

Early Intervention Support Service Parent/Carer Questionnaire

In completing this questionnaire, I give consent for the information to be used for monitoring and evaluating the Early Intervention Support Service. I understand that this information will be anonymous and I will not be identified in any evaluation.

ID Number				
1. When you started, did the worker tell you enough about the service?		Yes		
		No		
2. Did you find the staff helpful?		Yes		
		No		
3. Did you find the staff reliable?		Yes		
		No		
4. Which parts of the service were helpful or unhelpful:				
<ul style="list-style-type: none"> Individual sessions with you 		Helpful		
		Unhelpful		
		N/A		
<ul style="list-style-type: none"> Having a named worker 		Helpful		
		Unhelpful		
		N/A		
<ul style="list-style-type: none"> Individual sessions with your child 		Helpful		
		Unhelpful		
		N/A		
<ul style="list-style-type: none"> Family Sessions 		Helpful		
		Unhelpful		
		N/A		
<ul style="list-style-type: none"> Practical Support 		Helpful		
		Unhelpful		
		N/A		
5. What did you think about the time available for the sessions?		Just right		
		Too long		
		Too Short		
6. Overall how satisfied were you with the service?		Very Satisfied		
		Satisfied		
		Not Satisfied		
7. What score would you give the service out of 5?				
Not Good	Fair	Good	Very Good	Excellent
1	2	3	4	5
8. Have you any comments about the service? (Please write these below)				