## PHCU Cover Sheet

PHCU Code: Region/Woreda/Health Centre:

Name of Supervisor Name of enumerators

**Health Facilities:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Facility Name | Health Facility Code | GPS Coordinates NORTH | GPS Coordinates EAST | Coverage Data Collected (tick if yes) |
| 1 |  |  |  |  |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**Interviews conducted:**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Health Facility code | IntervieweeName | IntervieweeCode | Enumerator Initials | Date of data collection | Tick if recollected  |
| 1 |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |
| 11 |  |  |  |  |  |  |
| 12 |  |  |  |  |  |  |
| 13 |  |  |  |  |  |  |
| 14 |  |  |  |  |  |  |
| 15 |  |  |  |  |  |  |
| 16 |  |  |  |  |  |  |
| 17 |  |  |  |  |  |  |
| 18 |  |  |  |  |  |  |
| 19 |  |  |  |  |  |  |
| 20 |  |  |  |  |  |  |
| 21 |  |  |  |  |  |  |
| 22 |  |  |  |  |  |  |
| 23 |  |  |  |  |  |  |
| 24 |  |  |  |  |  |  |
| 25 |  |  |  |  |  |  |
| 26 |  |  |  |  |  |  |
| 27 |  |  |  |  |  |  |
| 28 |  |  |  |  |  |  |
| 29 |  |  |  |  |  |  |
| 30 |  |  |  |  |  |  |

**Interviews not conducted of those on Roster and why:**

|  |  |  |
| --- | --- | --- |
|  | Individual Code  | Reason not interviewed; document attempts to contact |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |

**Name of those not on Roster (former employees, on study leave longer than 4 months)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Position** | **Facility** | **Date of Departure** | **Code** **(start with 50)** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Notes on data collection:**

|  |
| --- |
|  |

**Checklist**

|  |  |
| --- | --- |
| Item in Folder | Tick if included |
| PHCU Cover sheet |  |
| Rosters (3) |  |
| Informed Consent sheets |  |
| Completed Network data tools |  |
| Completed HP Coverage data |  |