

PECD 2014 Endline 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 (3rd and final) (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? (Do NOT read list. Circle all that apply)	
a) Poor quality of facility 1	i) Food 1 s) Outdoor play equipment 1
b) Caregiver turnover 1	j) CG commitment/motivation 1 t) Supplies for CBCC garden 1
c) Insufficient space for children 1	k) Water 1 u) Community involvement 1
d) Insufficient secure/locked storage	L) Building 1 v) Materials for napping 1
Lack of... 1	m) Teaching materials 1 w) Washing materials 1
e) Funding 1	n) Play materials 1 x) Firewood 1
f) Toilets 1	o) Dishes/utensils 1 y) Training for CBCC Committee 1
g) Caregivers 1	p) Training for caregivers 1 z) Transportation/bicycle 1
h) Medicines 1	q) Incentives for caregivers 1 aa) Other (specify): 1
	r) (Natural) light 1

Name and contact details of the person currently being interviewed (NOT CG or 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? (Do NOT read list. Circle all that apply)	
a) Poor quality of facility 1	i) Food 1 s) Outdoor play equipment 1
b) Caregiver turnover 1	j) CG commitment/motivation 1 t) Supplies for CBCC garden 1
c) Insufficient space for children 1	k) Water 1 u) Community involvement 1
d) Insufficient secure/locked storage	L) Building 1 v) Materials for napping 1
Lack of... 1	m) Teaching materials 1 w) Washing materials 1
e) Funding 1	n) Play materials 1 x) Firewood 1
f) Toilets 1	o) Dishes/utensils 1 y) Training for CBCC Committee 1
g) Caregivers 1	p) Training for caregivers 1 z) Transportation/bicycle 1
h) Medicines 1	q) Incentives for caregivers 1 aa) Other (specify): 1
	r) (Natural) light 1

To be answered by the Supervisor

	a. Interviewer	b. Supervisor	c. Logged by	d. Entered by
20. Initials	[][]	[][]	[][]	[][]
21. ID Code	[][][]	[][][]	[][][]	[][][]
22. Date (dd/mm/yy):	[][][]/[][][]/[][][]	[][][]/[][][]/[][][]	[][][]/[][][]/[][][]	[][][]/[][][]/[][][]