

**MODULE 7: PROVIDER KNOWLEDGE AND COMPETENCY FOR MATERNAL AND NEWBORN CARE**

Interviewer Name \_\_\_\_\_ Date (d/m/y): \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**INSTRUCTIONS:** This form should be administered to the provider who attended the largest number of deliveries last month and who is present at the time of the visit. Do not read the answers unless the question specifies that they be read. Make the provider feel as comfortable and at ease as possible.

**READ TO PROVIDER:** I would like to ask you some questions about your experience and knowledge of maternal and newborn care. These questions are an important part of the national assessment of emergency obstetric and newborn services. This is not a test, but rather a general assessment. I will not record your name, and the information you provide will be held in the utmost confidence. Your participation is voluntary; you may choose to not answer a particular question or to end the interview at any time.

No.	Question	Response
1	May I proceed with the interview?	Yes ..... 1 No ..... 0

If the answer to question 1 is “No”, end the interview. If “Yes”, ask the person to sign the consent form and continue to Question 2.

No.	Question	Response
2	What is your professional classification?	Obstetrician ..... 1 Medical doctor (general physician) ..... 2 Medical assistant..... 3 Midwife ..... 4 Clinical nurse ..... 5 Public health nurse ..... 6 Community health nurse/officer ..... 7 Health assistant..... 8 TBA ..... 9 Other (specify) _____ ..... 10
3	How many deliveries did you attend last month?	_ _ _
4	How long have you worked in this facility?	_ _  years    _ _  months

No.	Question	Response	Mentioned	Did not mention
5	What are the primary attributes of focused antenatal care?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Minimum of 4 consultations b. Ensure woman has birth plan c. Prevent illness and promote health (tetanus toxoid vaccine, iron tablets, protection against malaria) d. Detect existing illnesses and manage complications e. Teach the danger signs (of pregnancy, childbirth, and the postpartum period) f. Promote breastfeeding	1 1 1 1 1 1	0 0 0 0 0 0
6	Which women require a special care plan?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Women who have had a cesarean b. Women with 5 or more deliveries c. Women with medical conditions d. Woman having the first baby at 35 years and above e. Interval <2 years or >5 years between pregnancies f. Previous stillbirth g. Previous neonatal death h. Previous instrumental delivery (vacuum extraction, forceps) i. History of severe obstetric complications j. Previous obstetric fistula repair	1 1 1 1 1 1 1 1 1 1	0 0 0 0 0 0 0 0 0 0
7	How do you know when a woman is in labor?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Regular uterine contractions b. Dilation of the cervix c. Discharge of blood and mucus d. Breaking of the waters/ruptured membranes	1 1 1 1	0 0 0 0

No.	Question	Response	Mentioned	Did not mention
8	<p>For a woman in labor, what observations do you make as you monitor her progress?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Fetal heartbeat</p> <p>b. Color of amniotic fluid</p> <p>c. Degree of moulding</p> <p>d. Dilatation of the cervix</p> <p>e. Descent of the head</p> <p>f. Uterine contractions</p> <p>g. Maternal blood pressure</p> <p>h. Maternal temperature</p> <p>i. Maternal pulse</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>
9	<p>Where do you register these observations?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. On a partograph</p> <p>b. In the patient's clinical record</p> <p>c. On a piece of paper/book</p> <p>d. Labor monitoring form</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p>
10	<p>What are the actions taken during active management of the third stage of labor?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Immediate oxytocin (within 1-2 minutes)</p> <p>b. Immediate ergometrine (within 1-2 minutes)</p> <p>c. Controlled cord traction</p> <p>d. Uterine massage</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p>

No.	Question	Response		
			Mentioned	Did not mention
11	<p>The last time you delivered a baby, what immediate care did you give the newborn?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Clean the baby's mouth before the shoulder comes out</p> <p>b. Clean the baby's mouth, face, and nose soon after baby is born</p> <p>c. Ensure the baby is breathing</p> <p>d. Ensure the baby is dry</p> <p>e. Observe for color</p> <p>f. Ensure baby is kept warm (skin-to-skin)</p> <p>g. Prophylaxis for the eyes</p> <p>h. Weigh the baby</p> <p>i. Care for the umbilical cord</p> <p>j. Breastfeeding initiated within the first 30 minutes</p> <p>k. Examine the newborn within the first hour</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>
12	<p>When a woman arrives at the facility with heavy bleeding or develops severe bleeding after giving birth, what signs do you look for?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Signs of shock (dizziness, rapid pulse, low BP)</p> <p>b. Amount of blood loss</p> <p>c. Signs of anemia</p> <p>d. Injury to the genital tract</p> <p>e. If the uterus is contracted</p> <p>f. Retained products or retained placenta</p> <p>g. Full bladder</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>
13	<p>When a woman develops heavy bleeding after delivery, what do you do?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Massage the fundus</p> <p>b. Give ergometrine or oxytocin (IV or IM)</p> <p>c. Begin IV fluids</p> <p>d. Empty full bladder</p> <p>e. Take blood for Hb, grouping and cross-matching</p> <p>f. Examine woman for lacerations</p> <p>g. Remove retained products</p> <p>h. Refer</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>

No.	Question	Response	Mentioned	Did not mention
14	<p>When a woman who just gave birth has a retained placenta, what do you do?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Empty the bladder</p> <p>b. Check for signs of separation of placenta before controlled cord traction</p> <p>c. Give or repeat oxytocin</p> <p>d. Do manual removal of the placenta</p> <p>e. Administer IV fluids</p> <p>f. Monitor vital signs for shock and act</p> <p>g. Check that uterus is well contracted</p> <p>h. Determine blood type and cross-match</p> <p>i. Prepare operating theater</p> <p>j. Refer</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>
15	<p>What are the signs and symptoms of infection in the newborn (sepsis)?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Less movement (poor muscle tone)</p> <p>b. Poor or not breastfeeding</p> <p>c. Hypothermia or hyperthermia</p> <p>d. Restlessness or irritability</p> <p>e. Difficulty breathing or fast breathing</p> <p>f. Deep jaundice</p> <p>g. Severe abdominal distention</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>
16	<p>When the newborn presents signs of infection, what initial steps do you take?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Explain the situation/condition to the mother or caregiver</p> <p>b. Continue to breastfeed or give breastmilk that has been expressed with cup and spoon and nasogastric tube if necessary</p> <p>c. Keep airways open</p> <p>d. Begin antibiotics</p> <p>e. Refer</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>

No.	Question	Response		
			Mentioned	Did not mention
17	When a newborn weighs less than 2.5 kgs, what special care do you provide?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Make sure the baby is warm (skin-to-skin/kangaroo technique)	1	0
		b. Provide extra support to the mother to establish breastfeeding	1	0
		c. Monitor ability to breastfeed	1	0
		d. Monitor baby for the first 24 hours	1	0
		e. Ensure infection prevention	1	0
18	What are the immediate (within 48 hours) complications of an unsafe abortion?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Sepsis	1	0
		b. Bleeding	1	0
		c. Genital injuries	1	0
		d. Abdominal injuries	1	0
		e. Shock	1	0
19	When you see a woman with complications from an unsafe or incomplete abortion, what do you do?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Do a vaginal exam	1	0
		b. Assess vaginal bleeding	1	0
		c. Assess vital signs	1	0
		d. Begin IV fluids	1	0
		e. Begin antibiotics	1	0
		f. Do manual vacuum aspiration	1	0
		g. Do dilatation with curettage or evacuation	1	0
		h. Provide counseling	1	0
		i. Refer	1	0

No.	Question	Response	Mentioned	Did not mention
20	What information do you give patients who were treated for an incomplete or unsafe abortion?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Information on how to prevent reproductive tract infection / HIV b. Information about when a woman can conceive again c. Counseling on family planning (FP) and other services d. Refer for FP to receive family planning methods e. Information on social support f. Information about the consequences of an unsafe abortion	1  1  1  1 1 1	0  0  0  0 0 0
21	When a woman presents as a victim of rape, what do you do?  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Encourage her to report to police b. Facilitate filling out the police report c. Counsel for pre and post HIV testing d. Counsel about pregnancy prevention e. Provide emergency contraception f. Provide post-exposure prophylaxis for HIV g. Request that she do urine, vaginal smear/swabs, and/or blood exams h. Refer	1 1 1 1 1 1 1 1	0 0 0 0 0 0 0 0

22. I am going to read a list of services and for each one I would like you to tell me if you've ever been trained (during pre-service or in-service training) to provide the service and if you have provided the service in the last 3 months.

Service	Have you ever been trained to...?		Have you provided this service in the past 3 months?	
	Yes	No	Yes	No
a. Provide focused antenatal care	1	0	1	0
b. Use the partograph to monitor progress of labor	1	0	1	0
c. Do active management of the third stage of labor	1	0	1	0
d. Do manual removal of the placenta	1	0	1	0
e. Set up IV fluids	1	0	1	0
f. Check for anemia	1	0	1	0
g. Start blood transfusion	1	0	1	0
h. Administer IM or IV magnesium sulfate for the treatment of severe pre-eclampsia or eclampsia	1	0	1	0
i. Do bimanual uterine compression	1	0	1	0
j. Suture an episiotomy	1	0	1	0
k. Suture vaginal lacerations	1	0	1	0
l. Suture cervical lacerations	1	0	1	0
m. Apply vacuum extractor	1	0	1	0
n. Apply obstetric forceps	1	0	1	0
o. Perform manual vacuum aspiration (MVA)	1	0	1	0
p. Perform a dilatation and curettage (D&C)	1	0	1	0
q. Administer antiretrovirals for PMTCT	1	0	1	0
r. Manage severe malaria in pregnancy	1	0	1	0
s. Counsel women about family planning and contraception	1	0	1	0
t. Perform adult resuscitation	1	0	1	0
u. Resuscitate a newborn with bag and mask	1	0	1	0



### GUIDED INTERVIEW FOR NEWBORN RESUSCITATION

Check the answer to the last question (Question 22u). If s/he has not been trained to resuscitate a newborn with bag and mask or tube and mask and has not performed newborn resuscitation in the past 3 months, end the interview. If s/he has been trained or s/he has performed newborn resuscitation, proceed.

No.	Question	Response		
23	Where did you receive training in newborn resuscitation? <i>(read options)</i>	In-service ..... 1 Pre-service ..... 2 Both ..... 3 Other ( <i>specify</i> ) _____ ..... 4		
24	Please describe how you would diagnose birth asphyxia.  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Depressed breathing b. Floppiness c. Heart rate below 100 beats per minute d. Central cyanosis (blue tongue)	Mentioned  1 1 1 1	Did not mention  0 0 0 0
25	Please describe the sequential steps of neonatal resuscitation.  <i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i>	a. Call for help b. Explain to mother condition of baby c. Place the newborn face up d. Wrap or cover baby, except for face and upper portion of chest e. Position baby's head so neck is slightly extended f. Suction mouth then nose g. Start ventilation using bag and mask	Mentioned  1 1 1 1 1 1 1	Did not mention  0 0 0 0 0 0 0
26	<i>Were the steps mentioned done in sequential order? (data collector's observation)</i>	Yes ..... 1 No ..... 0		

No.	Question	Response		
			Mentioned	Did not mention
27	<p>If resuscitating with bag and mask or tube and mask, what do you do?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Place mask so it covers baby's chin, mouth, and nose</p> <p>b. Ensure appropriate seal has been formed between mask, nose, mouth, and chin</p> <p>c. Ventilate 1 or 2 times and see if chest is rising</p> <p>d. Ventilate 40 times per minute for 1 minute</p> <p>e. Pause and determine whether baby is breathing spontaneously</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>
28	<p>If baby is breathing and there is no sign of respiratory difficulty (intercostal retractions or grunting), what do you do?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Keep baby warm</p> <p>b. Initiate breastfeeding</p> <p>c. Continue monitoring the baby</p>	<p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p>
29	<p>If baby does NOT begin to breathe or if breathing is less than 30 breaths per minute, or if there is intercostal retraction or grunting, what do you do?</p> <p><i>(circle all spontaneous answers and ask whether there is anything else the respondent would like to add)</i></p>	<p>a. Continue to ventilate</p> <p>b. Administer oxygen, if available</p> <p>c. Assess the need for special care</p> <p>d. Explain to the mother what is happening</p> <p>e. Intubate per resuscitation guidelines</p> <p>f. Refer the newborn</p>	<p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p> <p>1</p>	<p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p> <p>0</p>

### Comments

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