



Birth Center at PCC Satisfaction Survey

We want to provide women and their families with the best birth experience possible. Therefore, we are very interested in your feedback on your experience at the Birth Center at PCC. Please answer the following questions and rate the services you received at our center. Circle the number that best describes your experience. If you did not receive a service, leave that question blank and go to the next question.

1) How was the support you received from our staff during prenatal care?

1	2	3	4
Excellent	Good	Fair	Poor

2) How was the support you received from our staff during labor and birth?

1	2	3	4
Excellent	Good	Fair	Poor

3) How welcome did our staff make your support person(s) feel during labor and birth?

1	2	3	4
Excellent	Good	Fair	Poor

4) How was the support you received from our staff after birth (once you returned home)?

1	2	3	4
Excellent	Good	Fair	Poor

5) How well did the PCC prenatal classes prepare you for birth?

1	2	3	4
Excellent	Good	Fair	Poor

a. Who was your teacher? _____

6) How were the birth center rooms?

1	2	3	4
Excellent	Good	Fair	Poor

7) Please share any additional comments you may have.

Name (Optional): _____