

PECD 2013 Midline Survey Closed CBCC Form

CBCC IDENTIFICATION

1. Name of CBCC: _____	2. CBCC ID Code [][]/[][]
3. Name of CBO/NGO/FBO/Community in charge: _____	
4. Date of visit (dd/mm/yy) [][]/[][]/[][]	

Name and contact details of the person currently being interviewed (Caregiver or CBCC Committee member)

5. Name: _____			
6. Land or mobile phone number (if any): _____			
7. Position at the CBCC [][]	1= CBCC Chair 2= CBCC Secretary	3= CBCC Treasurer 4= other committee member	5= caregiver 6= other, specify:
8. When was the CBCC last open? (mm/yy) [][]/[][]			
9. Is the CBCC closed permanently or temporarily? [][] 1= permanent >>Q10 2= temporary			
10. When is the CBCC expected to reopen? (mm/yy) [][]/[][]			
11. Why did the CBCC close? <i>(Do NOT read list. Circle all that apply)</i>			
	a) Poor quality of facility 1	n) Play materials 1	
	b) Caregiver turnover 1	o) Dishes/utensils 1	
	c) Insufficient space for children 1	p) Training for caregivers 1	
	d) Insufficient secure/locked storage 1	q) Incentives for caregivers 1	
	Lack of...	r) (Natural) light 1	
	e) Funding 1	s) Outdoor play equipment 1	
	f) Toilets 1	t) Supplies for CBCC garden 1	
	g) Caregivers 1	u) Community involvement 1	
	h) Medicines 1	v) Materials for napping 1	
	i) Food 1	w) Washing materials 1	
	j) [caregiver?] Inspiration 1	x) Firewood 1	
	k) Water 1	y) Training for CBCC Committee 1	
	L) Building 1	z) Transportation/bicycle 1	
	m) Teaching materials 1	aa) Other (specify): 1	

Name and contact details of the person currently being interviewed (Caregiver or CBCC Committee member)

12. Name: _____			
13. Land or mobile phone number (if any): _____			
14. Relationship to CBCC [][]	1= Parent 2= Community member	3= Village Head 4= Other, specify:	
15. When was the CBCC last open? (mm/yy) [][]/[][]			
16. Is the CBCC closed permanently or temporarily? [][] 1= permanent >>Q18 2= temporary			
17. When is the CBCC expected to reopen? (mm/yy) [][]/[][]			
18. Why did the CBCC close? <i>(Do NOT read list. Circle all that apply)</i>			
	a) Poor quality of facility 1	n) Play materials 1	
	b) Caregiver turnover 1	o) Dishes/utensils 1	
	c) Insufficient space for children 1	p) Training for caregivers 1	
	d) Insufficient secure/locked storage 1	q) Incentives for caregivers 1	
	Lack of...	r) (Natural) light 1	
	e) Funding 1	s) Outdoor play equipment 1	
	f) Toilets 1	t) Supplies for CBCC garden 1	
	g) Caregivers 1	u) Community involvement 1	
	h) Medicines 1	v) Materials for napping 1	
	i) Food 1	w) Washing materials 1	
	j) [caregiver?] Inspiration 1	x) Firewood 1	
	k) Water 1	y) Training for CBCC Committee 1	
	L) Building 1	z) Transportation/bicycle 1	
	m) Teaching materials 1	aa) Other (specify): 1	

To be answered by the Supervisor

19. M/G interviews and child tests: [][]	1= M/G and Child Assessments complete 2= M/G and Child Assessments incomplete, revisit scheduled		
20. Initials	a. Interviewer [][]	b. Supervisor [][]	c. Logged by [][]
21. ID Code	[][]	[][]	[][]
22. Date (dd/mm/yy):	[][]/[][]/[][]	[][]/[][]/[][]	[][]/[][]/[][]