

Client Evaluation of Midwifery Care _ General English Evaluation Form

This form is provided by the College of Midwives of Alberta (CMA). Its purpose is to help Alberta midwives get feedback from their clients about the care that they gave. Your midwifery practice should give this form to you within six months after you have completed care. We ask that you fill it out and send it back to the practice.

Please think about the care you received from your midwives. Your feedback on your recent pregnancy, birth, and postpartum period is valuable. You do not need to put your name down unless you want to. If you don't want your midwife to know who you are, the details you write down might mean your midwife can figure out who you are. Your comments will be reviewed by the midwifery practice to help improve the care given to clients.

Please put the name of your midwife/team here (optional): _____

Your name (optional): _____

At which point in your pregnancy were you accepted into care by your midwife (optional)? _____

Please check all that apply about the kind of care you got from the midwives:

Pregnancy care Labor and birth care Postpartum care Other health care:

Overall, how happy are you with the care that you got?	Excellent	Good	Fair	Poor	I don't know
Did you have a Midwifery Student caring for you as well?	yes			no	

Comments:

Rate the following parts of your prenatal, labor and birth, and postpartum care. Check one rating choice for each box.

PRENATAL CARE (if applicable)	Excellent	Good	Fair	Poor	Not Applicable
1. The number of prenatal visits met my needs:					
2. I had enough time to talk and ask my midwife questions in our appointments:					
3. My midwife/midwives gave me the information I needed to make decisions:					
4. My midwife/midwives discussed information in a way I could understand:					
5. I felt supported by my midwife/midwives to make decisions:					
6. I felt supported by my midwife/midwives, no matter what decision I made:					
7. My comfort to contact my midwife/midwives for questions or problems was:					
8. It was easy to contact my midwife/midwives:					
9. My trust in my midwife/midwives skill and ability was:					
Please make comments or give your ideas for making your prenatal care better, mainly for areas above that you rated fair or poor:					

LABOUR and BIRTH CARE (if applicable)	Excellent	Good	Fair	Poor	Not Applicable
1. It was easy to contact my midwife/midwives:					
2. I felt safe to call my midwife/midwives for questions and problems:					
3. My midwife/midwives gave me the information I needed to make decisions:					
4. My midwife/midwives discussed information in a way I could understand:					
5. I felt supported by my midwife/midwives to make decisions:					
6. I felt supported by my midwife/midwives, no matter what decision I made:					
7. The care and support I had in my labour and birth was:					
8. My trust in my midwife/ midwives' overall skills and abilities in labour and birth care:					
Please make comments or give your ideas for making your labour and birth care better, mainly for the areas above that you rated fair or poor:					

POSTPARTUM CARE (if applicable)	Excellent	Good	Fair	Poor	Not Applicable
1.The number of postpartum visits met my needs:					
2.I had enough time to talk to my midwife/midwives and ask questions:					
3.The time we spent talking about how to care for my baby was:					
4.The time we spent talking about how to care for myself was:					
5.My comfort to call my midwife/midwives for questions and problems was:					
6. My midwife/midwives gave me the information I needed to make decisions:					
7. My midwife/midwives discussed information in a way I could understand:					
8. I felt supported by my midwife/midwives to make decisions:					
9. I felt supported by my midwife/midwives, no matter what decision I made:					
10. The support I got from my midwife/midwives on feeding my baby was:					
Please make comments or give ideas for making your postpartum care better, mainly for any of the areas above that you rated fair or poor:					

The questions in this section cover your care by midwives from pregnancy, through labour and birth and after your baby's birth until your baby is six weeks old. Please check one answer for each question.

CONTINUITY OF CARE <i>Midwives must make sure that clients have no more than four assigned midwives in their team and that clients can call one of those midwives 24-hours a day.</i>	Yes	No	Not Applicable
1.The number of midwives assigned to me was 4 or less:			
2. I knew who my assigned midwife/ midwives were during my time in midwifery care:			
3.I had enough chances to meet all my assigned midwives:			
4.I knew how to reach a midwife 24 hours a day:			
Comments and ideas to make your care by your assigned midwives better:			

INFORMED CHOICE: <i>Midwives must give clients enough information to make choices about their care. All clients have the right to make their own choices even if that choice is against recommendations.</i>	Yes	No	Not Applicable
1.When you had to make choices about your care: -Were your choices respected by your midwife/ midwives? -Did you know you could say no to anything your midwife offered or recommended?			
2.Were you given enough details to make informed choices about your care?			
3.Were you given enough details and support when deciding where to have your baby's birth?			
4. If you had a team of midwives, was the information given to you similar among midwives?			
5. Did your midwives talk about pros, cons, and other care options when you were making choices?			
Comments and ideas for making informed choice conversations better for you:			

For Midwifery Office Use Only	
If applicable, date midwifery practice called client to review feedback:	
If applicable, date feedback discussed with midwife/midwifery team:	
If applicable, changes that were made due to feedback from client:	