whether the child has ever received...?** Tick for each of the specific items listed (vaccination and vitamin A received) that the health provider asks about. Tick **[Yes]** if the provider tries to find out about each item, even if the caretaker answers that she/he does not know. Tick **[No]** for all questions not asked. Tick **[NA]** – not applicable – if the child is younger than the time due for vaccination or vitamin A (i.e. tick **[NA]** for measles if the child is less than 9 months old, and vitamin A if less than 6 months old).

FEEDING

- **A21. Does the health provider ask about breastfeeding?** Complete this item for all children, irrespective of whether they have passed the breastfeeding age. Tick **[Yes]** if the health provider asks anything about breastfeeding practices (for example, how often the child is breastfed, problems encountered, questions). If the health provider does not ask anything about breastfeeding, tick **[No]**.
- **A22. Does the health provider ask whether child takes any other foods/fluids?** Tick **[Yes]** if the health provider specifically asks if the child takes any other food and fluids than breastmilk or if the caretaker spontaneously reports this information.
- **A23. Does the health provider ask whether child feeding changed during the illness?** Tick **[Yes]** if the health provider specifically asks if the feeding pattern (type of food, times etc.) changed during the current illness of the child or if the caretaker spontaneously talks about this.
- **A23a. Who has asked these questions on feeding?** Tick as appropriate. This question relates to the previous 3 questions on breastfeeding and feeding (A21, A22 and A23).
- **A24. Does the health provider ask whether the child has other problems?** This question applies to all children enrolled in the survey. Tick **[Yes]** if the health provider asks the caretaker whether the child has any other problem, at the end of the "IMCI" examination of the child.

1.4 Classification Module

Health providers may classify a child presenting with one or several conditions. You need to record all the classifications made by the health provider (not by you) for each child. Tick **[1]** for **Yes** (the health provider makes this classification) and **[2]** for **No** (the health provider does not make this classification). To find out about the classification:

1. Listen to what the health provider tells the caretaker: if he/she mentions the child's classification(s) directly, then record this information immediately on Form 1

2. If the health provider does not mention the classification, ask the health provider about it at the end of the consultation: e.g., “Could you please tell me how you have classified this child?”, “What is your conclusion on this child?” etc..

- **C1. Does the health provider give one or more classifications for the child?** Make any effort to obtain the child’s classification, as this is essential for the analysis. If the classification/s given by the health provider do not match any of those listed in Form 1 (e.g., bronchitis, bronchiolitis, bronchopneumonia, gastroenteritis, and so on) or you are not sure, then record the health provider’s classification(s) under “other” and check later on with the supervisor. If the health provider cannot give any classification or diagnosis, then tick **[No]**. It is important to tick **[1]** (Yes) or **[2]** (No) for all the conditions listed in the classification section.

⌘ Note for Supervisors: Review the classifications at the end of the consultations and complete the coding on the right box of the page, that is the 'gold-standard' classifications obtained from the child re-examination (Form 3). The surveyor should not write in this box.

Note: Sometimes, in large facilities, the health provider may ask for laboratory tests for the child. The final classification and treatment will not be decided until the laboratory results are available. In this case, the surveyor should put the form aside until the child returns with the laboratory result and then complete the classification, treatment and counselling sections of the form.

1.5 Treatment Module

The health provider may prescribe and/or administer medications. When the health provider writes a prescription, you may not know immediately what drugs were prescribed; in this case, you should wait and ask to see the prescription at the end of the consultation, i.e. when the caretaker is ready to leave the room.

- **T5. Does the health provider advise immediate referral for the child?** Tick **[Yes]** if the health provider advises immediate referral for the child to a district or higher level hospital, and proceed to next question. If the health provider does not refer the child, tick **[No]** and go to question T1.
- **T5a. Does the health provider explain to the caretaker the reasons for referral?** Tick **[Yes]** if the health provider explains to the caretaker what the child has, the severity of the condition, the need and importance to take the child to the hospital and so on. Tick **[No]** if the health provider only tells the caretaker that she should take the child to the hospital (or a higher level facility) but does not explain to the caretaker what the child has nor the reasons for referral.
- **T5b. Does the caretaker accept referral for the child?** Tick **[Yes]** if the health provider thinks that the mother will go to the referral site, or if the caretaker tells the health provider that he/she will go to the referral facility.
- **T5c. Does the health provider complete a referral note?** Tick **[Yes]** if the health provider writes a note about referral (e.g., child’s name, reason for referral/diagnosis, pre-referral treatment given, signature) and gives it to the caretaker. The note can be written on any type of paper, not necessarily a printed

referral form. Tick **[No]** if the health provider does not write and give anything to the caretaker.

NOTE: Any child below five years old taken to the health facility on the day of the survey and found by the supervisor to be <unconscious> or in <coma> will not be enrolled in the survey but will be urgently referred.

- **T1. Does the health provider administers/prescribes injections?** Tick **[Yes]** if any health provider gives an injection to the child or prescribes one at the health facility for whatever reasons. If not, tick **[No]** and go to question T3. Vaccines are not considered injections: if a child is given a vaccination and no drugs by injection, tick **[No]**.
- **T2. Record all injections given.** If an injection is given or prescribed to the child and it is an antibiotic (and/or an antimalarial), tick **[Yes]** for antibiotic (and/or antimalarial) and specify which antibiotic (and/or antimalarial) it is. If an injection is given or prescribed but it is not an antibiotic and/or antimalarial, tick **[No]** for antibiotic/antimalarial, tick **[Yes]** for 'Other injection' and specify which drug it is.

☒ Note for Supervisors: Review the injections given and complete the coding on the right box of the page. Tick the square box in the 'Yes' column if the IMCI guidelines recommend a pre-referral injection in this case (T1a1) and if the antimalarial (T2a1) or antibiotic (T2b1) given is the one recommended in the IMCI guidelines as pre-referral treatment. The surveyor should not write in this box.

- **T3. Does the health provider prescribe or give ORS sachets to take home?** Tick **[Yes]** if the health provider gives a packet of ORS or administers or prescribes ORS or refers the child to the ORT corner. If no ORS is given, tick **[No]** and go to question T6.

Does the health provider explain:

- **T3a. How much water to mix with 1 ORS sachets?** Tick **[Yes]** if the provider explains to the caretaker how much water to use to prepare the solution; if so, write the amount of water advised as stated by the provider. Tick **[No]** otherwise.
- **T3b. When ORS should be given to the child during the day?** Tick **[Yes]** if the provider explains to the caretaker when she should give the solution to the child during the day; if so, write what the provider says. Otherwise, tick **[No]**.
- **T3c. How much ORS should be given to the child each time?** Tick **[Yes]** if the provider explains to the caretaker how much solution she should give to the child each time; if so, write what the provider says. Otherwise, tick **[No]**.

☒ Note for Supervisors: Review the three items on ORS preparation and administration and complete the coding on the right box of the page, ticking the square box in the 'Yes' column if the respective instructions (T3a1, T3b1, T3c1) are correct according to the IMCI guidelines. Tick **[No]** for each of the items that is incorrect. The surveyor should not write in this box.

- **T4. Does the health provider actually administer ORS – solution - at the facility?** Tick **[Yes]** if the health provider gives the solution to drink at the facility. If

the child is referred to the ORT corner, you should follow the child to ascertain whether the solution is actually given at the facility. If only ORS packets are given and no ORS solution is actually administered at the facility, then tick **[No]**.

- **T6. Does the health provider administer or prescribe oral treatment?** Note that here the question is on oral treatment. Tick **[Yes]** if any oral treatment is given or prescribed - including ORS - and proceed to next question (T7). If no oral medicine of any kind nor ORS is given or prescribed, tick **[No]** and *go to question T12*, if the child has not been referred (or has been referred but the caretaker has not accepted referral). If the child has been referred and the caretaker has accepted referral, then *go to question CM12* at the end of the questionnaire.
- **T7. Record all oral treatment given.** Tick **[Yes]** for all oral drugs listed that are given or prescribed, and **[No]** for all the drugs that are not given or prescribed. If ORS is given or prescribed or an oral drug is not listed in T7, tick **[Yes]** under 'Others' and specify what drug it is. If the drugs have been prescribed, at the end of the consultation, ask to see the prescription before the caretaker leaves the room. If what is written on the prescription is not clear, then ask the health provider: "What does this say?" for each drug that he/she has written on the prescription and is not clear. If you come across a drug (trade name) that you are unsure about, write the name (PRINT – capital letters) in English under <n.Others> on the line of "specify", followed by a "?".
- ▶ *Case referred:* If the health provider has referred the child and the mother has accepted referral (T5b=Yes), then the surveyor will skip next questions and go to question CM12 at the end of the form. The caretaker and the child should be accompanied to the other surveyor for a quick re-examination. If the child has a severe condition requiring urgent referral, the surveyor will skip the exit interview.
- ▶ *Case not referred or not accepting referral:* If the child has not been referred or has been referred but the mother has not accepted referral, then the surveyor will continue Form 1. If the surveyor finds out that a child referred by the health provider does not have a severe condition, the surveyor will conduct the exit interview.
- **T8. Is an oral antibiotic given or prescribed by the health provider for an 'IMCI' condition?** Tick **[Yes]** if you have ticked [Yes] for an antibiotic in the list of oral drugs of question T7 and the antibiotic has been prescribed for a condition covered by the IMCI guidelines. If no oral antibiotic is included or it has been prescribed for a condition other than an "IMCI condition", then tick **[No]** and *go to question T10*.
- **T9. Record what the health provider says:** If an oral antibiotic is given or prescribed, record what instructions the health provider gives to the caretaker about the dosage. If more than one oral antibiotic is given, complete the dosage separately for each of the two antibiotics given under 'First antibiotic' and 'Second antibiotic', respectively: complete the name, formulation and dose (amount per dose, number of times per day and duration of treatment in days) for each antibiotic.
- **T10 – T11. Is an oral antimalarial given or prescribed by the health provider?** Follow the same instructions as for T8-T9 above, except that here you refer to an antimalarial instead of an antibiotic.

Recording the dose:

If the health provider writes the prescription *and* explains the dosage to the caretaker,

record only what the health provider says. If the health provider only writes a prescription for the antibiotic and/or antimalarial, then copy the dosage from the prescription. If it is not clear, ask the health provider: ‘What does this say?’. If the provider does not give some of the information on dosage – e.g. no information on duration of treatment -neither verbally nor in the prescription, write “**NS**” (not stated).

1. *Drug name* - Write the name that appears on the drug label or on the prescription;
2. *Formulation* - Write the form of the antibiotic and/or antimalarial (tablet, capsule or syrup) and the dose (for example, a 500MG tablet, or 250MG/ML syrup);
3. *Amount each time* - Write the dose of the antibiotic and/or antimalarial to be taken each time, according to what the health provider says or writes (e.g., 1 **tab** –tablet- or 1 **tsp** –teaspoon- if syrup);
4. *Number of times a day.* Write the number of times to take the antibiotic and/or antimalarial each day according to what the health provider says or writes, e.g. once (1x), two times (2x), three times (3x) or four times (4x). If a single dose is given, write "*single dose*";
5. *Total number of days.* Record the number of days the treatment should be given according to what the health provider says or writes (for example, 3 days, 5 days, 10 days). If the medication is to be given until it is finished, write "*until finished*". If a single dose only is given, write "*single dose*".

- **T12. Is any of the following medicines given or prescribed by the health provider?** Check, one by one, if any of the three drugs listed has been given or prescribed (Tick [**Yes**] or [**No**] as applicable).

⌘ Note for Supervisors: Review the information recorded on the instructions on administration of the antibiotic/s and antimalarial/s. Complete the coding on the right box of the page, ticking the square box in the ‘Yes’ column if the antibiotic/s and antimalarial/s prescribed are the 1st or 2nd line antibiotic/antimalarial recommended by the IMCI guidelines (T9a1/T9f1 and T11a1/T11f1) and if the instructions on amount, frequency and duration of treatment are in line with the IMCI guidelines (T9c1/T9h1 and T11c1/T11h1, T9d1/T9i1 and T11d1/T11i1, T9e1/T9j1 and T11e1/T11j1). Tick [**No**] for each of the items that is incorrect. If only 1 antibiotic or antimalarial is given, leave the second box for the supervisor blank. If no antibiotic and/or antimalarial is given, leave the corresponding boxes for the supervisor blank. The surveyor should not write in this box. Next, complete the box “**Form 1: Supervisor coding**” as indicated on the form.

1.6 Communication Module

This section records the communication and counselling activities that the health provider performs. As mentioned earlier, another health provider in the facility sometimes does drug dispensing and counselling. In this situation, alternative arrangements need to be made to record this information. How to proceed in specific settings will be discussed and agreed upon during training.

The first 4 questions from CM1 through CM4 apply only to those cases that have been given or prescribed an oral antibiotic and/or antimalarial and/or ORS. In all the other cases (i.e., child given or prescribed an oral drug that is different from an antibiotic, antimalarial or ORS, or child not given or prescribed any oral drug at all) skip the first 4 questions and go to CM5.

- **CM1. Does the health provider explain how to administer the oral treatment?** Tick **[Yes]** if the health provider verbally advises the caretaker on *all* the following: a) how much, b) how many times a day and c) for how many days to give the antibiotic and/or antimalarial and/or ORS. If only an antibiotic or an antimalarial or ORS is given, tick **[NA]** for those that do not apply.
- **CM2. Does the health provider demonstrate how to administer the oral treatment?** Tick **[Yes]** if the health provider takes a tablet or the syrup formulation or the ORS sachet and shows how much to take and how to take it. The provider must take the tablet or the bottle or the ORS sachet for the demonstration but you can tick **[Yes]** even if the provider does not actually give the medicine to the child or open the ORS sachet. If only an antibiotic or an antimalarial or ORS is given, tick **[NA]** for those that do not apply.
- **CM3. Does the health provider ask an open-ended question to check if the caretaker understands how to administer the oral treatment?** Tick **[Yes]** if the health provider asks the caretaker to tell him/her how she/he will give the drug (how much, how often and for how long). The provider should just listen and not prompt the caretaker. Tick **[No]** if the health provider: does not ask any questions of the caretaker; or asks questions to be answered simply as “Yes” or “No” (e.g, “Do you know how much to give?”, “Did you understand what I told you?”, “Is it clear?”, and so on); or prompts the caretaker. If only an antibiotic or antimalarial or ORS is given, tick **[NA]** for those that do not apply.
- **CM4. Does the health provider give or ask the mother to give the first dose of the oral drug at the facility?** Tick **[Yes]** if the health provider ensures that the correct dose of the oral antibiotic or antimalarial is given to the child (and the child swallows it) at the facility. Tick **[No]** if no dose is given or the dose is incorrect. Although the health provider may give explanations, demonstrations, etc., for drugs other than oral antibiotics or antimalarials, this question relates only to oral antibiotics and antimalarials. If only an antibiotic or antimalarial is given, tick **[NA]** for the one that does not apply.
- **CM5. Does the health provider advise *and* explain when to return for (‘definite’) follow-up visit?** In some cases, the child’s condition will require a follow-up visit after a certain period of time (for example, a child with pneumonia should be seen in 2 days). This question here refers only to “definite” follow-up. “Conditional” follow-up (i.e., come back <IF>...) is not considered here. Tick **[Yes]** if the health provider does both of the following: a) tells the caretaker in how many days she/he needs to take the child back to the facility for follow-up; and b) explains to the caretaker the reason or importance of taking the child back. Tick **[No]** if the health provider: advises the caretaker to come back for follow-up only <if> a certain condition occurs (i.e., only “conditional” follow-up); tells the caretaker about when to take the child back but does not explain why; or gives non-specific instructions to the caretaker without specifying in how many days to take the child back (e.g., “Return if the child does not improve”); or gives no advice at all on when to return. Visits scheduled for vaccination or other purposes are not considered follow-up visits.

Remember that you have to record only what the provider says, not what should be done.

- **CM6. In how many days does the health provider ask the caretaker to come back?** Enter the number of days in the space provided.
- **CM7. Does the health provider advise to give more to drink (liquid or breastmilk) at home?** Tick **[Yes]** if the health provider advises the mother about the need to give increased amounts of liquid or breast milk to the child at home during the illness.
- **CM8. Does the health provider advise to continue feeding or breastfeeding at home?** Tick **[Yes]** if the health provider advises the mother about the need to continue feeding or breastfeeding the child at home during the illness.
- **CM9. Does the health provider advise how often to feed and/or breastfeed the child?** Tick **[Yes]** if the health provider advises the caretaker how many times a day she should breastfeed and/or feed the child at home or advises her to breastfeed/feed the child “as much as the child wants”. If no such advice is given, tick **[No]** and go to question CM10.
- **CM9a. How many times/24 hours did the health provider advise to feed the child?** Write the number of times that the caretaker should feed the child according to what the health provider says. Enter | 0 | 0 | if the provider gives no advice on the number of times the caretaker should feed the child; enter | 7 | 7 | if the provider advises the caretaker to feed the child “as much as the child wants”.
- **CM9b. How many times/24 hours did the health provider advise to breastfeed the child?** Write the number of times that the caretaker should breastfeed the child according to what the health provider says. Enter | 0 | 0 | if the provider gives no advice on the number of times the caretaker should breastfeed the child; enter | 7 | 7 | if the provider advises the caretaker to breastfeed the child “as much as the child wants”.
- **CM9c. Who has provided this advice on feeding and/or breastfeeding?** This item refers to questions from CM7 through CM9b. Tick as appropriate.
- **CM10. Does the health provider tell the caretaker to bring the child back immediately for the following signs...?** Tick **[Yes]** or **[No]** for each of the signs or symptoms listed from *a* to *h* according to the signs for which the health provider specifically advises the caretaker to return immediately. If the provider gives no advice at all to the caretaker about the signs that should prompt her/him to take the child back to the facility right away, tick **[No]** for each of the items listed from *a* to *h*.
- **CM11. Does the health provider ask at least one question about the mother’s health?** Tick **[Yes]** if the health provider asks the mother at least one question about her own health (or access to family planning or vaccination status); tick **[No]** if the provider asks no questions; tick **[NA]** (Not Applicable) if the caretaker is not the child’s mother.
- **CM11a. Does the health provider use the “mother card” to advise the caretaker?** Tick **[Yes]** only if the health provider uses the “mother card” (referring to it, holding it in his/her hands, etc.) when advising the mother. Tick **[No]** otherwise

and go to question #CM12.

- **CM11b. Does the health provider hold the card so that the caretaker sees pictures easily?** Tick **[Yes]** only if the provider holds the card facing the caretaker so that she/he can easily see the pictures on the card while the provider explains.
- **CM11c. Does the health provider point at the pictures on the card while counselling the caretaker?** Tick **[Yes]** only if the provider clearly points at the pictures on the card while talking to the caretaker. Otherwise, tick **[No]**.
- **CM11d. Does the health provider ask open-ended questions to check if the caretaker understands how to care for the child at home (fluids, feeding, signs to watch out...)?** Tick **[Yes]** if the health provider asks the caretaker to tell him/her how she/he will care for the child at home (about fluids, feeding, warning signs to return immediately to the facility). The provider should just listen to and not prompt the caretaker. Tick **[No]** if the health provider: does not ask any questions of the caretaker; or asks questions to be answered simply as “Yes” or “No” (e.g, “Do you know in which case to take the child back?”, “Did you understand what I told you?”, “Is it clear?”, and so on); or prompts the caretaker.
- **CM12. Did the health provider use the IMCI chart booklet at any time during the management of the child?** Tick **[Yes]** if the provider consults or refers to any section of the IMCI chart booklet at any time during the visit for whatever reasons (clinical signs, classifications, dosage of drugs, growth chart etc.). Tick **[No]** otherwise.

2. FORM 2 (CARETAKER EXIT INTERVIEW)

2.1 Overview of Form 2

Purpose

The main purpose of the exit interview is to determine whether the caretaker understood the advice given to her/him by the health provider and to collect information on caretaker satisfaction.

Identifying children who need the exit interview

All caretakers of children enrolled in the survey should have an exit interview when the consultation with the health provider is finished, except for those who are referred urgently to another facility by the health provider (If a caretaker has taken two sick children under five years old for consultation at the health facility, you should interview the caretaker two times, one per each child). The surveyor who observed the consultation with the health provider – or the supervisor - will accompany the caretaker and the child to the area where the exit interview and re-examination of the child will be conducted, also to ensure that they do not leave the health facility before this information is collected.

Location of the exit interview

Ideally the exit interview (and re-examination) will be conducted in a room made available exclusively for this purpose in the health facility. If a room is not available, then a site that is outside and away from other waiting caretakers is needed, so that they cannot hear the questions in advance and the interview is not influenced or disrupted. Since the exit interview and re-examination often take longer than the observation checklist of Form 1, caretakers may have to wait a short time after the clinical consultation. A place may be needed where caretakers can wait comfortably (i.e., seated).

Method for completing the instruments

Each caretaker and child should keep her/his enrolment card when leaving the consultation room and should give the enrolment card to the supervisor or surveyor conducting the exit interview and re-examination.

Method: exit interview

The exit interview is completed first. The supervisor or surveyor should make sure that the caretaker understands the purpose of the interview. It is important to explain that the questionnaire does not carry her name and the findings will not be mentioned to the health provider.

Ask the questions exactly as they are written on the form. If you ask a question and the caretaker does not know the answer, go to the next question without criticising the caretaker. If the caretaker has some questions for you, kindly suggest that she/he wait until you are finished with the interview.

With the exception of question 1, it is important that you do not prompt the caretaker for answers. This means that you should wait for the caretaker to answer on her/his own without suggesting any answer. You may say: “Is there anything else that you can think of?”, or “Is there anything else that you would like to say?”

2.2 Guidelines for completing Form 2 (exit interview)

2.2.1 General information

Copy from the Enrolment Card the general information to be entered at the top of Form 2 (e.g., questionnaire number; date; state; district; facility name, code and type; child: name, ID, birth date, age and sex). Then, quickly validate child’s age. Write the number assigned to you (surveyor number). Specify the **Caretaker sex** (tick **[M]** for male or **[F]** for female), education level and the **Caretaker relationship to the child**, as applicable.

2.2.2 Questions

- **1. How satisfied are you with the care provided to children in this facility?**
Read all the first three options to the caretaker (*very satisfied?*, *satisfied?*, or *unsatisfied?*) and tick according to the caretaker’s answer. If the caretaker does not answer or says she/he does not know, tick *[Don’t know]* and skip to question # 3..
- **2. Why?** Ask the caretaker the reason/s for her/his answer, that is why she/he said that she/he is very satisfied or satisfied or unsatisfied. Do not read the options listed on the Form. Tick all the box/es that apply according to caretaker’s answer/s. Then ask: “Any other reason?”.
- **3. Did the health provider give you or prescribe any oral medicines for <CHILD’s NAME> at the health facility today?** Tick **[Yes]** if any oral medicine was given or prescribed (check also the prescription if the caretaker has one). If no oral medicine was given, tick **[No]** and *go to question 16*.

When asking questions, replace <CHILD’s NAME> or <NAME> with the actual name of the child, i.e. always refer to the child with his/her name rather than <your child>.

- **4. “Oral antibiotics included?”** - Check the prescription or the medicine. Find out whether the prescription contains any oral antibiotic or whether any of the medicines given to the caretaker is an oral antibiotic. Tick **[Yes]** if an oral antibiotic is included. If no oral antibiotic is included, tick **[No]** and *go to question 16*. [If an injectable antibiotic is included, you should have ticked [No] in question 3 and skipped to question 16, as question 3 is about oral medicines only]. If only **ORS** was given or prescribed, *go to question 16*.
- **“Record name and formulation of the antibiotic”** – Record **4a.** the name(s) of all antibiotics given or prescribed and **4b.** their formulation (e.g., 500MG tablet, 250MG capsule or 250MG/ML syrup).

FOR EACH ORAL ANTIBIOTIC AND ANTIMALARIAL GIVEN OR PRESCRIBED ASK THE FOLLOWING QUESTIONS, RECORDING ONLY WHAT THE CARETAKER SAYS AND NOT WHAT IS WRITTEN ON THE PRESCRIPTION OR THE MEDICINE:

- **5. How much of this medicine will you give to <NAME> each time?** Record the number of tablets or capsules, or the amount of syrup that the caretaker says she/he will give to the child each time. Always refer to the child with his/her real name. If the caretaker says 'I don't know', write 'DK' in the space.
- **6. How many times will you give it to <NAME> each day?** Record the number of times the caretaker says she/he will give the medicine to the child each day. If the caretaker says 'I don't know', write 'DK' in the space (i.e., |_D_|_K_|).
- **7. For how many days will you give it to <NAME>?** Record the number of days the caretaker says she/he will give the medicine to the child. If the caretaker says 'until finished', write this over the space *Until finished* If the caretaker says 'I don't know', write 'DK' in the space (i.e., |_D_|_K_|).

At the end of the exit interview, before she/he leaves the facility, it is important that you instruct the caretaker on the correct dose for all medications for which she/he does not know it.

In this survey, the dosage of other oral drugs that might have been given is not recorded.

- **7o. If <NAME> gets better before then, what will you do with the medicines?** Tick one and only one of the 5 options shown on the form. Do not read the options to the caretaker. For option "other", specify in the space provided what the caretaker says.
- **7x., 7a., 7b.,7c., 7d., 7e. Second antibiotic included?** If another antibiotic is included, then complete the questions in this section in the same way as done for the first antibiotic (see question 4 through 7 above).
- **8., 8A., 8B., 9., 10., 11., 12., 12A., 12B., 13., 14., 15.** These questions relate to antimalarials. For instructions, see questions 4. through 7e. above.
- **16. Record whether ORS prescribed or given:** Tick [Yes] if ORS has been prescribed or given. If no ORS has been prescribed or given, tick [No] and go to question 19a.

If ORS has been given or prescribed: give the caretaker the ORS packet and ask her/him to describe the dose. If she/he can read, then she/he is allowed to read the instructions on the packet or the prescription if she/he wishes so.

- **17. How much water will you mix with one ORS packet?** If ORS has been prescribed or given, record the approximate amount of water that the caretaker says she would use to prepare the solution. If the caretaker says 'I don't know', write 'DK' in the space provided.
- **18. When will you give ORS to <NAME> each day?** Write what the caretaker says (e.g., number of times a day, after each loose stool, when the child wants, etc.). If the caretaker says 'I don't know', write 'DK' in the space.

- **19. How much ORS will you give to <NAME> each time?** Write what the caretaker says (e.g., if the caretaker says she/he would give half a glass of ORS each time, write so). If the caretaker says 'I don't know', write 'DK' in the space.

At the end of the exit interview, before she/he leaves the facility, it is important that you instruct the caretaker on the correct dose for all medications for which she/he does not know it.

🔗 **Note for Supervisors:** *If an oral antibiotic, antimalarial or ORS is given or prescribed, complete the relevant boxes for supervisors on the right hand side of Form 2 (questions # 5S, 6S, 7S; questions # 7cS, 7dS, 7eS; questions # 9S, 10S, 11S; questions # 13S, 14S, 15S; questions # 17S, 18S, 19S), ticking the box under the column of **Yes** for each of the three items listed if the amount, the number of times to be given a day and the duration of treatment, respectively, of the oral antibiotic/s, antimalarial/s and ORS – as applicable – mentioned by the caretaker are correct. Tick the box under the column of **No** if the answers are incorrect.*

- **19a. Now that <NAME> is unwell: Will you give him/her *more, about the same or less fluids – including breastmilk – to drink?*** Tick one of the three options according to the caretaker's answer. If she does not know, tick **[Don't know]**.
- **19b. And will you give him/her *more, about the same or less food – including breastmilk –?*** Tick one of the three options given according to the caretaker's answer. If she does not know, tick **[Don't know]**.
- **19c. ASK THIS QUESTION IF CHILD IS LESS THAN 24 MONTHS OLD:** *This question and only this question is asked only of caretakers of children less than 24 months old (check the enrolment card for child's age). If the child is 2 years old or older, skip this question and go to next question (19d):*
How many times/24 hours did the health provider advise you to breastfeed <NAME>? Note that this question applies to 24 hours, so day and night: clarify this when asking the question. Tick one of the options given according to the caretaker's answer. If the caretaker says that she/he was not told or does not know, tick **[Did not tell me or Don't know]**.
- **19d. How many times/24 hours did the health provider advise you to feed <NAME>?** Note that also this question applies to 24 hours, so day and night: clarify this when asking the question. Tick one of the options given according to the caretaker's answer. If the caretaker says "As much as the child wants", write 77 in the space provided, i.e. 7 7 . If the caretaker says that she/he was not told, write 00, i.e. 0 0 ; if she/he says that she/he does not know, write 8 8 .
- **20: Did the health provider tell you to bring <NAME> back to this facility on a specific day?** Tick **[Yes]** if the caretaker answers that the health provider told her/him to return to the health facility for follow-up on a specific day. If the caretaker says she/he was not told or does not know, tick **[No]** or **[Don't know]**, respectively, and go to question 20b.
- **20a. In how many days should you bring <NAME> back?** It is possible that, when answering the previous question (Q.20), the caretaker already mentioned on which day she was told to return. In that case there is no need to ask this question again: simply record the caretaker's answer. If the caretaker answers that she/he

was told to come back on a certain date or day (e.g., on 14 March or on Thursday), calculate how many days that is from today and write it in the space provided. Example: if today is 12 March and the provider tells the mother to take the child back for follow-up on 14 March, write <2> days. If the provider tells the caretaker to take the child back for follow-up “tomorrow”, write <1> day. If the caretaker says that she/he was not told exactly when to come back or is unsure or does not remember, then leave this question blank, go back to question # 20 and make sure that the answer ticked there is [No] or [Don’t know], respectively, and go to question # 20b.

- **20b. Do you have a mosquito bed-net at home?** Tick [Yes] if the caretaker has a bed-net at home, whether or not the family uses it.
- **20c. Is the bed-net treated with insecticide (a product that kills mosquitoes)?** Tick [Yes] if the bed-net has been impregnated (treated) with insecticide, regardless of when the bed-net was treated the last time.
- **20d. Did <NAME> sleep under the bed-net last night?** Tick [Yes] if the caretaker says that this child slept under the bed-net last night. If the child did not sleep under the net last night, tick [No], even if he/she usually does so or did so the nights before.
- **21. Sometimes children who are sick should be taken right away to a health facility: What symptoms would worry you that would make you take your child to a health facility right away?** If the caretaker does not understand the question, explain it as agreed during training, but do not make any example nor read any of the symptoms and signs listed on the Form. Tick [Yes] for each of the symptoms and signs that the caretaker mentions and tick [No] for those that are not mentioned. After the caretaker has mentioned a few signs, ask again up to two times: “Any other symptom?”.
- **22. IF THE CARETAKER IS THE MOTHER OF THE CHILD, ASK: Were you ever given an injection in the arm to prevent the baby from getting tetanus, that is convulsions after birth?** Tick [Yes] if the caretaker remembers ever having been given an injection for tetanus.
- **22a. How many injections did you receive?** Record the total number of injections against tetanus that the caretaker received throughout her life.
- **22b. When did you receive the last injection?** Record in the space provided the year when the caretaker last got an injection against tetanus. The day and month are not needed.
- **23. Did you receive or were you shown this card today?** *Show mother’s counselling card.* Tick [Yes] if the caretaker says that the health provider has shown or given her/him the card during this consultation at the facility, today, and tick [No] or [Don’t know] if the caretaker says she was not or is unsure, respectively.
- **24. How long did it take you to reach this facility from your place today?** Write the time in minutes that it took for the caretaker to reach the health facility from her place today. Start from the time she/he left home. For example, if the caretaker left home at 08.00 a.m. and arrived at the facility at 10.00 (= it took her/him 2 hours), enter “120” (minutes).

- **25. How much did you spend for transport for you and your child to get to this facility from your place today?** Enter in the space provided the total amount in local currency spent by the caretaker for any expense related to transport (bus ticket, taxi fare, petrol for car, etc., including any tips) for her/him and her/his child to come to this facility today. If the caretaker simply walked, enter "0".
- **26. How much did you spend for consultation, drugs, tests here today?** Record in the space provided the *total* amount spent by the caretaker for the consultation *for her/his sick child* today, including the child examination (consultation fee), charges for any laboratory analysis or X-ray or other test, medicines purchased for the child as per today's health provider's advice, tips at the facility and so on.
- **27. How much of this was for medicines?** Enter in the space provided the amount that was spent only on medicines today as per health provider's advice or prescription.
- **28. Is the child covered by health insurance?** Tick **[Yes]**, **[No]** or **[Don't know]** as applicable.

3. FORM 3 (RE-EXAMINATION OF CHILD 2 MO-5 YRS)

3.1 Overview of Form 3

Purpose

The purpose of the re-examination is to determine the 'gold-standard' classification of the child according to the IMCI clinical guidelines. This therefore helps to determine whether or not the health provider classified and treated the child correctly.

Procedures

All children enrolled in the survey should be re-examined by a surveyor after the consultation with the health provider (Form 1) and the exit interview (Form 2) have been completed. Children who have been referred urgently to another facility by the health provider should be re-examined quickly by the surveyor right away, i.e. soon after the visit done by the health provider, skipping the exit interview with the child caretaker. However, if the child has been referred but not urgently (e.g., for further tests), follow the same procedures as for non-referred cases: first do the exit interview with the caretaker, then re-examine the child. If it was the supervisor to conduct the exit interview (Form 2), then he/she will accompany the caretaker and the child to the surveyor in charge for the re-examination of the child (usually in the same room where the exit interview is conducted), also to ensure that they do not leave the health facility before this information is collected.

Location of the re-examination

The supervisor, together with the person responsible for the health facility, will identify a separate and quiet room to be used exclusively for the exit interview with the child caretaker and the re-examination of the child. See section on Form 2 for more details. Since the exit interview and re-examination often take longer than the observation checklist of Form 1, caretakers may have to wait a short time after the clinical consultation. A place may be needed where caretakers can wait comfortably (i.e., seated).

Method for completing Form 3

Each caretaker and child should keep her/his enrolment card when leaving the consultation room and should give it to the surveyor conducting the re-examination. **The re-examination is carried out totally independently from the observation of case management. The surveyor who does it must have no access to the other surveyor's findings on the observation of health provider's case management (Form 1).**

Re-examination

You will re-examine the child after the exit interview. Form 3 is mostly the standard IMCI patient recording form for children 2 months to 5 years of age used in the country. Assess and classify each child using the IMCI algorithm and record the findings as in IMCI. *Do not modify the treatment given by the health provider to the sick child unless you feel that it may result in harm to the child (especially if it is a case of under-treatment or of a severe condition to be referred urgently). If so, contact the supervisor*

who will explain the situation to the health provider, so that it will be the provider himself/herself to modify his/her instructions to the caretaker. Answer any questions the caretaker may have but do not comment on the health provider's examination and treatment of the child.

3.2 Guidelines for completing Form 3 (re-examination)

3.2.1 General information

Copy from the Enrolment Card the general information to be entered at the top of Form 3 (e.g., date; surveyor ID; questionnaire number; district name; facility name, code, and type; child name, ID, age, sex, weight and axillary temperature). Surveyor number is the number that has been assigned to you. Tick where it says "Initial visit?". Ask what the child's problems are (reasons for bringing the child).

- **Child's temperature and weight.** Take the child's temperature again yourself and record it on this form, even if it has already been taken at the facility. If no weight is recorded on the enrolment card, weigh the child yourself and record the weight on this form.

3.2.2 Assessment and classification

Assess the child and record the findings on Form 3 according to the IMCI guidelines. Encircle symptoms and signs that are present, count and record the respiratory rate. Tick all relevant classifications listed in the "Classify" column of the form according to the IMCI guidelines. Circle the immunisations and vitamin A doses received, based on the child's health or vaccination card if available, or history otherwise. Assess feeding practices for the targeted group. Complete the items on feeding based on the national IMCI feeding recommendations, as reported on the "IMCI mother's card". Below are some explanatory notes on selected questions, starting from question 8.

- **8. Is <NAME> breastfed?** Tick [Yes] if the caretaker says that the child is breastfed. If the caretaker says that the child is not breastfed, tick [No] and go to question 11; if she/he does not know as she/he is not the child's mother and is unsure or does not know anyway, tick [Don't know] as appropriate and go to question 11.
- **9. How many times in 24 hours?** If the caretaker has said that the child is breastfed, specify in the space provided the total number of times the child is breastfed in 24 hours, including both day and night.
- **10. Is number of times of breastfeeding as recommended?** Compare the number of times that the child is breastfed, according to the caretaker, with the number of times recommended in the IMCI mother's card: tick [Yes] if the child is breastfed the number of times recommended, [No] if not.
- **11. Does the child take any other food or fluids?** If the caretaker says [No] or does not know because she/he is not the mother of the child, tick the appropriate answer and go to question 15. If the caretaker says yes, tick the [Yes] answer and specify in the space provided which food and fluids the child takes.

- **12. Is type of food appropriate?** Tick **[Yes]** if the type of food given to the child is in line with what recommended in the IMCI mother's card; tick **[No]** otherwise.
- **13. How many times per day?** Enter in the space provided the number of times the child is given food in a day. If the caretaker gives a range (e.g., she says: "about 3 to 4 times") enter the lower number.
- **14. Is number of times of feeding as recommended?** Tick **[Yes]** if the child is given food the number of times recommended for his/her age in the IMCI mother's card and tick **[No]** if not.
- **15. Assess other problems.** Assess other problems and, if present, tick the classification/diagnosis on the 'classify column' and specify the problem.
- **160. EYE INFECTION (OTHER PROBLEM 1).** This item is pre-listed: if you conclude that the child has an eye infection, then tick **[Yes]** for this item. If you think the child does not have an eye infection, tick **[No]**. If the child does not have an eye infection but has another problem (e.g., a skin infection), tick **[No]** for this item, go to next item "**161. OTHER PROBLEM 2**", enter "skin infection" and tick **[Yes]** for this item. If the child does not have an eye infection nor any other problem, make sure you have ticked **[No]** in question # 15., and leave items 160., 161. and 162. blank.
- **164. Does the child need to be referred?** Tick **[Yes]** or **[No]** according to your assessment and classification of the condition of the child.
- **165. Return for definite follow-up in...** Write in the space provided the number of days within which the caretaker should take back her/his child to the facility for follow-up. If no follow-up is needed, enter <00> [i.e. |_0_|_0_|).
- **166. Any non-IMCI reason for antibiotics?** Tick **[Yes]** or **[No]** according to whether the child has a condition not specifically covered by the IMCI chart that may require antibiotics orally or parentally (e.g., urinary tract infection, skin infection, etc.), based on your examination of the child. Do not include here antibiotics for topical (local) use (e.g., antibiotic ointment, cream, lotion).
- **170. High Malaria risk?** Areas in the country have been classified as "high" or "low" malaria risk areas. Tick **[Yes]** or **[No]** according to whether this facility is located in an area classified as "high malaria risk" area.
- **16. Record if the child needs vitamin A today.** Based on your assessment, tick **[Yes]** if the child would need a dose of vitamin A today as per IMCI recommendations. If the child does not need it, tick **[No]** and *go to question 19*.
- **17. Has <NAME> been given vitamin A drops from a capsule like this today?** Show the mother a capsule of vitamin A as per child age. If she says that her child has been given drops from a capsule like that, tick **[Yes]** and *skip to question 19*. If the answer is **[No]** or **[Don't know]**, then ask question 18.
- **18. Has the health worker told you to bring back <NAME> to receive vitamin A on another day?** If the child needed vitamin A and was not given it, the caretaker might have been told by the provider to take the child back on another day to get it. If this is the case, tick **[Yes]**, otherwise tick **[No]**.

- **19. Record if child's road-to-health or vaccination card is available.** Tick **[Yes]** if the caretaker has the child's vaccination card with her for this consultation today and **[No]** if she/he does not.
- **20. Record if the child needs to receive any immunisation today.** Based on your assessment, tick **[Yes]** if the child needs any immunisation today according to the national IMCI/immunisation recommendations. If the child does not but has a fever classification, tick **[No]** and go to 🌡️ "IF THE CHILD HAS A FEVER CLASSIFICATION". If the child does not need any immunisation today and does not have a fever classification *STOP the interview with the caretaker here.*
- **21. Did <NAME> receive a vaccination today or has the health provider referred <NAME> to the immunisation room?** The purpose of this question is to know whether, for a child who needs immunisation today, action has been taken to vaccinate him/her today. Tick **[Yes]** if this is the case and: a) go to 🌡️ "IF THE CHILD HAS A FEVER CLASSIFICATION"; or b) *STOP the interview with the caretaker here*, if the child has no fever classification. Otherwise, tick the answer as appropriate and ask next question.
- **22. Has the health provider told you to bring back <NAME> or another day or to take him/her to another place to receive a vaccination?** It may happen that no immunisation session is scheduled for today or the facility does not provide immunisation service. Tick **[Yes]** if the caretaker answers that she/he has been told to bring her/his child back on another day (or to another facility) to receive the required vaccination.

IF YOU HAVE CLASSIFIED THE CHILD WITH A FEVER CLASSIFICATION, ASK THE CARETAKER:

- **23. Did <NAME> receive a medicine for 'malaria' before being taken to this health facility?** Tick **[Yes]** if the caretaker says that the child was given a medicine for this episode of illness before taking the child to this facility. If the caretaker says no or does not know (e.g., she is not the child's mother or father), then tick the relevant answer and *STOP the interview here.*
- **24. Which medicine did <NAME> receive?** Do not read the names of the medicines listed. Tick **[Yes]** or **[No]** for each of the items listed on the form according to whether or not the caretaker mentions them.
- **25. IF CHLOROQUINE OR FANSIDAR, ASK: How long after <NAME> started having fever did <NAME> receive the medicine?** Tick the relevant answer. You have to count starting from the time from which the caretaker believes the child had fever.

Advising the Mother. At the end of the interview, thank the caretaker for her/his time and ask if she/he has any questions. If a caretaker does not know how to prepare ORS, explain how to prepare it. If the caretaker does not know the dosage of a medication to give, explain the proper dosage. If the caretaker does not know some of the signs for seeking care immediately, explain these signs.

🔗 **Note for Supervisors:** Carefully check the IMCI classifications recorded on the form based on the signs found by the surveyor. Then, copy those classifications on Form 1, page 6, right box.

Feedback. Remember to discuss classification or treatment issues with health providers before leaving the facility.

4. FORM 4 (FACILITY EQUIPMENT AND SUPPLY CHECKLIST)

4.1 Overview of the instrument

Modules

Form 4 has for modules:

1. Equipment and supplies;
2. Availability of drugs;
3. Facility services;
4. Facility records.

Method

Supervisor: This Form is usually completed by the supervisor. Only 1 form is completed for each facility. As soon as you arrive at the facility and explain the purpose of the visit to the person responsible for the facility, ask if the administrative staff can start preparing the information required for the *Facility Records* Module of Form 4. If so, explain each item. This information may in fact take some time to be ready. Some sections can be completed during the clinic session and others at the end – e.g., record review and those questions that need to be asked of health staff.

All equipment, supplies and drugs must be directly and personally observed by the supervisor: It is not adequate to ask health facility staff whether or not items are available, accepting the answer without seeing them. For the *Facility Services* Module, interview the senior health staff at the facility, e.g. before giving feedback at the end of the visit.

4.2 General information

Identifying Information. Copy from the Enrolment Card (that you have filled out for the first child enrolled in the survey at that facility) the general information to be entered at the top of Form 4, if not done yet (e.g., date; state and district name; facility name, code, and type) and write the letter assigned to your team. The pre-assigned facility code (two digits) should also be written on the upper right-hand corner of each page.

➤ Health Providers with Child Case-Management Responsibilities.

Table 1 is used to record the number and characteristics of staff regularly working at the facility. Talk to the head of the facility or to the most senior health provider available. The following information is collected:

1. **Second column: No. managing children.** Write the total number of physicians, medical assistants and nurses, respectively, who manage sick children at the facility. It is common for health staff to have multiple responsibilities; if any of these responsibilities include the management of sick children, then they are included.
2. **Third column: No. managing children trained in IMCI.** Write here the total number of physicians, medical assistants and nurses, respectively, who have been

trained in IMCI among those who manage sick children (included in column 2).

3. **Forth column: No. trained in IMCI present today.** Write here the number of physicians, medical assistants and nurses, respectively, who are present today among those trained in IMCI (included in column 3).

4.3. *Equipment and supplies Module*

- **E1. Does the facility have the following equipment and materials?** Ask a health provider to show you around the facility. Inspect personally all the items listed in questions E1 through E5a and determine also whether they are functioning properly, as agreed during training and relevant. It is important to see and/or touch each item listed in the checklist. For some items (e.g., E1c2, E1c4 and drugs), you have to check also the number available. Tick **[Yes]** or **[No]** for each question.
- **E1.k. Accessible means of transportation for patients requiring referral.** Transportation refers to the route from this area to the referral hospital. "Accessible" here refers to transportation that is both physically accessible (e.g., in relation to distance) and economically accessible (i.e., affordable) to most people living in the catchment area of this facility.
- **E1z. Does facility provide immunisation services?** Tick the appropriate answer. Some facilities may not provide immunisation services. If the facility provides out-reach immunisation services, tick **[Yes]**. If the facility does not provide immunisation services, Tick **[No]** and *go to question D1 on drugs*.
- **E2. Does the facility have needles and syringes appropriate for vaccinations?** Tick **[Yes]** if a supply of both syringes and needles is available. The quantity of syringes and needles should be sufficient at least for one vaccination session. If needles and syringes are available, proceed to **E2a** to determine how they are used. If a supply of needles and syringes is not available, *go to question E4a*.
- **E2a.** (If appropriate needles and syringes are available) **How do health providers use these needles?** Ask this question of the health provider/s responsible for giving vaccinations. Tick **[Single use]** if each needle is used once and then thrown away. If needles are used several times, tick **[Multiple uses]** and *go to question E4a*.
- **E2b. IF SINGLE (DISPOSABLE) USE: Does the facility have the safety box to dispose of them?** Tick **[Yes]** if the facility has the safety box shown during the training to dispose safely of needles/syringes. If not, tick **[No]**.
- **E4a. Does the facility have a functioning refrigerator?** Tick **[Yes]** if there is a refrigerator in working conditions supplied with power on the day of visit. If there is no refrigerator or the refrigerator is not working, tick **[No]** and *go to question E5*.
- **E4b. Is there a working thermometer inside the refrigerator?** Open the refrigerator, take the thermometer and close the refrigerator. Read the thermometer and record the temperature on a piece of paper (you need this for next question). Then, hold the thermometer in your closed hands for 1 minute: if the temperature rises, tick **[Yes]** and *go to next question (E4)*. If the thermometer does not work, tick **[No]** and *go to question E5*.

- **E4. Is the refrigerator's temperature between 2°C and 8°C at the time of the visit?** Check the value of the temperature that you read and recorded before holding the thermometer. Tick **[Yes]** if the temperature read was between 2°C and 8°C.
- **E5. Does the facility have ice packs and undamaged cold boxes?** Ice packs can be frozen or unfrozen. Iceboxes should be functional ("undamaged"): this means that the boxes should be intact with lids. The rubber seal around the rim of the lids should be present and intact. If the answer is **[No]**, go to question D1.
- **E5a. Are ice packs frozen?** Tick **[Yes]** if the ice packs are clearly frozen (no liquid floating).

4.4. Availability of drugs Module

- **D1 – D2.** Tick **[Yes]** for those items listed under questions **D1-D2** for which at least one treatment course (for a child weighing 10kg) is available. For some of the drugs listed (e.g., iron, paracetamol), judge availability as agreed during training. Remember that you have to inspect the items personally.
- **D4 – D7.** For the following drugs, count how many courses of treatment are available right now (a course of treatment for a child weighing 10kg for the condition specified): cotrimoxazole (for pneumonia), amoxicillin (for pneumonia), oral chloroquine and sulphadoxine+pyrimethamine (for malaria). If a drug is not available or the amount present is less than a full course of treatment, enter "0".

4.5. Facility services Module

S1-S11 – Ask these questions of health providers who manage sick children. In facilities where only one health provider has been observed managing cases, questions are asked of the health provider who has been observed by the surveyor during the clinic session. If more than one health provider is observed, then questions can be asked of the health providers as a group - and consensus can be reached on each question.

- **S1 – S2. Days that services are provided for all outpatients and for children.** Write in the space provided the number of days per week the facility is open, including emergency services, for all patients of all ages (S1) and for children (S2). In many cases these two are the same.
- **S3. Does the facility hold immunisation sessions during the week?** If the facility provides all or some antigens once or more a week, tick **[Yes]**. If the facility does not provide immunisation services at all or provides them less often than weekly, tick **[No]** and go to question S4.
- **S3a. How many sessions are held at the facility per week?** Write the number of any immunisation sessions held per week. The facility may hold sessions only for some antigens (e.g., OPV, DPT): in this case, enter how often these are held.
- **S3b. Which vaccinations are not available during the week?** If some antigens are not available weekly, tick all those that are not available. If all antigens are available during the week, tick **[All are available]** and go to question S5.

- **S4. Does the facility hold immunisation sessions in a month?** Tick **[Yes]** if the facility holds at least 1 immunisation session in a month period. If the facility does not, tick **[No]** and *go to question S5*.
- **S4a. Which vaccinations are not available in a month?** See S3b above.
- **S5 - S7. Supervisory visits.** Supervisory visits include any visit to oversee technical patient-care programs. They do not include visits for maintenance (e.g., the cold chain maintenance).
 - **S5.** Record the number of supervisory visits made to the facility in the last 6 months. If no visit was made, enter 0 *and go to question S7a*.
 - **S6.** If the facility has had at least one supervisory visit during the last six months, find out how many of these visits were IMCI follow-up visits to health providers recently trained in IMCI.
 - **S7.** Ask this question about the most recent supervisory visit that was not an IMCI follow up visit. Find out whether the supervisor observed case management of sick children at the last visit.
 - **S7a.** Ask if the facility has a supervisory book and write the answer accordingly.
 - **S7b.** If a supervisory visit book is available at the health facility, check when the last supervisory visit was carried out and whether the supervisor has written findings and recommendations as a result of his visit.
 - **S7c.** Enter how many months ago the latest record of the visit refers to.
- **S9. - S10. Facility procedures for referring sick children.** These questions aim to know:
 - **S9.** The estimated time required to get to the referral hospital from there using a means of transportation that is commonly taken by and affordable to most people living in that area. If this is a hospital OPD, enter “0”;
 - **S10.** If there have been instances in which a child needing referral could not be referred, whatever the reasons;
 - **S10a.** Reasons why a child referred to hospital could not be referred and taken there.
 - **S11.** This question can be asked in different ways. There are at times some very ill children who would need to be taken to the hospital but are not taken there by their caretakers: try to explain the question and get the health provider’s estimate of the proportion of all children referred to hospital who would actually go to the hospital.

4.6 Facility records Module

FACILITY CASELOAD DATA: ESTIMATED FIGURES

F1-F6. The purpose of these questions is to obtain some approximate information on the facility caseload based on interview, as records (or reliable records) may not be available. If more than a health provider saw outpatients in that facility last week, these questions should be asked of all these providers and the total should be entered. For instance, if 2 providers saw outpatients last week, one saw about 30 patients and the second one saw about 20 patients, “50” (30+20) will be entered in F1. The same approach applies to all questions from F1 to F6. Please, pay attention to the age group to which each question refers: some questions refer to all ages (i.e., children and adults), some only to children below five years of age (“under-fives”); also, some questions refer to all consultations for illness, while others refer to outpatient

consultations for “pneumonia or bronchopneumonia” or “malaria”.

F7. Does the facility have a logbook where outpatients’ diagnoses are recorded?

If you find a register, logbook or similar book where cases are registered with the diagnosis, then tick **[Yes]**; otherwise tick **[No]** and stop here.

R1 – R8. Soon after your arrival at the facility, ask for this information to be prepared for you. All the data are collected on cases coming to the facility during the month agreed during training. Review the routine outpatient attendance records. All these data are usually included in the outpatient case register - used for recording the name of the child, age, sex, diagnosis, treatment and follow-up provided. This register is usually completed by the health provider seeing sick children or a nurse or other support staff.

If no one at the facility can help with the tally or no monthly summary report is available, go back to the beginning of the one-month period yourself and count cases in each of the categories, in order to fill in the numbers.

- **R1. Total number of visits for OUTPATIENT services (ALL AGES)** - Write the total number of outpatient visits (all ages) for insured and uninsured patients in the 1st and 2nd columns, respectively.
- **R2, R3, R4.** – This is the breakdown for R1: write total number of outpatient visits for children below five years old, female children below five years old and children below two months old as applies to R2, R3 and R4, respectively. For R2 and R3, write also the total number of “well child” visits (immunisation and growth monitoring).
- **R5, R6.** – Check personally how many of the OUTPATIENT (ALL AGES) visits were diagnosed as “Pneumonia” or “Bronchopneumonia” during the same month and how many of these visits were in children under-five.
- **R7, R8.** – Do the same as in R5 and R6 for cases classified as malaria or cases reported as fever but given an antimalarial.

5. OBSERVATION SHEET

The survey team will fill in this form together. Include additional qualitative observations on the items listed, if any, that the team has made during the visit and/or have emerged in the discussions during the feedback meeting with the facility staff at the end of the visit. Do NOT repeat what already is in the forms. Use this form only to record any qualitative observations that otherwise would be missed by the other forms. Some suggestions have been included in the Sheet. You can add any other observation and comment, whether or not it is listed on the form. Write at the back of the page if you need more space.