**Birth Reflections Evaluation Form**

We would be grateful for you comments on this service. Please complete this short questionnaire.

Name: (optional but helpful)

How did you hear about the service?

Reason for contacting the service?

**Your experience of the Birth Reflections visit:**

(Please circle, 5 being most helpful and 1 being least helpful)

Did you find the midwife informative? 1 2 3 4 5

Were all of your questions answered?

If not please comment on what was not covered:

Overall can you score how useful the meeting was? 1 2 3 4 5

In your opinion is there anyway in which the service can be improved?

Thank you for taking the time to answer these questions. We use the feedback to facilitate positive changes in maternity care by identifying areas we can improve upon and by recognising what we are doing well.

Please return completed forms to the ‘Comments Box’ at hospital reception, email to [birthreflections@rotunda.ie](mailto:birthreflections@rotunda.ie) or post to Birth Reflections Midwife, The Rotunda Hospital, Dublin 1.