Advancing care and support for women and families after stillbirth or neonatal death in Sub-Saharan Africa: A feasibility study

Staff Survey

Thank you for taking the time to complete this questionnaire, there are no right or wrong answers we want to know your experiences and opinions: Please read the questions carefully and record you responses in the space provided, please continue on the back of the sheet if required.

Once you have completed the questionnaire please return in the box provided in your area of work.

What is your							
age?							
What is your job							
role							
What is your	Maternity:		Maternity:		Maternity:		
main area of	Labour ward		Antenatal/postnatal		Antenatal clinic		
work?			ward				
	Maternity: Neonatal Unit/		it/	Other: Please			
	Rotational		Special Care	Special Care		specify	
	(work in	all					
	areas)						
How long have							
you been							
qualified							
(years/months)							
What is your	Certificate/		Degree	Postgra	duate	Other	
highest level of	diploma			degree			
education							
Are you aware of t	the Perina	tal Bere	eavement Care	Group v	vhich ha	is recently	
been introduced in	n your fac	ility?					
Yes	No		Not		sure		
Are you aware of t	the Perina	tal Bere	eavement Care	Champi	ons in y	our area of	
work?							
Yes	No			Not	Sure	Sure	
				.,			
Are you aware of a	any chang	es to th	e care provide	d/or hov	v care is	provided for	

women whose baby died before, during or soon after birth in your facility the
last 6 months?
Please describe below:
Could anything else be done to improve the care provided in your facility for
bereaved women and families in the future?
Please describe below:

Thank you for taking the time to complete this questionnaire.