

Indicator 1: All pneumonia-related assessment tasks performed. Health worker assessed all of the following: cough or difficult breathing, duration of symptoms, 60-second respiratory rate, and danger signs (history of seizure, inability to drink or breastfeed and vomiting everything). Note that assessment of stridor, chest indrawing, lethargy and unconsciousness were excluded because it was not possible to accurately observe health workers performing these tasks.

Indicator 2: Pneumonia correctly classified. Health worker described the child's illness with the correct IMCI classification or with a diagnosis very similar in meaning (e.g. lower respiratory tract infection).

Indicator 3: Recommended treatment prescribed. Health worker prescribed recommended pneumonia treatment (Figure 1), with complete documentation of medicine name, quantity per dose, doses per day, and treatment duration.

Indicator 4: Recommended or adequate treatment prescribed. Health worker prescribed recommended or adequate pneumonia treatment (Figure 1), with complete documentation of medicine name, quantity per dose, doses per day and treatment duration. Note that as documentation of treatments was often incomplete, a sensitivity analysis was performed in which consultations with incomplete documentation were considered to have "adequate" treatment quality if all parts of the prescription that were recorded were adequate.

Indicator 5: Recommended or adequate treatment from the caretaker's perspective. Caretaker left the health facility with the medicines and demonstrated knowledge necessary to provide recommended pneumonia treatment at home.

*For uncomplicated pneumonia: caretaker left the health facility with a recommended or adequate antibiotic in hand and the knowledge to provide recommended or adequate pneumonia treatment at home (i.e. caretaker told a surveyor the recommended or adequate quantity per dose, doses per day and treatment duration for the antibiotic). If the caretaker did not know the treatment duration, we assumed the caretaker would give the medicine until it was finished.*

*For severe pneumonia: either the caretaker told a surveyor that she would hospitalize the child at the health facility, or the child received the recommended or adequate pre-referral dose of a recommended or adequate antibiotic and the caretaker told a surveyor that she would take the child to a hospital the same day.*