

## Ethiopia Maternal Mortality Reduction Initiative

### Quality Assurance (QA) Monitoring Checklist

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#### Instructions for Use

This checklist should be completed by the assigned Quality Assurance (QA) Officer during each monitoring visit. Each domain must be reviewed and rated for compliance. Mark Yes/No in the 'Compliance' column, indicate Risk Level as Low / Moderate / High, and document comments or corrective actions. At the end of each assessment, calculate the QA Compliance Rate (%) and classify the overall risk rating. This tool aligns with WHO Quality Improvement principles and USAID field audit standards.

## QA Monitoring Table

Domain	Indicators	Verification Method	Compliance (Y/N)	Risk Level	Comments / Action Required
Data Quality	All fields completed, correct IDs	Record review	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low / Moderate / High	
Informed Consent	Consent forms completed and stored securely	Review forms	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low / Moderate / High	
Equipment Functionality	BP cuff, thermometer , scale functional	Observation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low / Moderate / High	
Referral Documentation	Referred cases logged and followed	Record audit	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low / Moderate / High	
Supervisor Feedback	Monthly supervision documented	Interview / Logbook	<input type="checkbox"/> Yes <input type="checkbox"/> No	Low / Moderate / High	

## QA Scoring Summary

QA Compliance Rate (%)	_____
Risk Classification	<input type="checkbox"/> Low <input type="checkbox"/> Moderate <input type="checkbox"/> High
Immediate Corrective Action Needed	_____
Reviewed By / Date	_____

## Signature Section

QA Officer Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Field Supervisor Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Project Manager Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_