**Parent/Caregiver Survey**

Help Me Grow and WIC are working together on a new project focused on helping young children to grow and thrive. Each time you come to a WIC appointment, the project gives you a Developmental Milestone Checklist that matches your child’s age. To help us learn how we might improve the project, we would like to ask you to complete this brief survey. No names will be attached to the survey.

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| 1. Is today the first time you filled out a Developmental Milestone Checklist?  * Yes. You do not need to continue with this survey. Thank you for your time. * No. Please continue, beginning with question 2. |

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| 1. Please tell us: 2. My age is… ❑ 18 or under ❑ 19-29 ❑ 30 -39 ❑ 40 or over 3. I have… ❑ 1 child ❑ 2-3 children ❑ 4 or more children |

For questions 3 through 10, check “Yes,” “No” or “Not Sure”

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|  |  | **Yes** | **No** | **Not sure** | |
| 1. Is the Checklist(s) helpful to you? |  |  |  |  | |
| 1. After you completed the Checklist, did a WIC staff person talk about it with you? |  |  |  |  | |
| 1. Have you heard of the term, "developmental milestones,” before? |  |  |  |  | |
| 1. Have you talked to your child's doctor about your child's development? |  |  |  |  | |
| 1. Have you heard of the services provided by Help Me Grow? |  |  |  |  | |
| 1. Have you been referred to Help Me Grow by a WIC staff person? |  |  |  |  | |
| 1. Have you called Help Me Grow on your own? |  |  |  |  | |
| 1. Have you visited the website, Alamedakids.org? |  |  |  |  | |
|  |  |  |  | **Please turn over →** | |
| 1. Who can you go to if you have questions about your child's development (check all that apply)?   ❑ Friends, family or co-workers  ❑ Doctor or other health care provider  ❑ Help Me Grow Phone Line  ❑ Child care provider or teacher  ❑ Religious counselor or leader  ❑ Home visitor or case manager  ❑ Website(s), internet  ❑ Books or other printed resource  ❑ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | |

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| 1. What did you do with the Checklist(s) you received previously (check all that apply)?   ❑ I don’t remember  ❑ I didn’t keep it (e.g., left it at the WIC office, threw it away)  ❑ Shared it with my child's doctor  ❑ Shared it with friends or family  ❑ Put it someplace easy to find (e.g., refrigerator, a folder or book)  ❑ Other: ­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| 1. What did you learn, if anything, from the Checklist(s)? |

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| 1. Are you doing anything differently because of what you learned? If yes, please describe. |

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| 1. Do you have any suggestions for how to improve the Checklist project? For example, how could the Checklists be improved? How could WIC staff better support parents when discussing the Checklist responses? |

**Thank you**