Additional file 2: Showing the copies of interview and observation guides used in measuring input (Table 1), process (Table 2) and output (Table 3 and 4) quality delivery service in Northern Ethiopia study.

Table 1: Checklist used in measuring input quality delivery service in the Northern Ethiopia

	Input variables (yes/no question)	Resp	oonse(observed)
Infrastructu	res indicators		
1.	Clean water source available	1. Yes	2. No
2.	Reliable electricity available	1. Yes	2. No
3.	Means of communication available all times even not locked	1. Yes	2. No
4.	24 hour service available	1. Yes	2. No
5.	Functioning transport facilities (Ambulance) available	1. Yes	2. No
6.	At least three rooms available for maternity service	1. Yes	2. No
7.	Functional refrigerator for storage of drugs and vaccines available	1. Yes	2. No
8.	Mother toilet with shower service available	1. Yes	2. No
	nents and supplies in the delivery room	1. 103	2.110
1.	Functional Blood pressure apparatus available	1. Yes	2. No
2.	Functional Oral or axillary Thermometer available		
		1. Yes	2. No
3.	Functional Stethoscope available	1. Yes	2. No
4.	Functional Fetal stethoscope available	1. Yes	2. No
5.	Functional Baby weighing scales available	1. Yes	2. No
6.	Sterilizers (autoclave or dry oven) available	1. Yes	2. No
7.	Personal protective equipments (at least mouth mask, boots, delivery gown, apron, sterile glove) available	1. Yes	2. No
8.	Antiseptics (soap, chlorine solution, alcohol, iodine)	1. Yes	2. No
9.	Container for infection prevention (decontamination container, safety box, covered	1. Yes	2. No
	contaminated waste bin) available		
10.	Functional movable delivery light available	1. Yes	2. No
	Functional Vacuum extractor available	1. Yes	2. No
	ostetric equipments (absolute minimum equipments for delivery)	1. 105	2.110
1.	Two sterilized delivery sets (cord scissors, cord tie, two artery forceps) available	1. Yes	2. No
2.	Episiotomy set (catgut, one tissue forceps, one needle holder, one scissor/blade)	1. Yes	2. No
	available	1. 165	2. 100
Consumable			
1.	IV set and Canula available	1. Yes	2. No
2.	Folly catheter available	1. Yes	2. No
3.	Blank partograph available	1. Yes	2. No
4.	HIV test kit available	1. Yes	2. No
5.	IV fluid (normal saline) available	1. Yes	2. No
Emergency of	drugs for maternal care available		
1.	Oxytocin drug available	1. Yes	2. No
2.	Antibiotics (at least Ampicillin, Gentamicin and Metrandazol) available	1. Yes	2. No
3.	Anticonvulsant drugs (at least Magnisiaum sulfate(MgSo4)) available	1. Yes	2. No
4.			
	Antihypertensive drug (Hydralazine) available	1. Yes	2. No
	wborn care equipments and drugs	1 77	2.11
1.	Newborn resuscitation materials (at least Bag and mask, mucus extractors, mask) available	1. Yes	2. No
2.	At least two towel to dry and warp baby after delivery available	1. Yes	2. No
3.	Functional incubator (enough light or radiant warmer) available	1. Yes	2. No
4.	Vitamin K available	1. Yes	2. No
5.	Tetracycline (TTC) eye ointment available	1. Yes	2. No
Functioning	Laboratory service		
1.	Basic blood and Urine analysis test available (Hgb or Hct, WBC count, ABO blood	1. Yes	2. No
1	group and Rh test, malaria and HIV tests, Urine analysis like protein urea,		
Human reson	arce for maternity service available	1	
2.	At least three midwife available at Health Center or at least 13 midwives at hospital	1. Yes	2. No
	(adequacy of SBAs)		
3.	Skilled birth attendance(SBAs) readiness (available and properly dressed at delivery room)	1. Yes	2. No
4.	All SBAs in the facility trained to manage obstetric complication	1. Yes	2. No
5.	At least one SBA in the facility trained to manage neonatal resuscitation	1. Yes	2. No
		1	1

Table 2: Checklist used in measuring process quality delivery service in Northern Ethiopia

ocess quality variables: assessed using observation of mother during labour	OI	oserved
A. During Admission:	1 17	0 N
Provider greets the woman and her companion (if present) in a cordial manner	1. Yes	2. No
Provider responds to mother immediate needs (thirst, hunger, cold/hot, need to urinate,	1. Yes	2. No
Provider ask mothers name	1. Yes 1. Yes	2. No
Provider ask her age	1. Yes	2. No
Provider ask about number of previous pregnancies/births	1. Yes	2. No
Provider ask any complications during labour and postpartum period	1. Yes	2. No
Provider ask other general medical problems	1. Yes	2. No
Provider ask use of medications	1. Yes	2. No
Provider ask about her HIV status	1. Yes	2. No
Provider estimate gestational age using last menstrual period	1. Yes	2. No
	1. Yes	
Provider ask mothers how frequently labour are occurring Provider ask if her membranes runtured; when what color and what small it had	1. Yes 1. Yes	2. No 2. No
Provider ask if her membranes ruptured: when, what color and what smell it had Provider ask mothers whether she feels the baby's movements	1. Yes 1. Yes	2. No
· · · · · · · · · · · · · · · · · · ·	1. Yes 1. Yes	
Provider ask mothers when the painful regular contractions began	1. 1 es	2. No
Provider ask mothers whether she has experienced vaginal bleeding, fever, severe headaches, blurred vision, convulsion, or if any other problems the client is		
concerned	1. Yes	2. No
Provider records the information on clinical history chart	1. Yes	2. No
Ensures privacy with screen or curtain to separate the women from others at least	1. 108	2. INO
during examination	1. Yes	2. No
Washes hands with running water and soap for 10-15 seconds and dries with an	1. 108	Z. 1NO
individual clean towel or allows hands to air dry	1. Yes	2. No
Explain each step	1. Yes	2. No
At least one encourage the woman to ask questions	1. Yes	2. No
Respond to the woman/ companion questions politely and in respectful manner	1. Yes	2. No
B. First stage of labour:	1. 100	2.110
Providers takes mother temperature	1. Yes	2. No
Provider takes mother pulse during admission/first stage labour	1. Yes	2. No
Provider measures mother blood pressure	1. Yes	2. No
Provider determines mother respiratory rate	1. Yes	2. No
Provider measures mother fundal height	1. Yes	2. No
Provider determines foetal lie and presentation	1. Yes	2. No
Provider identifies degree of decent by abdominal palpation (from five to zero	1. 100	2.110
fingers above the pubis)	1. Yes	2. No
Provider evaluates uterine contractions (frequency and duration over a 10-minute		2.1.0
period)	1. Yes	2. No
Provider Auscultates foetal heart rate (FHR)	1. Yes	2. No
During physical examination, providers:		
Puts sterile gloves on both hands	1. Yes	2. No
Carefully inserts two fingers of the exam hand	1. Yes	2. No
Assess cervical examination	1. Yes	2. No
Assesses molding	1. Yes	2. No
Assesses station of presenting part	1. Yes	2. No
Assesses position	1. Yes	2. No
Gloves are removed after being immersed in 0.5% chlorine solution and placed in a	1. 100	2.110
leak-proof container	1. Yes	2. No
Records all information on the clinical records	1. Yes	2. No
records an information on the chinear records	1. 108	Z. INO

1. Yes	2. No
1. Yes	2. No
	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
	2. No
1. Yes	2. No
	2. No
	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes	2. No
1. Yes 1. Yes	
	2. No
	2. No
1. Yes	2. No 2. No
1. Yes	2. No 2. No
1. Yes 1. Yes 1. Yes	2. No 2. No 2. No 2. No
1. Yes	2. No 2. No 2. No
1. Yes 1. Yes 1. Yes 1. Yes	2. No 2. No 2. No 2. No 2. No
1. Yes 1. Yes 1. Yes	2. No 2. No 2. No 2. No
1. Yes 1. Yes 1. Yes 1. Yes 1. Yes 1. Yes	2. No 2. No 2. No 2. No 2. No 2. No
1. Yes 1. Yes 1. Yes 1. Yes	2. No 2. No 2. No 2. No 2. No 2. No
1. Yes	2. No
1. Yes 1. Yes 1. Yes 1. Yes 1. Yes 1. Yes	2. No
1. Yes	2. No
	1. Yes 1. Yes

Ensures that the baby is well covered	1. Yes	2. No
Administer vitamin K to newborn	1. Yes	2. No
Provides tetracycline eye ointment 1% prophylaxis to newborn	1. Yes	2. No
Observe breast feeding initiated within the first hour after birth	1. Yes	2. No
Weight the baby	1. Yes	2. No
Mother and newborn kept in same room after delivery	1. Yes	2. No
Discards the placenta in a leak-proof container with a plastic liner	1. Yes	2. No
Disposes of medical waste (gauze, etc) in a plastic container with a plastic liner	1. Yes	2. No
Puts the soiled linen in a leak-proof container	1. Yes	2. No
Places all reusable instruments in a 0.5% chlorine solution for 10 minutes	1. Yes	2. No
Disposes needle and siring in a puncture-resistance container, without removing,		
recapping or breaking the needle	1. Yes	2. No
Gloves are removed after being immersed in 0.5% chlorine solution and placed in a		
leak-proof container	1. Yes	2. No
Washes hands with running water and soap for 10-15 seconds and dries with an		
individual clean towel or allows hands to air dry after conducting delivery	1. Yes	2. No
Provider monitors the mother and newborn after birth:		
Baby's breathing condition and breastfeeding during immediate postpartum period	1. Yes	2. No
Vaginal bleeding assessed during immediate postpartum period before discharge	1. Yes	2. No
Bladder distension assessed during immediate postpartum period before discharge	1. Yes	2. No
Blood pressure measured during immediate postpartum period before discharge	1. Yes	2. No
Uterine contraction assessed during immediate postpartum period before discharge	1. Yes	2. No
Pulse of mother measured during immediate postpartum period before discharge	1. Yes	2. No
Health condition of the mother assessed during immediate postpartum period		
before discharge	1. Yes	2. No
Assists the woman with breastfeeding after birth	1. Yes	2. No
Asks the woman if she has urinated and encourages her to do so whenever she		
wishes after birth	1. Yes	2. No
Records the information on the women's clinical record and reports any		
abnormalities after birth	1. Yes	2. No

Table 3: Interview guides used in measuring output quality (level of Satisfaction and EmONC utilization measures) in Northern Ethiopia study, 2015

	Output quality variables			
no	A. Satisfaction of mother (n=216): using exit interview (total 26 items)	Response		
1	The distance from your home to the nearest health facility is:	 Long Quite long Short 		
2	To get transport from your home to this health facility is:	 Difficult Moderately difficult Not at all difficult 		
3	The cost of transportation from your home to this health facility is:	Not at all affordable Moderately affordable Affordable		
4	The fees you are charged at this health facility is:	Not at all affordable Moderately affordable Affordable		
5	The opening hours at of this health facility is:	 Not at all Suitable Moderately suitable Suitable 		
6	The doctors and midwives at this health facility are:	 Not at all available Moderately available Available 		
7	The people who work in this health facility are:	 Not very honest Fairly honest Honest 		
8	The doctors and midwives are Capable;	 Not capable of finding out the problem with a pregnancy Fairly capable Incapable 		
9	How you obtain drugs:	With difficulty With relative ease Easily		
10	The effectiveness of the medicine supplied by this facility is:	1. Not good 2. Fair 3. Good		
11	The equipment is Adequate;	Inadequate for detecting diseases related to pregnancy More or less adequate		
12	The waiting rooms, examination rooms and delivery rooms are:	Inadequate More or less adequate Adequate		
13	The pregnant women cared for:	 Do not recover well Recover relatively well Recover well 		
14	The doctors and midwives examine you:	Not very Well Moderately well Well		
15	The doctors and midwives are	 Not very open with the pregnant women Fairly open Open 		
16	The doctors and midwives are	Not very compassionate towards pregnant women Fairly compassionate Compassionate		
17	The doctors and midwives are	Not at all respectful towards pregnant women		

		2. Fairly respectful	
		3. Respectful	
18	The time that the doctors and midwives devote you is:	1. Inadequate	
		2. More or less adequate	
		3. Adequate	
19	How do rate the privacy given to you during child birth	Inadequate privacy during	
		examination by the midwife/	
		nurse	
		2. More or less adequate privacy	
•		3. Adequate privacy	
20	The number of doctors and midwives is:	1. Inadequate	
		2. More or less adequate	
21		3. Adequate	
21	The doctors and midwives are	1. Not well suited to deliver	
		pregnant women	
		 Relatively well suited Well suited 	
22	Danier	S. Well suited	
22	Previous expectation toward quality care given at this facility	1. Poor	
		2. Moderate 3. Good	
23	Currently received care	1. Poor service more than expected	
23	Currently received care	2. Moderate	
		3. Good service more than expected	
24	Are you satisfied with waiting time in this facility:	Un satisfied	
	The you substice with waiting time in this facility.	2. Fairly satisfied	
		3. Very satisfied	
25	Cleanliness of facility	1. Inadequate	
	,	2. More or less adequate	
		3. Adequate	
26	The doctors and midwives involve you in decision making:	1. Not involved	
	,	2. Moderately involved	
		3. Totally involved	

Table 4: Checklist used in assessing emergency obstetric and newborn care utilization in the past three months prior to study periods which is filled from maternity registers.

	Facility Case Summary Form for EmONC practice (Data extraction)			
	B. Emergency Obstetric utilization past 3 months prior to study periods: using questions using record review at health facility (n=32); total 9 items	g record rev	iew Yes/no	
1	Parenteral antibiotics administered	1. Yes	2. No	
2	Parenteral oxytocin administered	1. Yes	2. No	
3	Parenteral anticonvulsants administered	1. Yes	2. No	
4	Manual removal of placenta done	1. Yes	2. No	
5	Removal of retained products (e.g., manual vacuum aspiration) done	1. Yes	2. No	
6	Assisted vaginal delivery (e.g., vacuum extraction, breech delivery) done	1. Yes	2. No	
7	Newborn resuscitation done	1. Yes	2. No	
8	Blood transfusion done	1. Yes	2. No	
9	Caesarian delivery (operative delivery) conducted	1. Yes	2. No	