

QUALITY OF DISCHARGE TEACHING SCALE – NEW MOTHER FORM ©

Please check or circle your answer. Most of the responses are on a 10-point scale from 0 to 10. The words below the number indicate what the 0 or the 10 means. Pick the number between 0 and 10 that best describes how you feel. For example, circling number 7 means you feel more like the description of number 10 than number 0 but not completely.

1a. How much information <u>did you need</u> from your nurses about taking care of yourself after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
1b. How much information <u>did you receive</u> from your nurses about taking care of yourself after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
2a. How much information <u>did you need</u> from your nurses about your emotions after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
2b. How much information <u>did you receive</u> from your nurses about your emotions after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
3a. How much information <u>did you need</u> from your nurses about taking care of your baby after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
3b. How much information <u>did you receive</u> from your nurses about taking care of your baby after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
4a. How much information <u>did you need</u> from your nurses about feeding your baby after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
4b. How much information <u>did you receive</u> from your nurses about feeding your baby after you go home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
5a. How much practice <u>did you need</u> with baby care skills before going home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	
5b. How much practice <u>did you have</u> with baby care skills before going home?	0	1	2	3	4	5	6	7	8	9	10
	None									A great deal	

6a. How much information <u>did you need</u> from your nurses about who and when to call if you have problems after you go home?	0	1	2	3	4	5	6	7	8	9	10	None	A great deal
6b. How much information <u>did you receive</u> from your nurses about who and when to call if you have problems after you go home?	0	1	2	3	4	5	6	7	8	9	10	None	A great deal
7a. How much information did your family member(s) or others <u>need</u> about care for you and your baby after you go home from the hospital?	0	1	2	3	4	5	6	7	8	9	10	None	A great deal
7b. How much information did your family member(s) or others <u>receive</u> about care for you and your baby after you go home from the hospital?	0	1	2	3	4	5	6	7	8	9	10	None	A great deal
8. How much did the information provided by your nurses answer your specific concerns and questions ?	0	1	2	3	4	5	6	7	8	9	10	Not at all	A great deal
9. How much did your nurses listen to your concerns?	0	1	2	3	4	5	6	7	8	9	10	Not at all	A great deal
10. Were your nurses sensitive to your personal beliefs and values?	0	1	2	3	4	5	6	7	8	9	10	Not at all	A great deal
11. Did you like the way your nurses taught you about how to care for yourself and your baby at home?	0	1	2	3	4	5	6	7	8	9	10	Not at all	A great deal
12. Was the information your nurses provided about caring for yourself and your baby presented to you in a way you could understand ?	0	1	2	3	4	5	6	7	8	9	10	Not at all	Always
13. Did your nurses break up your teaching into small amounts to help you learn?	0	1	2	3	4	5	6	7	8	9	10	Not at all	Always
14. Did your nurses check to make sure you understood the information and instructions?	0	1	2	3	4	5	6	7	8	9	10	Not at all	A great deal
15. Did you receive consistent (the same) information from your nurses, doctors, and other health workers?	0	1	2	3	4	5	6	7	8	9	10	Not at all	Always

16. Was the information about caring for yourself and your baby given to you at times that were good for you ?	0	1	2	3	4	5	6	7	8	9	10
	Not at all										Always
17. Was the information you received from your nurses provided at times when your family member(s) or others could attend ?	0	1	2	3	4	5	6	7	8	9	10
	Not at all										Always
18. Did your nurses help you to feel confident in your ability to care for yourself and your baby at home?	0	1	2	3	4	5	6	7	8	9	10
	Not at all										A great deal
19. How confident do you feel that you would know what to do in an emergency ?	0	1	2	3	4	5	6	7	8	9	10
	Not at all										Extremely
20. Did the information your nurses provided about your care and your baby's care at home decrease your anxiety about going home?	0	1	2	3	4	5	6	7	8	9	10
	Not at all										A great deal

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marianne.weiss@marquette.edu