

Step-By-Step Guide to Assessing Client Satisfaction

There are 7 main components to assessing client satisfaction. These components are:

- Identifying Human Resources
- Project management
- Timing of the surveys
- Fieldwork
- Data analysis
- Interpretation and Reporting
- Using the Findings.

Identifying Human Resources

There are two important aspects that fall under this component:

- Firstly the hospital needs to identify a representative from the management team whose duty it will be to manage the whole assessment process. This person is often responsible for all quality improvement projects in the health facility. For the purposes of this Guide this person shall be known as the Client Satisfaction Co-ordinator (CSC)
- Secondly, a fieldworker needs to be identified who will administer the questionnaire to the clients. For the purposes of this Guide the fieldworker will be known as the Client Satisfaction Fieldworker (CSF).

Project management

Management of this project will entail the following:

Hospital Management -

- Identifies the Client Satisfaction Co-ordinator from the hospital's management team to manage the assessment process
- Provides the necessary support to the Client Satisfaction Co-ordinator
- Considers findings and trends and takes steps for continuous improvement of the quality of services.

The Client Satisfaction Co-ordinator -

- Is responsible for all activities related to the gathering of the data at the hospital (including timing, recruitment of fieldworkers, overseeing fieldwork), data analysis, and reporting back of survey results to the hospital management team
- Organises suitable incentive/ remuneration for the fieldworker
- Organises a back up for the fieldworker in case she/he is ill
- Provides training for the fieldworker/s
- Makes sure that the questions are always asked in the same way
- Must be available during the week when data is gathered at the hospital
- Monitors the patient load and arranges for assistance to the fieldworker where required. (It could be necessary to have more than one fieldworker at a time for large facilities.)
- Monitors trends and makes recommendations to management.

Fieldworkers -

A suitable person for the fieldwork is someone with the following attributes:

- Must not be an employee of the hospital
- Must have no family who work for the hospital
- Must be friendly and able to speak the local languages
- Must be sensitive to client concerns
- Must have passed matric
- Must be timeous, and available all day long for the whole week; and
- Must understand and convey management's commitment to improving health services.

Timing of the surveys

It is recommended that the questionnaire be administered:

- every three to six months
- from Monday to Friday (i.e. for one week)
- from 8:30 am to 4:00 pm (the daytime hours)

Fieldwork

There are three important aspects of fieldwork, namely time, set up and administering the questionnaire.

1. Fieldwork: In terms of time:
 - The Client Satisfaction Fieldworker (CSF) must be in position from 8:30 to 4:00 every day
 - The CSF cannot start late or leave early otherwise clients will be missed. This will negatively affect the validity of the findings.
2. Fieldwork: In terms of set up:
 - The CSF must position themselves as close to the hospital gate as possible, so as to catch all patients/clients leaving, whether on foot or by vehicle
 - The CSF must have tables and chairs (these will make it easier to fill in the questionnaire and it allows the client to sit down while the CSF talks to them or they fill out the questionnaires themselves)
 - Materials needed by CSF include sufficient questionnaires (approximately double number of outpatient flow), pencils, rubber
 - One A4 envelope is required for each day. The CSF will need to mark the day and date on each envelope – it is very important that only the questionnaires from that day go into the envelope marked for that day (i.e. only questionnaires collected on Monday must go into the envelope marked Monday). If no envelope is available separate the questionnaires with an elastic band, making sure that it is clear which set of questionnaires were completed on which day.
3. Fieldwork: In terms of administering the questionnaire the CSF must do the following:
 - Introduce him/herself and then ask the client if s/he may interview them
 - Explain briefly the nature of the study (that the health services want to try and improve services to all the patients)
 - Emphasise the confidentiality of the study (i.e. no names of clients will be recorded)
 - Ask for the client's permission – along the lines of "is it ok to ask you a few questions"

- Take the client through the questionnaire explaining how it works
- When the CSF fills out the questionnaire, ask the questions exactly as they are written and let the patient decide their response. (Remember that it is the client's perception of the service that is being measured and not what the CSF thinks the perception of the client is! Do not try to influence the client's answer.)
- Where clients indicate that they would like to fill out the questionnaires themselves, make sure that they understand what to do and understand the questions. Provide assistance as necessary
- Make sure every question has been answered
- Thank the clients for their time
- Number the questionnaires in consecutive order each day (starting from questionnaire number 1) and date them
- Place completed questionnaires in the marked envelope
- The CSF must keep the completed questionnaires safely stowed until they have been handed over to the Client Satisfaction Co-ordinator (CSC).

Data analysis

The data can be analysed manually or by computer.

Analysis by computer

The CSC must ensure that the data is entered into the Client Satisfaction computer programme for analysis. Explain to the person entering the data that all questionnaires should be completed.

The software programme that has been developed to assist with the analysis and reporting is available from Health Systems Trust free of charge. It has the following characteristics:

- It allows for capturing of all the records and has a memory of previous survey results
- It draws graphs per question and per domain
- It calculates the percentage of completed inpatient questionnaires
- It compares trends over time
- It comes with a training manual.

Read through the manual analysis section below to understand the report that is generated by the computer.

Manual analysis

The manual analysis can be time consuming, especially with high volumes of questionnaires. It is important though, to understand how calculations are done. This will assist in the interpretation of the findings.

A step by step guide on how to conduct the manual analysis is provided below.

Step 1: Prepare the data for analysis

This is done as follows:

1. Record the range of scores (1 – 5) from the filled out questionnaires for each of the questions.
2. Calculate the total score for each value of 1- 5. This is done by multiplying the number of questionnaires per score value, with the score value. Determine then the total score for each question by adding the scores for each of the values.

For example: Questionnaires collected on Monday 3 October:

Question	Score										Total	
	1		2		3		4		5			
	<i>n</i> Questionnaires	Total score	<i>n</i> Questionnaires	Total score	<i>n</i> Questionnaires	Total score	<i>n</i> Questionnaires	Total score	<i>n</i> Questionnaires	Total score	<i>n total</i> Questionnaires	Total score
1	12	12x1= 12	90	90x2= 180	52	52x3= 156	0	0x4= 0	0	0x5= 0	154	348
2	10	10x1= 10	93	93x2= 186	27	27x3= 81	24	24x4= 96	0	0x5= 0	154	373

- To get to the average per question, divide the total score by the number of entries/questionnaires for the particular question. Round off to 1 decimal.

In our example it would be:

Question 1: $348 / 154 = 2.3$

Question 2: $373 / 154 = 2.4$

Continue with these calculations for each day of the week. Determine the average score per question for the whole week.

- Deduct 3 from the answer obtained above. The score values would now change to a range of -2 to 2. In our example it would change as follows:

Question 1: $2.3 - 3 = -0.7$

Question 2: $2.4 - 3 = -0.6$

The reason for this step is as follows:

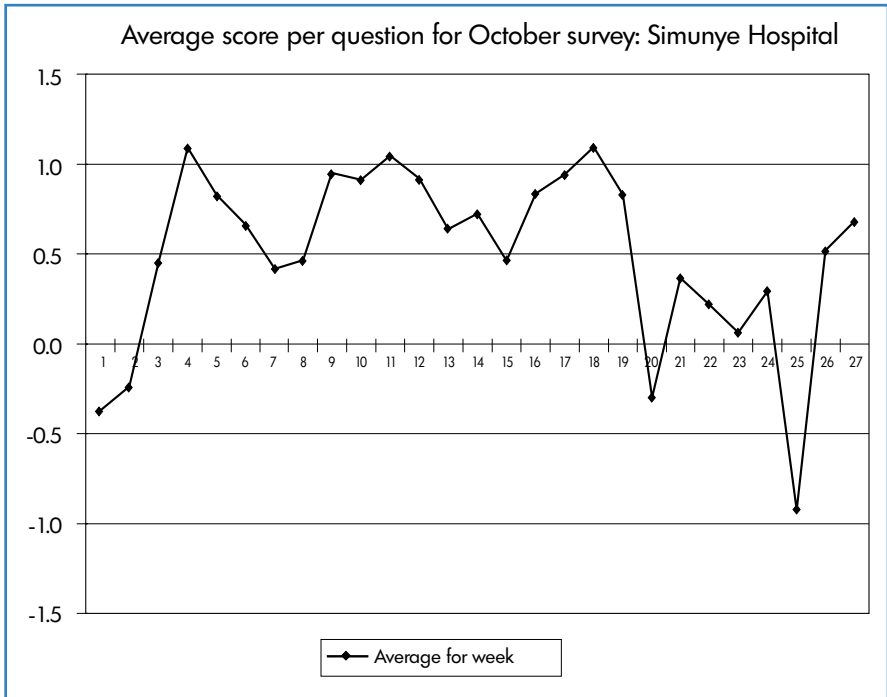
The clients had a choice from 1-5 for each question. A score of 3 shows that the person is neither satisfied nor unsatisfied on the particular issue. 3 can thus be regarded as a "zero point" to plan management actions. Questions that scored 3, would thus change to 0 and those that scored 1 would change to -2.

- Convert the scores of the questions that were asked in a negative format to a positive score. The reason for this is that some questions have been designed as negative questions as part of ensuring the quality of the questionnaire.

The questions involved are numbers 1, 2, 6, 7, 20, 22 and 24. The table below will assist with the conversion:

Average score from questionnaires in the "negative"	"Positive" score to be used in the graph
-2	2
-1	1
0	0
1	-1
2	-2

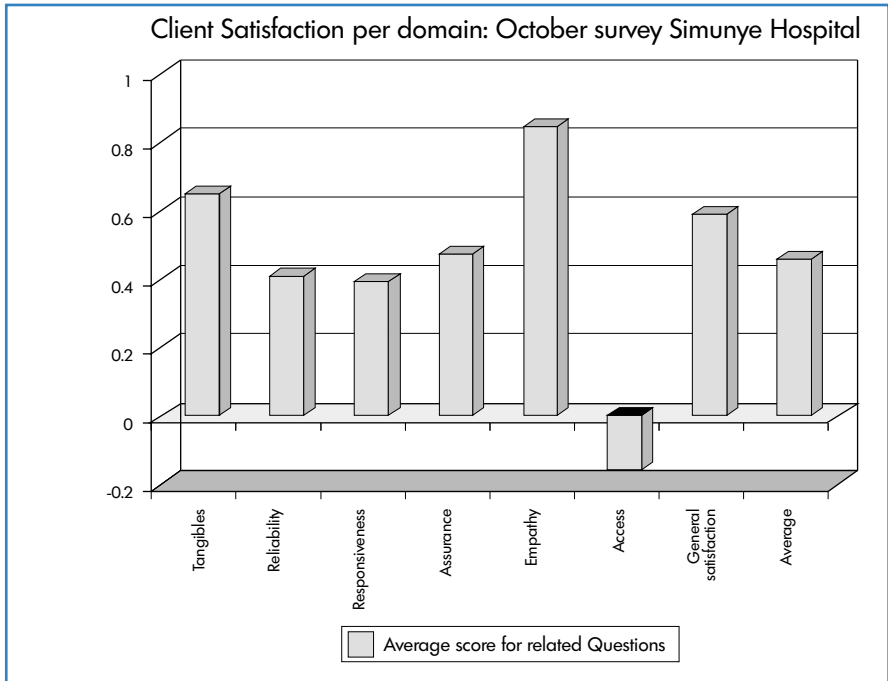
Step 2: Draw a **graph of the averages for each of the 27 questions**, having taken all the steps above. Below is an example of a line graph.



Step 3: To prepare a **bar graph for the averages per domain**, group the averages of the various questions per domain. The questions that are linked to a particular domain are as follows:

Domain	Questions
Tangibles	3, 4, 6, 8, 17, 18, 19
Reliability	7, 13, 15, 23
Responsiveness	9, 20, 23, 26
Assurance	14, 21, 24, 26
Empathy	10, 11, 14
Access	1, 2, 5, 25
General satisfaction	12, 16, 22, 27

Below is an example of a bar graph per domain.



Step 4: Calculate the percentage of questionnaires that were completed by patients who stayed at least one night in the hospital. (It will be those that completed questions 17 to 27).

For example: If 85 out of a total of 154 questionnaires were completed by inpatients, the proportion of questionnaires completed by patients who stayed at least one night in the hospital is 55.2%. The calculation is as follows:

$$\frac{\text{Total number of questionnaires completed by inpatients}}{\text{Total number of questionnaires completed}} \times 100 = \frac{85}{154} \times 100 = 55.2\%$$

Interpretation and Reporting

Take the following steps when interpreting the results:

Step 1: Use the Domain graph and interpret the results by looking at the average score per domain. Select those domains that appear lowest. Any score below 1 should alert management for action. Do not select more than 2 domains as it is often not possible to have proper interventions on more than two.

Note that a score of 2 means 100% satisfaction by all clients, a score of 1 means a 50% satisfaction level and a score of 0 means clients are neither satisfied nor unsatisfied.

Step 2: Look for the results for each of the questions that relate to the domains selected in step 1 for intervention. List the selected domains and the related questions with their average scores.

Step 3: Summarise and group the comments under question 28. This forms the qualitative section of the assessment.

Step 4: Draw a report to hospital management by including the following:

1. *Survey process:*

This covers the survey period, the number of questionnaires completed by both inpatients and outpatients, the number of clients who did not want to complete the questionnaire and how well the fieldworker performed. As it is important to see whether a substantive % of clients is included in the survey, record also the total number of discharged patients and outpatients for the week of the survey and compare it to the number of questionnaires completed.

2. *Survey results:*

- Include both the Domain graph and the graph per question
- Highlight the domains that appear low and list the scores for the questions related to the domains
- Add the summary of Question 28 (step 3)
- Interpret and compare the findings to earlier survey results

Note: Remember that when comparing findings over time a

decrease in client satisfaction could imply any of three reasons: either the client's expectations were raised, or the perceived quality of care decreased, or both. Management should aim at maintaining or improving on the levels of satisfaction, independently of these reasons.

- Make recommendations.

Using the Findings

1. Use the report produced from the findings to start discussions within the hospital. These discussions aim to sensitise health workers to the perception of clients, and, assist with forging agreement on targets for service delivery at the hospital. Link these discussions to both the Batho Pele programme and the Charter for Patients' Rights.
2. The steps that Districts generally follow are:
 - The health facility management team and the quality improvement team use the results of the survey to identify the problem areas that require focused intervention
 - The quality improvement team, including relevant stakeholders, analyses these problem areas and recommends solutions
 - The management team reviews the recommended solutions/ interventions and takes decisions/interventions
 - The quality improvement team, including relevant stakeholders, implements the decisions
 - The management team monitors the implementation and the changes in levels of satisfaction.

An example might be that a hospital would like to improve its average score for **Assurance**: The ability to be knowledgeable and to inspire confidence and trust. To do this, management would need to ensure that the scores improve on the following 4 items:

- q14. My privacy was respected by the nurses and doctors.
- q21. The staff at the hospital answered all my questions about my illness.
- q24. I felt safe at night in the hospital.
- q26. The hospital will tell my local health clinic about my future care needs

A further example of this might be if the hospital wants to improve its average score for **Tangibles**: the equipment and physical surroundings. This domain is made up of scores from the following 7 items:

- q3. The hospital is in good condition.
- q4. The hospital is clean.
- q6. The toilets are dirty.
- q8. There was a bench for me to sit on while I waited.
- q17. The ward was clean.
- q18. The bedding was clean.
- q19. The food was good.

To improve the overall score for this domain Management could begin by examining which of these scores are pulling the overall score down. It might be, for example, issues of cleanliness (questions 4, 6, 17 & 18) which clients have scored negatively.

Management could then identify who is responsible for this area and target it as an area that requires special attention. In this particular example management might decide to launch a campaign to ensure that the toilets are kept clean at all times and a system is put in place to monitor the campaign.

Frequently asked questions

The set of questions listed below are frequently asked by Fieldworkers. (Please refer to the client questionnaires in addenda 1, 2 and 3.)

1. How often do I collect the data?

We recommend that you collect this data at least **every** three to six months.

2. How many patients do I interview?

Your patient records section would assist with determining the expected volume of patients/clients. Determine the average number of patients per week. Add the average number of discharges. This would give you a good idea of the expected number of clients per week. Try to reach all of them.

3. Who do I Interview?

Interview all patients, whether they are in-patients or those who have been visiting the specialist clinics or outpatients. Please note that if the patient is a child then interview the adult who has brought the child.

If there is a rush with too many people at the same time, accept it and just record the number. Do report it, however, to the CSC who should look at the trends and arrange for future assistance.

4. When do I interview them?

Interview patients as they leave the outpatient department or clinic or hospital at the gate, **after** they have collected their drugs and are departing the grounds of the hospital.

Each interview should take 5 minutes or less.

5. What do I do if a client refuses to complete the questionnaire?

You cannot force someone to complete the questionnaire if they do not want to. Try to be firm, but polite with them. Indicate the genuine wish of the hospital to improve services.

If they still do not want to complete the questionnaire try to establish why they will not complete the questionnaire and record their comment on the questionnaire. It is perfectly understandable that some patients would not fill out the questionnaires, especially if they are running late. If however they are

too scared to complete the questionnaire you need to record that and alert the CSC.

Record the number of clients that did not want to complete the questionnaire and submit to the CSC.

6. What should I do when a patient wants to make suggestions or lay a complaint?

You need to record the comments and assure the client that all suggestions are most welcome. Question 28 allows space to record such comments. Remember to keep it anonymous (do not add a name).

If the client wants to lay a complaint they need to follow the hospital's formal procedures. Therefore steer the client in the right direction so that they can go and lay the complaint. The CSC will assist you.

Checklist for the Client Satisfaction Co-ordinator

Activity	Person Responsible	Task Completed?
Set dates for when the CS Tool will be administered	CSC and management	
Inform hospital management when the CS Tool will be administered	CSC	
Get approval and arrange incentives for the fieldworker(s)	CSC and management	
Identify CS Fieldworker(s)	CSC	
Train the CS fieldworker(s)	CSC	
Organise back-up for fieldworker(s)	CSC	
Make sure you have sufficient questionnaires	CSC and fieldworker	
Make sure you have pencils and rubbers	CSC and fieldworker	
Organise chairs and table for interviews in shady area	CSC	
Make sure you have 5 A4 envelopes/ rubber bands	CSC and fieldworker	
Collect completed questionnaires from CS Fieldworker	CSC	
Organise completed questionnaires for data analysis	CSC	
Present report to hospital management	CSC	
<p>Comments:</p>		

Further support

- In conjunction with ISDS, the HST's IT department and Strategy & Tactics have developed a software package which will assist with data capture and analysis.

Contact persons:

Beth Engelbrecht at elengelb@pawc.wcape.gov.za

(process, interpretation and management)

Ruth Grobler at ruth@hst.org.za

or Ronel Visser at ronel@hst.org.za

(software)

- Strategy & Tactics (the consultants who conducted this pilot study) are available to provide follow-up analysis and assistance to ensure that a meaningful set of data is developed with which to determine the satisfaction of clients and thereby assist hospitals with their quality assurance.

Contact person:

Matthew Smith at msmith01@iafrica.com

(general support)

Addendum 1: Client Satisfaction Survey

Directions: Based on your experiences as a patient at this hospital, please tell us whether you strongly agree, disagree, don't know, agree, or strongly agree with the following statements. Please mark your answer for each question by circling the number. For example, if you disagree with a statement you would circle 2, if you agree with the statement you would circle 4. You may only choose one answer per question. If you spent at least one night in this hospital, please will you also answer the questions on the back of this form. The information on this form will be treated confidentially, so please do not place your name on this form. Thank you.

	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
1. It takes more than 30 minutes to get to the hospital	1	2	3	4	5
2. It costs more than R7.00 to get to the hospital	1	2	3	4	5
3. The hospital is in good condition	1	2	3	4	5
4. The hospital is clean	1	2	3	4	5
5. The out-patients/ casualty department has convenient hours of opening	1	2	3	4	5
6. The toilets are dirty	1	2	3	4	5
7. I had to wait a long time to get my folder	1	2	3	4	5
8. There was a bench for me to sit on while I waited	1	2	3	4	5
9. The person who gave me my folder was helpful	1	2	3	4	5
10. The nurse who treated me listened to my problems	1	2	3	4	5
11. The doctor who treated me was polite	1	2	3	4	5

	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
10. The nurse who treated me listened to my problems	1	2	3	4	5
11. The doctor who treated me was polite	1	2	3	4	5
12. I was pleased with the way I was treated at the hospital	1	2	3	4	5
13. The doctor explained to me what was wrong with me	1	2	3	4	5
14. My privacy was respected by all the staff	1	2	3	4	5
15. If I received medicines/ pills I did not have to wait long for them	1	2	3	4	5
16. Next time I am ill I will come back here	1	2	3	4	5

NB: Please complete the questions overleaf if you have spent at least one night or more in the hospital

In-patients (Clients who spent at least one night in the hospital) Only

	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
17. The ward was clean	1	2	3	4	5
18. The bedding was clean	1	2	3	4	5
19. The food was good	1	2	3	4	5
20. Visiting hours were not long enough	1	2	3	4	5
21. The staff at the hospital answered all my questions about my illness	1	2	3	4	5
22. I was very bored in the hospital	1	2	3	4	5
23. When I needed help at night, there was always a nurse to help me	1	2	3	4	5
24. I did not feel safe at night in the hospital	1	2	3	4	5
25. The hospital made sure I got a lift home	1	2	3	4	5
26. The hospital will tell my local health clinic about my future care needs	1	2	3	4	5
27. If my friends are sick I will tell them to come to this hospital	1	2	3	4	5

28. Before we end, is there anything else you would like the hospital to be aware of?

(Record the answer in the space below or, if necessary, on a separate piece of paper)

Addendum 2: Client Satisfaction Survey

Gebaseer op u ondervinding as 'n pasiënt by hierdie hospitaal, dui asseblief aan tot watter mate u saamstem, aldan nie, met die volgende stellings. Vir elke stelling moet u aandui as u saamstem, volkome saamstem, of as u nie saamstem nie of beslis nie saam stem met die stelling nie. Merk asseblief u antwoord vir elke vraag deur die nommer te sirkel wat ooreenstem met hoe u voel oor die vraag. Byvoorbeeld as u saamstem met 'n stelling sal u 'n sirkel om 4 trek en as u nie daarmee saamstem nie sal u 2 sirkel. As u ten minste een aand in die hospitaal deurgebring het moet u ook die vrae op die volgende bladsy voltooi. Die inligting wat u verskaf is vertroulik en u hoef dus nie u naam te verskaf nie.

	Stem beslis nie saam nie	Stem nie saam nie	Onseker	Stem saam	Stem volkome saam
1. Dit neem langer as 30 minute om tot by die hospitaal te kom	1	2	3	4	5
2. Dit kos meer as R7.00 om tot by die hospitaal te kom	1	2	3	4	5
3. Die hospitaal is in 'n goeie toestand	1	2	3	4	5
4. Die hospitaal is skoon	1	2	3	4	5
5. Die buite-pasiënte/ongevalle afdeling het gerieflike ure	1	2	3	4	5
6. Die toilette is vuil	1	2	3	4	5
7. Ek moes lank wag om my lêer te ontvang	1	2	3	4	5
8. Daar was 'n bank waarop ek kon sit terwyl ek moes wag	1	2	3	4	5
9. Die persoon wie my lêer gegee het was baie behulpsaam	1	2	3	4	5
10. Die verpleegster wie my behandel het, het geluister na my probleme	1	2	3	4	5

	Stem beslis nie saam nie	Stem nie saam nie	Onseker	Stem saam	Stem volkome saam
11. Die dokter wie my behandel het was hoflik teenoor my	1	2	3	4	5
12. Ek was tevrede met die manier waarop ek behandel was by die hospitaal	1	2	3	4	5
13. Die dokter het aan my verduidelik wat verkeerd was met my	1	2	3	4	5
14. My privaatheid was gerespekteer deur die verpleegsters en dokters	1	2	3	4	5
15. Indien ek pille/ medisyne ontvang het moes ek nie lank daarvoor wag nie	1	2	3	4	5
16. Indien ek weer sou siek word sal ek weer na hierdie hospitaal toe kom	1	2	3	4	5

L.W. Indien U ten minste een aand in die hospitaal deurgebring moet U asseblief die volgende vrae voltooi

Binne pasiënte alleenlik

	Stem beslis nie saam nie	Stem nie saam nie	Onseker	Stem saam	Stem volkome saam
17. Die saal was skoon	1	2	3	4	5
18. Die beddegoed was skoon	1	2	3	4	5
19. Die kos was goed	1	2	3	4	5
20. Die besoekure was nie lank genoeg nie	1	2	3	4	5
21. Die personeel by die hospitaal het al my vrae omtrent my siekte beantwoord	1	2	3	4	5
22. Ek was verveeld in die hospitaal	1	2	3	4	5
23. 'n Verpleegster was altyd beskikbaar indien ek hulp in die nag benodig het	1	2	3	4	5
24. Snags het ek nie veilig in die hospitaal gevoel nie	1	2	3	4	5
25. Die hospitaal het seker gemaak dat vervoer beskikbaar was om my huis toe te neem	1	2	3	4	5
26. Die hospitaal sal my plaaslike gesondheidskliniek inlig oor my toekomstige gesondheidsbehoefes	1	2	3	4	5
27. Indien vriende van my siek word sal ek vir hulle aanbeveel om na hierdie hospitaal te kom.	1	2	3	4	5

28. Is daar dalk nog enige iets wat u graag sou wou byvoeg waarvan die hospitaal moet kennis neem?

(Skryf in die spasie hieronder of neem 'n skoon bladsy)

Addendum 3: Client Satisfaction Survey

Izikhombisi: Kumava akho njengesigulana esibhedlele,nceda usixelele ukuba uyaphikisa kakhulu,awuvumelani,awazi,uyavuma okanye uyavuma kakhulu nezi zilandelayo. Nceda phawula impendulo zakho kumbuzo ngamnye ngokuthi wenze isangqa kulonombolo. Umzekelo:ukuba uyaphikisa kakhulu yenza isangqa kwinombolo yesibini(2), ukuba uyavuma uyakwenza isangqa kwinombolo yesine(4). Ukuba uchithe ubusuku obunye kwesi sibhedlele , unganceda uphendule imibuzo ngasemva kule fomu. Enkosi ngexesha lakho.

	Phikisa Kakhulu	Phikisa	Phakathi	Vuma	Vuma Kakhulu
1. Ithatha imizuzu eggitha amashumi amathathu ukuya esibhedlele	1	2	3	4	5
2. Ixabisa ukudlula i-r7 ukuya esibhedlele	1	2	3	4	5
3. Isibhedlele sikwimo encomekayo	1	2	3	4	5
4. Isibhedlele sicocekile	1	2	3	4	5
5. Izigulana zangaphandle zifumana uncedo ngawo onke amaxesha	1	2	3	4	5
6. Amagumbi angasese amdaka	1	2	3	4	5
7. Ndalinda ixesha elide ukufumana ifolda yam	1	2	3	4	5
8. Sasikhona isitulo sokuhlala ngelixesha ndilindileyo	1	2	3	4	5
9. Umntu owandinika ifolda yam wayeluncedo	1	2	3	4	5
10. Umongikazi owayendixilonga wamamela ingxaki zam	1	2	3	4	5
11. Ugqirha owayendixilonga wayonothakazelelo	1	2	3	4	5

	Phikisa Kakhulu	Phikisa	Phakathi	Vuma	Vuma Kakhulu
12. Ndabanomdla yindlela endaphatheka ngayo esibhedlele	1	2	3	4	5
13. Uggirha wandichazela into engamandla kum	1	2	3	4	5
14. Imfihlo yam yaba nokuhlonitshwa ngoomongikazi noogqirha	1	2	3	4	5
15. Xa ndifumana amayeza andilindi xesha lide	1	2	3	4	5
16. Kwixesha elizayo ndigula ndakubuya ndize kwakhona	1	2	3	4	5

NB: Please complete the questions overleaf if you have spent at least one night or more in the hospital

In-patients (Clients who spent at least one night in the hospital) Only

	Phikisa Kakhulu	Phikisa	Phakathi	Vuma	Vuma Kakhulu
17. Igumbi lezigulana lalicocekile	1	2	3	4	5
18. Ingubo zokulala zazicocekile	1	2	3	4	5
19. Ukutya kwakulungile	1	2	3	4	5
20. Amaxesha okundwendwela ayengekho made ngokwaneleyo	1	2	3	4	5
21. Abasebenzi sibhedlele bandiphendula kwimibuzo endandinayo ngesigulo sam	1	2	3	4	5
22. Ndandikruqukile esibhedlele	1	2	3	4	5
23. Xa ndandifuna uncedo ebusuku umongikazi wayesoloko ekhona ukunceda mna	1	2	3	4	5
24. Ndaziva ndingakhuselekanga ebusuku esibhedlele	1	2	3	4	5
25. Isibhedlele saqinisekisa ukuthi ndinayo isithuthi sokundigodisa	1	2	3	4	5
26. Isibhedlele siyakuchazele ikliniki ekufutshane nalunga ngemfuno zam zempilo	1	2	3	4	5
27. Xa abahlobo bam begula ndiyakubaxelela ukuba beze kwesi sibhedlele	1	2	3	4	5

28. Before we end, is there anything else you would like the hospital to be aware of?

(Record the answer in the space below or, if necessary, on a separate piece of paper)