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| **Staff Satisfaction Questionnaire** |

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| * Date (DD/MM/YY) / /
 |
| * How long have you worked in this hospital?
 |  Months Weeks |
| * TYPE
 | □ National staff　　　 | □ International staff |
| * Job Category

(please check **ONE** box only) | □ Medical Doctor  | □ Nurse, Midwife |
| □ Other Health Professionals | □ Management and Administration |
| * Other Support Staff
 | □ Others |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Agree | Strongly Agree |
| 1. I received appropriate briefing for my work duties and security.
 | 1 | 2 | 3 | 4 |
| 1. I received the right amount of support and guidance from my supervisor.
 | 1 | 2 | 3 | 4 |
| 1. I was provided with necessary trainings to perform my job.
 | 1 | 2 | 3 | 4 |
| 1. I learned many new job skills in this position.
 | 1 | 2 | 3 | 4 |
| 1. I was appropriately recognized when I perform well at my regular work duties.
 | 1 | 2 | 3 | 4 |
| 1. The organization rules made it easy for me to do a good job.
 | 1 | 2 | 3 | 4 |
| 1. The amount of work I was expected to finish each week was reasonable.
 | 1 | 2 | 3 | 4 |
| 1. My work assignments were always clearly explained to me.
 | 1 | 2 | 3 | 4 |
| 1. My work was evaluated based on a fair system of performance standards.
 | 1 | 2 | 3 | 4 |
| 1. The management of this organization was supportive of me.
 | 1 | 2 | 3 | 4 |
| 1. The buildings, grounds, and layout of this facility were adequate for me to perform my work duties.
 | 1 | 2 | 3 | 4 |
| 1. My coworkers and I worked well together.
 | 1 | 2 | 3 | 4 |
| 1. I felt I could easily communicate with members from all levels of this organization.
 | 1 | 2 | 3 | 4 |
| 1. Appropriate information to perform my work duties was shared with me in timely manner.
 | 1 | 2 | 3 | 4 |
| 1. How would you rate this hospital as a place to work on a scale 1 (the worst) to 10 (the best)?
 | □　□　□　□　□　□　□　□　□　□１　２　３　４　５　６　７　８　９　10　Worst・・・・・・・・・・・・・・・・・・・・・・・・・・・Best |

\*\* These questions are for **ONLY** those who lives in the hospital compound.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Agree | Strongly Agree |
| 1. Hygiene of my accommodation, toilet, and kitchen was always kept well.
 | 1 | 2 | 3 | 4 |
| 1. I could keep private area in the hospital compound.
 | 1 | 2 | 3 | 4 |
| 1. I was satisfied with the quality and quantity of foods provided in the hospital.
 | 1 | 2 | 3 | 4 |
| 1. I always felt safe in the hospital.
 | 1 | 2 | 3 | 4 |

Please give us your comments and suggestions for JRCS Emergency Hospital.

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**Thank you for your cooperation.**