

SCORE SHEET – EXPANDED VERSION

Family Child Care Environment Rating Scale-Revised Edition

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Observer: _____ Observer Code: _____

Home: _____ Facility Code: _____

Provider(s): _____ Provider 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: _____

Number of providers present: _____

Number of children enrolled: _____

Highest number of children family child care home allows 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

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

Number enrolled in each age group:

Infants (birth – 11mos.) _____

Toddlers (12 mos. – 29 mos.) _____

Preschool/K (30 mos. – 5yrs.) _____

Schoolagers (6yrs. – 12yrs.) _____

SPACE AND FURNISHINGS

1. Indoor space used for child care

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

7.3. Accessibility: a) Doorways \geq 32' wide? (y / n)

b) Easy to use handles on doors (y / n)

c) Thresholds appropriate height / beveled if $>$ 1/4" (y / n)

| | | | |
|---|---|--|---|
| 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"/> | 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"/> |
| 1.4 <input type="checkbox"/> <input type="checkbox"/> | 3.4 <input type="checkbox"/> <input type="checkbox"/> | | |

2. Furniture for routine care, play and learning

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

5.3. Examples of provisions that promote self-help used (at least 2 observed):

- 1.
- 2.

5.5, 7.3. Use of adult seating by provider observed (at least 1 example)?: (y / n)

| | | | |
|---|---|---|--|
| 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 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 type="checkbox"/> <input type="checkbox"/> | |

3. Provision for relaxation & comfort

1 2 3 4 5 6 7

3.1. Soft furnishings used during observation? (y / n)

5.1. Soft furnishings accessible much of the day? (y / n)

5.3. Number of soft toys: _____

| | | | |
|---|---|---|---|
| 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"/> |

4. Arrangement of indoor space for child care

1 2 3 4 5 6 7

1.2, 3.2. Is it difficult to supervise while children are in:

- a) sleeping areas? (y / n)
- b) any play spaces? (y / n)

3.3. List hazards observed in space:

- 1)
- 2)
- 3)

| | | | |
|---|--|---|---|
| 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"/> |
| 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. Display for children

1 2 3 4 5 6 7

5.3. Number of children 1 year and older enrolled: _____
Number of pieces of children's work displayed: _____

5.4. Provider talks about display? (at least 1 example observed): (y / n) _____

| | | | |
|---|--|--|---|
| 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"/> | 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"/> <input type="checkbox"/> | 7.3 <input type="checkbox"/> <input type="checkbox"/> |
| | | 5.4 <input type="checkbox"/> <input type="checkbox"/> | |

6. Space for privacy

1 2 3 4 5 6 7

5.1, 7.1. Space(s) set aside for privacy:

| | | | |
|---|---|---|---|
| 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"/> |

A. Subscale (Items 1 - 6) Score ____

B. Number of items scored ____

SPACE AND FURNISHINGS Average Score (A ÷ B) ____

PERSONAL CARE ROUTINES

7. Greeting/departing

1 2 3 4 5 6 7

1.1, 3.1, 5.1, 5.3, 5.4, 7.2 Greetings observed (√=yes, χ=no)

| | | | |
|---|---|--|---|
| 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"/> | |
| | 3.4 <input type="checkbox"/> <input type="checkbox"/> | 5.4 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> | |

| | Child | Parent | Info shared |
|---|-------|--------|-------------|
| 1 | — | — | — |
| 2 | — | — | — |
| 3 | — | — | — |
| 4 | — | — | — |
| 5 | — | — | — |
| 6 | — | — | — |
| 7 | — | — | — |

8. Nap/rest

1 2 3 4 5 6 7

1.2, 3.2 Cots/mats, cribs for children < 2 yrs ≥ 36” apart or solid barrier? (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 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"/> | |

5.2 All cots/mats, cribs ≥ 36” apart or solid barrier? (y / n)

Other issues (e.g. supervision, schedule):

9. Meals/snacks

1 2 3 4 5 6 7

| | | | |
|--|--|--|---|
| Y N NA | 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"/> |
| 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"/> <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"/> | | |

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

Tables/highchair trays washed? (y / n) sanitized? (y / n) *[before meals]*
washed? (y / n) sanitized? (y / n) *[after meals]*

| | Children | Adults |
|---------------|----------|--------|
| Before eating | | |
| After eating | | |

10. Diapering/toileting

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> | | |

- Other related issues (e.g. supervision, interactions):

1.1, 1.2, 3.1, 3.2. Diapering procedure (every adult observed): (√=yes, χ=no)

| | | | | | | | | | |
|----------------------|--|--|--|--|--|--|--|--|--|
| Prep | | | | | | | | | |
| Proper disposal | | | | | | | | | |
| Wipe adult's hands | | | | | | | | | |
| Wipe child's hands | | | | | | | | | |
| Clean diaper area | | | | | | | | | |
| Sanitize diaper area | | | | | | | | | |
| Same sink sanitized | | | | | | | | | |

Other issues:

1.1, 3.1. Same sink sanitized after toileting use? (y / n)

1.3, 3.3. Handwashing observed (√=yes, χ=no)

| | | | | | | | | | | | | | | |
|-------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Adult | | | | | | | | | | | | | | |
| Child | | | | | | | | | | | | | | |

11. Health practices

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

| | | | |
|---|---|---|---|
| Y N | Y N NA | Y N | Y NNA |
| 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"/> | |

3.2 Handwashing observed (√=yes, χ=no)

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

12. Safety practices

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> | |

1.1, 1.2, 3.1 Safety hazards:

Indoor::

Outdoor::

A. Subscale (Items 7 - 12) Score ___

B. Number of items scored ___

Personal Care Routines Average Score (A ÷ B) ___

LISTENING AND TALKING

13. Helping children understand language

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

3.1, 5.1. Talking during routines (examples):

3.1, 5.1. Talking during play (examples):

5.4. Examples of descriptive words used:

| | | | |
|---|---|---|---|
| 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"/> | |

14. Helping children use language

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

3.1, 5.4. Verbal responses from provider to children (examples):

3.1, 5.4. Non-verbal responses from provider to children (examples):

5.3) Children encouraged to communicate with one another (2 examples):

- 1)
- 2)

| | | | |
|---|---|--|--|
| 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"/> <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"/> <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"/> <input type="checkbox"/> |

15. Using books

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

5.2. Wide selection of books for each age group?

Races: _____
 Ages: _____
 Abilities: _____
 Animals: _____
 Familiar experiences: _____
 Fiction: _____
 Factual: _____

1.1, 3.1, 5.1. Number of accessible books for each age group

1.2, 3.2. Number of books in disrepair:

5.1. Any inappropriate books (violent, frightening)? (y / n)

List:

5.3. Provider reads to individuals/small groups? Observed at least 1 example: (y / n)

7.2. Provider uses books with children (2 examples):

- 1)
- 2)

7.3. Provider encourages children to read at their ability level (1example)

- 1)

A. Subscale (Items 13 - 15) Score ___

B. Number of items scored ___

Listening and Talking Average Score (A ÷ B) ___

ACTIVITIES

16. Fine Motor

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> | |

5.3. Provider interacts with children during fine motor play (2 ex.)

- 1)
- 2)

3.1, 5.1. Types of fine motor materials accessible (for preschool and school age):

- Building toys: _____
- Art /Craft materials: _____
- Manipulatives _____
- Puzzles: _____

Materials for infants and toddlers? List: _____

17. Art

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

| | | | |
|---|---|--|--|
| 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"/> |
| | 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"/> |
| | 3.4 <input type="checkbox"/> <input type="checkbox"/> | 5.4 <input type="checkbox"/> <input type="checkbox"/> | |

Score "NA" if all children in care are younger than 12 months of age

3.1, 5.1, 5.2. Types of art materials accessible (for preschool and school age):

- **Drawing** (required) _____
- Paints _____
- 3-D _____
- Collage _____
- Tools _____
- Types of art materials for toddlers (list): _____

1.2, 3.2. Any unsafe or toxic materials used? (y / n)

18. Music and movement

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

| | | | |
|---|---|--|---|
| 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"/> | 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"/> |
| | | 5.4 <input type="checkbox"/> <input type="checkbox"/> | |

3.1, 5.1, 5.2. Music materials accessible (list for each age group):

5.3. Informal singing observed? (y / n)

5.4. Times recorded music used:

19. Blocks

| | | | | | | | |
|---|---|---|---|---|---|---|----|
| 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"/> | 7.3 <input type="checkbox"/> <input type="checkbox"/> |

3.1, 5.1. Types of blocks accessible (list for each age): _____

3.1, 5.1. Types of accessories accessible (list): _____

7.3. Provider encourages/participates in block play (1 example observed)? (y / n)

Score "NA" if all children in care are younger than 12 months or older than 7 years of age

20. Dramatic play

1 2 3 4 5 6 7

3.1, 5.1, 5.2. Dramatic play materials accessible (list for each age group):

| | | | |
|---|---|--|--|
| 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"/> | |

7.1. Materials that represent diversity (list):
1)
2)

7.3. Provider facilitates children's play (1example observed)? (y/n)

21. Math/number

1 2 3 4 5 6 7

3.1, 5.1. Math and number materials accessible (list for each age group):

| | | | |
|---|---|---|--|
| 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"/> | | 5.3 <input type="checkbox"/> <input type="checkbox"/> | 7.3 <input type="checkbox"/> <input type="checkbox"/> |
| | | 5.4 <input type="checkbox"/> <input type="checkbox"/> | |

5.4. Provider talks about math/number concepts during: a) free play? (y/ n)
b) routines? (y /n)

22. Nature/science

1 2 3 4 5 6 7

3.1, 5.1. Types of science/nature materials accessible (for preschool and school age):

| | | | |
|---|---|--|--|
| 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"/> <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"/> | |

- Collections of natural objects: _____
- Living things: _____
- Nature /science tools: _____
- Nature/science books, pictures, games or toys: _____

3.1. Types of materials accessible to infants and toddlers:

5.4. Provider uses everyday events as basis for helping children learn about science/nature?
1 example observed: (y / n)

23. Sand and water play

1 2 3 4 5 6 7 NA

3.2. Supervision issues:

7.2) Different activities done with sand or water:

| | | | |
|---|---|---|---|
| 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"/> | |

3.1, 5.1, 7.1. Sand/water provided? (√=yes, χ=no)

| | Indoors | Outdoors | How often? |
|-------|---------|----------|------------|
| Sand | | | |
| Water | | | |

3.3, 5.2. Toys/materials for sand/water play:

Score "NA" if all children in care are younger than 18 months of age and/or over 6 years of age

24. Promoting acceptance of diversity

1 2 3 4 5 6 7

3.1, 5.1. (Tally)

5.2. Dramatic play props that represent various cultures/races? List:

Y N Y N Y N Y N
 1.1 3.1 5.1 7.1
 1.2 3.2 5.2 7.2
 1.3 3.3

| Diversity | Books | Pictures | Materials |
|--------------|-------|----------|-----------|
| Race/Culture | | | |
| Age | | | |
| Abilities | | | |
| Gender | | | |

- 1)
- 2)
- 3)
- 4)

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

1 2 3 4 5 6 7 NA

1.1, 3.1. Any inappropriate materials used? (y/n) List:

Y N NA Y N Y N Y N
 1.1 3.1 5.1 7.1
 1.2 3.2 5.2 7.2
 1.3 3.3 5.3
 1.4

3.3. Times children use TV/video:

Times used for computer:

Score item "NA" if TV, video and computers are never used when children are present

3.2, 5.2. Alternative activities accessible (list):

26. Active physical play

1 2 3 4 5 6 7

1.3, 3.3, 5.3, 5.4. Any equipment/materials inappropriate/unsafe? (y /n)

1.1, 1.2, 3.2, 5.1) Appropriate indoor/outdoor space used? (y / n)

7.4. Skills stimulated by materials (list):

Y N Y N Y N Y N NA
 1.1 3.1 5.1 7.1
 1.2 3.2 5.2 7.2
 1.3 3.3 5.3 7.3
 1.4 3.4 5.4 7.4

Older infant/toddlers:

Preschool-K:

School-age:

A. Subscale (Items 16 - 26) Score ___

B. Number of items scored ___

ACTIVITIES Average Score (A ÷ B) ___

INTERACTION

27. Supervision of play and learning

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> | |

28. Provider-child interaction

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

5.1. Examples of positive interaction: a)verbal:

| | | | |
|---|---|---|---|
| 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"/> | | |

b)physical

29. Discipline

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> |
| 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"/> | |

30. Interactions among children

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

7.1. Provider points out positive interaction among children (1 example):

| | | | |
|---|---|---|--|
| 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"/> | | |

7.2. Provider-initiated activities that encourage children to work or play together (1 example):

See notes for clarification for when to score item "NA"

A. Subscale (Items 27 - 30) Score ___

B. Number of items scored ___

INTERACTION Average Score (A ÷ B) ___.

PROGRAM STRUCTURE

31. Schedule

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

5.3. Example(s) of children waiting longer than 3 minutes:

| | | | |
|---|---|---|---|
| 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"/> | | |

32. Free play

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

7.1. Supervision used as education interaction (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"/> | |

1)

2)

33. Group time

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

7.2) Educational interaction with small groups/individuals (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"/> |
| 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"/> | | | |

Score item "NA" if children never do same activity as whole group

34. 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 31 - 34) Score ___

B. Number of items scored ___

PROGRAM STRUCTURE Average Score (A ÷ B) ___.

PARENTS AND PROVIDER

35. Provisions for parents

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> |
| | 3.4 <input type="checkbox"/> <input type="checkbox"/> | 5.4 <input type="checkbox"/> <input type="checkbox"/> | |

36. Balancing personal and caregiving responsibilities

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

| | | | |
|---|---|--|---|
| 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"/> | 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"/> | |
| | 3.4 <input type="checkbox"/> <input type="checkbox"/> | | |

37. Opportunities for professional growth

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> |
| | 3.2 <input type="checkbox"/> <input type="checkbox"/> | 5.2 <input type="checkbox"/> <input type="checkbox"/> | 7.2 <input type="checkbox"/> <input type="checkbox"/> |
| | | | 7.3 <input type="checkbox"/> <input type="checkbox"/> |

38. Provisions for professional needs

| | | | | | | |
|---|---|---|---|---|---|---|
| 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"/> |

A. Subscale (Items 35 - 38) Score ___

B. Number of items scored ___

PARENTS AND PROVIDER Average Score (A ÷ B) __. __

Total and Average Score

| | <u>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 Provider | _____ | _____ | _____ |
| TOTAL | _____ | _____ | _____ |

Comments/Notes: