

[illegible]

VI. INVOLVE FAMILY										COMMENTS	
• ENCOURAGE FAMILY MEMBERS ACCESS TO PT AND BABY WHEN APPROPRIATE											
• GIVE PERIODIC UPDATES ON PT STATUS/PROGRESS OF LABOR											
VII. INCORPORATE CULTURAL CONTEXT											COMMENTS
• ASK PT/FAMILY FOR RELIGIOUS PREFERENCES/REQUIREMENTS, E.G. JEHOVA WITNESS, WAKORINO SECT											
• ASK PT/FAMILY FOR CULTURAL PREFERENCES/REQUIREMENTS											
• ALLOW PT/FAMILY TO OBSERVE CULTURAL PREFERENCES/PRACTICES											
TOUCH/PHYSICAL DISTANCE/PHYSICAL CONTACT											
GENDER (PATIENT/PROVIDERS)											
DISPOSAL OF PLACENTA											
RITUAL BURIAL OF MOTHER/NEWBORN											
BIRTH POSITION											
PRIVACY/MODESTY/ DRESSED/UNDRESSED											
BELIEF IN INFLUENCE OF "SPIRITS" ON BIRTH PROCESS AND OUTCOME											
DECISION MAKING BY HIERARCHY OF SOCIOFAMILIAL RELATIONSHIPS											
NEGATIVE BEHAVIORS											
• BELITTling BEHAVIOR TO PATIENT											
• ROUGH TREATMENT OF PATIENT											
• NOT RESPONDING TO PATIENT NEEDS											
• PHYSICALLY PRESENT/EMOTIONALLY DISTANT											
• SHARES PATIENT'S PERSONAL INFORMATION PUBLICLY											

TIME									PARITY
PT. ASSESSMENT									COMMENTS
- FETAL HEART									
- BLOOD PRESSURE									
- CERVICAL DILATION									
- STATUS OF MEMBRANES									
- URINE OUTPUT									
- FLUID INTAKE									
- OTHER									

ADDITIONAL COMMENTS:



DRAFT

MATERNAL CARE PROVIDER BEHAVIOR ASSESSMENT TOOL KENYA



CHANGE PROJECT

DATA COLLECTION

NAME OF PERSON/UNIT ASSESSED _____

FACILITY _____

DATE _____

PERSON COMPLETING ASSESSMENT _____

PATIENT INFORMATION

PARITY _____

CERVICAL DILATION _____

STATUS OF MEMBRANES _____

OTHER _____

LABOR WARD INFORMATION

NUMBER OF PATIENTS _____

IN LABOR _____

POSTPARTUM _____

NUMBER OF MIDWIVES _____

NUMBER OF STUDENTS _____

NUMBER OF PHYSICIANS _____