APPENDIX 2

Sick Child Assessment and Treatment Observation Checklist for Evaluators

OBSERVATION CHECKLIST – SICK CHILD

0.1a Province: _____	0.1b District: _____
0.2a Facility Name: _____	0.2b Facility code #:_____
0.3 health worker Category:_____	0.3a Course: 7 or 11 days or I(circle one)
0.4a health worker Name: _____	0.4b health worker code #: _____
0.5 Date: ____year(a)/_____month(b)/_____day(c)	0.5b # weeks after course: _____weeks
0.6 Observer name: _____	0.7 Child's age: _____(months)

0.8 Begin Timing the Observation Now. Time: _____(write start time here)

1. What reason does the caretaker give for bringing the child to the health facility? **(ANSWER ALL THAT APPLY)**

1.1 Diarrhea/vomiting……Y N
1.2 Fever/malaria…….. …Y N
1.3 Difficulty breathing/cough/pneumonia……Y N
1.4 Other problems……Y N
1.5 If other problem, specify_____

2. Does the health worker ask the age of the child or know the age from another source of information? …….. Y N

3. Is the child weighed? …….. Y N

4. Is the child's weight plotted on a growth chart? …… Y N

5. Is the child's temperature checked? …… Y N

Does the health worker **ASK about (or does the caretaker REPORT)-**	**Does the** health worker **perform these EXAMINATION TASKS?**

Danger signs: 6. Not able to drink/breastfeed? ……Y N 7. Vomits everything? ……Y N 8. History of convulsions……Y N	9. Look for lethargy or unconsciousness? Y N 10. Convulsing now? ……Y N
11. Cough or difficult breathing? ……Y N ***If child has no cough or difficult breathing GO TO 16*** 12. For how long? …… Y N	13. Raise the shirt? …… Y N 14. Count breaths/minute? …… Y N 15. Look and listen for chest indrawing and stridor…… Y N
16. Diarrhea? …… Y N ***If child has no diarrhea GO TO 23*** 17. For how many days?…… Y N 18. Is there blood in the stool? …… Y N	19. Observe drinking or breastfeeding?….. Y N 20. Pinch the skin on abdomen?……Y N 21. Look for sunken eyes? …… Y N 22. Look for irritability & restlessness…… Y N
23. Fever? …… Y N ***If child has no fever, GO TO 28*** 24. Is it a high or low malaria risk area …… Y N	25. Look or feel for stiff neck? …… Y N 26. Look for generalized rash?……Y N 27. Look for runny nose/red eyes?……Y N
28. Assess feeding IF child under 2 yrs…… ……. Y N N/A ***If child is 2 years or older, GO TO 31*** 29. Breastfeeding practice ……Y N 30. Complementary foods …… Y N 31. Feeding practices during this illness……Y N	**Malnutrition and anemia:** 32. Undress and look for wasting……Y N 33. Look for palmer pallor……Y N 34. Look for edema of both feet…… Y N 34a. Assess for low weight for age……Y N

A. All danger signs (questions 6 to 10) assessed?……**Y N**

B. All main symptoms (questions 11, 16, 23) assessed? ……**Y N**

C. Number of ARI assessment tasks completed on history and examination? (Circle one: use questions 12 to 15 and if child had no cough or difficulty breathing circle N/A)…… **0 1 2 3 4 N/A**

D. Number of diarrhea assessment tasks completed on history and examination? (Circle one: use questions 17 to 22 and if child had no diarrhea circle N/A)…… **0 1 2 3 4 5 6 N/A**

E. Number of fever assessment tasks completed on history and examination? (Circle one: use questions 24 to 27 and if child had no fever circle N/A)…… **0 1 2 3 4 N/A**

Number of feeding and nutrition assessment tasks completed on history and examination? (Circle one according to age of child)

F. For younger than 2 years (use questions 29 to 34a)…… **0 1 2 3 4 5 6 7**

G. For child 2 years or older (use questions 31 to 34a only) …….. **0 1 2 3 4 5**

Immunization

35. Does the health worker ask for the *child's* immunization card? (Circle N/A if child is 2 years or older)…… Y N N/A

IF NO or N/A, GO TO QUESTION 38

36. **IF YES**, does the *child* have a card? …… Y N

37. Is the *child* referred for vaccination? …… Y N N/A

38 Does the health worker ask for the *mother's* immunization card? (In absence of mother circle N/A) …… Y N N/A

IF NO OR N/A, GO TO QUESTION 41

39. **IF YES**, does the mother have the card? …… Y N

40. Is the *mother* referred for vaccination? …… Y N N/A

Classification:

How does the health worker **classify the child?**

41. Severe pneumonia…… Y N

42. Pneumonia……Y N

43. No pneumonia: cough/cold…… Y N

44. Diarrhea with no dehydration …… Y N
45. Diarrhea with some dehydration…… Y N
46. Diarrhea with severe dehydration…… Y N
47. Dysentery…… Y N
48. Persistent diarrhea…… Y N
48a Severe persistent diarrhea …… Y N

49. Very severe febrile disease……Y N
50. Malaria……Y N
51. Severe complicated measles……Y N
52. Complicated measles ……Y N
53. Simple Measles……Y N
54. Fever, other cause……Y N
55. Other infection ……Y N

If NO GO TO 57

56. SPECIFY if other infection:_____

57. Severe malnutrition……Y N
57a Very low weight……Y N
58. Severe anemia……Y N
58a Anemia…… Y N

59. No classification identified……Y N (yes means correct statement)

59a Other classification not listed……Y N

	If NO GO TO H 59b If 59a=Y specify:_____

Validation done by observer:

H. health worker **classification agrees with validator**…… **Y N** **I. Severely ill child classified correctly** …… **Y N N/A**

Treatment

What does the health worker **administer or prescribe for the child?**	
60. Immediate referral **……**Y N 61. Antimalarial injection……Y N 62. Antimalarial tablets/syrup……Y N 63. Paracetamol…… Y N 64. Tepid bath …… Y N 65. Antibiotic ointment…… Y N 66. Antibiotic tablets/syrup…… Y N 67. Vitamin A …… Y N 67a. Iron …… Y N 67b. Folic Acid …… Y N	68. ORS…… Y N 69. Antidiarrheal/antimotility…… Y N 70. Metronidazole tablets/syrup…… Y N 70a. Mebendazole Tablets…… Y N 70b. Zinc Tablets …… Y N 71. Tablets/syrup unknown type …… Y N 72. Injection Unknown type …… Y N 73. None …… Y N 74. Other …… Y N ***If NO GO TO J*** 74a If "other" Specify: _____

J. Is the medication appropriate for the classification according to the validator? ……**Y N**

K. Diarrhea case received appropriate medication according to the validator? …… **Y N N/A** **L. Pneumonia case received appropriate medication according to the validator?** …… **Y N N/A** **M. Dysentery case received appropriate medication according to the validator?** …… **Y N N/A**

Compare validator's treatment to observed health worker**:**

N. Is the child treated correctly? ……	**Y**	**N**	
O. Severe classification correctly referred?……	**Y**	**N**	**N/A**
P. Pneumonia case correctly treated? ……	**Y**	**N**	**N/A**
Q. Diarrhea case correctly treated? ……	**Y**	**N**	**N/A**
R. Dysentery case correctly treated? ……	**Y**	**N**	**N/A**

Interpersonal communication:
For all oral medication:

75. Does the health worker explain how to administer medications/ORS? …… Y N
76. Does the health worker demonstrate? …… Y N N/A

77. Does the health worker ask open-ended questions to verify the comprehension of how to administer medications/ORS? …… Y N

S. Number of treatment tasks performed? (Circle one: questions 75 to 77)…… **0 1 2 3 N/A**

78. Does the health worker explain when to return for follow-up? ……Y N
79. Does the health worker explain the need to give the more liquid at home…….. Y N
80. Does the health worker explain the need to continue feeding or breast-feeding at home?..... Y N

T. Number of counseling tasks performed? (Circle one: questions 78 to 80)…… **0 1 2 3 N/A**

81. Does the health worker tell the caretaker to bring the child back immediately for the following signs? (Circle the letter of all that apply)

Child is not able to drink or drinking poorly……a
Child is not able to breast-feed/eat……. b
Child becomes sicker …….. c
Child develops a fever ……..d
Child develops fast or difficult breathing …… ……e
Child develops blood in the stool……..f
Change in consciousness ……g

U. Are at least 3 of the Question 81 messages circled? …… Y N N/A

82. Does the health worker give the caretaker any advice on nutrition? …… Y N N/A

0.9a Record the time when the caretaker leaves: Time: _____
0.9b Duration of observation:_____ (minutes)

<END OF HEALTH WORKER OBSERVATION>

- The surveyor may need to ask the health worker about the diagnosis made and the treatment given during the consultation, but only if these two components were not stated during the consultation.
- The surveyor *must complete* this form *before* the next child observation.