TOOL E: RMC RELATED POLICY AND PRACTICE ASSESSMENT TOOL
Name of HF $\qquad$ HF ID $\qquad$
Facility type: $\qquad$ 1. Health centre 2. Hospital

Region $\qquad$ Zone $\qquad$ Woreda $\qquad$

Select yes or no for the following practices and policies (Use observation when applicable)

|  | Y/N | Comment |
| :--- | :--- | :--- |
| Policy related to RMC |  |  |
| Admission of family members/ person of choice to accompany <br> women during labor/child birth |  |  |
| A policy of allowing non harmful cultural rituals in the facility |  |  |
| Requirement of informed consent for procedures |  |  |
| Freedom of movement during labor (i.e., walking around) |  |  |
| Allowing women choice of position for birth |  |  |
| Policy of keeping the newborn with the mother immediately <br> after the birth |  |  |
| A policy of keeping mother and baby together throughout time <br> in facility |  |  |
| A policy that prohibit detention of women in facility for lack of <br> payment |  |  |
| Prevention of institutional violence against <br> women and newborns |  |  |
| Infrastructure, materials, supplies |  |  |
| Adequacy of infrastructure to ensure privacy during labor and <br> birth (privacy screens, curtains) |  |  |
| Adequacy of infrastructure to ensure accommodation of <br> companion during labor and birth |  |  |
| Adequacy of infrastructure to ensure freedom of movement <br> during labor |  |  |
| Acquiring necessary materials or supplies <br> (curtains, screens to ensure privacy) |  |  |
| Availability of chairs for the birth companion; <br> r and freedom to birth in vertical position |  |  |
| Community involvement |  |  |
| Feedback/anonymous reporting unprofessional behaviors |  |  |
| Practice of facility tour (maternity open days) to pregnant <br> women |  |  |

