

3. Baseline Service Provider Survey

Time: 30 minutes

The data collected here will be handled as confidentially as possible. If the results of this study are published or presented, individual names and other personally identifiable information will not be used. Information that could be used to identify villages or community clinic will not be presented.

A. Identification

A001	Service Provider Name	
A002	Gender: 1=Male; 2=Female	
A003	Religion: 1=Islam; 2=Hindu; 3=Christian; 4=Buddhist; 5=Other (specify)	
A004	Age	
A005	Service Provider Position 1=FWA; 2=HA; 3=CHCP	
A006	Service Provider ID number	
A007	Service Provider Mobile/Phone We would like to contact you again to learn more about your work, could you give us your mobile?	
A008	Place of current residence	
A009	Community Clinic where the Service Provider works?	
A010	Name of Union	
A011	Name of Upazila	

B. Education, Experience and Training

B001. Highest class passed (Use code): _____

Highest class passed	0=No class, 1=Class 1, 2=Class 2, 3=Class 3, 4=Class 4, 5=Class 5, 6=Class 6, 7=Class 7, 8=Class 8, 9=Class 9, 10=SSC pass, 11=Class 11, 12=HSC pass, 14=Graduate, 16=Masters, 66=Pre primary school
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2. Degree and Name of the Degree

		Code	Answer
200a	Do you have any professional degree/diploma?	1=Yes 2=No	
200b	If yes, name the professional degree/diploma?	Name	

3. Working experience

		Year
300a	Total years of working experience as FWA/HA/CHCP?	
300b	Total years of working experience as FWA/HA/CHCP in this Union?	

4. What are your three primary tasks?

	Task	Check box
400a	Provide family planning services	
400b	Supervise the work of other service providers (FWA, HA)	
400c	Look after general well-being of pregnant mothers and children under 3	
400d	Provide health services to children under 5	
400e	Look after malnourished children	
400f	Take care of immunizations	
400g	Take care of diarrhea and fever problems	
400h	Other specify:	
400i	Other specify:	
400j	Other specify:	

5. Have you ever received training on ...:

	Training type	1=Yes 2=No
500a	Early Childhood Development?	
500b	Child health?	
500c	Child feeding and nutrition?	
500d	Other child-related training? (specify)	
500e	Other child-related training? (specify)	

C. Workload

1. Now we would like to know more about your workload and the number of Households you are assigned to visit.

I am not assigned to visit households → skip question E.

C100a	How many households are you assigned to visit each month?	No. of HH	
C100b	How many households are you supposed to visit each day?	No. of HH	
C100c	How many days per week are you supposed to work?	Days	
C100d	How many hours per day are you supposed to work?	Hours	

2. We understand that due to several reasons you may end up visiting less households or working less or more days/hours per week/day if so, please answer:

C200a	Approximately how many households were you able to visit last	No. of HH	
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	month?		
C200b	Approximately, how many households were you able to visit in your last day of work?	No. of HH	
C200c	How many days per week do you normally work?	Days	
C200d	How many hours per day do you normally work?	Hours	

3. What are the **main three reasons** that explain why you usually cannot visit all assigned households?

	Reasons	Check box
C300a	I have more households than I can handle	
C300b	Distance among households is too long	
C300c	Households do not cooperate because (specify)	
C300d	Reschedule visit to particular household because (specify)	
C300e	I have other responsibilities in satellite clinics	
C300f	I have other responsibilities in Family Welfare Centers (FWC)	
C300g	I have other responsibilities in Expand Promotion of Immunizations (EPI) Center	
C300h	Other specify:	
C300i	Other specify:	
C300j	Other specify:	

D. Time Spent With Each Household

D001. **Remember your last working day when you had to visit households;** on average how many minutes did you spend with each household?

Average number of minutes: ____

D002. Do you spend more time with certain types of households; if so with which type of households are you likely to spend more time? Mark the three main types of households and the average number of minutes.

	Descriptors of the household	Check Box	Average Number of minutes
		Q1	Q2
D200a	Household with a sick child		
D200b	Household with multiple children		
D200c	Household with depressed mother		
D200d	Poorer households		
D200e	Household with pregnant women		
D200f	More friendly households		
D200g	Other specify:		
D200h	Other specify:		
D200i	Other specify:		

E. Perceptions about the importance of Early Childhood Development (ECD)

For mothers with children under 3 years old, how important do you think is to?

		1=Unimportant 2=Important 3=Not Sure
E001	Teach mothers how to talk with their children and how to respond to children's attempt to talk?	
E002	Teach mothers how to care for their children's health?	
E003	Teach mothers what food they should feed their children?	
E004	Teach mothers how to respond to children's cues?	
E005	Teach mothers how to play games with their children?	

F. Understanding how community clinics operate

Who supervises your job?

		Mark all that apply
F001	Community Health Care Provider (CHCP)	
F002	Family Planning Inspector (FPI)	
F003	Health Inspector (HI)	
F004	Family Welfare Visitor (FWV)	
F005	Sub Assistant Community Medical Officer (SACMO)	
F006	Assistant Health Inspector (AHI)	
F007	Other specify:	

G. Job Satisfaction

	Question	Code	Answer
G001	How satisfied are you with the work you are doing?	1 2 3 4 5 1=Very dissatisfied 5=Very satisfied	
G002	What value do you think the community puts on your service?	1 2 3 4 5 1=None 5=Very great	
G003	In your daily work, how free are you to make decisions and to act on them?	1 2 3 4 5 1=Not at all 2=Very free	
G004	How much recognition does your supervisor show for a job well done?	1 2 3 4 5 1=None 5=Great deal	

V001	Date of interview	Day:	Month:	Year:
V002	Name of interviewer		Code	