

<b>Note:</b> Please approach the caregivers who are just received services from the PHC. Introduce yourself and ask if they have 5 minutes to answer your questions. Explain the questions about her/ his point of view of this ECD corner , and the services provided. If caregiver said yes, start, if caregiver said no go to another one. Please attempt to interview at least 5 caregivers at different times. Please notify the caregiver that providing the name is optional, and this will remain confidential, the names will not be shown anywhere. Make sure you are approaching the caregivers who have children from 0 to 8, and ask whether they received ECD services from the PHC. The services can be (vaccination, scheduled checkups or any other checkups related to children, etc.)	
Facilitator name:	
Governorate:	
PHC name:	
Location (GPS coordinates)	
Caregiver name:	
Child age:	
Gender of the caregiver:	
Date:	
<b>Q1. Did you visit The ECD corner of the PHC?</b>	No score
Yes	
No ( <i>Skip the question related to ECD corner for tool developer</i> )	
<b>Q2. Did you talk to the health providers about the child/children with you now or any of your children who are under 8 years old?</b>	No score
Yes	
No ( <i>Skip the question related to the service provider for the tool developer</i> )	
<b>Questions about ECD corner</b>	
<b>Q3. What do you think of the ECD corner that is established in this PHC?</b>	If score $\geq 2$ , acceptable Max score = 4
<b>Codes &amp;Answers</b>	
1 <input type="radio"/> Very good	4
2 <input type="radio"/> Good	3
3 <input type="radio"/> I don't know	2
4 <input type="radio"/> Bad	0
5 <input type="radio"/> Very bad	0
6 <input type="radio"/> Refused to answer	2
<b>Q3a. Why do you think the ECD corner is [insert answer from Q1 – Very good, good, bad, very bad]</b>	

<b>Codes &amp;Answers</b>		
1	<input type="radio"/> Why do you think the ECD corner is very good, or good? <i>Fill in text response</i>	
2	<input type="radio"/> Why do you think the ECD corner is bad or very bad? <i>Fill in text response</i>	
<b>Q4. Do you feel that you and your child are welcomed to the ECD corner?</b>		<b>If score = 1, acceptable</b> Max score = 1
<b>Codes &amp;Answers</b>		
1	<input type="radio"/> Agree	1
2	<input type="radio"/> Neither agree nor disagree	0
3	<input type="radio"/> Disagree	0
<b>Q4 a. What made you feel that you and your child (are not) welcomed to the ECD corner? Fill in short text</b>		
<b>Q4 b. What made you feel that you and your child (are) welcomed to the ECD corner? Fill in short text</b>		
<b>Q5. How satisfied are you with the materials available at the ECD corner?</b>		<b>If score &gt;= 2, acceptable</b> Max score = 4
<b>Codes &amp;Answers</b>		
1	<input type="radio"/> Very satisfied	4
2	<input type="radio"/> Satisfied	3
3	<input type="radio"/> Neither satisfied nor dissatisfied	2
4	<input type="radio"/> Dissatisfied	0
5	<input type="radio"/> Very dissatisfied	0
6	<input type="radio"/> Skip Logic (Dissatisfied+ Very dissatisfied) Short text explain -----	
<b>Q6 what materials, or activities your child used? (Multiple choice)</b>		<b>If score &gt;= 3, acceptable</b> Max score = 9
1	<input type="radio"/> Slide	1
2	<input type="radio"/> Climbing wall	2
3	<input type="radio"/> Blocks	1

5	<input type="radio"/> Toys	1
6	<input type="radio"/> Stories	2
7	<input type="radio"/> Baby rocker chair	1
8	<input type="radio"/> Table and Chairs	1
9	<input type="radio"/> None	0
<input type="radio"/> <b>Q7 what materials, or activities you used with your child?</b> (Multiple choice)		<b>If score <math>\geq 3</math>, acceptable</b> Max score = 10
1	<input type="radio"/> Slide	1
2	<input type="radio"/> Climbing wall	2
3	<input type="radio"/> Blocks	1
4	<input type="radio"/> Toys	1
5	<input type="radio"/> Stories	2
6	<input type="radio"/> Wall Printings	2
7	<input type="radio"/> Baby Rocker chair	1
9	<input type="radio"/> None	0
<b>ECD Services provided by the health workers</b>		
<b>Q8. Do you think the information you received from the Nurses, or doctors are useful to help you in promoting ECD?</b>		<b>If score <math>\geq 1</math>, acceptable</b> Max score = 3
<b>Codes &amp;Answers</b>		
1	<input type="radio"/> Yes	3
2	<input type="radio"/> Somehow, but there should be more information.	2
3	<input type="radio"/> I don't know	1
4	<input type="radio"/> No	0
<b>Q8a. If (2) How you like to receive more information?</b>		<b>No score</b>
<b>Codes &amp;Answers</b>		

	<ul style="list-style-type: none"> <li>• From health provider in my next visit to a health center</li> <li>• In ECD corner</li> <li>• Social Media</li> <li>• Courses</li> <li>• WhatsApp messages</li> <li>• Campaigns</li> <li>• Flyers</li> <li>• Others</li> </ul> <p>If other (short text)</p>	
<b>Q9. Did you get any information about your child's development or about ECD in general during your visit?</b>		No Score
<b>Codes &amp;Answers</b>		
1	<input type="radio"/> Yes	
2	<input type="radio"/> I don't know	
3	<input type="radio"/> No	
<b>Q9a. If yes, what information did you receive?</b> <i>(Multiple choice)</i>		<b>If score &gt;= 1, acceptable</b> Max score = 8
<b>Codes &amp;Answers</b>		
1	Behaviors	1
2	Nutrition	1
3	Health and Mental health	1
4	Safety and Security	1
5	Child body privacy	1
6	Disability	1
7	Early learning	1
8	Other, please fill in text for "other"	1
<b>Q10. Do you have other questions about your child's development or ECD in general that were not answered in this visit?</b>		<b>Acceptable</b> Max score = 1
<b>Codes &amp;Answers</b>		
1	<input type="radio"/> Yes	1

3	<input type="radio"/> I don't know	1
4	<input type="radio"/> No	1
<b>Q10a. If yes, what questions do you have?</b>		
<b>Codes &amp; Answers</b>		
1	<input type="radio"/> Fill in text	

**Indicator:** % of caregivers satisfied with ECD services in the PHCs.

Part 1: **ECD corner** Q3 till Q7

Total score = 28

If total score  $\geq 25$ , very good

If total score  $\geq 20$ , good

If total score  $\geq 15$ , acceptable

If total score  $< 15$ , not acceptable

Part 2: **Service provider** Q8 till Q9

Total score = 11

If total score 10-11, very good

If total score 07-9, good

If total score 06-07 acceptable

If total score 05-0, not acceptable

Both parts: **All** Q3 till Q10

Total score = 39

If total score  $\geq 38$ , very good

If total score  $\geq 30$ , good

If total score  $\geq 23$ , acceptable

If total score  $< 23$ , not acceptable