

SCORE SHEET

Infant/Toddler Environment Rating Scale—Revised Edition

Thelma Harms, Debby Cryer and Richard M. Clifford (2002)

Observer: _____

Observer Code: _____

Center/School: _____

Center Code: _____

Room: _____

Room Code: _____

Teacher(s): _____

Teacher Code: _____

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: _____

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

Time observation began: ____ : ____ AM PM

Time observation ended: ____ : ____ AM PM

SPACE AND FURNISHINGS

1. Indoor space

1	2	3	4	5	6	7
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Notes:

Y	N	Y	N	NA	Y	N	Y	N
1.1	<input type="checkbox"/>	3.1	<input type="checkbox"/>	□	5.1	<input type="checkbox"/>	7.1	<input type="checkbox"/>
1.2	<input type="checkbox"/>	3.2	<input type="checkbox"/>	□	5.2	<input type="checkbox"/>	7.2	<input type="checkbox"/>
1.3	<input type="checkbox"/>	3.3	<input type="checkbox"/>	□	5.3	<input type="checkbox"/>	7.3	<input type="checkbox"/>
1.4	<input type="checkbox"/>	3.4	<input type="checkbox"/>	□	5.4	<input type="checkbox"/>	7.4	<input type="checkbox"/>
	3.5	<input type="checkbox"/>	<input type="checkbox"/>	□				

2. Furniture for routine care and play

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

Y	N	Y	N	NA	Y	N	NA	
1.1	<input type="checkbox"/>	3.1	<input type="checkbox"/>	□	5.1	<input type="checkbox"/>	7.1	<input type="checkbox"/>
1.2	<input type="checkbox"/>	3.2	<input type="checkbox"/>	□	5.2	<input type="checkbox"/>	7.2	<input type="checkbox"/>
1.3	<input type="checkbox"/>	3.3	<input type="checkbox"/>	□	5.3	<input type="checkbox"/>	7.3	<input type="checkbox"/>
	3.4	<input type="checkbox"/>	5.4	<input type="checkbox"/>	7.4	<input type="checkbox"/>	□	
		5.5	<input type="checkbox"/>	□				

3. Furnishings for relaxation & comfort

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

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

4. Room arrangement

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

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

5. Display for children

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

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

1 2 3 4 5 6 7

Notes:

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

7. Meals/snacks

1 2 3 4 5 6 7

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

8. Nap

1 2 3 4 5 6 7

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

9. Diapering/toileting

1 2 3 4 5 6 7

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

10. Health practices

1 2 3 4 5 6 7

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

11. Safety practices

1 2 3 4 5 6 7

Notes:

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

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

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 checked="" type="checkbox"/>	3.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.1 <input type="checkbox"/> <input checked="" type="checkbox"/>
1.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	3.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.2 <input type="checkbox"/> <input checked="" type="checkbox"/>
		5.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.3 <input type="checkbox"/> <input checked="" type="checkbox"/>
			7.4 <input type="checkbox"/> <input checked="" type="checkbox"/>

14. Books and pictures

1 2 3 4 5 6 7

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

<p>A. Subscale (Items 12 – 14) score ____</p> <p>B. Number of items scored ____</p> <p>LISTENING AND TALKING Average Score (A +B) ____</p>								<p>19. Blocks</p> <table border="1"> <tr> <td>Y N</td> <td>Y N</td> <td>Y N NA</td> <td>Y N</td> </tr> <tr> <td>1.1 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>3.1 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>5.1 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>7.1 <input type="checkbox"/> <input checked="" type="checkbox"/></td> </tr> <tr> <td>1.2 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>3.2 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>5.2 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>7.2 <input type="checkbox"/> <input checked="" type="checkbox"/></td> </tr> <tr> <td>3.3 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>5.3 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>5.3 <input type="checkbox"/> <input checked="" type="checkbox"/></td> <td>7.3 <input type="checkbox"/> <input checked="" type="checkbox"/></td> </tr> </table> <p>Notes:</p>							Y N	Y N	Y N NA	Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	3.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	1.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	3.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	3.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.3 <input type="checkbox"/> <input checked="" type="checkbox"/>
Y N	Y N	Y N NA	Y N																											
1.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	3.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.1 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.1 <input type="checkbox"/> <input checked="" type="checkbox"/>																											
1.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	3.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.2 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.2 <input type="checkbox"/> <input checked="" type="checkbox"/>																											
3.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	5.3 <input type="checkbox"/> <input checked="" type="checkbox"/>	7.3 <input type="checkbox"/> <input checked="" type="checkbox"/>																											
<p>ACTIVITIES</p> <p>15. Fine motor</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> </table> <p>Y N Y N Y N Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/></p>								1	2	3	4	5	6	7	<p>20. Dramatic play</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> </table> <p>Y N Y N Y N NA Y N NA 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/></p>							1	2	3	4	5	6	7		
1	2	3	4	5	6	7																								
1	2	3	4	5	6	7																								
<p>16. Active physical play</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> </table> <p>Y N Y N Y N Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.5 <input type="checkbox"/> <input checked="" type="checkbox"/></p>								1	2	3	4	5	6	7	<p>21. Sand and water play</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>NA</td> </tr> </table> <p>Y N NA Y N Y N Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/></p>							1	2	3	4	5	6	7	NA	
1	2	3	4	5	6	7																								
1	2	3	4	5	6	7	NA																							
<p>17. Art</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>NA</td> </tr> </table> <p>Y N Y N NA Y N NA Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/></p>								1	2	3	4	5	6	7	NA	<p>22. Nature & science</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> </table> <p>Y N Y N Y N Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/></p>							1	2	3	4	5	6	7	
1	2	3	4	5	6	7	NA																							
1	2	3	4	5	6	7																								
<p>18. Music & movement</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td> </tr> </table> <p>Y N Y N Y N Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/></p>								1	2	3	4	5	6	7	<p>23. Use of TV, video, and/or computer</p> <table border="1"> <tr> <td>1</td><td>2</td><td>3</td><td>4</td><td>5</td><td>6</td><td>7</td><td>NA</td> </tr> </table> <p>Y N NA Y N Y N Y N 1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.3 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/></p>							1	2	3	4	5	6	7	NA	
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Y N	Y N	Y N	Y N																																																																																																
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32. Provisions for children with disabilities	1 2 3 4 5 6 7 NA	Notes:	36. Staff interaction and cooperation	1 2 3 4 5 6 7 NA	Notes:
Y N Y N Y N Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.4 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.4 <input type="checkbox"/> <input checked="" type="checkbox"/>		Y N Y N Y N Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" 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		38. Supervision and evaluation of staff	1 2 3 4 5 6 7	
Y N Y N Y N Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.4 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/>		Y N Y N Y N Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/>	
34. Provisions for personal needs of staff	1 2 3 4 5 6 7		39. Opportunities for professional growth	1 2 3 4 5 6 7	
Y N Y N NA Y N Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.4 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.5 <input type="checkbox"/> <input checked="" type="checkbox"/> <input type="checkbox"/>		Y N Y N Y N Y N NA	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.4 <input type="checkbox"/> <input checked="" type="checkbox"/>	
35. Provisions for professional needs of staff	1 2 3 4 5 6 7		A. Subscale (Items 33 – 39) score ____		
Y N Y N Y N Y N	1.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.1 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 7.2 <input type="checkbox"/> <input checked="" type="checkbox"/> 1.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 3.3 <input type="checkbox"/> <input checked="" type="checkbox"/> 5.3 <input type="checkbox"/> <input checked="" type="checkbox"/>		B. Number of items scored ____		
PARENTS AND STAFF Average Score (A ÷ B) ____					

Total and Average Scores

	<u>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	_____	_____	_____

Comments and Plans: