Sections: 3, Sub-sections: 16,
Questions: 273.
Questions with enabling conditions: 106
Questions with validation conditions: 31
Rosters: 2
Variables: 20

Survey Solutions

Health Care Provider Interviews (HF7)

COVER
No sub-sections, No rosters, Questions: 6.

SECTION 1: STAFF LISTING
No sub-sections, No rosters, Questions: 3.

SECTION 2: STAFF INTERVIEW
Sub-sections: 16, Rosters: 2, Questions: 264, Static texts: 32, Variables: 20.

APPENDIX A — ENABLING CONDITIONS

APPENDIX B — VALIDATION CONDITIONS AND MESSAGES

APPENDIX C — OPTIONS

APPENDIX D — VARIABLES

LEGEND

COVER

Health Facility Name	TEXT facility_name SCOPE: IDENTIFYING ┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄
State	SINGLE-SELECT state_code SCOPE: IDENTIFYING 02 ◯ ADAMAWA 07 ◯ BENUE 25 ◯ NASARAWA 27 ◯ OGUN 28 ◯ ONDO 34 ◯ TARABA
Local Government Area	SINGLE-SELECT: COMBO BOX lga_code SCOPE: IDENTIFYING 0201 ◯ DEMSA 0202 ◯ FUFORE/GURIN 0203 ◯ GANYE 0204 ◯ GIREI 0205 ◯ GOMBI 0206 ◯ GUYUK 0207 ◯ HONG 0208 ◯ JADA 0209 ◯ LAMURDE 0210 ◯ MADAGALI 0211 ◯ MAIHA 0212 ◯ MAYO-BELWA 0213 ◯ MICHIKA 0214 ◯ MUBI NORTH 0215 ◯ MUBI SOUTH 0216 ◯ NUMAN And 95 other [1]
Ward Name	TEXT ward_name SCOPE: IDENTIFYING ┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄
Facility Level	SINGLE-SELECT facility_level SCOPE: IDENTIFYING 01 ◯ Primary 02 ◯ Secondary
INTERVIEWER Name	TEXT int_name SCOPE: IDENTIFYING ┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄

SECTION 1: STAFF LISTING

1.01: INTERVIEWER: DID YOU GET A HARD COPY OF THE STAFF LIST FOR THE HEALTH FACILITY?	SINGLE-SELECT HF7_Q101 01 ◯ YES 02 ◯ NO
1.01b: REASON FOR NOT GETTING THE HARD COPY E HF7_Q101==2	TEXT HF7_Q101_reason ┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄┄

1.02: TAKE A PICTURE OF THE FIRST PAGE OF THE <u>CLINICAL STAFF</u> LIST	PICTURE	HF7_Q102
E `HF7_Q101==1`		

SECTION 2: STAFF INTERVIEW

VARIABLE `(Quest.IRnd() * 13) - Math.Truncate(Quest.IRnd() * 13)`	DOUBLE	r1
VARIABLE `(Quest.IRnd() * 23) - Math.Truncate(Quest.IRnd() * 23)`	DOUBLE	r2
VARIABLE `(Quest.IRnd() * 41) - Math.Truncate(Quest.IRnd() * 41)`	DOUBLE	r3
VARIABLE `(new [] {r1, r2, r3}).OrderBy(x => x).ToList().IndexOf(r1) + 1`	LONG	r1_index
VARIABLE `(new [] {r1, r2, r3}).OrderBy(x => x).ToList().IndexOf(r2) + 1`	LONG	r2_index
VARIABLE `(new [] {r1, r2, r3}).OrderBy(x => x).ToList().IndexOf(r3) + 1`	LONG	r3_index

SECTION 2: STAFF INTERVIEW
Roster: STAFF INTERVIEW
generated by fixed list   staff_roster

01   STAFF MEMBER #1

02   STAFF MEMBER #2

03   STAFF MEMBER #3

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 1: BASIC INFORMATION

Start Time and Date of interview	DATE: CURRENT TIME	int_start_time

Translator Used?	SINGLE-SELECT	translator
	01 ◯ Never 02 ◯ Sometimes 03 ◯ Always	

1.01: WHAT IS THE NAME OF THE STAFF MEMBER?	TEXT	Q901_1

1.02: IS THE STAFF MEMBER MALE OR FEMALE?	SINGLE-SELECT	Q902
	01 ◯ MALE 02 ◯ FEMALE	

1.04: How old are you?	NUMERIC: INTEGER	Q904_1
V1 `self.InRange(18,75)` M1 Employee age is unlikely. Please confirm.		
	SINGLE-SELECT	Q905_1

1.05: What is the highest academic qualification that you have obtained?	00 ○ No schooling 01 ○ Primary School Certificate 02 ○ Secondary School Certificate 03 ○ Bachelor degree 04 ○ Master degree or higher 05 ○ Certificate 06 ○ Diploma 07 ○ Higher national diploma 08 ○ MBBS 09 ○ Don't know

1.06: What is your position in this facility?

V1 `// Highly educated positions - at least bachelors (self.InList(1,3,4,5,13,50,51,52,53) && Q905_1>=3) || // medium education - at least secondary (self.InList(3,4,5,13,50,51,52,53) && Q905_1>=2) || //` And 72 other symbols [1]

M1 The highest academic qualification (%Q905_1%) obtained seems too low for their position in this facility. Please review.

V2 `self.InList(1,3,4,5,13,50,51,52,53)`

M2 This cannot be a clinical staff

SINGLE-SELECT   Q906_1

01 ○ Doctor or medical officer
02 ○ Hospital secretary
03 ○ Nurse midwife
04 ○ Nurse
05 ○ Midwife
06 ○ Pharmacist
07 ○ Environmental health officer
09 ○ Pharmacy assistant/Dispenser
10 ○ Lab technologist/scientist
11 ○ Lab technician/assistant
13 ○ Other clinical
50 ○ Public Health Nurse
51 ○ Community Health Officer (CHO)
52 ○ Community Health Extension Worker (CHEW)
53 ○ Junior Community Health Extension Worker (JCHEW)
54 ○ Medical Records Officer

And 5 other [2]

1.07: What year did you receive your clinical qualification?

E `Q906_1.InList(1,3,4,5,51,52,53)`
V1 `self.InRange(1920,2017)`
M1 reported year of training is unlikely. Please confirm.
V2 `2017-Q904_1+17 <= self`
M2 The year that the person received their clinical qualification seems unlikely. Please review.

NUMERIC: INTEGER   Q907

1.08: What is your year of posting at this health facility?

V1 `Q908.InRange(1920,2017)`
M1 reported year of posting is unlikely. Please confirm.
V2 `Q907.InRange(1920,2017)`
M2 The year cannot be earlier than that

NUMERIC: INTEGER   Q908

1.10: How many days per week do you usually work at this health facility?

V1 `Q910.InRange(1,7)`
M1 Number of days per week is unlikely. Please confirm.

NUMERIC: INTEGER   Q910

1.11: How many hours per week do you usually work at this health facility?

V1 `Q911.InRange(0,97)`
M1 Number of hours per week is unlikely. Please confirm.
V2 `Q911<Q910*15`
M2 Hours declared is imposible

NUMERIC: INTEGER   Q911

1.12: How many hours per week do you usually | NUMERIC: INTEGER   Q912

spend providing medical care directly to patients?

E	Q906_1.InList(1,3,4,5,51,52,53)
V1	Q912.InRange(1,97)
M1	Number of hours per week is unlikely. Please confirm.
V2	self <= Q911
M2	Hour spend providing services cannot be greater than hour usually worked. Please correct.

1.16: What services are you providing today?

I SELECT ALL MENTIONED

MULTI-SELECT   Q916

- 01 ☐ Antenatal care
- 02 ☐ Child Preventive services (incl immunizations)
- 03 ☐ Child curative care
- 04 ☐ Adult curative care
- 05 ☐ HIV testing and counselling
- 06 ☐ Post natal care
- 07 ☐ Non clinical (admin, registration, etc.)
- 51 ☐ Deliveries
- 52 ☐ Other inpatient care including surgeries
- 53 ☐ Pharmacy related activities
- 54 ☐ Laboratory related activities

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 2: STAFF TRAINING

STATIC TEXT

2.1: For each subject I mention, I would like to know the most recent time you received in-service training. Please do not include your initial medical or nursing education.

INTERVIEWER: THIS TRAINING INCLUDES ONLY THE TRAINING RECEIVED AFTER UNDERGOING PROFESSIONAL EDUCATION. FOR EXAMPLE, TRAINING RECEIVED AS PART OF THE BACHELOR OF MEDICINE AND SURGERY (MBBS) OR MEDICAL DOCTOR (MD) PROGRAM SHOULD NOT BE MENTIONED HERE. READ EACH OPTION ALOUD.

Q2.01A: When was the most recent time you received in-service training on Integrated Management of Childhood Illness (IMCI), Diarrhea, ARI, etc?	SINGLE-SELECT HF7_Q201A 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01B: When was the most recent time you received in-service training on Malaria?	SINGLE-SELECT HF7_Q201B 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01C: When was the most recent time you received in-service training on Tuberculosis diagnosis and treatment?	SINGLE-SELECT HF7_Q201C 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01D: When was the most recent time you received in-service training on Family planning methods and/or counselling?	SINGLE-SELECT HF7_Q201D 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01E: When was the most recent time you received in-service training on Emergency Obstetric and Newborn Care?	SINGLE-SELECT HF7_Q201E 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01F: When was the most recent time you	SINGLE-SELECT HF7_Q201F

received in-service training on Labor and delivery?	01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01G: When was the most recent time you received in-service training on Use of vacuum extractors?	SINGLE-SELECT HF7_Q201G 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01H: When was the most recent time you received in-service training on Use of manual vacuum aspirator?	SINGLE-SELECT HF7_Q201H 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01I: When was the most recent time you received in-service training on Mental Health?	SINGLE-SELECT HF7_Q201I 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01J: When was the most recent time you received in-service training on Antenatal / Postnatal care?	SINGLE-SELECT HF7_Q201J 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01K: When was the most recent time you received in-service training on Nutrition and growth monitoring?	SINGLE-SELECT HF7_Q201K 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01L: When was the most recent time you received in-service training on Management of Sexually Transmitted Infections (STIs)?	SINGLE-SELECT HF7_Q201L 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01M: When was the most recent time you received in-service training on HIV/AIDS testing and counseling?	SINGLE-SELECT HF7_Q201M 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01N: When was the most recent time you received in-service training on HIV/AIDS treatment (Anti retroviral therapy, ART)?	SINGLE-SELECT HF7_Q201N 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01O:When was the most recent time you received in-service training on Prevention of mother to child transmission of HIV/AIDS (PMTCT)?	SINGLE-SELECT HF7_Q201O 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01P: When was the most recent time you received in-service training on Vaccination?	SINGLE-SELECT HF7_Q201P 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01Q: When was the most recent time you received in-service training on Treatment of skin diseases and skin conditions?	SINGLE-SELECT HF7_Q201Q 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago 03 ◯ Never trained
Q2.01R: When was the most recent time you received in-service training on Specialized training for ear, nose and throat care (ENT)?	SINGLE-SELECT HF7_Q201R 01 ◯ Training less than 1 year ago 02 ◯ Training one year or more ago

	03 ○ Never trained
Q2.01S: When was the most recent time you received in-service training on Other adult curative care?	SINGLE-SELECT HF7_Q201S 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01T: When was the most recent time you received in-service training on providing sexual and reproductive health (SRH) services to adolescents (youth friendly services)?	SINGLE-SELECT HF7_Q201T 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01U: When was the most recent time you received in-service training on Management and administration?	SINGLE-SELECT HF7_Q201U 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01V: When was the most recent time you received in-service training on Community Health / Outreach?	SINGLE-SELECT HF7_Q201V 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01W: When was the most recent time you received in-service training on Emergency department protocol/ work?	SINGLE-SELECT HF7_Q201W 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01X:When was the most recent time you received in-service training on Minor surgery?	SINGLE-SELECT HF7_Q201X 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01Y: When was the most recent time you received in-service training on Major surgery?	SINGLE-SELECT HF7_Q201Y 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01Z: When was the most recent time you received in-service training on Medical care waste management procedures?	SINGLE-SELECT HF7_Q201Z 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01ZA: When was the most recent time you received in-service training on Other (specify)?	SINGLE-SELECT HF7_Q201ZA 01 ○ Training less than 1 year ago 02 ○ Training one year or more ago 03 ○ Never trained
Q2.01ZA_SPC: Specify other in service training E HF7_Q201ZA==1 || HF7_Q201ZA==2	TEXT HF7_Q201ZA_SPC ....

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW / SECTION 2: STAFF TRAINING

Roster: IN-SERVICE TRAININGS
generated by fixed list   HF7_Q202

01   Integrated Management of Childhood Illness (IMCI), Diarrhea, ARI, etc

02   Malaria

03   Tuberculosis diagnosis and treatment

04   Family planning methods and/or counseling

05   Emergency Obstetric and Newborn Care

06   Labor and delivery

07   Use of vacuum extractors

08   Use of manual vacuum aspirator

09   Mental Health

10   Antenatal / Postnatal care

11   Nutrition and growth monitoring

12   Management of Sexually Transmitted Infections (STIs)

13   HIV/AIDS testing and counseling

14   HIV/AIDS treatment (Anti-retroviral therapy, ART

15   Prevention of mother to child transmission of HIV/AIDS (PMTCT)

16   Vaccination

17   Treatment of skin diseases and skin conditions

18   Specialized training for ear, nose and throat care (ENT)

19   Other adult curative care

20   Providing SRH services to adolescents (youth friendly services)

21   Management and administration

22   Community Health /Outreach

23   Emergency department protocol/work

24   Minor surgery

25   Major surgery

E   `// Only enable items where the staff said he/she has had // a training in the last year new[]{ HF7_Q201A, HF7_Q201B, HF7_Q201C, HF7_Q201D, HF7_Q201E, HF7_Q201F, HF7_Q201G, HF7_Q201H, HF7_Q201I,` And 201 other symbols [1]

Q2.02A: %rostertitle% was organized by...	SINGLE-SELECT HF7_Q202A 01 ◯ Government 02 ◯ NGO 03 ◯ Others
Q2.02A: %rostertitle% organised by others E `HF7_Q202A==3`	TEXT HF7_Q202A_OTHER ···
Q2.02B: Who paid for %rostertitle%?	SINGLE-SELECT HF7_Q202B 01 ◯ Government 02 ◯ NGO 03 ◯ Health Facility 04 ◯ Full paid by Self 05 ◯ Some costs paid by Self
Q2.02C: What was the amount paid by you for the training for %rostertitle% in Naira? E `HF7_Q202B.InList(4,5)`	NUMERIC: INTEGER HF7_Q202C – – – – – – – – – – – – – – – – – – –
Q2.02D: How satisfied were you with the training for %rostertitle%?	SINGLE-SELECT HF7_Q202D 01 ◯ Very Satisfied 02 ◯ Satisfied 03 ◯ Not Satisfied
Q2.03: Are there training you personally feel you need for your present job?	SINGLE-SELECT HF7_Q203 01 ◯ YES 02 ◯ NO
Q2.04: What kind of additional training do you feel you need for your present job? I DO NOT READ OPTION ALOUD	MULTI-SELECT HF7_Q204 01 ☐ Integrated Management of Childhood Illness (IMCI), Diarrhea, ARI, etc

02 ☐	Malaria
03 ☐	Tuberculosis diagnosis and treatment
04 ☐	Family planning methods and/or counseling
05 ☐	Emergency Obstetric and Newborn Care
06 ☐	Labor and delivery
07 ☐	Use of vacuum extractors
08 ☐	Use of manual vacuum aspirator
09 ☐	Mental Health
10 ☐	Antenatal / Postnatal care
11 ☐	Nutrition and growth monitoring
12 ☐	Management of Sexually Transmitted Infections (STIs)
13 ☐	HIV/AIDS testing and counseling
14 ☐	HIV/AIDS treatment (Anti-retroviral therapy, ART
15 ☐	Prevention of mother to child transmission of HIV/AIDS (PMTCT)
16 ☐	Vaccination

And 11 other [3]

Q2.04: Other kind of additional training specify

TEXT   HF7_Q204_OTHER

E   HF7_Q204.Contains(27)

....

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 3: HOURS AND DUTIES

Q3.01: How many hours per week are you <u>expected</u> to work at this facility?

NUMERIC: INTEGER   HF7_Q301

I   RECORD AVERAGE NUMBER OF EXPECTED HOURS PER WEEK. NOTE: THE EXPECTED HOURS CAN BE LESS THAN THE ACTUAL HOURS WORKED

V1   /* I have assumed that one person can work a maximum of 14 hours per day for 7 days */ self.InRange(0,98)

M1   Number of hours worked per week seems very high. Please review.

Q3.02: We realize that health care providers cannot always fulfill their duties and stick to their assigned schedules. In the last 30 days, how many days were you absent from work?

NUMERIC: INTEGER   HF7_Q302

V1   self.InRange(0,30)

M1   The number of days cannot be greater than 30. Please review.

Q3.03: In the last 7 days, how many <u>days</u> did you work at this facility?

NUMERIC: INTEGER   HF7_Q303

V1   self.InRange(0,7)

M1   The number of days cannot be greater than 7. Please review.

Q3.04: In the last 7 days, how many <u>hours</u> did you work at this facility in total?

NUMERIC: INTEGER   HF7_Q304

V1   /* I have assumed that one person can work a maximum of 14 hours per day for 7 days */ self.InRange(0,98)

M1   Number of hours worked per week seems very high. Please review.

Q3.05: In comparing to 12 months ago, would you say the number of hours you work in a

SINGLE-SELECT   HF7_Q305

01 ◯   Increased

week have increased, decreased or remained the same?	02 ○ Decreased 03 ○ Remained the same

Q3.06: Have you ever been absent from work without authorized leave?	SINGLE-SELECT HF7_Q306 01 ○ YES 02 ○ NO

Q3.07: The last time you were away from work without authorized leave, what type of activity were you doing? I DO NOT READ OPTIONS ALOUD. FOR EACH OPTION, NOTE WHETHER THE HEALTH WORKER MENTIONED THIS ACTION OR NOT. E HF7_Q306==1	MULTI-SELECT HF7_Q307 01 ☐ I GOT STUCK TRAVELING TO WORK 02 ☐ I WAS SICK 03 ☐ I WAS CARING FOR SICK RELATIVES 04 ☐ I WAS ATTENDING ANOTHER PAID JOB 05 ☐ I WAS ATTENDING ANOTHER UNPAID JOB 06 ☐ I WAS CARING FOR CHILDREN 07 ☐ I WAS DOING HOUSEHOLD CHORES 08 ☐ I WAS TIRED FROM THE PREVIOUS DAY 09 ☐ OTHER (SPECIFY)

Q3.07_spc: Specify what other activity you were doing E HF7_Q307.Contains(9)	TEXT HF7_Q307_os ....

Q3.08: When you are away from the facility without authorized leave, did any of the following occur? I READ OPTIONS ALOUD. FOR EACH OPTION, RECORD "YES" FOR YES OR "NO" FOR NO. E HF7_Q306==1	MULTI-SELECT: YES/NO HF7_Q308 01 ☐ / ☐ Facility head / manager contacts you 02 ☐ / ☐ Your salary / allowance / bonus is reduced 03 ☐ / ☐ Manager discusses this with you 04 ☐ / ☐ Absences are reflected in your performance assessment 05 ☐ / ☐ Your coworkers speak to you about it 06 ☐ / ☐ Other, specify

Q3.08_spc: Specify what other thing occur? E HF7_Q308.Yes.Contains(6)	TEXT HF7_Q308_os ....

Q3.09: How many individual patients did you see on your last full working day? I PLEASE DO NOT COUNT GROUP SENSITIZATION OF MOTHERS/PATIENTS. IF NO PATIENT SEEN, RECORD "0". IF 97 OR MORE, RECORD "98". IF DON'T KNOW, RECORD "99"	NUMERIC: INTEGER HF7_Q309 -

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 4: SALARY

Q4.02: What is your current monthly net (take home) salary? I NAIRA	NUMERIC: INTEGER HF7_Q402 -

Q4.03: What was your monthly net salary one year ago? I NAIRA V1 self<=HF7_Q402	NUMERIC: INTEGER HF7_Q403 -

M1 Mnthly net salary a year ago should be less than or equal to current salary. Please confirm and correct	

Q4.04: What is your current salary grade?

V1 `self.InRange(0,17)`
M1 The salary grade entered seems unlikely. Please review.

NUMERIC: INTEGER   HF7_Q404

- -

Q4.05A: Over the past 2 years, has your salary increased?

SINGLE-SELECT   HF7_Q405A
01 ◯ YES
02 ◯ NO

Q4.05B: Over the past 2 years, did your salary increase because of the following reasons?

I READ ANSWER OPTIONS. FOR EACH OPTION, RECORD 'YES' OR 'NO'
E `HF7_Q405A==1`

MULTI-SELECT: YES/NO   HF7_Q405B
01 ☐ / ☐ Annual increment
02 ☐ / ☐ Individual performance
03 ☐ / ☐ Promotion
04 ☐ / ☐ Other, specify

Q4.05_spc: Other reasons for salary increase

E `HF7_Q405B.Yes.Contains(4)`

TEXT   HF7_Q405_spc

··

Q4.06: In the last 12 months, did you receive all your due salary according to the payment schedule?

SINGLE-SELECT   HF7_Q406
01 ◯ YES
02 ◯ NO

Q4.07: What day of the month are you officially supposed to receive your salary?

V1 `self.InRange(1,31)`
M1 The day of the month is out of range. Please correct.

NUMERIC: INTEGER   HF7_Q407

- -

Q4.08: Last month, by how many days was your salary delayed?

I ENTER A NUMBER. IF STILL NOT RECEIVED, RECORD '77'. IF RECEIVED ON TIME, RECORD '0'
E `HF7_Q406==2`
V1 `self.InRange(0,31) || self==77`
M1 No of days in the month seems unlikely. Please correct

NUMERIC: INTEGER   HF7_Q408

- -

Q4.09: Have you received your salary in totality for last month?

E `// skip if still have not received HF7_Q408!=null && HF7_Q408!=77`

SINGLE-SELECT   HF7_Q409
01 ◯ YES
02 ◯ NO

Q4.10: The month prior to last month, how many days was your salary delayed?

I ENTER A NUMBER. IF STILL NOT RECEIVED, RECORD '77'. IF RECEIVED ON TIME, RECORD '0'
E `HF7_Q406==2`
V1 `self.InRange(0,31) || self==77`
M1 No of days in the month seems unlikely. Please correct

NUMERIC: INTEGER   HF7_Q410

- -

Q4.11: Have you received all of it?

E `// skip if still have not received HF7_Q410!=null && HF7_Q410!=77`

SINGLE-SELECT   HF7_Q411
01 ◯ YES
02 ◯ NO

Q4.12: In the last 12 months, those times that you did not receive your full salary on time, what reason was usually given for you not being paid?

I DO NOT READ OPTIONS ALOUD. FOR EACH OPTION, NOTE WHETHER THE HEALTH WORKER MENTIONED THIS REASON OR NOT, RECORD "Y

MULTI-SELECT: YES/NO   HF7_Q412
01 ☐ / ☐ LACK OF FUNDS
02 ☐ / ☐ SYSTEMIC DELAY / ADMINISTRATIVE PROBLEM
03 ☐ / ☐ SALARY WITHHELD TO SERVICE OUTSTANDING DEBTS

E HF7_Q406==2

04 ☐ / ☐	NON-PAYMENT WAS NOT EXPLAINED
05 ☐ / ☐	RELATED TO PERFORMANCE / ABSENCE
06 ☐ / ☐	OTHER, SPECIFY

Q4.12_spc: Other reason given for you not being paid

E HF7_Q412.Yes.Contains(6)

TEXT　　　　　　　　　　　　　　　　　HF7_Q412_spc

....

Q4.13: For the last 12 months, have you received all the salary due to you, even if it was not according to the payment schedule?

SINGLE-SELECT　　　　　　　　　　　　HF7_Q413

01 ◯ YES
02 ◯ NO

Q4.14: How many months' salary are you currently owed for the past 12 months?

E HF7_Q413==2
V1 self.InRange(1,12)
M1 Number of months must be between 1 and 12. Please correct.

NUMERIC: INTEGER　　　　　　　　　　HF7_Q414

Q4.15: If you were to leave your current job, what type of work do you think you will be able to get easily?

I DO NOT READ OPTIONS ALOUD. RECORD ALL MENTIONED

MULTI-SELECT: ORDERED　　　　　　　HF7_Q415

01 ☐ NGO WITHIN THE HEALTH SECTOR
02 ☐ OUTSIDE THE COUNTRY
03 ☐ PRIVATE HEALTH FACILITY
04 ☐ FAITH BASED ORGANIZATIONS
05 ☐ NON HEALTH ORGANIZATION
06 ☐ OTHER PUBLIC FACILITIES
08 ☐ OTHER, SPECIFY

Q4.15: Specify the other type of work

E HF7_Q415.Contains(8)

TEXT　　　　　　　　　　　　　　　HF7_Q415_other

....

Q4.16: What would be the lowest monthly net salary you would accept to work in your preferred job?

I IN NAIRA

NUMERIC: INTEGER　　　　　　　　　　HF7_Q416

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 5: OTHER COMPENSATION

Q5.01: Do you currently receive any of the following benefits as part of your primary job?

I READ OPTIONS ALOUD

MULTI-SELECT: YES/NO　　　　　　　　HF7_Q501

01 ☐ / ☐ Free or subsidized housing
02 ☐ / ☐ Health care benefits and/or medicines
03 ☐ / ☐ Free food/meals at work
04 ☐ / ☐ Uniform for your work
05 ☐ / ☐ Shoes for your work
06 ☐ / ☐ Transport between work and home
07 ☐ / ☐ Free schooling or school subsidies for children

Q5.02: Do you currently receive a housing allowance?

SINGLE-SELECT　　　　　　　　　　　HF7_Q502

01 ◯ YES
02 ◯ NO

Q5.03: How often is the housing allowance paid?

SINGLE-SELECT　　　　　　　　　　　HF7_Q503

01 ◯ EACH DAY
02 ◯ EACH WEEK

E HF7_Q502==1	03 ○ EACH MONTH 04 ○ EVERY FOUR MONTHS 05 ○ EVERY SIX MONTHS 06 ○ EACH YEAR 07 ○ IRREGULAR/AD HOC 08 ○ OTHER, SPECIFY
Q5.03_spc: Other period for housing allowance E HF7_Q503==8	TEXT HF7_Q503_spc ....
Q5.04: How much did you receive in the last period or at your last ad hoc payment for the housing allowance in Naira? E HF7_Q502==1 V1 self>0 M1 Amount cannot be zero if you currently received benefits. Confirm your response	NUMERIC: INTEGER HF7_Q504 -------------------------------.
Q5.05: Do you currently receive a "Rural Hardship" allowance (for working in rural areas)?	SINGLE-SELECT HF7_Q505 01 ○ YES 02 ○ NO
Q5.06: How often is the Rural Hardship allowance paid? E HF7_Q505==1	SINGLE-SELECT HF7_Q506 01 ○ EACH DAY 02 ○ EACH WEEK 03 ○ EACH MONTH 04 ○ EVERY FOUR MONTHS 05 ○ EVERY SIX MONTHS 06 ○ EACH YEAR 07 ○ IRREGULAR/AD HOC 08 ○ OTHER, SPECIFY
Q5.06_spc: Other period for housing allowance E HF7_Q506==8	TEXT HF7_Q506_spc ....
Q5.07: How much did you receive in the last period or at your last ad hoc payment for the Rural Hardship allowance? I IN NAIRA E HF7_Q505==1	NUMERIC: INTEGER HF7_Q507 -------------------------------.
Q5.08: Do you normally receive a travel allowance for outreach activities?	SINGLE-SELECT HF7_Q508 01 ○ YES 02 ○ NO
Q5.09: In the last 3 months, how much did you receive as travel allowance for outreach activities? I IN NAIRA E HF7_Q508==1	NUMERIC: INTEGER HF7_Q509 -------------------------------.

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 6: SUPERVISION (INTERNAL AND EXTERNAL)

STATIC TEXT

INTERNAL SUPERVISION

STATIC TEXT

Now I would like to talk with you about supervision of your work by people who also work in this facility.

Q6.01: Within the facility, is there anyone who is responsible for supervising your work? This could include providing feedback on your performance, giving you advice, discussing your career with you?	SINGLE-SELECT HF7_Q601 01 ◯ YES 02 ◯ NO
Q6.02: Within the facility, who is responsible for supervising your work? E HF7_Q601==1	SINGLE-SELECT HF7_Q602 01 ◯ Health facility head 02 ◯ Head of service within the facility 03 ◯ Other HEALTH CARE PROVIDER in the facility 08 ◯ Other, specify
Q6.02_spc: Other responsible specify E HF7_Q602==8	TEXT HF7_Q602_spc ....
Q6.03: What is the position of your supervisor as designated by the Ministry of Health? E HF7_Q601==1	SINGLE-SELECT HF7_Q603 01 ◯ Doctor or medical officer 02 ◯ Hospital secretary 03 ◯ Nurse midwife 04 ◯ Nurse 05 ◯ Midwife 06 ◯ Pharmacist 07 ◯ Environmental health officer 09 ◯ Pharmacy technician/Dispenser 10 ◯ Lab technologist/scientist 11 ◯ Lab technician/assistant 51 ◯ Community Health Officer (CHO) 52 ◯ Community Health Extension Worker (CHEW) 53 ◯ Junior Community Health Extension Worker (JCHEW) 54 ◯ Medical Records Officer 55 ◯ Auxiliary Nurse/Midwife 96 ◯ Other, specify
Q6.03_spc: Other position specify E HF7_Q603==96	TEXT HF7_Q603_spc ....
Q6.04: When was the last time you met with this internal supervisor to discuss your performance or your career development? E HF7_Q601==1	SINGLE-SELECT HF7_Q604 01 ◯ Within the past 30 days 02 ◯ Within the past 31-90 days 03 ◯ Within the past 4-6 months 04 ◯ More than 6 months ago
Q6.05: Within the last 12 months, have you discussed any job difficulties with your internal supervisor? E HF7_Q601==1	SINGLE-SELECT HF7_Q605 01 ◯ YES 02 ◯ NO
Q6.06: After these discussions, did you notice a lot of improvements, some improvements or no improvements? E HF7_Q605==1	SINGLE-SELECT HF7_Q606 01 ◯ A LOT OF IMPROVEMENTS 02 ◯ SOME IMPROVEMENTS 03 ◯ NO IMPROVEMENTS

STATIC TEXT

STATIC TEXT

Now I would like to talk with you about supervision of your work by people from outside of the facility.

Q6.07: Outside of this health facility, is there anyone who is responsible for supervising your work? This could include providing feedback on your performance, giving you advice, discussing your career with you?	SINGLE-SELECT　　　　　　　　　　　HF7_Q607 01 ◯ YES 02 ◯ NO
Q6.08: Who outside the facility is primarily responsible for supervising your work? E `HF7_Q607==1`	SINGLE-SELECT　　　　　　　　　　　HF7_Q608 01 ◯ LGA PHC Coordinator 02 ◯ Hospital Management Board Official 03 ◯ SMoH Official 04 ◯ Donor 05 ◯ LGA PHC Department Official 06 ◯ FMOH/NPHCDA Official 08 ◯ Other, specify
Q6.08_spc: Other responsible specify E `HF7_Q608==8`	TEXT　　　　　　　　　　　HF7_Q608_spc ....
Q6.09: In the last 12 months, how many times have you met with this external supervisor? I NUMBER OF TIMES E `HF7_Q607==1`	NUMERIC: INTEGER　　　　　　　　　　　HF7_Q609 -
Q6.10: When was the last time you met with your external supervisor to discuss your performance or your career development? E `HF7_Q607==1`	SINGLE-SELECT　　　　　　　　　　　HF7_Q610 01 ◯ Within the past 30 days 02 ◯ Within the past 31-90 days 03 ◯ Within the past 4-6 months 04 ◯ More than 6 months ago 05 ◯ Never
Q6.11: The last time that you met this external supervisor, what did [HE/SHE] do to supervise your work? I DO NOT READ CHOICES ALOUD. RECORD ALL OPTIONS MENTIONED. E `HF7_Q610<5`	MULTI-SELECT　　　　　　　　　　　HF7_Q611 01 ☐ BROUGHT SUPPLIES / EQUIPMENT 02 ☐ CHECKED RECORDS 03 ☐ CHECKED FINANCES 04 ☐ OBSERVED CONSULTATION 05 ☐ ASSESSED KNOWLEDGE 06 ☐ PROVIDED HEALTH-RELATED INSTRUCTION 07 ☐ PROVIDED ADMINISTRATIVE INSTRUCTION 08 ☐ PROVIDED INSTRUCTION ON FILLING HEALTH MANAGEMENT INFORMATION SYSTEMS (HMIS) FORMS 10 ☐ DISCUSSED MY PERFORMANCE AND/OR CAREER 11 ☐ INSPECTED FACILITY 12 ☐ OTHER, SPECIFY
Q6.11 Record what else was done to supervise your work E `HF7_Q611.Contains(12)`	TEXT　　　　　　　　　　　HF7_Q611_other ....
Q6.12: Within the last 12 months, have you discussed any job difficulties with your external	SINGLE-SELECT　　　　　　　　　　　HF7_Q612 01 ◯ YES

supervisor? E `HF7_Q607==1`	02 ⭕ NO
Q6.13: After these discussions, did you notice a lot of improvements, some improvements or no improvements? E `HF7_Q612==1`	SINGLE-SELECT HF7_Q613 01 ⭕ A LOT OF IMPROVEMENTS 02 ⭕ SOME IMPROVEMENTS 03 ⭕ NO IMPROVEMENTS

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 7: SUPPLEMENTAL INCOME

STATIC TEXT

It is common for health care providers to have additional work to their primary job at the health facility. I would like to ask you questions about additional work you might be doing. Please answer the following questions with regards to your supplemental activity

7.01 : Do you have any other job or activity to supplement your income from this health facility?	SINGLE-SELECT HF7_Q701 01 ⭕ Yes 02 ⭕ No
7.02: What kind of job or activity is this? I READ OPTIONS ALOUD E `HF7_Q701==1`	MULTI-SELECT HF7_Q702 01 ☐ Work in another government facility 02 ☐ Work in private clinic or private practice 03 ☐ Work in a pharmacy 04 ☐ Work in non-health related business other than farming 05 ☐ Farming 06 ☐ Others specify
Please specify the other job or activity E `HF7_Q702.Contains(6)`	TEXT HF7_Q702_os ....
7.03 : What is the main reason that you are doing this other job or activity? I DO NOT READ OPTIONS ALOUD. E `HF7_Q701==1`	SINGLE-SELECT HF7_Q703 01 ⭕ I CANNOT MAKE ENDS MEET ON MY PRIMARY INCOME 02 ⭕ HOURLY PAY IS LUCRATIVE IN THIS SECONDARY JOB 03 ⭕ I CAN GAIN EXPERIENCE THAT IS NOT AVAILABLE IN MY PRIMARY JOB 04 ⭕ THE SECONDARY JOB HAS A BETTER ENVIRONMENT 05 ⭕ I CAN SEE PATIENTS I COULD NOT SEE DURING WORKING HOURS 08 ⭕ OTHER, SPECIFY
Please specify the other reason E `HF7_Q703==8`	TEXT HF7_Q703_oth ....
7.04a : How long have you been doing this additional job or activity? YEAR I RECORD YEARS E `HF7_Q701==1`	NUMERIC: INTEGER HF7_Q704A - - - - - - - - - - - - - - - - - - -
7.04b : How long have you been doing this additional job or activity? MONTHS	NUMERIC: INTEGER HF7_Q704B - - - - - - - - - - - - - - - - - - -

I RECORD MONTHS E `HF7_Q701==1` V1 `self.InRange(0,11)` M1 The number of months must be between 0 and 11. Please correct.	

7.05 : How many hours did you spend on this other work in the last 7 days? E `HF7_Q701==1` V1 `self.InRange(0,84)` M1 The number of hours spent on this work seems very high. Please review.	NUMERIC: INTEGER -	HF7_Q705

7.06 : What is your <u>monthly net</u> income in this other work? (based on last month) I IN NAIRA E `HF7_Q701==1`	NUMERIC: INTEGER -	HF7_Q706

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW

SECTION 8: WHO WELL-BEING INDEX

STATIC TEXT

Now I will read five statements about how a person might be feeling. For each of the five statements, please indicate whether in the last two weeks, you have been feeling this way most of the time, more than half of the time, less than half of the time, only rarely, or never.

8.01 : In the past 2 weeks, I have felt cheerful and in good spirits	SINGLE-SELECT 01 ◯ Most of the time 02 ◯ More than half of the time 03 ◯ Less than half of the time 04 ◯ Rarely 05 ◯ Never	HF7_Q801

8.02 : In the past 2 weeks, I have felt calm and relaxed…	SINGLE-SELECT 01 ◯ Most of the time 02 ◯ More than half of the time 03 ◯ Less than half of the time 04 ◯ Rarely 05 ◯ Never	HF7_Q802

8.03 : In the past 2 weeks, I have felt active and vigorous…	SINGLE-SELECT 01 ◯ Most of the time 02 ◯ More than half of the time 03 ◯ Less than half of the time 04 ◯ Rarely 05 ◯ Never	HF7_Q803

8.04 : In the past 2 weeks, I woke up feeling fresh and rested…	SINGLE-SELECT 01 ◯ Most of the time 02 ◯ More than half of the time 03 ◯ Less than half of the time 04 ◯ Rarely 05 ◯ Never	HF7_Q804

8.05 : In the past 2 weeks, my daily life has been filled with things that interest me….	SINGLE-SELECT 01 ◯ Most of the time 02 ◯ More than half of the time 03 ◯ Less than half of the time 04 ◯ Rarely 05 ◯ Never	HF7_Q805

SECTION 9: HEALTH CARE PROVIDER SATISFACTION

STATIC TEXT

In this part of the questionnaire I would like to ask you some questions regarding your satisfaction with your current job. All answers are confidential. I am going to read you a series of statements about your level of satisfaction with various aspects of your current job. For each of these aspects, please tell me whether you are satisfied, neither satisfied nor unsatisfied, meaning you are indifferent, or unsatisfied.

9.01 : Working relationships with other facility staff	SINGLE-SELECT HF7_Q901 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.02 : Working relationships with LGA/ Ministry of Health staff	SINGLE-SELECT HF7_Q902 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.03 : Working relationships with Management staff within the health facility	SINGLE-SELECT HF7_Q903 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.04 : Quality of the management of the health facility by the management staff within the health facility	SINGLE-SELECT HF7_Q904 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.05 : Quantity of medicine available in the health facility	SINGLE-SELECT HF7_Q905 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.06 : Quality of medicine available in the health facility	SINGLE-SELECT HF7_Q906 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.07 : Quantity of equipment in the health facility	SINGLE-SELECT HF7_Q907 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.08 : Quality and physical condition of equipment in the health facility	SINGLE-SELECT HF7_Q908 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.09 : Availability of other supplies in the health facility (compresses, etc.; office supplies)	SINGLE-SELECT HF7_Q909 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied
9.10 : The physical condition of the health	SINGLE-SELECT HF7_Q910

facility building	01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	
9.11 : Your ability to provide high quality of care given the current working conditions in the facility	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q911
9.12 : The relationships between the health facility and local traditional leaders	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q912
9.13 : Your level of respect in the community	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q913
9.14 : Your opportunities to upgrade your skills and knowledge through training	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q914
9.15 : Your opportunity to discuss work issues with your immediate supervisor	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q915
9.16 : Your immediate supervisor's recognition of your good work	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q916
9.17 : Your opportunity to be rewarded for hard work, financially or otherwise	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q917
9.18 : The opportunities to use your skills in your job	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q918
9.19 : Your salary	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q919
9.20 : Your benefits (such as housing, travel allowance, bonus including performance bonus, etc.)	SINGLE-SELECT 01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	HF7_Q920

9.21 : Your opportunities for promotion	SINGLE-SELECT	HF7_Q921
	01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	

9.22 : Safety and security in the community	SINGLE-SELECT	HF7_Q922
	01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	

9.23 : Living accommodations	SINGLE-SELECT	HF7_Q923
	01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	

9.24 : Available schooling for your children	SINGLE-SELECT	HF7_Q924
	01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied 98 ◯ No children	

9.25 : Overall, how satisfied are you with your job?	SINGLE-SELECT	HF7_Q925
	01 ◯ Satisfied 02 ◯ Neither satisfied nor unsatisfied 03 ◯ Unsatisfied	

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 10: PERSONAL DRIVE

STATIC TEXT

In this part of the questionnaire I would like to talk with you about your work environment. All answers are confidential. I am going to read you a series of statements about your work with your colleagues. For each of these aspects, please tell me whether you strongly disagree, disagree, neither agree nor disagree, agree or strongly agree.

10.01: Staff willingly share their experience and knowledge with other member	SINGLE-SELECT	HF7_Q1001
	01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	

10.02 : My job requires different complex skills	SINGLE-SELECT	HF7_Q1002
	01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	

10.03 : When I do my job well it benefits many people	SINGLE-SELECT	HF7_Q1003
	01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	

10.04 : In my facility, we are like an extended family where people share a lot with each	SINGLE-SELECT	HF7_Q1004
	01 ◯ Strongly disagree	

other	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.05 : My supervisors often let me know how well they think I am performing	SINGLE-SELECT HF7_Q1005
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.06 : I am given enough authority by my supervisors to make decisions about running this facility	SINGLE-SELECT HF7_Q1006
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.07 : The in-charge of my facility is a role model and I try my best to work like him/her	SINGLE-SELECT HF7_Q1007
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.08 : In my facility, getting a promotion is based on performance and not if you know someone important in the government	SINGLE-SELECT HF7_Q1008
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.09 : I am not able to talk to my supervisor about a personal problem affecting my work	SINGLE-SELECT HF7_Q1009
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.10 : My job is quite simple and I do the same work everyday	SINGLE-SELECT HF7_Q1010
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.11 : My job requires a lot of teamwork	SINGLE-SELECT HF7_Q1011
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.12 : Staff do not help each other out when someone has difficulties with work	SINGLE-SELECT HF7_Q1012
	01 ◯ Strongly disagree
	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

| 10.13: My supervisors gives me feedback on how well I am performing | SINGLE-SELECT HF7_Q1013 |
| | 01 ◯ Strongly disagree |

	02 ◯ Disagree
	03 ◯ Neither disagree nor agree
	04 ◯ Agree
	05 ◯ Strongly agree

10.14 : In my facility policies and procedures are important for doing our work	SINGLE-SELECT HF7_Q1014 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.15 : My job provides me the opportunity to help my community and improve their health	SINGLE-SELECT HF7_Q1015 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.16 : The in-charge of my facility does not treat me fairly	SINGLE-SELECT HF7_Q1016 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.17 : My patients and community appreciate and recognize my work	SINGLE-SELECT HF7_Q1017 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.18 : The in-charge of my facility is creative and willing to take risks in order to improve things	SINGLE-SELECT HF7_Q1018 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.19 : I usually get the chance to complete the work I started	SINGLE-SELECT HF7_Q1019 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.20 : My job allows me to take independent initiatives in doing my work	SINGLE-SELECT HF7_Q1020 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.21 : I have been working harder ever since the performance-based financing scheme started	SINGLE-SELECT HF7_Q1021 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree
10.22 : I am not able to provide quality services because of lack of resources (drugs, equipment, electricity, water) at this facility	SINGLE-SELECT HF7_Q1022 01 ◯ Strongly disagree

	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1023
10.23 : My salary is fair as compared to my colleagues	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1024
10.24 : In my facility people are willing to take risks to do a job well	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1025
10.25 : I get adequate support and supervision from my supervisor	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1026
10.26 : I am not able to finish my work from beginning to end in this job	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1027
10.27 : I work here because of the benefits that I receive (housing, rural hardship allowances etc.)	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1028
10.28 : I can not assess how well I am performing in this job	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1029
10.29 : I receive my salary on time at this job	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1030
10.30 : When disputes occur among staff, they try to resolve the situation themselves.	01 ⭕ Strongly disagree
	02 ⭕ Disagree
	03 ⭕ Neither disagree nor agree
	04 ⭕ Agree
	05 ⭕ Strongly agree

	SINGLE-SELECT HF7_Q1031
10.31 : The major satisfaction in my life comes from my work	01 ⭕ STRONGLY DISAGREE

	02 ◯ DISAGREE	
	03 ◯ NEITHER DISAGREE NOR AGREE	
	04 ◯ AGREE	
	05 ◯ STRONGLY AGREE	

10.32 : Doing my job well makes me feel worthwhile	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1032
10.33 : I work hard because of my religious beliefs	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1033
10.34 : I feel that I am not in control of things which affect my work	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1034
10.35 : I am confident about my ability to do my job	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1035
10.36 : I always wanted to be a HEALTH CARE PROVIDER	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1036
10.37 : I am proud to tell others that I am a HEALTH CARE PROVIDER	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1037
10.38 : Changes in the health sector have opened up new career opportunities for me	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1038
10.39 : I cope well with change	SINGLE-SELECT 01 ◯ Strongly disagree 02 ◯ Disagree 03 ◯ Neither disagree nor agree 04 ◯ Agree 05 ◯ Strongly agree	HF7_Q1039
10.40 : Overall, I am motivated to do my job	SINGLE-SELECT 01 ◯ Strongly disagree	HF7_Q1040

	02 ⭘ Disagree
	03 ⭘ Neither disagree nor agree
	04 ⭘ Agree
	05 ⭘ Strongly agree

SECTION 11: INNOVATION

STATIC TEXT

CASE SCENARIOS

STATIC TEXT

I am now going to read you some examples of situations that may happen at the health center. These situations may or may not be currently true in the health facility where you work. For each situation, I would like to know what kind of actions you would take. All answers are confidential.

11.01: If it were the case that too few women in the community come in for <u>antenatal care</u>, what would you do? I DO NOT READ OPTIONS ALOUD V1 `self.Contains(1)? self.Length==1 : true` M1 Cannot select "NOTHING" and another option. Please correct.	MULTI-SELECT HF7_Q1101 01 ☐ NOTHING. IT IS THE WOMEN'S OWN CHOICE 02 ☐ ENGAGE WITH TRADITIONAL BIRTH ATTENDANTS 03 ☐ OFFER INCENTIVE TO TRADITIONAL BIRTH ATTENDANTS 04 ☐ OFFER AN IN-KIND INCENTIVE TO WOMEN WHO COME IN 05 ☐ OFFER A CASH INCENTIVE TO WOMEN WHO COME IN 06 ☐ TALK TO THE COMMUNITY LEADERS AND HAVE THEM CONVINCE THE WOMEN 07 ☐ ORGANIZE SENSITIZATION/OUTREACH ACTIVITIES 08 ☐ OTHERS SPECIFY
Please specify what else you would do E `HF7_Q1101.Contains(8)`	TEXT HF7_Q1101_os ....
11.02: If it were the case that too few women in the community come in for <u>delivery</u>, what would you do? I DO NOT READ OPTIONS ALOUD V1 `self.Contains(1)? self.Length==1 : true` M1 Cannot select "NOTHING" and another option. Please correct.	MULTI-SELECT HF7_Q1102 01 ☐ NOTHING. IT IS THE WOMEN'S OWN CHOICE 02 ☐ ENGAGE WITH TRADITIONAL BIRTH ATTENDANTS 03 ☐ OFFER INCENTIVE TO TRADITIONAL BIRTH ATTENDANTS 04 ☐ OFFER AN IN-KIND INCENTIVE TO WOMEN WHO COME IN 05 ☐ OFFER A CASH INCENTIVE TO WOMEN WHO COME IN 06 ☐ TALK TO THE COMMUNITY LEADERS AND HAVE THEM CONVINCE THE WOMEN 07 ☐ ORGANIZE SENSITIZATION/OUTREACH ACTIVITIES 08 ☐ OTHERS SPECIFY
Please specify what else you would do E `HF7_Q1102.Contains(8)`	TEXT HF7_Q1102_oth ....
11.03: If it were the case that too few women in	MULTI-SELECT HF7_Q1103

the community come in for <u>post-natal care</u>, what would you do?		01 ☐ NOTHING. IT IS THE WOMEN'S OWN CHOICE
		02 ☐ ENGAGE WITH TRADITIONAL BIRTH ATTENDANTS
I DO NOT READ OPTIONS ALOUD		03 ☐ OFFER INCENTIVE TO TRADITIONAL BIRTH ATTENDANTS
V1 `self.Contains(1)? self.Length==1 : true`		04 ☐ OFFER AN IN-KIND INCENTIVE TO WOMEN WHO COME IN
M1 Cannot select "NOTHING" and another option. Please correct.		05 ☐ OFFER A CASH INCENTIVE TO WOMEN WHO COME IN
		06 ☐ TALK TO THE COMMUNITY LEADERS AND HAVE THEM CONVINCE THE WOMEN
		07 ☐ ORGANIZE SENSITIZATION/OUTREACH ACTIVITIES
		08 ☐ OTHERS SPECIFY

Please specify what else you would do	TEXT	HF7_Q1103_oth
E `HF7_Q1103.Contains(8)`	··

11.04: Say that the facility does not have any means of transportation for patients in emergencies, what would you do?	MULTI-SELECT	HF7_Q1104
	01 ☐ NOTHING. THE PATIENTS AND THE IR FAMILIES HAVE TO SORT IT OUT	
I DO NOT READ OPTIONS ALOUD	02 ☐ CONTRACT A PRIVATE PERSON/FIRM IN THE COMMUNITY WHO HAS A CAR	
V1 `self.Contains(1)? self.Length==1 : true`	03 ☐ ORGANIZE A COMMUNITY FUNDRAISER TO BUY A VEHICLE	
M1 Cannot select "NOTHING" and another option. Please correct.	04 ☐ SEEK FUNDS FROM THE GOVERNMENT TO BUY VEHICLE	
	05 ☐ SEEK FUNDS FROM NGO'S TO BUY VEHICLE	
	06 ☐ BUY A VEHICLE FROM THE FACILITY'S FUNDS	
	07 ☐ ENCOURAGE THEM TO USE COMMUNITY BASED TRANSPORT	
	08 ☐ OTHERS SPECIFY	

Please specify what else you would do	TEXT	HF7_Q1104_oth
E `HF7_Q1104.Contains(8)`	··

11.05: Imagine a situation where there are not enough HEALTH CARE PROVIDERs in the facility to serve the needs of the community. What would you do?	MULTI-SELECT	HF7_Q1105
	01 ☐ NOTHING. THIS IS NOT THE RESPONSIBILITY OF THE FACILITY	
I DO NOT READ OPTIONS ALOUD	02 ☐ CONTRACT RETIRED NURSES AND MIDWIVES IN THE COMMUNITY	
V1 `self.Contains(1)? self.Length==1 : true`	03 ☐ CONTRACT STAFF FROM OTHER FACILITIES, PUBLIC OR PRIVATE	
M1 Cannot select "NOTHING" and another option. Please correct.	04 ☐ TRAIN TRADITIONAL BIRTH ATTENDANTS	
	05 ☐ TRAIN COMMUNITY HEALTH CARE PROVIDERS	
	06 ☐ TRAIN OTHER PERSONS TO FULFILL THE ROLE OF HEALTH STAFF	
	07 ☐ REQUEST LGA FOR MORE STAFF	
	08 ☐ OTHERS SPECIFY	

Please specify what else you would do	TEXT	HF7_Q1105_oth

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 12: STAFF KNOWLEDGE

STATIC TEXT

INTERVIEWER: IT IS VERY IMPORTANT THAT THE HEALTH CARE PROVIDER DOES NOT SEE THE SURVEY FORM WHERE YOU ARE RECORDING HIS/HER ANSWERS. MANY OF THE OPTIONS SHOULD NOT BE READ ALOUD AND THEREFORE IT IS IMPORTANT THAT HE/SHE CANNOT SEE THEM.

LET THE HEALTH CARE PROVIDER LEAVE, IF NEED BE, AFTER ASKING ALL OF THE QUESTIONS PERTAINING TO A CASE SCENARIO. DO NOT LET THE HEALTH CARE PROVIDER LEAVE WITH A CASE SCENARIO AND THEN RETURN TO ANSWER QUESTIONS ABOUT THAT CASE SCENARIO; ASK THOSE CORRESPONDING QUESTIONS BEFORE HE/SHE LEAVES.

STATIC TEXT

START BY READING THE FOLLOWING STATEMENT TO THE HEALTH CARE PROVIDER:

The following set of questions are an assessment of your knowledge of basic disease protocols. This assessment will not affect your employment at this facility, nor does it affect your standing as a practitioner in this area. This is a tool simply to help the Ministry of Health obtain information on how to improve training of facility staff in the future. I will present you with situations that you would observe in the clinic. Please answer the questions to the best of your knowledge.

Q12.01: IS THE STAFF A SERVICE PROVIDER (ANY CLINICAL SERVICE)?	SINGLE-SELECT HF7_Q1201 01 ◯ YES 02 ◯ NO
Q12.02a: At what age should a child receive **BCG** vaccines? I IF AT BIRTH, RECORD '0'. IF DON'T KNOW, RECORD '999'. IF SHOULD NOT BE GIVEN, RECORD '98'	NUMERIC: INTEGER HF7_Q1202A1
Q12.02a: Is %HF7_Q1202A1% in weeks or months? E HF7_Q1202A1!=98 && HF7_Q1202A1!=999	SINGLE-SELECT HF7_Q1202A2 01 ◯ WEEK 02 ◯ MONTH
Q12.02b: At what age should a child receive **Pentavalent 1** vaccines? I IF AT BIRTH, RECORD '0'. IF DON'T KNOW, RECORD '999'. IF SHOULD NOT BE GIVEN, RECORD '98'	NUMERIC: INTEGER HF7_Q1202B1
Q12.02b: Is %HF7_Q1202B1% in weeks or months? E HF7_Q1202B1!=98 && HF7_Q1202B1!=999	SINGLE-SELECT HF7_Q1202B2 01 ◯ WEEK 02 ◯ MONTH
Q12.02c: At what age should a child receive **Pentavalent 2** vaccines? I IF AT BIRTH, RECORD '0'. IF DON'T KNOW, RECORD '999'. IF SHOULD NOT BE GIVEN, RECORD '98'	NUMERIC: INTEGER HF7_Q1202C1
Q12.02c: Is %HF7_Q1202C1% in weeks or months? E HF7_Q1202C1!=98 && HF7_Q1202C1!=999	SINGLE-SELECT HF7_Q1202C2 01 ◯ WEEK 02 ◯ MONTH
Q12.02d: At what age should a child receive **DPT2** vaccines? I IF AT BIRTH, RECORD '0'. IF DON'T KNOW, RECORD '999'. IF SHOULD NOT BE GIVEN, RECORD '98'	NUMERIC: INTEGER HF7_Q1202D1

Q12.02d: Is %HF7_Q1202D1% in weeks or months? E HF7_Q1202D1!=98 && HF7_Q1202D1!=999	SINGLE-SELECT HF7_Q1202D2 01 ◯ WEEK 02 ◯ MONTH
Q12.02e: At what age should a child receive Yellow Fever vaccines? I IF AT BIRTH, RECORD '0'. IF DON'T KNOW, RECORD '999'. IF SHOULD NOT BE GIVEN, RECORD '98'	NUMERIC: INTEGER HF7_Q1202E1 ----------------------
Q12.02e: Is %HF7_Q1202E1% in weeks or months? E HF7_Q1202E1!=98 && HF7_Q1202E1!=999	SINGLE-SELECT HF7_Q1202E2 01 ◯ WEEK 02 ◯ MONTH
Q12.02f: At what age should a child receive Measles vaccines? I IF AT BIRTH, RECORD '0'. IF DON'T KNOW, RECORD '999'. IF SHOULD NOT BE GIVEN, RECORD '98'	NUMERIC: INTEGER HF7_Q1202F1 ----------------------
Q12.02f: Is %HF7_Q1202F1% in weeks or months? E HF7_Q1202F1!=98 && HF7_Q1202F1!=999	SINGLE-SELECT HF7_Q1202F2 01 ◯ WEEK 02 ◯ MONTH
Q12.03: What are the danger signs of tuberculosis? I DO NOT READ ALOUD. LET THE PROVIDER RESPOND TO THIS QUESTION. RECORD ALL OPTIONS MENTIONED. E HF7_Q1201==1	MULTI-SELECT HF7_Q1203 01 ☐ LOSS OF WEIGHT 02 ☐ LOSS OF APPETITE 03 ☐ FEVER 04 ☐ COUGH FOR MORE THAN 15 DAYS 05 ☐ NIGHT SWEATING
Q12.04: Imagine a mother brings in her 9 month old child for routine immunization. You find the child has a fever, a red throat, and a runny nose, but no other signs of illness. Should you give the immunization? E HF7_Q1201==1	SINGLE-SELECT HF7_Q1204 01 ◯ YES 02 ◯ NO
Q12.05: Do you feel comfortable providing Sexual and Reproductive Health Services to adolescents? E HF7_Q1201==1	SINGLE-SELECT HF7_Q1205 01 ◯ YES 02 ◯ NO
Q12.06: Do unmarried adolescents need permission from a family member to use Adolescent Sexual and Reproductive Health services? E HF7_Q1201==1	SINGLE-SELECT HF7_Q1206 01 ◯ YES 02 ◯ NO
Q12.07: If a 13 year old female came to you for contraceptives,what would you do? I READ THE OPTIONS AND FOR EACH OPTION RECORD "YES" OR "NO" E HF7_Q1201==1	MULTI-SELECT: YES/NO HF7_Q1207 01 ☐ / ☐ Follow protocol 02 ☐ / ☐ Do not provide her any service and ask her to leave the health facility 03 ☐ / ☐ Provide contraceptives 04 ☐ / ☐ Provide counselling on safe sex, pregnancy prevention, HIV and STIs 05 ☐ / ☐ Provide information on types of contraceptions 06 ☐ / ☐ Ask her to provide evidence of parental or spousal permission

Q12.08: Do you know the policies related to Sexual and Reproductive Health services for adolescents at these levels?

I READ THE OPTIONS AND FOR EACH OPTION RECORD "YES" OR "NO"

E HF7_Q1201==1

MULTI-SELECT: YES/NO

01 ☐ / ☐ Facility level
02 ☐ / ☐ State level
03 ☐ / ☐ National level

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW / SECTION 12: STAFF KNOWLEDGE

CASE SCENARIO BASED QUESTIONS

E HF7_Q1201==1

STATIC TEXT

FOR EACH OF THE SCENARIOS, START BY READING THE SCENARIO AS INDICATED. FOR EACH OPTIONS MENTION WHETHER THE OPTION WAS MENTIONED OR NOT.

VARIABLE	LONG case option
// Randomly choose 0 or 1. Similar to coin flip new Random((int)Math.Floor((2000 * (3 + Quest.IRnd())) % 2000)).Next(0,2)	

STATIC TEXT

E case_option==1

CASE SCENARIO 1:

Khadiza aged 22 years came for antenatal visit. She is 5 months pregnant. This is her first antenatal visit and her first pregnancy.

Q12.09: What prescriptions would you make to prevent malaria in pregnancy (assuming all drugs are available)?

I DO NOT READ THE OPTIONS ALOUD. RECORD ALL OPTIONS MENTIONED

E case_option==1

MULTI-SELECT   HF7 Q1209

01 ☐ GIVE SP (E.G. FANSIDAR, AMALAR, MALOXINE, MALDOX) AS DIRECTLY OBSERVED TREATMENT (DOT)
02 ☐ COUNSEL HER TO SLEEP UNDER LONG LASTING INSECTICIDE TREATED NET (LLIN)
03 ☐ COUNSEL HER TO COME FOR SECOND DOSE OF SP
04 ☐ ADVICE ON ADEQUATE NUTRITION
05 ☐ EDUCATE HER TO SCREEN WINDOWS AND DOORS WITH NET
06 ☐ PROVIDE ADVICE ON ENVIRONMENTAL SANITATION AND HYGIENE
07 ☐ ENCOURAGE ON THE USE OF INSECTICIDE

STATIC TEXT

E case_option==1

CASE SCENARIO 2:

A child 7 months old had a fever for 24 hours, which comes and goes. He was given paracetamol from a neigbour plus one dose of choloroquine which he vomited. He has no danger signs and your assessment suggests that this is a malaria case. The health center has no facility to investigate malaria using RDT or microscopy.

Q12.10: Assuming that all the needed drugs are in stock in the health facility, and that there is a referral hospital available one hour away, what are ALL the actions and/or prescriptions you would take to provide this child with the most appropriate treatment?

MULTI-SELECT   HF7 Q1210

01 ☐ TREAT FOR MALARIA WITH ARTEMISININ-BASED COMBINATION THERAPY (ACT)

08 ☐	TREAT MALARIA WITH ARTESUNATE (AS)/QUININE/ARTEMETHER THROUGH IV/IM ROUTE
02 ☐	COUNSEL/HEALTH EDUCATE ON HOW TO COMPLETE TREATMENT AND HOW TO PREVENT MALARIA
03 ☐	REFER TO THE NEAREST HOSPITAL
04 ☐	ENCOURAGE FLUID INTAKE
05 ☐	TEPID SPONGE AND TEMPERATURE, PULSE, RESPIRATION (TPR)
06 ☐	ADVISE PATIENT TO RETURN TO PHC AFTER TWO DAYS IF THERE IS NO IMPROVEMENT
07 ☐	ADVISE PATIENT TO RETURN TO PHC IMMEDIATELY IF THE CONDITION WORSENS OR DEVELOP DANGER SIGNS OR ANY ADVERSE DRUG REACTION IS NOTICED

STATIC TEXT

E   `facility_level==2`

CASE SCENARIO 3:

A nurse involved in patient triage brings a female child who has been referred to your facility by a community care giver because of severe illness. The referral note says that the 2 year-old child has had repeated convulsions in the past 24 hours following a high fever for three days. The caregiver informs you that the last convulsion lasted about five minutes and involved the arms and legs. The child has had a poor appetite in the past week.

Q12.11: What actions you will take to manage the child given that hospital has all drugs and lab facility available?	MULTI-SELECT HF7_Q1211

I   DO NOT READ THE OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED.

E   `facility_level==2`

01 ☐	GIVE RECTAL DIAZEPAM OR SLOW IV DIAZEPAM OR PARAALDEHYDE IF NO RESPONSE CARRY OUT A QUICK ASSESSMENT USING THE ABCD STEPS: AIRWAY, BREATHING
02 ☐	CIRCULATION, COMA, CONVULSION AND DEHYDRATION
03 ☐	CARRY OUT A THOROUGH EXAMINATION OF THE PATIENT COVERING ALL THE SYSTEM
04 ☐	CARRY OUT BEDSIDE TEST FOR BLOOD SUGAR AND TREAT HYPOGLACAEMIA IF BLOOD GLUCOSE IS 40MG/DL
05 ☐	DO MALARIA RDT AND/OR MICROSCOPY TO IDENTIFY PARASITE TYPE (THIN BLOOD FILM) AND ESTIMATE PARASITE DENSITY (THICK BLOOD FILM)
06 ☐	ESTIMATE HB CONCENTRATION AND HCT. TRANSFUSE BLOOD/PCV IF HB < 5 G/DL OR HCT , 15%
07 ☐	DO FULL BLOOD COUNT
08 ☐	DO UREA OR CRAETININE AND PLASMA ELECTROLYTES
09 ☐	DO LUMBER PUNCTURE IF INDICATED
10 ☐	DO CHEST X RAY
11 ☐	GIVE OXYGEN IF THERE ARE SIGNS OF METABOLIC ACIDOSIS

12	☐	ESTABLISH IV LINE AND RESTORE CIRCULATING VOLUME WITH SALINE+DEXTROSE MIX OR 10% DEXTROSE IF HYPOGLYCAEMIC
13	☐	INSERT NG TUBE TO MINIMIZE RISK OF ASPIRATION PNEUMONIA IF THE CHILD IS UNCONSCIOUS
14	☐	INSERT URINARY CATHETER IF RENAL FAILURE IS SUSPECTED OR UNCONSCIOUS
15	☐	GIVE BROAD SPECTRUM ANTIBIOTIC
16	☐	TREAT MALARIA WITH ARTESUNATE/QUININE/ARTEMETHER THROUGH IV/IM ROUTE

STATIC TEXT

E `case_option==0`

CASE SCENARIO 4 :

A little girl aged 25 months and weighing 10.5 kg is brought to the facility because she has been asleep since the morning and is very difficult to wake up. She hasn't eaten or drunk fluids since yesterday. When asked, the mother said that her daughter did not vomit and did not have any convulsions, but has had diarrhea for about six days. She also had fever for three days and a runny nose. The health care provider assessed the child and confirmed that the child was lethargic. The health care provider also performed a skin pinch and the skin came back very slowly. No other abnormal clinical signs were found. The family lives in a low malaria risk area, and has not traveled recently. There is no cholera in the area now.

Q12.12: Assuming that all the needed drugs are in stock in the health facility, and that there is a referral hospital available one hour away, what are ALL the actions and/or prescriptions you would take to provide this child with the most appropriate treatment?

I DO NOT READ THE OPTIONS ALOUD. RECORD ALL OPTIONS MENTIONED.

E `case_option==0`

MULTI-SELECT   HF7_Q1212

01	☐	RECOMMENDS URGENT REFERRAL TO A HOSPITAL
02	☐	ADMINISTER RINGER LACTATE OR NORMAL SALINE IV SOLUTION
03	☐	ADMINISTER LIQUID BY NASO-GASTRIC TUBE
04	☐	INJECT ONE DOSE OF AN INJECTABLE ANTIBIOTIC
05	☐	INJECT ONE DOSE OF A SECOND ANTIBIOTIC (IF REFERRAL IS DIFIICULT)
06	☐	PRESCRIBE INJECTABLE ANTIBIOTIC FOR FIVE DAYS
07	☐	GIVE ONE DOSE OF AN ORAL ANTIBIOTIC
08	☐	PRESCRIBE ORAL ANTIBIOTICS FOR FIVE DAYS
09	☐	GIVE ONE DOSE OF ORAL ANTIMALARIAL
10	☐	PRESCRIBE QUININE FOR FIVE DAYS
11	☐	PRESCRIBE ORAL ANTIMALARIALS FOR 3 DAYS
12	☐	ADMINISTER ORS AT THE FACILITY
13	☐	ADVISE ON GIVING ORS ON THE WAY TO HOSPITAL
14	☐	PRESCRIBE ORS FOR HOME TREATMENT
15	☐	GIVE ONE DOSE OF PARACETAMOL
16	☐	PRESCRIBE PARACETAMOL FOR HOME TREATMENT

And 4 other [7]

E `case_option==0`

CASE SCENARIO 5 :

A one month old boy is brought to you because he has been coughing and not drinking well in the last day. The child has not had convulsions or diarrhea. He is hard to wake up, lethargic, and feels cool. His breathing is loud and fast, at 64 breaths per minute. You see his chest indrawing, and hear harsh wheezing sounds in his chest.

Q12.13: Assuming that all the needed drugs are in stock in the health facility, and that there is a referral hospital available one hour away, what are all the actions and/or prescriptions you would take to provide this child with the most appropriate treatment?	MULTI-SELECT HF7_Q1213
	01 ☐ REFER URGENTLY TO A HOSPITAL
I DO NOT READ THE OPTIONS ALOUD. RECORD ALL OPTIONS MENTIONED	02 ☐ ADMINISTER RINGER LACTATE OR NORMAL SALINE IV SOLUTION
E `case_option==0`	03 ☐ ADMINISTER LIQUID BY NASO-GASTRIC TUBE
	04 ☐ INJECT ONE DOSE OF AN INJECTABLE ANTIBIOTIC
	05 ☐ INJECT ONE DOSE OF A SECOND ANTIBIOTIC
	06 ☐ PRESCRIBE INJECTABLE ANTIBIOTIC FOR FIVE DAYS
	07 ☐ GIVE ONE DOSE OF AN ORAL ANTIBIOTIC
	08 ☐ PRESCRIBE ORAL ANTIBIOTICS FOR FIVE DAYS
	09 ☐ GIVE ONE DOSE OF ORAL ANTIMALARIAL
	10 ☐ PRESCRIBE QUININE FOR FIVE DAYS
	11 ☐ PRESCRIBE ORAL ANTIMALARIALS FOR 3 DAYS
	12 ☐ ADMINISTER ORS AT THE FACILITY
	13 ☐ ADVISE ON GIVING ORS ON THE WAY TO HOSPITAL
	14 ☐ PRESCRIBE ORS FOR HOME TREATMENT
	15 ☐ GIVE ONE DOSE OF PARACETAMOL
	16 ☐ PRESCRIBE PARACETAMOL FOR HOME TREATMENT
	And 5 other [8]

CASE SCENARIO 6 :

Mrs. Salima is 16 years old. She is 30 weeks pregnant and has attended the antenatal clinic three times. All findings were within normal limits until her last antenatal visit 1 week ago. At that visit it was found that her blood pressure was 130/90 mm Hg. Her urine was negative for protein. The fetal heart sounds were normal, the fetus was active and uterine size was consistent with dates. She has come to the clinic today, as requested, for follow-up. The main findings include: Proteinuria 2+; Blood pressure is 130/90 mm Hg; No headache, visual disturbance, upper abdominal pain, convulsions, or loss of consciousness; Fetus is active and fetal heart sounds are normal; and Uterine size is consistent with dates of pregnancy.

Q12.14: In giving Mrs. Salima advice about danger signs, what signs do you tell her about, that would mean she should go to the hospital/health center immediately, day or night, without waiting?	MULTI-SELECT HF7_Q1214
	01 ☐ VAGINAL BLEEDING
	02 ☐ CONVULSIONS
	03 ☐ SEVERE HEADACHE OR BLURRED VISION
I DO NOT READ THE OPTIONS ALOUD. RECORD ALL OPTIONS MENTIONED	04 ☐ FEVER AND TOO WEAK TO GET OUT OF BED
	05 ☐ SEVERE ABDOMINAL PAIN

06	☐	BABY PRESENT WITH BUTTOCKS, HANDS AND CORD
07	☐	LABOUR PROLONG MORE THAN 12 HOURS
08	☐	PREMATURE RUPTURE OF MEMBRANE
09	☐	PLACENTA DELAY MORE THAN 30 MINUTES
10	☐	SWELLING OF FACE, FINGERS, LEGS

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 13: PROTOCOL-BASED VIGNETTES

STATIC TEXT

Now I would like to discuss some examples of situations that may happen at the health center. These situations may or may not be currently true in the health facility where you work. For each situation, I would like to know what kind of actions you would take. All answers are confidential. The first type of situation I would like to discuss with you is a prenatal care visit. I will read out the case to you and then I will ask you what you would do.

STATIC TEXT

CASE: Mrs. Sibeso, a married woman of 26, has recently moved into the area and comes to see you for the first time. She is obviously pregnant and reports that she has not yet received any prenatal care for this pregnancy. Please tell me what questions you would ask Mrs. Sibeso, and what actions you would take.

13.01 : What questions would you ask Mrs. Sibeso about her previous pregnancies?

I DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1301

01	☐	NUMBER OF PRIOR PREGNANCIES
02	☐	NUMBER OF LIVE BIRTHS
03	☐	NUMBER OF MISCARRIAGES/STILLBIRTHS/ABORTIONS
04	☐	ANY BLEEDING DURING PREVIOUS LABOR
05	☐	HOW WAS THE LAST CHILD DELIVERED? (NATURAL? CEASARIAN? FORCEPS?)
06	☐	BIRTH WEIGHT OF PREVIOUS CHILD
07	☐	HISTORY OF GENETIC ANOMALIES
08	☐	TETANUS IMMUNIZATIONS?
09	☐	BIRTH INTERVAL
10	☐	CONVULSIONS

13.02 : What questions would you ask Mrs. Sibeso about her current pregnancy?

I DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1302

01	☐	LAST MENSTRUAL PERIOD (LMP)
02	☐	ANY HEALTH PROBLEMS NOW?
03	☐	ANY CONTRACTIONS?
04	☐	ANY VAGINAL BLEEDING?
05	☐	ANY WEIGHT LOSS/GAIN?
06	☐	ANY NAUSEA OR VOMITING?
07	☐	TAKING MEDICATIONS NOW?
08	☐	TETANUS IMMUNIZATIONS?

13.03 : What questions would you ask Mrs. Sibeso about her medical history?

I DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1303

01	☐	ANY HISTORY OF HIGH BLOOD PRESSURE?
02	☐	ANY HISTORY OF DIABETES?
03	☐	ANY PREVIOUS STI, INCLUDING HIV?
04	☐	ANY PREVIOUS IUCD OR CONTRACEPTIVE USE?
05	☐	ANY PAP SMEARS?

06 ☐ ANY HEART DISEASE, LIVER DISEASE, MALARIA, GOITRE?	
07 ☐ FAMILY HISTORY OF HEREDITARY D ISEASE?	
08 ☐ ANY ALLERGIES TO MEDICATIONS?	
09 ☐ PRESENT/CURRENT SMOKER?	
10 ☐ ANY HISTORY OF ALCOHOL USE?	
11 ☐ ANY HISTORY OF ILLICIT DRUG USE?	
12 ☐ BLOOD TRANSFUSION	
13 ☐ JAUNDICE	

13.04: What physical examinations or measurements would you perform on Mrs. Sibeso?

I   DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1304

01 ☐ BODY HEIGHT
02 ☐ BODY WEIGHT
03 ☐ BLOOD PRESSURE
04 ☐ TEMPERATURE
05 ☐ RESPIRATORY RATE
06 ☐ PALPATE ABDOMEN
07 ☐ LISTEN TO FETAL HEARTBEAT
08 ☐ PELVIC EXAMINATION
09 ☐ CHECK FOR OEDEMA/SWELLING OF THE FEET, ANKLE OR FACE
10 ☐ MEASURE SIZE OF WOMB (FUNDAL HEIGHT OR UTERINE HEIGHT)
11 ☐ ADMINISTER TETANUS TOXOID
12 ☐ EYE FOR JAUNDICE/PALLOR
13 ☐ NECK FOR GOITRE
14 ☐ BREAST FOR SORE, INVERSION OR SWOLLEN
15 ☐ VERICOSE VEIN IN THE LEGS

13.05 :What laboratory investigations would you perform on Mrs. Sibeso ?

I   DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1305

01 ☐ PREGNANCY TEST
02 ☐ HEMOGLOBIN TEST
03 ☐ URINE TEST FOR DIABETES
04 ☐ URINE PROTEIN
05 ☐ ULTRASOUND
06 ☐ BLOOD PLATELETS COUNT
07 ☐ LIVER ENZYMES
08 ☐ SERUM UREA AND CREATININE
09 ☐ HIV TEST
10 ☐ STI TEST - SYPHILLIS AND/OR GONORRHEA
11 ☐ RUBELLA ANTIBODIES
12 ☐ BLOOD GROUPING AND CROSS-MATCHIING

13.06: What would you prescribe/provide to Mrs. Sibeso?

I   DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1306

01 ☐ INSECTICIDE TREATED MOSQUITO NET/LLITN
02 ☐ IRON / FOLIC ACID SUPPLEMENTS
03 ☐ ADMINISTER TETANUS TOXOID
04 ☐ INTERMITTENT PREVENTIVE TREATMENT FOR MALARIA

13.07: What kind of advice would you give to Mrs. Sibeso?

I   DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER

MULTI-SELECT   HF7_Q1307

01 ☐ NUTRITION
02 ☐ IRON / FOLIC ACID SUPPLEMENTS
03 ☐ DANGER SIGNS FOR EMERGENCY HELP

| 04 ☐ BREASTFEEDING |
| 05 ☐ CONTRACEPTION |
| 06 ☐ HIV VOLUNTARY COUNSELING AND TESTING/HCT |
| 07 ☐ USE OF INSECTICIDE TREATED BEDNET/LLITN |

13.08: What follow-up action would you take for Mrs. Sibeso? I DO NOT READ OPTIONS ALOUD. RECORD ALL ACTIONS MENTIONED BY HEALTH CARE PROVIDER	MULTI-SELECT HF7_Q1308 01 ☐ COMPLETE PRENATAL CARD 02 ☐ SCHEDULE ANOTHER PRENATAL CARE VISIT 03 ☐ SCHEDULE INSTITUTIONAL/HOSPITAL DELIVERY 04 ☐ BIRTH PREPAREDNESS INCLUDING ITEMS REQUIRED DURING AND IMMEDIATELY AFTER DELIVERY

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW

SECTION 14: PBF KNOWLEDGE

E `// Only for intervention states state_code==2 || state_code==25 ||state_code==28`

STATIC TEXT

Now I would like to ask you some questions about the Nigeria State Health Investment Project (or NSHIP). This is a government programme that provides top-up payments to health facilities.

14.02. Are you aware that this facility participates in the Nigeria State Health Investment Project?	SINGLE-SELECT HF7_Q1402 01 ◯ YES 02 ◯ NO
14.01A. Which of the following indicators are incentivized by the Complementary Package of Activities in the PBF program? I READ ANSWER OPTIONS AND RECORD 'YES' OR 'NO FOR EACH OPTION E `// Only for secondary facilities facility_level==2 && HF7_Q1402==1`	MULTI-SELECT: YES/NO HF7_Q1401A 01 ☐ / ☐ Caesarean section (C-section) 02 ☐ / ☐ Counter-referral slip arrived at the health center 03 ☐ / ☐ Child growth monitoring visit 04 ☐ / ☐ First ANC visit before 6 months of pregnancy 05 ☐ / ☐ Inpatient day 06 ☐ / ☐ Normal delivery 07 ☐ / ☐ FP: vasectomy and bilateral tubal ligation 08 ☐ / ☐ PTB patient completed treatment and cured
14.01B. Which of the following indicators are incentivized by the Minimum Package of Activities in the PBF program? I READ ANSWER OPTIONS AND RECORD 'YES' OR 'NO FOR EACH OPTION E `// show only for primary facility_level==1 && HF7_Q1402==1`	MULTI-SELECT: YES/NO HF7_Q1401B 01 ☐ / ☐ Caesarean section (C-section) 02 ☐ / ☐ Referred patient arrived at the Cottage Hospital 03 ☐ / ☐ Child growth monitoring visit 04 ☐ / ☐ First ANC visit before 6 months of pregnancy 05 ☐ / ☐ Second dose of SP provided to a pregnant woman 06 ☐ / ☐ Normal delivery 07 ☐ / ☐ FP: implants and IUDs 08 ☐ / ☐ PTB patient completed treatment and cured
14.03. How much top-up payment has <u>YOUR FACILITY</u> received in the FIRST quarter (from January through March 2017) for services incentivized by the Nigeria State Health	NUMERIC: INTEGER HF7_Q1403 -----------------------------

Investment Project (NSHIP)? (NAIRA)

I RECORD '0' IF NONE. RECORD '999' IF DON'T KNOW
E HF7_Q1402==1

14.04A. If you wanted to <u>increase</u> your facility's payment from the PBF program for next quarter by 1.25 million Naira, which services would you focus on?

I DO NOT READ OPTIONS. SELECT ALL OPTIONS MENTIONED.
E // Only enable for secondary facility_level==2 && HF7_Q1402==1

MULTI-SELECT   HF7 Q1404A

- 01 ☐ NEW OUTPATIENT CONSULTATION BY A DOCTOR
- 02 ☐ NEW OUTPATIENT CONSULTATION BY A DOCTOR OF AN INDIGENT PATIENT
- 03 ☐ COUNTER-REFERRAL SLIP ARRIVED AT THE HEALTH CENTER
- 04 ☐ NEW HYPERTENSIVE PATIENTS DETECTED AND REGISTERED
- 05 ☐ MINOR SURGERY
- 06 ☐ MAJOR SURGERY (EX CS)
- 07 ☐ NORMAL DELIVERY
- 08 ☐ ASSISTED DELIVERY
- 09 ☐ CS
- 10 ☐ INPATIENT DAY
- 11 ☐ INPATIENT DAY FOR AN INDIGENT PATIENT
- 12 ☐ POSTNATAL CONSULTATION
- 13 ☐ FIRST ANC CONSULTATION BEFORE FOUR MONTHS OF PREGNANCY
- 14 ☐ ANC STANDARD VISIT (2-4)
- 15 ☐ FP: TOTAL OF NEW USERS OF MODERN FP METHODS
- 16 ☐ FP: IMPLANTS AND IUDS

And 8 other [4]

14.04B. If you wanted to <u>increase</u> your facility's payment from the PBF program for next quarter by 300,000 Naira, which services would you focus on?

I DO NOT READ OPTION. SELECT ALL OPTIONS MENTIONED
E // Only enable for primary facility_level==1 && HF7_Q1402==1

MULTI-SELECT   HF7 Q1404B

- 01 ☐ NEW OUTPATIENT CONSULTATION
- 02 ☐ NEW OUTPATIENT CONSULTATION BY AN INDIGENT PATIENT
- 03 ☐ MINOR SURGERY
- 04 ☐ REFERRED PATIENT ARRIVED AT THE COTTAGE HOSPITAL
- 05 ☐ NEW HYPERTENSIVE PATIENTS DETECTED AND REGISTERED
- 06 ☐ COMPLETELY VACCINATED CHILD
- 07 ☐ GROWTH MONITORING VISIT CHILD
- 08 ☐ 2-5 TETANUS VACCINATION OF PREGNANT WOMEN
- 09 ☐ POSTNATAL CONSULTATION
- 10 ☐ FIRST ANC VISIT BEFORE 4 MONTHS PREGNANCY
- 11 ☐ ANC STANDARD VISIT (2-4)
- 12 ☐ SECOND DOSE OF SP PROVIDED TO A PREGNANT WOMAN
- 13 ☐ NORMAL DELIVERY
- 14 ☐ FP: TOTAL OF NEW AND EXISTING USERS OF MODERN FP METHODS
- 15 ☐ FP: IMPLANTS AND IUDS
- 16 ☐ VCT/PMTCT/PIT TEST

And 6 other [5]

14.05. Generally speaking, what else determines the level of payment for services included in the Nigeria State Health Investment Project (NSHIP)?

I SELECT ALL MENTIONED. DO NOT READ ANSWER OPTIONS
E `HF7_Q1402==1`
V1 `self.ContainsOnly(7) || self.ContainsOnly(6) || !(self.ContainsAny(6,7))`
M1 Cannot select "Don't know" or "Nothing else" and another option. Please review.

MULTI-SELECT   HF7_Q1405
01 ☐ QUALITY
02 ☐ SIZE OF CATCHMENT AREA
03 ☐ VERIFICATION
04 ☐ DISTANCE
05 ☐ OTHER, SPECIFY
06 ☐ NOTHING ELSE
07 ☐ DON'T KNOW

14.05_Oth. Specify the other factor that determines the level of payment for services

E `HF7_Q1405.Contains(5)`

TEXT   HF7_Q1405_os

·······························

14.06. In naira, can you tell me what the PBF fee for a NORMAL DELIVERY is?

I RECORD '0' IF NONE. RECORD '999' IF DON'T KNOW
E `HF7_Q1402==1`

NUMERIC: INTEGER   HF7_Q1406

14.07. In naira, can you tell me what the PBF fee for a POSTNATAL CONSULTATION is?

I RECORD '0' IF NONE. RECORD '999' IF DON'T KNOW
E `HF7_Q1402==1`

NUMERIC: INTEGER   HF7_Q1407

14.08. In naira, can you tell me what the PBF fee for a NEW CLIENT PUT UNDER ARV TREATMENT is?

I RECORD '0' IF NONE. RECORD '999' IF DON'T KNOW
E `HF7_Q1402==1`

NUMERIC: INTEGER   HF7_Q1408

14.09. Are you aware that under the PBF program target levels are set for certain services that you provide?

E `HF7_Q1402==1`

SINGLE-SELECT   HF7_Q1409
01 ○ YES
02 ○ NO

14.10. Can you tell me what the percentage target is for 2017 for NORMAL DELIVERIES?

I IF DON'T KNOW, RECORD '999'
E `HF7_Q1402==1`
V1 `self.InRange(0,100) || self==999`
M1 The percentage must be in between 0 and 100.

NUMERIC: INTEGER   HF7_Q1410

14.11. Can you tell me what the percentage target is for 2017 for POSTNATAL CONSULTATIONS?

I IF DON'T KNOW, RECORD '999'
E `HF7_Q1402==1`
V1 `self.InRange(0,100) || self==999`
M1 The percentage must be in between 0 and 100.

NUMERIC: INTEGER   HF7_Q1411

14.12. Can you tell me what the percentage target is for 2017 for NEW PATIENTS PUT UNDER ARV TREATMENT?

I IF DON'T KNOW, RECORD '999'
E `HF7_Q1402==1`
V1 `self.InRange(0,100) || self==999`
M1 The percentage must be in between 0 and 100.

NUMERIC: INTEGER   HF7_Q1412

14.13. Can you tell me the percentage quality

NUMERIC: INTEGER   HF7_Q1413

bonus that health facilities can receive over the obtained volume for the past quarter?

I IF DON'T KNOW, RECORD '999'
E `HF7_Q1402==1`
V1 `self.InRange(0,100) || self==999`
M1 The percentage must be in between 0 and 100.

SECTION 2: STAFF INTERVIEW / STAFF INTERVIEW
SECTION 15: PARTOGRAPH

INTERVIEWER: PLEASE ASK THE RESPONDENT IF THEY KNOW HOW TO READ A PARTOGRAPH. YOU MAY SHOW THEM ONE OF THE PARTOGRAPHS AS AN EXAMPLE.	SINGLE-SELECT partograph check 01 ◯ YES 02 ◯ NO

VARIABLE `// Randomly choose 0 or 1. Similar to coin flip new Random((int)Math.Floor((1000 * (1 + Quest.IRnd())) % 1000)).Next(0,2)`	LONG random

VARIABLE `new []{ r1_index, r2_index, r3_index}[Convert.ToInt32(@rowcode) - 1]`	LONG index

INTERVIEWER: SELECT THE EXPERIMENT ARM FOR THE INTERVIEWER F `@optioncode==index` E `partograph_check==1`	SINGLE-SELECT arm 01 ◯ INFORMATION 02 ◯ REWARD 03 ◯ PENALTY

INTERVIEWER: SELECT WHETHER THE RESPONDENT WILL BE ASSIGNED TO OPTION 1 OR OPTION 2. F `// Show only the option that was randomly selected @optioncode==random` E `partograph_check==1`	SINGLE-SELECT correct 00 ◯ OPTION 1 01 ◯ OPTION 2

STATIC TEXT

E `index==1 && partograph_check==1`

INTERVIEWER, PLEASE READ:
We would like you to help us evaluate some partographs.

Here is a list of items that our experts have found important. There might be other things that are not listed here and that are clinically relevant at various stages of labor and delivery.

Note that some items are about NOT doing something because it is UNNECESSARY.

We appreciate your help in examining these partographs and would like to offer 1,750 Naira as a thank-you.

STATIC TEXT

E `index==2 && partograph_check==1`

INTERVIEWER, PLEASE READ:
We would like you to help us evaluate some partographs.

Here is a list of items that our experts have found important. There might be other things that are not listed here and that are clinically relevant at various stages of labor and delivery.

Note that some items are about NOT doing something because it is UNNECESSARY.

We appreciate your help to look at these and would like to offer 1,000 Naira as a thank-you.

As you see, there are numbers next to some items on the list. We will give you those amounts on top of the 1,000 Naira, for every item that you mention and that is clinically indicated in this case. So, if you mention some of those items, we will give you more than 1,000 Naira at the end.

These rewards apply to all questions that we'll ask about each partograph.

STATIC TEXT

E `index==3 && partograph_check==1`

INTERVIEWER, PLEASE READ:
We would like you to help us evaluate some partographs.

Here is a list of items that our experts have found important. There might be other things that are not listed here and that are clinically relevant at various stages of labor and delivery.

Note that some items are about NOT doing something because it is UNNECESSARY.

We appreciate your help to look at these and would like to offer 2,500 Naira as a thank-you.

As you see, there are numbers next to some items on the list. We will subtract those amounts from the 2,500 Naira for every item that you did not mention and that is clinically indicated in this case. So, if you miss some of those items, we will give you less than 2,500 Naira at the end.

These penalties apply to all questions that we'll ask about each partograph.

VARIABLE	STRING	Q1_suggestion
`// Did they get randomly selected to get the correct suggestion random==0 ? "Monitor contractions" : // For incorrect, is this primary or secondary facility? facility_level==1 ? "Refer to a higher f` And [87 other symbols [1]]		

STATIC TEXT

E `partograph_check==1`

INTERVIEWER: SHOW THE HEALTH CARE PROVIDER THE PARTOGRAPH FOR CASE 1: MRS. FLORENCE

15.01. Based on Mrs. Florence's partograph, your colleague suggests that you %Q1_suggestion% NOW. Based on the time and stage of Mrs. Florence's pregnancy and the information provided in the partograph, do you believe this action is clinically indicated at this time? E `partograph_check==1`	SINGLE-SELECT HF7_Q1501 01 ◯ Correct 02 ◯ Incorrect 03 ◯ Not sure

---

VARIABLE	LONG	Q1_reward
`(random==0 && HF7_Q1501==1) || (random==1 && HF7_Q1501==2) ? 50 : 0`		

STATIC TEXT

E `partograph_check==1`

INTERVIEWER: SHOW THE HEALTH CARE PROVIDER THE PARTOGRAPH FOR CASE 2: MRS. ADEOLA

15.02. Assume Mrs. Adeola is your patient. What clinically indicated actions would you take NOW, based on the state of the pregnancy outlined in Mrs. Adeola's partograph? I DO NOT READ OPTIONS. SELECT ALL OPTIONS THAT WAS MENTIONED. F `facility_level==1 ? @optioncode!=12 : facility_level==2 ? @optioncode!=11 : true` E `partograph_check==1`	MULTI-SELECT HF7_Q1502 01 ☐ CONTINUE TO MONITOR CONTRACTIONS 02 ☐ CONTINUE TO MONITOR COLOR AND CONSISTENCY OF LIQUOR 03 ☐ CONTINUE TO MEASURE RATE OF DESCENT OF FETAL HEAD 04 ☐ CONTINUE TO MONITOR FETAL HEART RATE 05 ☐ CONTINUE TO MEASURE MOTHER'S VITAL SIGNS (HEART RATE, BLOOD PRESSURE, TEMPERATURE) 06 ☐ MEASURE URINE AND TEST FOR PROTEIN/GLUCOSE 07 ☐ PALPATE THE UTERUS 08 ☐ REPEAT CERVICAL EXAM NOW 09 ☐ AUGMENT LABOR

10 ☐ PREPARE FOR IMMINENT DELIVERY	
11 ☐ REFER TO SECONDARY FACILITY	
12 ☐ DO C-SECTION / EMERGENCY OBSTETRICS	
13 ☐ RECORD FLUIDS/DRUGS ADMINISTERED	
14 ☐ ADMINISTER ANTIBIOTICS	
15 ☐ ADMINISTER MAGNESIUM SULFATE	
16 ☐ OTHER, SPECIFY	

15.02_Oth. Please specify other action

TEXT   HF7_Q1502_os

E   `HF7_Q1502.Contains(16)`

⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻

VARIABLE

`HF7_Q1502.ContainsAll(1,4) ? 150 : HF7_Q1502.Contains(1) && !HF7_Q1502.Contains(4) ? 50 : HF7_Q1502.Contains(4) && !HF7_Q1502.Contains(1) ? 100 : 0`

LONG   Q2_reward

VARIABLE

`HF7_Q1502.ContainsAny(11,12) ? 0 :200`

LONG   nrefer_reward_Q2

STATIC TEXT

E   `partograph_check==1`

INTERVIEWER: SHOW THE HEALTH CARE PROVIDER THE PARTOGRAPH FOR <u>CASE 3: MRS. BLESSING</u>

15.03. Assume <u>Mrs. Blessing</u> is your patient. What clinically indicated actions would you take NOW, based on the state of the pregnancy outlined in <u>Mrs. Blessing's</u> partograph?

I   DO NOT READ OPTIONS. SELECT ALL OPTIONS THAT WAS MENTIONED.

F   `facility_level==1 ? @optioncode!=12 : facility_level==2 ? @optioncode!=11 : true`

E   `partograph_check==1`

MULTI-SELECT   HF7_Q1503

01 ☐ CONTINUE TO MONITOR CONTRACTIONS
02 ☐ CONTINUE TO MONITOR COLOR AND CONSISTENCY OF LIQUOR
03 ☐ CONTINUE TO MEASURE RATE OF DESCENT OF FETAL HEAD
04 ☐ CONTINUE TO MONITOR FETAL HEART RATE
05 ☐ CONTINUE TO MEASURE MOTHER'S VITAL SIGNS (HEART RATE, BLOOD PRESSURE, TEMPERATURE)
06 ☐ MEASURE URINE AND TEST FOR PROTEIN/GLUCOSE
07 ☐ PALPATE THE UTERUS
08 ☐ REPEAT CERVICAL EXAM NOW
09 ☐ AUGMENT LABOR
10 ☐ PREPARE FOR IMMINENT DELIVERY
11 ☐ REFER TO SECONDARY FACILITY
12 ☐ DO C-SECTION / EMERGENCY OBSTETRICS
13 ☐ RECORD FLUIDS/DRUGS ADMINISTERED
14 ☐ ADMINISTER ANTIBIOTICS
15 ☐ ADMINISTER MAGNESIUM SULFATE
16 ☐ OTHER, SPECIFY

15.03_Oth. Please specify other action

TEXT   HF7_Q1503_os

E   `HF7_Q1503.Contains(16)`

⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻⸻

VARIABLE

`HF7_Q1503.ContainsAll(1,4,7) ? 250 : HF7_Q1503.ContainsAll(4,7) && !HF7_Q1503.Contains(1) ? 200 : (HF7_Q1503.ContainsAll(1,4) && !HF7_Q1503.Contains(7) || HF7_Q1503.ContainsAll(1,7) && !HF7_Q1503.Con`

LONG   Q3_reward

And <u>198 other symbols [2]</u>	

VARIABLE	LONG	refer_reward_Q3
`HF7_Q1503.ContainsAny(11,12) ? 300 : 0`		

VARIABLE	STRING	Q4_suggestion
`// primary and incorrect answer facility_level==1 && random==0 ? "Refer to higher level" : // primary and correct answer (facility_level==1 && random==1) ? "Do not refer to higher level facilities" :` And <u>176 other symbols [3]</u>		

STATIC TEXT

E `partograph_check==1`

INTERVIEWER: SHOW THE HEALTH CARE PROVIDER THE PARTOGRAPH FOR <u>CASE 4: MRS. ABAYOMI</u>

	SINGLE-SELECT	HF7_Q1504
15.04. Based on <u>Mrs. Abayomi's</u> partograph, your colleague suggests that you %Q4_suggestion% NOW. Based on the time and stage of <u>Mrs. Abayomi's</u> pregnancy and the information provided in the partograph, do you believe this action is clinically indicated at this time? E `partograph_check==1`	01 ○ Correct 02 ○ Incorrect 03 ○ Not sure	

VARIABLE	LONG	Q4_reward
`(random==0 && HF7_Q1504==2) || (random==1 && HF7_Q1504==1) ? 200 : 0`		

STATIC TEXT

E `partograph_check==1`

INTERVIEWER: SHOW THE HEALTH CARE PROVIDER THE PARTOGRAPH FOR <u>CASE 5: MRS. ADEBI</u>

	MULTI-SELECT	HF7_Q1505
15.05. Assume <u>Mrs. Adebi</u> is your patient. What clinically indicated actions would you take NOW, based on the state of the pregnancy outlined in <u>Mrs. Adebi's</u> partograph? I DO NOT READ OPTIONS. SELECT ALL OPTIONS THAT WAS MENTIONED. F `facility_level==1 ? @optioncode!=12 : facility_level==2 ? @optioncode!=11 : true` E `partograph_check==1`	01 ☐ CONTINUE TO MONITOR CONTRACTIONS 02 ☐ CONTINUE TO MONITOR COLOR AND CONSISTENCY OF LIQUOR 03 ☐ CONTINUE TO MEASURE RATE OF DESCENT OF FETAL HEAD 04 ☐ CONTINUE TO MONITOR FETAL HEART RATE 05 ☐ CONTINUE TO MEASURE MOTHER'S VITAL SIGNS (HEART RATE, BLOOD PRESSURE, TEMPERATURE) 06 ☐ MEASURE URINE AND TEST FOR PROTEIN/GLUCOSE 07 ☐ PALPATE THE UTERUS 08 ☐ REPEAT CERVICAL EXAM NOW 09 ☐ AUGMENT LABOR 10 ☐ PREPARE FOR IMMINENT DELIVERY 11 ☐ REFER TO SECONDARY FACILITY 12 ☐ DO C-SECTION / EMERGENCY OBSTETRICS 13 ☐ RECORD FLUIDS/DRUGS ADMINISTERED 14 ☐ ADMINISTER ANTIBIOTICS 15 ☐ ADMINISTER MAGNESIUM SULFATE 16 ☐ OTHER, SPECIFY	

	TEXT	HF7_Q1505_os
15.05_Oth. Please specify other action E `HF7_Q1505.Contains(16)`	······································· ·····	

VARIABLE	LONG	Q5_reward
`HF7_Q1505.ContainsAll(1,4) ? 150 : HF7_Q1505.Contains(1) && !HF7_Q1505.Contains(4) ? 50 : HF7_Q1505.Contains(4) && !HF7_Q1505.Contains(1) ? 100 : 0`		

VARIABLE	LONG	nrefer reward Q5
`HF7_Q1505.ContainsAny(11,12) ? 0 :200`		

VARIABLE	LONG	payout
`// reward arm (index== 2||index==3) ? new[] {1000, Q1_reward, Q2_reward,nrefer_reward_Q2, Q3_reward,refer_reward_Q3, Q4_reward, nrefer_reward_Q5,Q5_reward} .Sum() : 1750`		

STATIC TEXT

E `partograph_check==1`

BASED ON THEIR ANSWERS, THIS PERSON WILL RECEIVE _%payout% NAIRA._

INTERVIEWER: PLEASE RECORD THE PAYMENT AMOUNT IN NAIRA FOR THE HEALTH CARE PROVIDER SHOWN ABOVE. E `partograph_check==1` V1 `self==payout` M1 The payment amount you have recorded does not match the amount shown above. Please correct.	NUMERIC: INTEGER Q2 payment -

Can you please provide me with your bank account number where your payment should be made? <u>This must be a bank account under your name.</u> E `partograph_check==1`	TEXT account_number ....

At which bank is this account? E `partograph_check==1`	SINGLE-SELECT bank_name
	01 ○ ACCESS BANK
	03 ○ DIAMOND BANK
	04 ○ ECOBANK
	06 ○ FCMB
	07 ○ FIDELITY BANK
	08 ○ FIRST BANK
	10 ○ GTB
	16 ○ SKYE BANK
	17 ○ SPRING BANK PLC
	18 ○ STANBIC BANK
	19 ○ STANDARD CHARTERED BANK
	20 ○ STERLING BANK
	21 ○ UBA
	22 ○ UNION BANK
	23 ○ UNITY BANK
	24 ○ WEMA BANK
	And 4 other [6]

SPECIFY THE NAME OF THE BANK E `bank_name==28`	TEXT bank other ....

Please can you give me your mobile number so we contact you if there is any issue with your payment? E `partograph_check==1`	TEXT payment num ....

RESULT OF INTERVIEW	SINGLE-SELECT int_result
	01 ○ INTERVIEW DONE

	05 ◯ FACILITY IS EMPTY (NO STAFF MEMBERS)
	06 ◯ HEALTH FACILITY NOT FOUND
	96 ◯ OTHER, SPECIFY:
Specify other result E int_result==96	TEXT int result other ■..■
End Time of interview	DATE: CURRENT TIME int end time ■..■

APPENDIX A — ENABLING CONDITIONS

[1] : In-Service Trainings
Enablement Condition:

```
// Only enable items where the staff said he/she has had
// a training in the last year
new[]{
HF7_Q201A, HF7_Q201B, HF7_Q201C,
HF7_Q201D, HF7_Q201E, HF7_Q201F,
HF7_Q201G, HF7_Q201H, HF7_Q201I,
HF7_Q201J, HF7_Q201K, HF7_Q201L,
HF7_Q201M, HF7_Q201N, HF7_Q201O,
HF7_Q201P, HF7_Q201Q, HF7_Q201R,
HF7_Q201S, HF7_Q201T, HF7_Q201U,
HF7_Q201V, HF7_Q201W, HF7_Q201X,
HF7_Q201Y
}[(int)@rowindex]==1
```

[1] : In-Service Trainings
Enablement Condition:

```
// Only enable items where the staff said he/she has had
// a training in the last year
new[]{
```

APPENDIX B — VALIDATION CONDITIONS AND MESSAGES

[1] Q906_1: 1.06: What is your position in this facility?
Validation Condition:

```
// Highly educated positions - at least bachelors
(self.InList(1,3,4,5,13,50,51,52,53) && Q905_1>=3) ||
// medium education - at least secondary
(self.InList(3,4,5,13,50,51,52,53) && Q905_1>=2) ||
// Other non clinical - does not require any education so no check
self==17
```

Validation Message: The highest academic qualification (%Q905_1%) obtained seems too low for their position in this facility. Please review.
Validation Condition:

```
self.InList(1,3,4,5,13,50,51,52,53)
```

Validation Message: This cannot be a clinical staff

APPENDIX C — OPTIONS

[1] lga_code: Local Government Area
Options: 201:DEMSA, 202:FUFORE/GURIN, 203:GANYE, 204:GIREI, 205:GOMBI, 206:GUYUK, 207:HONG, 208:JADA, 209:LAMURDE, 210:MADAGALI, 211:MAIHA, 212:MAYO-BELWA, 213:MICHIKA, 214:MUBI NORTH, 215:MUBI SOUTH, 216:NUMAN, 217:SHELLENG, 218:SONG, 219:TOUNGO, 220:YOLA NORTH, 221:YOLA SOUTH, 701:ADOR, 702:AGATU, 703:APA, 704:BURUKU, 705:GBOKO, 706:GUMA, 707:GWER-EAST, 708:GWER-WEST, 709:KATSINA-ALA, 710:KONSHISHA, 711:KWANDE, 712:LOGO, 713:MAKURDI, 714:OBI BN, 715:OGBADIBO, 716:OHIMINI, 717:OJU, 718:OKPOKWU, 719:OTUKPO, 720:TARKA, 721:UKUM, 722:USHONGO, 723:VANDEIKYA, 2501:AKWANGA, 2502:AWE, 2503:DOMA, 2504:KARU, 2505:KEANA, 2506:KEFFI, 2507:KOKONA, 2508:LAFIA, 2509:NASARAWA, 2510:NASARAWA EGN, 2511:OBI, 2512:TOTO, 2513:WAMBA, 2701:ABEOKUTA NORTH, 2702:ABEOKUTA SOUTH, 2703:ADO-ODO/OTA, 2704:EGBADO-N/YEWA, 2705:EGBADO-SOUTH/, 2706:EWEKORO, 2707:IFO, 2708:IJEBU-EAST, 2709:IJEBU-NORTH, 2710:IJEBU-N/EAST, 2711:IJEBU-ODE, 2712:IKENNE, 2713:IMEKO/AFON, 2714:IPOKIA, 2715:OBAFEMI-OWODE, 2716:ODEDA, 2717:ODOGBOLU, 2718:OGUN-WATERSIDE, 2719:REMO NORTH, 2720:SAGAMU, 2801:AKOKO N/ EAST, 2802:AKOKO N/WEST, 2803:AKOKO S/EAST, 2804:AKOKO S/WEST, 2805:AKURE NORTH, 2806:AKURE SOUTH, 2807:ESE-ODO, 2808:IDANRE, 2809:IFEDORE, 2810:ILAJE, 2811:ILEOLUJI/OKEIGBO, 2812:IRELE, 2813:ODIGBO, 2814:OKITIPUPA, 2815:ONDO EAST, 2816:ONDO WEST, 2817:OSE, 2818:OWO, 3401:ARDO-KOLA, 3402:BALI, 3403:DONGA, 3404:GASHAKA, 3405:GASSOL, 3406:IBI, 3407:JALINGO, 3408:KARIM-LAMIDO, 3409:KURMI, 3410:LAU, 3411:SARDAUNA, 3412:TAKUM, 3413:USSA, 3414:WUKARI, 3415:YORRO, 3416:ZING,

[2] Q906_1: 1.06: What is your position in this facility?
Options: 1:Doctor or medical officer, 2:Hospital secretary, 3:Nurse midwife, 4:Nurse, 5:Midwife, 6:Pharmacist, 7:Environmental health officer, 9:Pharmacy assistant/Dispenser, 10:Lab technologist/scientist, 11:Lab technician/assistant, 13:Other clinical, 50:Public Health Nurse, 51:Community Health Officer (CHO), 52:Community Health Extension Worker (CHEW), 53:Junior Community Health Extension Worker (JCHEW), 54:Medical Records Officer, 55:Auxiliary nurse/midwife, 14:Health assistants >1 year, 15:Health assistants < 1 year, 16:Administrative staff, 17:Other non clinical,

[3] HF7_Q204: Q2.04: What kind of additional training do you feel you need for your present job?
Options: 1:Integrated Management of Childhood Illness (IMCI), Diarrhea, ARI, etc, 2:Malaria, 3:Tuberculosis diagnosis and treatment, 4:Family planning methods and/or counseling, 5:Emergency Obstetric and Newborn Care, 6:Labor and delivery, 7:Use of vacuum extractors, 8:Use of manual vacuum aspirator, 9:Mental Health, 10:Antenatal / Postnatal care, 11:Nutrition and growth monitoring, 12:Management of Sexually Transmitted Infections (STIs), 13:HIV/AIDS testing and counseling, 14:HIV/AIDS treatment (Anti-retroviral therapy, ART, 15:Prevention of mother to child transmission of HIV/AIDS (PMTCT), 16:Vaccination, 17:Treatment of skin diseases and skin conditions, 18:Specialized training for ear, nose and throat care (ENT), 19:Other adult curative care, 20:SRH services to adolescents (youth friendly services), 21:Management and administration, 22:Community Health /Outreach, 23:Emergency department protocol/work, 24:Minor surgery, 25:Major surgery, 26:Medical care waste management procedures, 27:Others specify,

[4] HF7_Q1404A: 14.04A. If you wanted to <u>increase</u> your facility's payment from the PBF program for next quarter by 1.25 million Naira, which services would you focus on?
Options: 1:NEW OUTPATIENT CONSULTATION BY A DOCTOR, 2:NEW OUTPATIENT CONSULTATION BY A DOCTOR OF AN INDIGENT PATIENT, 3:COUNTER-REFERRAL SLIP ARRIVED AT THE HEALTH CENTER, 4:NEW HYPERTENSIVE PATIENTS DETECTED AND REGISTERED, 5:MINOR SURGERY, 6:MAJOR SURGERY (EX CS), 7:NORMAL DELIVERY, 8:ASSISTED DELIVERY, 9:CS, 10:INPATIENT DAY, 11:INPATIENT DAY FOR AN INDIGENT PATIENT, 12:POSTNATAL CONSULTATION, 13:FIRST ANC CONSULTATION BEFORE FOUR MONTHS OF PREGNANCY, 14:ANC STANDARD VISIT (2-4), 15:FP: TOTAL OF NEW USERS OF MODERN FP METHODS, 16:FP: IMPLANTS AND IUDS, 17:FP: VASECTOMY AND BILATERAL TUBA LIGATION, 18:VCT/PMTCT/PIT TEST, 19:PMTCT: HIV+ PREGNANT MOTHERS AND CHILDREN BORN TO ARE TREATED ACCORDING TO PROTOCOL, 20:STI PARTNER CONSULTATION, 21:STD TREATED, 22:NEW CLIENT PUT UNDER ARV TREATMENT, 23:NEW AFB+ PTB PATIENT, 24:PTB PATIENT COMPLETED TREATMENT AND CURED,

[5] HF7_Q1404B: 14.04B. If you wanted to <u>increase</u> your facility's payment from the PBF program for next quarter by 300,000 Naira, which services would you focus on?
Options: 1:NEW OUTPATIENT CONSULTATION, 2:NEW OUTPATIENT CONSULTATION BY AN INDIGENT PATIENT, 3:MINOR SURGERY, 4:REFERRED PATIENT ARRIVED AT THE COTTAGE HOSPITAL, 5:NEW HYPERTENSIVE PATIENTS DETECTED AND REGISTERED, 6:COMPLETELY VACCINATED CHILD, 7:GROWTH MONITORING VISIT CHILD, 8:2-5 TETANUS VACCINATION OF PREGNANT WOMEN, 9:POSTNATAL CONSULTATION, 10:FIRST ANC VISIT BEFORE 4 MONTHS PREGNANCY, 11:ANC STANDARD VISIT (2-4), 12:SECOND DOSE OF SP PROVIDED TO A PREGNANT WOMAN, 13:NORMAL DELIVERY, 14:FP: TOTAL OF NEW AND EXISTING USERS OF MODERN FP METHODS, 15:FP: IMPLANTS AND IUDS, 16:VCT/PMTCT/PIT TEST, 17:PMTCT: HIV+MOTHERS AND CHILDREN TREATED ACC PROTOCOL, 18:STI PARTNER CONSULTATION, 19:STD TREATED, 20:NEW AFB+ PTB PATIENT, 21:PTB PATIENT COMPLETED TREATMENT AND CURED, 22:HOUSEHOLD VISIT PER PROTOCOL,

[6] bank_name: At which bank is this account?
Options: 1:ACCESS BANK, 3:DIAMOND BANK, 4:ECOBANK, 6:FCMB, 7:FIDELITY BANK, 8:FIRST BANK, 10:GTB, 16:SKYE BANK, 17:SPRING BANK PLC, 18:STANBIC BANK, 19:STANDARD CHARTERED BANK, 20:STERLING BANK, 21:UBA, 22:UNION BANK, 23:UNITY BANK, 24:WEMA BANK, 25:ZENITH BANK, 26:KEYSTONE BANK, 27:MAINSTREAM BANK, 28:OTHER (SPECIFY),

[7] HF7_Q1212: Q12.12: Assuming that all the needed drugs are in stock in the health facility, and that there is a referral hospital available one hour away, what are ALL the actions and/or prescriptions you would take to provide this child with the most appropriate treatment?
Options: 1:RECOMMENDS URGENT REFERRAL TO A HOSPITAL, 2:ADMINISTER RINGER LACTATE OR NORMAL SALINE IV SOLUTION, 3:ADMINISTER LIQUID BY NASO-GASTRIC TUBE, 4:INJECT ONE DOSE OF AN INJECTABLE ANTIBIOTIC, 5:INJECT ONE DOSE OF A SECOND ANTIBIOTIC (IF REFERRAL IS DIFIICULT), 6:PRESCRIBE INJECTABLE ANTIBIOTIC FOR FIVE DAYS, 7:GIVE ONE DOSE OF AN ORAL ANTIBIOTIC, 8:PRESCRIBE ORAL ANTIBIOTICS FOR FIVE DAYS, 9:GIVE ONE DOSE OF ORAL ANTIMALARIAL, 10:PRESCRIBE QUININE FOR FIVE DAYS, 11:PRESCRIBE ORAL ANTIMALARIALS FOR 3 DAYS, 12:ADMINISTER ORS AT THE FACILITY, 13:ADVISE ON GIVING ORS ON THE WAY TO HOSPITAL, 14:PRESCRIBE ORS FOR HOME TREATMENT, 15:GIVE ONE DOSE OF PARACETAMOL, 16:PRESCRIBE PARACETAMOL FOR HOME TREATMENT, 17:GIVE ONE DOSE OF VITAMIN A, 18:TREAT TO PREVENT LOW BLOOD SUGAR, 19:RECOMMENDS TO CONTINUE BREASTFEEDING, 20:RECOMMENDS TO GIVE FOOD AND FLUIDS OTHER THAN BREASTMILK,

[8] HF7_Q1213: Q12.13: Assuming that all the needed drugs are in stock in the health facility, and that there is a referral hospital available one hour away, what are all the actions and/or prescriptions you would take to provide this child with the most appropriate treatment?
Options: 1:REFER URGENTLY TO A HOSPITAL, 2:ADMINISTER RINGER LACTATE OR NORMAL SALINE IV SOLUTION, 3:ADMINISTER LIQUID BY NASO-GASTRIC TUBE, 4:INJECT ONE DOSE OF AN INJECTABLE ANTIBIOTIC, 5:INJECT ONE DOSE OF A SECOND ANTIBIOTIC, 6:PRESCRIBE INJECTABLE ANTIBIOTIC FOR FIVE DAYS, 7:GIVE ONE DOSE OF AN ORAL ANTIBIOTIC, 8:PRESCRIBE ORAL ANTIBIOTICS FOR FIVE DAYS, 9:GIVE ONE DOSE OF ORAL ANTIMALARIAL, 10:PRESCRIBE QUININE FOR FIVE DAYS, 11:PRESCRIBE ORAL ANTIMALARIALS FOR 3 DAYS, 12:ADMINISTER ORS AT THE FACILITY, 13:ADVISE ON GIVING ORS ON THE WAY TO HOSPITAL, 14:PRESCRIBE ORS FOR HOME TREATMENT, 15:GIVE ONE DOSE OF PARACETAMOL, 16:PRESCRIBE PARACETAMOL FOR HOME TREATMENT, 17:GIVE ONE DOSE OF VITAMIN A, 18:TREAT TO PREVENT LOW BLOOD SUGAR, 19:RECOMMEND TO CONTINUE BREASTFEEDING, 20:RECOMMEND TO GIVE FOOD AND FLUIDS OTHER THAN BREASTMILK, 21:RECOMMEND TO KEEP CHILD WARM,

APPENDIX D — VARIABLES

[1] Q1_suggestion:

// Did they get randomly selected to get the correct suggestion random==0 ? "Monitor contractions" : // For incorrect, is this primary or secondary facility? facility_level==1 ? "Refer to a higher facility for a Caesarean section (C-section)" : "Perform a Cesarean section (C-section)"

[2] Q3_reward:

HF7_Q1503.ContainsAll(1,4,7) ? 250 : HF7_Q1503.ContainsAll(4,7) && !HF7_Q1503.Contains(1) ? 200 : (HF7_Q1503.ContainsAll(1,4) && !HF7_Q1503.Contains(7) || HF7_Q1503.ContainsAll(1,7) && !HF7_Q1503.Contains(4)) ? 150 : HF7_Q1503.Contains(1) && !HF7_Q1503.ContainsAny(4,7) ? 50 : (HF7_Q1503.Contains(4) && !HF7_Q1503.ContainsAny(1,7) || HF7_Q1503.Contains(7) && !HF7_Q1503.ContainsAny(1,4)) ? 100 : 0

[3] Q4_suggestion:

// primary and incorrect answer facility_level==1 && random==0 ? "Refer to higher level" : // primary and correct answer (facility_level==1 && random==1) ? "Do not refer to higher level facilities" : // secondary and correct (facility_level==2 && random==1) ? "Do not perform Caesarean section (C-section)": // secondary and incorrect "Perform Caesarean section (C-section)"

LEGEND

Legend and structure of information in this file

Name of section

Enabling condition for this section

Question title

Type of question, scope

Answer options

Variable name

SECTION 5: OTHER INCOME SOURCES
E `s4_other_sources_which.Contains(98)`

Duis aute irure dolor in reprehenderit in voluptate velit esse cillum dolore eu fugiat nulla pariatur?

I **This refers to family relations**
E `s3_time_other > 0`
V1 `s4_rel_leaders_which.Contains(98)`
M1 **Can not be itself**
V2 `(s3_time_other_breeding_advice <= (50 - s3_time_art_in-sem_advice)) ||s3_time_other_breeding_advice == 0`
M2 **This person is not in the list**
F `optioncode != s5_ignored_option_code`

MULTI-SELECT
SCOPE: PREFILLED

`s4_rel_leaders_other`

01 ☐ **Community animal health workers**

02 ☐ **Private**

03 ☐ **Government**

04 ☐ **Livestock keepers association**

05 ☐ **NGO**

And 5 other [13]

Additional information:
"I" — **Question instruction**
"E" — **Enabling condition**
"V1" — **Validation condition №1**
"M1" — **Message for validation №1**
"F" — **Filter in Categorical questions**

Link to full set in appendix

Breadcrumbs

Type or roster

Roster Title

CHAPTER 3 IDENTIFICATION /
Roster: LEADER RELATION DETAILS
generated by fixed list:

01 **Ward Livestock Officer**

02 **Village Livestock Officer**

99 **Other (specify)**

List items