

SCORE SHEET- Expanded Version

Infant/Toddler Environment Rating Scale–Revised

Thelma Harms, Debby Cryer and Richard M. Clifford

Observer: _____ Observer Code: ____ ____
 Center/School: _____ Center Code: ____ ____
 Room: _____ Room Code: ____ ____
 Teacher(s): _____ Teacher Code: ____ ____

Date of Observation: ____ / ____ / ____
m m d d y y

Number of children with identified disabilities: ____

Check type(s) of disability: physical/sensory cognitive/language
 social/emotional other: _____

Birthdates of children enrolled: youngest ____ / ____ / ____
m m d d y y
 oldest ____ / ____ / ____
m m d d y y

Number of staff present: ____

Number of children enrolled in class: ____

Highest number center allows in class at one time: ____

Highest number of children present during observation: ____

Time observation began: ____ : ____ AM PM

Time observation ended: ____ : ____ AM PM

Time interview began: ____ : ____ AM PM

Time interview ended: ____ : ____ AM PM

SPACE AND FURNISHINGS

1. Indoor space		1	2	3	4	5	6	7
Y N	Y N NA							
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>					
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>					
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>					
1.4 <input type="checkbox"/> <input type="checkbox"/>	3.4 <input type="checkbox"/> <input type="checkbox"/>							
	3.5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>							

Notes:
 3.5/5.3 accessibility:

2. Furniture for routine care and play		1	2	3	4	5	6	7
Y N	Y N	Y N NA	Y N NA					
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>					
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>					
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>					
	3.4 <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/>	7.4 <input type="checkbox"/> <input type="checkbox"/>					
		5.5 <input type="checkbox"/> <input type="checkbox"/>						

5.2, 7.2 Child-sized table(s) and chairs? _____

3. Provision for relaxation & comfort	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">1</td><td style="padding: 2px;">2</td><td style="padding: 2px;">3</td><td style="padding: 2px;">4</td><td style="padding: 2px;">5</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td></tr> </table>	1	2	3	4	5	6	7	Notes: 3.1 furnishings 5.1 cozy area? {y / n} 3.2, 5.3 # of soft toys:													
1	2	3	4	5	6	7																
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N NA</td> </tr> <tr> <td>1.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.1 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td>3.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>5.3 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.3 <input type="checkbox"/> <input type="checkbox"/></td> </tr> </table>	Y N	Y N	Y N	Y N NA	1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>		3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>						
Y N	Y N	Y N	Y N NA																			
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	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																			
		5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>																			
4. Room arrangement	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">1</td><td style="padding: 2px;">2</td><td style="padding: 2px;">3</td><td style="padding: 2px;">4</td><td style="padding: 2px;">5</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td></tr> </table>	1	2	3	4	5	6	7	1.2, 3.2, 5.2 problems with visual supervision													
1	2	3	4	5	6	7																
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N NA</td> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N</td> </tr> <tr> <td>1.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.1 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>1.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.2 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td>3.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>5.3 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.3 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>5.4 <input type="checkbox"/> <input type="checkbox"/></td> <td></td> </tr> </table>	Y N	Y N NA	Y N	Y N	1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>	1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>		3.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>			5.4 <input type="checkbox"/> <input type="checkbox"/>			
Y N	Y N NA	Y N	Y N																			
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		5.4 <input type="checkbox"/> <input type="checkbox"/>																				
5. Display for children	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">1</td><td style="padding: 2px;">2</td><td style="padding: 2px;">3</td><td style="padding: 2px;">4</td><td style="padding: 2px;">5</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td></tr> </table>	1	2	3	4	5	6	7	5.4 Staff talk about display? (observe 1 example)													
1	2	3	4	5	6	7																
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N NA</td> </tr> <tr> <td>1.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.1 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>1.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.2 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>5.3 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.3 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>5.4 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> </tr> </table>	Y N	Y N	Y N	Y N NA	1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>	1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>			5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>			5.4 <input type="checkbox"/> <input type="checkbox"/>	7.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		
Y N	Y N	Y N	Y N NA																			
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		5.4 <input type="checkbox"/> <input type="checkbox"/>	7.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																			
A. Subscale (Items 1 - 5) Score ___ ___ B. Number of items scored ___ ___ SPACE AND FURNISHINGS Average Score (A ÷ B) ___ . ___ ___																						

PERSONAL CARE ROUTINES																																																
6. Greeting/departing	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="padding: 2px;">1</td><td style="padding: 2px;">2</td><td style="padding: 2px;">3</td><td style="padding: 2px;">4</td><td style="padding: 2px;">5</td><td style="padding: 2px;">6</td><td style="padding: 2px;">7</td></tr> </table>	1	2	3	4	5	6	7	1.1, 3.1, 3.4, 5.1, 7.2 Greetings observed (√=yes, χ=no, w=warm)																																							
1	2	3	4	5	6	7																																										
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N</td> <td style="width: 25%;">Y N NA</td> <td style="width: 25%;">Y N NA</td> </tr> <tr> <td>1.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.1 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.1 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>1.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.2 <input type="checkbox"/> <input type="checkbox"/></td> <td>7.2 <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td>1.3 <input type="checkbox"/> <input type="checkbox"/></td> <td>3.3 <input type="checkbox"/> <input type="checkbox"/></td> <td>5.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> <td>7.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></td> </tr> <tr> <td></td> <td>3.4 <input type="checkbox"/> <input type="checkbox"/></td> <td></td> <td></td> </tr> </table>	Y N	Y N	Y N NA	Y N NA	1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>	1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>	1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>		3.4 <input type="checkbox"/> <input type="checkbox"/>			<table style="width: 100%; border: none;"> <thead> <tr> <th style="text-align: left; border-bottom: 1px solid black;">Child</th> <th style="text-align: left; border-bottom: 1px solid black;">Parent</th> <th style="text-align: left; border-bottom: 1px solid black;">Info. shared</th> </tr> </thead> <tbody> <tr><td>1. _____</td><td>_____</td><td>_____</td></tr> <tr><td>2. _____</td><td>_____</td><td>_____</td></tr> <tr><td>3. _____</td><td>_____</td><td>_____</td></tr> <tr><td>4. _____</td><td>_____</td><td>_____</td></tr> <tr><td>5. _____</td><td>_____</td><td>_____</td></tr> <tr><td>6. _____</td><td>_____</td><td>_____</td></tr> <tr><td>7. _____</td><td>_____</td><td>_____</td></tr> <tr><td>8. _____</td><td>_____</td><td>_____</td></tr> </tbody> </table>	Child	Parent	Info. shared	1. _____	_____	_____	2. _____	_____	_____	3. _____	_____	_____	4. _____	_____	_____	5. _____	_____	_____	6. _____	_____	_____	7. _____	_____	_____	8. _____	_____	_____
Y N	Y N	Y N NA	Y N NA																																													
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>																																													
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>																																													
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>																																													
	3.4 <input type="checkbox"/> <input type="checkbox"/>																																															
Child	Parent	Info. shared																																														
1. _____	_____	_____																																														
2. _____	_____	_____																																														
3. _____	_____	_____																																														
4. _____	_____	_____																																														
5. _____	_____	_____																																														
6. _____	_____	_____																																														
7. _____	_____	_____																																														
8. _____	_____	_____																																														

7. Meals/snacks

1	2	3	4	5	6	7
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Notes:

1.3, 3.3, 5.3 Handwashing: (√=yes, χ=no)

1.3, 3.3, 5.3 Same sink used? {y / n}

Y N NA	Y N NA	Y N NA	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	
1.4 <input type="checkbox"/> <input type="checkbox"/>	3.4 <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/>	
1.5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	3.5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5.5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

	Children		Adults	Sink sanitized? {y / n}
Before eating		Before food prep, feeding		
After eating		After feeding		Tables/highchair tray washed, sanitized? _____

8. Nap

1	2	3	4	5	6	7	NA
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Y N	Y N	Y N NA	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	
	3.4 <input type="checkbox"/> <input type="checkbox"/>		

1.1 All cots/ mats, cribs > 36" apart or solid barrier? {y / n}

Other issues:

9. Diapering/toileting

1	2	3	4	5	6	7
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Y N	Y N	Y N	Y N NA
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
1.4 <input type="checkbox"/> <input type="checkbox"/>	3.4 <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/>	

1.1, 3.1 Diapering procedure (every adult observed): (√=yes, χ=no)

Other issues:

Prep														
Proper disposal														
Wipe child's hands														
Wipe adult's hands														
Sanitize diap. area														
Same sink sanitized														

1.1, 3.1 Same sink sanitized? (y/n)

1.3, 3.3 Handwashing

Adult														
Child														

10. Health practices

1	2	3	4	5	6	7
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1.1, 3.2, 5.2 Handwashing observations: (√=yes, χ=no)

Y N	Y N NA	Y N NA	Y N NA
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
	3.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

	Child	Adult
Upon arrival in class or re-entry from outside		
Before water; after sand, water, messy play		
After dealing w/ bodily fluids		
After touching pets or contaminated objects		

11. Safety practices

1	2	3	4	5	6	7
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1.1, 1.2, 3.1, 5.1 Safety hazards:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>		

	Major	Minor
Indoor:		
Outdoor:		

A. Subscale (Items 6 - 11) Score __ __

B. Number of items scored __ __

PERSONAL CARE ROUTINES Average Score (A ÷ B) __. __ __

LISTENING AND TALKING

12. Helping children understand language

1 2 3 4 5 6 7

Y	N	Y	N	Y	N	Y	N
1.1	<input type="checkbox"/> <input type="checkbox"/>	3.1	<input type="checkbox"/> <input type="checkbox"/>	5.1	<input type="checkbox"/> <input type="checkbox"/>	7.1	<input type="checkbox"/> <input type="checkbox"/>
1.2	<input type="checkbox"/> <input type="checkbox"/>	3.2	<input type="checkbox"/> <input type="checkbox"/>	5.2	<input type="checkbox"/> <input type="checkbox"/>	7.2	<input type="checkbox"/> <input type="checkbox"/>
1.3	<input type="checkbox"/> <input type="checkbox"/>	3.3	<input type="checkbox"/> <input type="checkbox"/>	5.3	<input type="checkbox"/> <input type="checkbox"/>	7.3	<input type="checkbox"/> <input type="checkbox"/>
		3.4	<input type="checkbox"/> <input type="checkbox"/>	5.4	<input type="checkbox"/> <input type="checkbox"/>		

Notes:

~~5.4, 7.1 Examples of descriptive words used:~~

~~7.2 Examples of observed verbal play:~~

13. Helping children use language

1 2 3 4 5 6 7

Y	N	Y	N	Y	N	Y	N	NA
1.1	<input type="checkbox"/> <input type="checkbox"/>	3.1	<input type="checkbox"/> <input type="checkbox"/>	5.1	<input type="checkbox"/> <input type="checkbox"/>	7.1	<input type="checkbox"/> <input type="checkbox"/>	
1.2	<input type="checkbox"/> <input type="checkbox"/>	3.2	<input type="checkbox"/> <input type="checkbox"/>	5.2	<input type="checkbox"/> <input type="checkbox"/>	7.2	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
				5.3	<input type="checkbox"/> <input type="checkbox"/>	7.3	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
						7.4	<input type="checkbox"/> <input type="checkbox"/>	

3.1 During routines:
During play:

7.2 Staff add words/ideas to what children say (observe 2 examples):

~~7.3 Staff ask simple questions (observe 2 examples):~~

14. Using books

1 2 3 4 5 6 7

Y	N	Y	N	Y	N	Y	N	NA
1.1	<input type="checkbox"/> <input type="checkbox"/>	3.1	<input type="checkbox"/> <input type="checkbox"/>	5.1	<input type="checkbox"/> <input type="checkbox"/>	7.1	<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>
1.2	<input type="checkbox"/> <input type="checkbox"/>	3.2	<input type="checkbox"/> <input type="checkbox"/>	5.2	<input type="checkbox"/> <input type="checkbox"/>	7.2	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	
1.3	<input type="checkbox"/> <input type="checkbox"/>	3.3	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	5.3	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	7.3	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	
		3.4	<input type="checkbox"/> <input type="checkbox"/>	5.4	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>			

1.2, 3.2 # of books in disrepair: _____

5.1 Any inappropriate books: {y / n}
(violent, frightening)

5.3 Staff read to individuals/small groups: {y / n}
(observed at least 1 example)

5.2 Wide selection of books

Races: _____
Ages: _____
Abilities: _____
Animals: _____
Familiar routines: _____
Familiar objects: _____

Nature science books for Item 22:

A. Subscale (Items 12 - 14) Score ___

B. Number of items scored ___

LISTENING AND TALKING Average Score (A ÷ B) ___.

ACTIVITIES

15. Fine motor

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Notes:

1.1, 3.1, 5.1

Materials for infants:

Materials for toddlers:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input checked="" type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>		

16. Active physical play

1	2	3	4	5	6	7
---	---	---	---	---	---	---

1.1, 1.2, 3.3, 5.5

Any equipment/materials inappropriate/unsafe?

Appropriate indoor/outdoor space:

Y N	Y N	Y N	Y N
1.1 <input checked="" type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input checked="" type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input checked="" type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/>	
		5.5 <input checked="" type="checkbox"/> <input checked="" type="checkbox"/>	

17. Art

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----

1.2 Toxic/unsafe art materials used? {y / n}

3.2 Appropriate/safe/nontoxic art materials used:

Y N	Y N NA	Y N NA	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5.1 <input checked="" type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	7.1 <input checked="" type="checkbox"/> <input type="checkbox"/>
1.2 <input checked="" type="checkbox"/> <input type="checkbox"/>	3.2 <input checked="" type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input checked="" type="checkbox"/> <input type="checkbox"/>	

18. Music & movement

1	2	3	4	5	6	7
---	---	---	---	---	---	---

3.1, 5.1 List # of musical toys/instruments:

5.2 Informal singing observed? {y / n}

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input checked="" type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input checked="" type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/>	

19. Blocks

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----

3.1, 5.1, 7.1 Sets of blocks:

1)

2)

3)

3.2, 7.2 Accessories:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input checked="" type="checkbox"/> <input type="checkbox"/>

20. Dramatic play

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Y N	Y N	Y N NA	Y N NA
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	

Notes:

5.1 Dramatic play materials:

Infants and toddlers:

- Dolls-
- Soft animals-
- Toy telephones-
- Pots & pans-

Toddlers only:

- Dress-ups-
- Child-sized play furniture-
- Play foods-
- Dishes/eating utensils-
- Doll furniture-
- Small play buildings & accessories-

~~21. Sand and water play~~

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	

22. Nature/science

1	2	3	4	5	6	7
---	---	---	---	---	---	---

5.3 Example of science/nature observed in daily events:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	

23. Use of TV, video, and/or computer

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----

Y N NA	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	

24. Promoting acceptance of diversity

1	2	3	4	5	6	7
---	---	---	---	---	---	---

5.1 Diversity in materials (10 examples, all types of categories):

5.2 Dolls (3 different skin tones/facial features):

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>		

	Books	Pictures	Materials
Races/Culture			
Ages			
Abilities			
Gender			

7.1 Non-sexist images:

7.2 Variety of activities:

A. Subscale (Items 15 - 24) Score ___

B. Number of items scored ___

ACTIVITIES Average Score (A ÷ B) __. __

INTERACTION

25. Supervision of play and learning

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Notes:

Y -N	Y -N	Y -N	Y -N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
		5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/>	

26. Peer interaction

1	2	3	4	5	6	7
---	---	---	---	---	---	---

~~7.1 Examples (observe 2 examples)~~
Action:

Y -N	Y -N	Y -N	Y -N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>

Feelings:

Intentions:

~~7.2 Positive social interaction talked about (observe 1 example):~~

27. Staff-child interaction

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Y -N	Y -N	Y -N	Y -N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	
— —	3.4 <input type="checkbox"/> <input type="checkbox"/>		

28. Discipline

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Y -N	Y -N	Y -N	Y -N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/>	

~~A. Subscale (Items 25 - 28) Score~~ ___

~~B. Number of items scored~~ ___

~~INTERACTION Average Score (A ÷ B)~~ ___

PROGRAM STRUCTURE

29. Schedule

1	2	3	4	5	6	7
---	---	---	---	---	---	---

Notes:

5.4 Example of more than 3 minute wait:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>		5.3 <input type="checkbox"/> <input type="checkbox"/>	
		5.4 <input type="checkbox"/> <input type="checkbox"/>	

30. Free play

1	2	3	4	5	6	7
---	---	---	---	---	---	---

7.1 Supervision as educational interaction (observe 2 examples):

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	

31. Group play activities

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	

32. Provisions for children with disabilities

1	2	3	4	5	6	7	NA
---	---	---	---	---	---	---	----

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
1.4 <input type="checkbox"/> <input type="checkbox"/>	3.4 <input type="checkbox"/> <input type="checkbox"/>		

A. Subscale (Items 29 - 32) Score ___

B. Number of items scored ___

PROGRAM STRUCTURE Average Score (A ÷ B) ___

PARENTS AND STAFF

33. Provisions for parents

1 2 3 4 5 6 7

Notes:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
	3.4 <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/>	

34. Provisions for personal needs of staff

1 2 3 4 5 6 7

Y N	Y N NA	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
	3.4 <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/>	
	3.5 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	5.5 <input type="checkbox"/> <input type="checkbox"/>	

35. Provisions for professional needs of staff

1 2 3 4 5 6 7

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	

36. Staff interaction and cooperation

1 2 3 4 5 6 7 NA

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>

37. Staff continuity

1 2 3 4 5 6 7

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
1.3 <input type="checkbox"/> <input type="checkbox"/>	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
1.4 <input type="checkbox"/> <input type="checkbox"/>	3.4 <input type="checkbox"/> <input type="checkbox"/>	5.4 <input type="checkbox"/> <input type="checkbox"/>	

38. Supervision and evaluation of staff

1 2 3 4 5 6 7 NA

Notes:

Y N	Y N	Y N	Y N
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
		5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/>	

39. Opportunities for professional growth

1 2 3 4 5 6 7

Y N	Y N	Y N	Y N NA
1.1 <input type="checkbox"/> <input type="checkbox"/>	3.1 <input type="checkbox"/> <input type="checkbox"/>	5.1 <input type="checkbox"/> <input type="checkbox"/>	7.1 <input type="checkbox"/> <input type="checkbox"/>
1.2 <input type="checkbox"/> <input type="checkbox"/>	3.2 <input type="checkbox"/> <input type="checkbox"/>	5.2 <input type="checkbox"/> <input type="checkbox"/>	7.2 <input type="checkbox"/> <input type="checkbox"/>
	3.3 <input type="checkbox"/> <input type="checkbox"/>	5.3 <input type="checkbox"/> <input type="checkbox"/>	7.3 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
		5.4 <input type="checkbox"/> <input type="checkbox"/>	

A. Subscale (Items 33 - 39) Score ___ B. Number of items scored ___ **PARENTS AND STAFF Average Score (A ÷ B) ___.**

Total and Average Score

	<u>Subscale/Total Score</u>	<u># of Items Scored</u>	<u>Average Score</u>
Space and Furnishings	_____ ÷ _____	_____	= _____
Personal Care Routines	_____ ÷ _____	_____	= _____
Listening and Talking	_____ ÷ _____	_____	= _____
Activities	_____ ÷ _____	_____	= _____
Interaction	_____ ÷ _____	_____	= _____
Program Structure	_____ ÷ _____	_____	= _____
Parents and Staff	_____ ÷ _____	_____	= _____
TOTAL	_____ ÷ _____	_____	= _____