



**MIDLAND WOMEN'S HEALTH CARE PLACE
CRECHE EVALUATION**

Date:

Location of Crèche: Ellenbrook Midland

*Please rate the overall performance of your experience at Midland Women's Health Care Place. The information you provide will be kept private and confidential. **Thank you for your assistance to improve the quality of our services.***

For each of the questions below, please indicate 1 to 5 with 1 representing a low level and 5 representing a high level. If not applicable, please tick N/A.

CRECHE STAFF

Crèche staff are not friendly and/or professional 1-----2-----3-----4-----5 Crèche staff are friendly and/or professional
 N/A

CRECHE & YOUR CHILD

I felt the Crèche did not cater to my child's needs 1-----2-----3-----4-----5 I felt the Crèche catered to my child's needs
 N/A

CRECHE FACILITY

Do you find the Crèche facility provided a safe, caring and comfortable environment for your child?
I did not feel the Crèche facility was adequate/satisfactory 1-----2-----3-----4-----5 I felt the Crèche facility was adequate/satisfactory
 N/A

OVERALL SATISFACTION

How would you rate your overall satisfaction with the services you received at MWHCP?
Not at all satisfied 1-----2-----3-----4-----5 Very satisfied
 N/A

SERVICE USED

What service did you use while your children attended the Crèche?
 Embrace Therapy Group Embrace Support Group Counselling Pap Smear Clinic
 Other (please specify) _____

FURTHER COMMENTS

EMAILING LIST

Would you like to receive updates from Midland Women's Health Care Place?
 YES, Email: _____ NO Already receiving

MEMBERSHIP

Would you like to receive more information about becoming a member?
Receive updates via post, quarterly newsletters, program timetables, use of our resource library and internet, invitations to special events and more!
 YES, Email: _____ NO Already a member