Interview guide

The articles I base the interview on: (1, 2) Possible reads:(3)

Introduction

- 1. How long have you worked in this healthcare facility?
 - a. PROBE Where did you work before? What is your current position at the hospital?
- 2. What surgery do you perform now?
 - a. How are the surgeons organized? Work in teams? Surgery planned for every day?
 - b. How is unplanned surgery performed?
- 3. What other surgeries are performed here now?

HMA: This is to establish that I am interested in the particular person in front of you. Plus gain understanding of the particular clinic. It gives you a starting point to understand changes from. GD: also gives chance for experts to highlight where issues arise.

Background: Ebola setting

- 4. When did you first hear Ebola was in the country?
- 5. Would you please tell me how your clinic at the time before the Ebola crisis took care of a patient with surgical pathology?
- 6. Would you please tell me the first changes that were made to the surgery at the hospital when Ebola struck? How did you receive a patient with suspected Ebola?

The 6 building blocks of health systems

Now we understand some of the background. I would like to know more about the specifics of caesarean sections and what happened during the Ebola crisis.

Service delivery

- 7. There might have been changes during the Ebola epidemic. Think about the beginning, middle, and end of the epidemic:
 - a. How would you describe the way a patient that had to undergo a caesarean section was treated, from admission to dismissal, during the crisis?
 - b. Did you notice any differences in caesarean section care if you compare the beginning, middle, and the end of the crisis?
 - c. What was your opinion about how caesarean sections were made? Was there any talk in the staff group about it?
- 8. Did your clinic perform other surgery part from caesarean sections? Did these provision of these surgical procedures change in any way during the crisis?
- 9. Who were the patients coming to the clinic? What areas did they come from? How did this compare to before the outbreak? How did this affect the clinic?

Human resources

- 10. Can you please tell us who performed the caesarean sections during the crisis?
 - a. PROBE: did you have colleagues who stopped working? What were their situation?
 - b. What did you consider yourself concerning whether or not continuing working?
 - c. Did any staff get Ebola? Did they survive?
 - d. PROBE: Did it influence the number of surgeries? Types of surgeries? The planning of surgeries?
- 11. Was there a change in who performed the caesarean sections during the crisis? In who took care of the patient before and after surgery?
 - a. Who performed other surgeries?

- b. Did team compositions change?
- c. Did new staff arrive?

Governance and leadership

- 12. I would like to further understand how decisions regarding the number of surgeries were made during the crisis. What messages did staff receive from management on how to provide caesarean sections?
 - a. Were you encouraged to stay?
 - b. If staff left, did they come back after the crisis or what happened to them afterwards?
- 13. Do you recall any specific changes in policies related to staff attendance, procedures, or pay?
 - a. In your experience, do you believe these changes had an impact on the volume of caesarean sections? And other surgeries?
- 14. What happened to the management of other surgery apart from caesarean sections?

Health financing

- 15. Do you know whether there were any resource allocations made during the crisis? If yes, how did this affect the surgical ward?
- 16. Were there any personal economic incentives for staff to continue performing surgery during the crisis?
 - a. Probe: how much in proportion to your normal salary?
 - b. And which staff groups did it apply to?

Medicines, drugs, and technologies

- 17. Were changes made in the distribution of supplies or medicines to your clinic?
 - a. Other technology or equipment necessary for performing surgery or caesarean sections in particular?
 - b. PROBE: If yes, what were they? How did they influence your work?
- 18. Where there any periods of shortage or stock-out or supplies or medicines, or need for reparations of equipment?
 - a. Probe: How did you COPE?

Information

- 19. In periods of crisis, knowledge of the situation can be useful. How did you get information on the situation in the health sector?
 - a. Did you get information about risks or priorities? From where?

The 5 resilience mechanisms of health systems

Awareness

- 20. Do you know if there was a disaster plan before Ebola? Had there been plans on how to continue essential service delivery in the face of a crisis?
- 21. Was there communication between clinics on how to best provide surgical care despite the Ebola risks? How did your clinic become aware of the situation?
- 22. Had you ever discussed this scenario with a colleague? What are the specific characteristics of the risks for surgeons?

Diversity

- 23. Now I would like to understand the surgical chain better. When Ebola struck, did you consider any part of the surgical chain weaker than the other? For instance, how did the anaesthetic service work?
 - a. Can you recall any specific changes in services such as anaesthesia or postoperative care during the crisis?
- 24. Were there other facilities that could start doing surgery or increase their surgical load?

Self-regulating

- 25. We understand that the Ebola crisis put healthcare workers under really stressful working conditions. Even when Ebola peaked, what made you personally feel that you were providing care of quality?
 - a. What made you feel it was safe, for both staff and patient?
 - b. What did your colleagues think regarding quality of care and safety?
- 26. If your clinic could not receive all patient seeking surgical care were they informed to seek care at a new hospital?
 - a. Were they referred? How did you compensate for their medical needs if your clinic was not able at the time?

Integrated

- 27. How did the cooperation between surgical, anaesthetic, and obstetric care providers work during the crisis? Was there any change compared to before?
- 28. Did all staff involved in a patient having a caesarean section follow the same "game plan"/policies?

Adaptive

- 29. Could you mention the 2 or 3 most important ways that the surgery team adapted to the challenges of Ebola?
- 30. Considering what we have spoken about today, what do you think are the most important factors for providing caesarean sections? Could you give us a few of what you consider the most important reasons?

Final questions

- 31. What lessons do you think health systems can learn from the successes of caesarean sections during the Ebola crisis?
- 32. Are there any end points you want to add on any of the topics touched upon today or that we have not spoken about?

READS

- 1. Kruk ME, Myers M, Varpilah ST, Dahn BT. What is a resilient health system? Lessons from Ebola. The Lancet. 2015;385(9980):1910-2.
- 2. Everybody's business: Strengthening health systems to improve health outcomes: WHO's framework for action. Report. Geneva: World Health Organization; 2007.
- 3. Bayntun C, Rockenschaub G, Murray V. Developing a health system approach to disaster management: A qualitative analysis of the core literature to complement the WHO Toolkit for assessing health-system capacity for crisis management. PLoS Curr. 2012;4:e5028b6037259a.