

Online Appendix 1

Note: This is Online Appendix 1 of Mhango P, Chipeta E, Muula AS, et al. Implementing the Family-Led Care model for preterm and low birth weight newborns in Malawi: Experience of healthcare workers. 2020;12(1), a2266. <https://doi.org/10.4102/phcfm.v12i1.2266>

TABLE 1-A1: Number of participants recruited per cadre and data collection period.

Cadre	Data period 1 (n)	Data period 2 (n)	Total (n)
Facility-based staff			
Clinical officer	3	2	5
Medical assistant	2	0	2
Nurse-midwife†	16	15	31
Hospital attendant	16	15	31
Subtotal health facility	37	32	69
Community-based health workers			
Health surveillance assistant	25	29	54
Total	62	61	123

†, Nurse-midwives include registered nurse-midwives and nurse-midwife technicians.

TABLE 2-A1: Births, admissions and referrals.

Indicator	Data period 1	Data period 2	Total
Number of babies born preterm or LBW in the past 3 months	212	243	455
Number of babies < 2500 g admitted to KMC in the past 3 months	111	127	238
Percentage of eligible babies admitted to KMC	52%	52%	52%
Number of babies referred to district hospital	7	2	9

LBW, low birth weight; KMC, kangaroo mother care.

TABLE 3-A1: Individual observations completed on the monitoring sheets.

No.	Observation	Data period 1		Data period 2		Total	
		n	%	n	%	n	%
1.	Temperature monitored twice/day	16	59	44	88	60	78
2.	Respirations monitored twice/day	16	59	42	84	58	75
3.	Tone monitored twice/day	16	59	44	88	60	78
4.	Colour monitored twice/day	16	59	45	90	61	79
5.	Urine monitored twice/day	16	59	45	90	61	79
6.	Stools monitored twice/day	16	59	44	88	60	78
7.	Feeds recorded as per schedule	10	37	49	98	59	77
8.	Weight of baby recorded every day	22	81	49	98	71	92
9.	Mode of feeding recorded on feeding chart	23	85	50	100	73	95
Mean percentage score		-	62	-	92	-	81

TABLE 4-A1: Adherence to discharge criteria.

No.	Criterion	Data period 1 (n = 27)		Data period 2 (n = 50)		Total (n = 77)	
		n	%	n	%	n	%
1.	No danger signs present	25	93	47	94	72	94
2.	Baby regained birth weight	15	56	20	40	35	45
3.	Discharge weight: > 1500 g (hospital)/> 1800 g (health centres)	21	78	31†	78	52†	78
Mean percentage score		-	75	-	71	-	72

†, Data for this criterion not available for one facility, percentages calculated accordingly.

TABLE 5-A1: Observations in follow-up care records.

No.	Actions taken	Data period 1 (n = 18)		Data period 2 (n = 33)		Total (n = 51)	
		n	%	n	%	n	%
1.	Date entered on KMC follow-up form	5	28	27	82	32	63
2.	Weight entered on follow-up form	5	28	28	85	33	65
3.	Weight entered on KMC register	7	39	24	73	31	61
4.	Temperature entered	5	28	25	86	30	59
5.	Family kept the given follow-up appointment	8	44	28	85	36	79
6.	Family returned at another date	1	6	7	21	8	16

KMC, kangaroo mother care.

TABLE 6-A1: Referral criteria: Participants with a correct answer per criterion.

Actions taken	Data period 1 (<i>n</i> = 19)		Data period 2 (<i>n</i> = 14)		Total (<i>n</i> = 33)	
	<i>n</i>	%	<i>n</i>	%	<i>n</i>	%
Birth weight < 1500 g	11	59	2	14	13	39
Presence of danger sign(s)	13	68	6	43	19	58
Mother very sick	0	0	1	7	1	3
No surrogate/Non-acceptance KMC	0	0	1	7	1	3

KMC, kangaroo mother care.

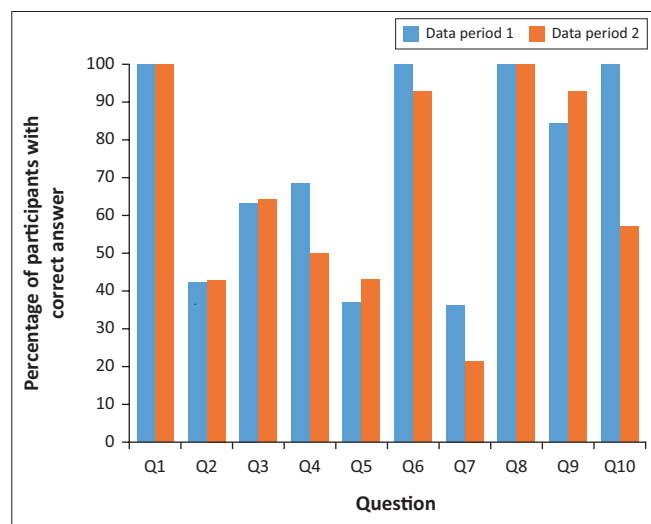
TABLE 7-A1: Knowledge questions.

No.	Question
1	Preterm and low birth weight babies are more prone to infections than term babies weighing 2.5 kg.
2	A 1800 g baby was discharged home 2 weeks ago and now returns for a follow-up visit. Today the baby weighs 2000 g; this is normal weight gain.
3	Preterm/low birth weight babies who cannot take milk from the mother's breast should only be fed expressed breast milk.
4	Family-Led Care refers to care the family provides to their preterm/low birth weight baby once mother and baby are discharged to home
5	While in the hospital, the family should monitor and record the baby's feeding, temperature, respirations and tone.
6	If a baby does not come for the follow-up appointment, it is the responsibility of the facility staff to find out the condition of the baby and encourage them to return for the appointment and record this in the KMC register.
7	Once home, the family should continue to monitor the baby's temperature, breathing, skin colour and condition of the cord once a day and record it on the KMC monitoring form.
8	At the time of discharge, the family should be counselled when and where to return for follow-up care.
9	Families do not need to bring the KMC monitoring form when they return for follow-up appointments.
10	While in the hospital, KMC babies should have their colour, tone, respirations and temperature checked and recorded once a day by staff at the health facility.

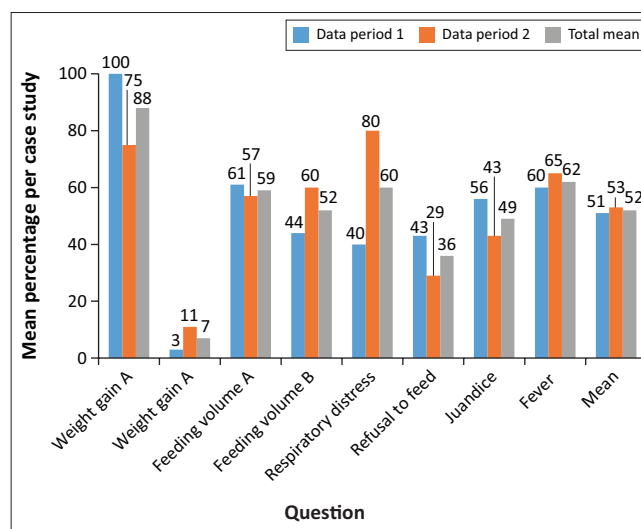
KMC, kangaroo mother care.

TABLE 8-A1: Knowledge assessment of professionals (mean percentage scores).

Cadre	Data period 1 (%)	Data period 2 (%)	Total (%)
Clinical officers	63	65	64
Medical assistants	70	-	70
Nurse-midwives	74	67	71
Total	72	67	69



Note: Likert-Scale values: Strongly disagree, 0; Disagree, 1; Neutral, 2; Agree, 3; Strongly agree, 4. KMC, Kangaroo mother care; LBW, low birth weight; FLC, Family-Led Care.

FIGURE 1-A1: Percentage of health professional participants answering individual knowledge items correctly.**FIGURE 2-A1:** Application-of-knowledge assessment (mean percentage scores per case topic).**TABLE 9-A1:** Summary of counselling observations.

Observation	Real observation (<i>n</i>)	Role play (<i>n</i>)	Total (<i>n</i>)	
1. Initiating basic care	Data period 1	1	7	8
	Data period 2	2	10	12
	Total	3	17	20
2. Pre-discharge counselling	Data period 1	1	6	7
	Data period 2	2	9	11
	Total	3	15	18
3. Follow-up counselling	Data period 1	6	2	8
	Data period 2	4	9	13
	Total	10	11	21
Total	Data period 1	8	15	23
	Data period 2	8	28	36
	Total	16	43	59

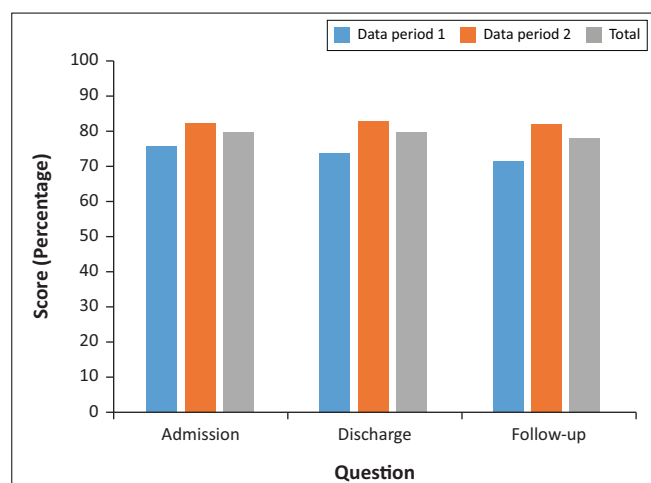


FIGURE 3-A1: Summary of counselling scores.

TABLE 10-A1: Initiating basic care.

Observation	Data period 1 (n = 8)		Data period 2 (n = 12)		Total (n = 20)	
	Yes	%	Yes	%	Yes	%
Real observation	1	-	2	-	3	-
Role play	7	-	10	-	17	-
1. Gathers:						
a. flip chart	8	100	11	92	19	95
b. family monitoring form and pencil	6	75	10	83	16	80
c. take-home leaflet for counselling	2	25	8	67	10	50
2. Invites available caregivers for baby	5	100	7	58	12	60
3. Introduces self to family	2	25	6	50	8	40
4. Asks family what they see in the picture	8	100	10	83	18	90
5. Defines KMC	5	63	11	92	16	80
6. Discusses benefits of KMC	8	100	11	92	19	95
7. Discusses keeping baby warm	7	88	11	92	18	90
8. Explains and demonstrates putting baby on skin to skin	8	100	12	100	20	100
9. Explains infection prevention measures	7	88	11	92	18	90
10. Explains that breast milk is best food for baby	5	63	7	58	12	60
11. Explains feeding						
a. Frequency	8	100	11	92	19	95
b. Route (tube, cup, breast)	8	100	11	92	19	95
12. Explains baby's daily milk volume will be communicated	5	63	11	92	16	80
13. Explains newborn danger signs	7	88	11	92	18	90
14. Explains what to do if they danger sign/s seen	8	100	10	83	18	90
15. Explains and demonstrates use of family monitoring form	5	63	11	92	16	80
16. Asks if there are questions	5	63	9	75	14	70
17. Thanks family for time	4	50	9	75	13	65
Mean score (%)	-	76	-	83	-	80

TABLE 11-A1: Pre-discharge counselling.

Observation	Data period 1 (n = 7)		Data period 2 (n = 11)		Total (n = 18)	
	n	%	n	%	n	%
Real observation	1	-	2	-	3	-
Role play	6	-	9	-	15	-
1. Gathers:						
a. flip chart	6	86	10	91	16	89
b. family monitoring form and pencil	5	71	10	91	15	83
c. take-home leaflet for counselling	3	43	10	91	13	72
2. Invites available care givers for baby	4	57	8	73	12	67
3. Introduces self to family	3	43	6	55	9	50
4. Asks family what they see in picture	4	57	10	91	14	78
5. Tells family baby is doing well and after discharge, they will continue care at home	6	86	10	91	16	89
6. Reminds family how to keep baby warm at home	6	86	10	91	16	89
7. Discusses what to do when baby feels cold while on skin to skin	2	29	6	55	8	44
8. Teaches family how to prevent baby from getting infections at home	7	100	10	91	17	94
9. Reminds family that breast milk is best food for baby	4	57	8	73	12	67
10. Teaches family how feeding baby at home						
a. Quantity (if baby is cup fed)	2	40 [†]	7	64	9	56 [†]
b. Frequency	6	86	9	82	15	83
c. Route (tube, cup, breast)	7	100	10	91	17	94
12. Reviews danger signs to watch on baby	6	86	10	91	16	89
13. Discusses what to do when they see one or more danger sign at home	6	86	11	100	17	94
14. Encourages use of basic family monitoring form at home	6	86	11	100	17	94
15. Requests family to bring monitoring form when coming for follow-up care	7	100	10	91	17	94
16. Explains how family can support mother at home	6	86	11	100	17	94
17. Encourages family to come for follow-up care	6	86	8	73	14	78
18. Gives family appointment day	6	86	9	82	15	83
19. Asks if family has any questions	5	71	7	64	12	67
Mean score (%)	-	74	-	83	-	80

[†], In 2 cases this observation was not applicable; calculation of percentage was made out of 5 instead of 7 for data period 1 and 16 instead of 18 for the total.

TABLE 12-A1: Follow-up counselling.

Observation	Data period 1 (n = 8)		Data period 2 (n = 13)		Total (n = 21)	
	n	%	n	%	n	%
Real observation	6	-	4	-	10	-
Role play	2	-	9	-	11	-
1. Gathers necessary equipment	6	75	12	92	18	86
2. Introduces self to family	1	13	7	54	8	38
3. Welcomes family and thanks them for coming for follow-up	7	88	11	85	18	86
4. Reviews with family how the baby was cared for at home	8	100	11	85	19	90
5. Checks if there were challenges at home	6	75	10	77	16	76
6. Reviews the family monitoring form to determine if it was being used correctly at home	5	63	10	77	15	71
7. Calculates to check if baby has adequate weight gain or allowable physiological weight loss	8	100	11	85	19	90
8. Examines the baby	5	63	12	92	17	81
9. Shares findings of examination with family	5	63	11	85	16	76
10. Documents required information in:						
a. Register	5	63	10	77	15	71
b. health passport for baby	6	75	11	85	17	81
c. follow-up form	5	63	11	85	16	76
11. Gives family date of the next appointment day	6	86 [‡]	9	69 [‡]	15	88 [¶]
12. Books family in the diary for the next appointment day	5	71 [‡]	8	62 [‡]	13	76 [¶]
13. Thanks the family for coming for follow-up and checks if they have questions	7	88	11	85	18	86
Mean score (%)	-	71	-	82	-	78

[†], In one case this observation was not applicable; calculation of percentage was made out of 7 instead of 8.

[‡], In three cases this observation was not applicable; calculation of percentage was made out of 10 instead of 13.

[¶], In four cases this observation was not applicable; calculation of percentage was made out of 17 instead of 21.