CLIENTS'SATISFACTION WITH QUALITY OF CHILDBIRTH SERVICES. "A COMPARATIVE STUDY BETWEEN PUBLIC AND PRIVATE FACILITIES IN LIMURU SUB-COUNTY-KIAMBU – KENYA.

Questionnaire Source: The questionnaire has been adapted from: Mfundisi N.P, Melese T, Gebrehiwot Y, Bisetegne, D, Habte D. (2014), Karkee R, Lee A.H& Pokharel P.K. (2014.)

This Questionnaire will be used to establish Patient satisfaction with healthcare during childbirth

PATIENT SATISFACTION WITH HEALTH SERVICES DURING LABOUR, DELIVERY AND AFTER DELIVERY

Rating scale: **5**= Completely Satisfied/ Agree; **4**= Satisfied/Agree; **3**= Not Sure; **2**=Dissatisfied/Disagree; **1**= Completely Dissatisfied/Disagree

Facility Code	
Date	Patient code
SECTION A –General characteristics	
<u>Demographic Data</u>	
Kindly provide the following demographic in	nformation about yourself/
Please tick the appropriate circle	

01. How old are you? Indicate Age in completed years:

02. What is your marital status?

Single (1) Married monogamous (2) Married polygamous (3) Divorced (4) Widowed (5)

03. What is your religion?

Christian protestant (1) Christian catholic (2) Muslim (3) No religion (4) Others Specify______(5)

Socio-Economic

04. What is the highest level of education that you attained?

No education (Never been to school) (1) Primary (2) Secondary (3) College (4) University (5)

05. What is your occupation?

Student (1) Unemployed (2) Self Employed (3) Formal Employment/salaried (4)

06. How much is your income per month (approximate in Ksh.)

None (1) 1 – 5,000 (2) 5,001 - 10,000 (3) above 10,000 (4)

Obstetric data:

07.What is your **parity** ?(How many times have your pregnancy ended in a live birth and how many times have you miscarried or had an abortion?)

First pregnancy (Primigravida) (1) Para 2-5) (2) Para 5 and above (3)

Patient satisfaction with health services during childbirth

Kindly respond by indicating the level to which you are in agreement/satisfied with the statements provided.

SECTION B. Client Satisfaction with turnaround time (Time taken from arrival in facility to time attended by health provider)

08. How long did you wait between the time you first arrived at this clinic and the time health provider attended to you for consultation? Indicate actual waiting time in **hours:**

0-30 mins (1) 30 mins – 1 hour (2) 1hr- 2hrs (3) Over 2 hrs (4)

S/No	CODE	5	4	3	2	1
	Statement	Completely	Satisfied	Not sure	Dissatisfied	Completely Dissatisfied
09	On a scale of one to five how would you describe your					
	level of satisfaction with the time you spent waiting for					
	health care providers to examine you?					
10	To what extent do you agree with this statement? The staff					
	kept checking on me thus I did not feel neglected / ignored					
	during the waiting process.					

Section C. Clients satisfaction with privacy and confidentiality

	Statement	Completel y satisfied	Satisfied	Not sure	Dissatisfie d	Completel	y Dissatisfie
11	How would you rate your level of agreement with the following statement?						
	The staff treated my personal information with confidence						

	Statement	Completel	y satisfied	Satisfied	Not sure	Dissatisfie d	Completel	y	Dissatisfie
12	To what extent do you agree with the								
	following statement?								
	The health facility provided privacy during								
	vaginal examination.								
13	During labour there were a lot of people								
	who are non-staff around me which made								
	me feel uncomfortable								
14	The medical staff respected my privacy; I								
	was not left exposed during delivery (2 nd								
	Stage).								
Section D	Satisfaction With Treatment During Labo	our a	nd aft	er Deli	very				
15	How would you describe your level of								
	agreement with pain management during								
	labour?								
	I was given pain relief during labour as the								
	need arose (Pharmacological and Non-								
	pharmacological)								
16	How would you describe your level of agreement with pain management after								
	you delivered your baby?								
	I was given pain relief after delivery as the need arose. (<i>Pharmacological</i>)								
17	To what extent do you agree with the								
	following statement								

	Statement	Completel y satisfied		Satisfied	Not sure	Dissatisfie d	Completel	>	Dissatisfie
	The health staffs in the health facility are								
	well suited to treat mothers during labour								
	and delivery								
18	The equipment such as blood pressure								
	machines used on me appeared to be in good								
	working order								
19	How would you describe your level of								
	satisfaction with the way staff responded to								
	your questions and concerns during labour								
	and delivery								
20	I was allowed to have a birth companion					l			
	If Yes go to No. 22	Yes (1))	No (2)					
	If No skip to No. 23								
	What is your level of agreement with the								
	following statement								
21	My labour companion was given guidance								
	on how best to assist me (Giving me								
	emotional support, providing me with basic								
	needs etc)								
22	My labour companion was made welcome								
	during labour and delivery process,								
22									
23	The midwife supported and encouraged me								
	during labour								

	Statement	Completel	y satisfied	Satisfied	Not sure	Dissatisfie d	Completel	y	Dissatisfie
24	When I had the urge to bear down, the								
	midwife gave me clear guidance on how to								
	do so								
25	I was satisfied with the way the midwife								
	conducted my delivery								
26	I was encouraged to breastfeed my baby								
	within one hour after delivery to foster								
	bonding								
Section I	E: Satisfaction With Information after Deliv	ery a	and Be	efore D	ischarg	ge	<u> </u>		
	To what extent do you agree with the follo	wing	state	ment?					
27	I was informed about the health status of my								
	baby immediately after delivery								
28	The health staff provided me with the								
	information on how to detect danger signs								
	on myself after delivery.								
29	The health staff provided me with the								
	information on how to detect danger signs								
	in my baby								
30	I was provided with the information on how								
	to take care of myself at home before								
	discharge								
31	I was provided with the information on how								
	to take care of the baby at home before								
32	discharge								
34	How would you rate your level of overall								
	satisfaction with the treatment provided by								
	the health staff of this facility from								

Statement	Completel y satisfied	Satisfied	Not sure	Dissatisfie d	Completel	y Dissatisfie
admission, during labour, during delivery and after delivery?						

Did you have any positive feedback that you would like to share regarding your delivery?
Did you have any negative feedback that you would like to share regarding your delivery?

Would you recommend for a relative or friend to come and deliver in this health facility?

(2) No	
Kindly explain the reason to your response	

Thank You for dedicating your time to answer my questions.

(1) Yes