Things to think about when assessing the appropriateness of a pre-school child.

These questions provide prompts for practitioners when engaging in a series of conversations with the child and/or their parent/carer or another practitioner working with them to explore and understand their lived experience. The questions can be selected as appropriate and adapted to suit the communication needs of the child and their parent/carer. It is not intended that that all sections are answered in a single conversation. Information provided will need to be triangulated with the direct observations of practitioners and information from a range of sources.

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| **Questions** | **Responses** | **Notes** (including observations) |
| **Waking**1. What time do I normally get up?
2. Do I normally sleep well? Am I kept awake by TV or anything?
3. Do I wet the bed? If so, is there someone to help me with the sheets?
4. Does someone help me get up or do I get myself up?
5. Do I have to get anyone else up?
6. Is there anyone else up when I get up?
7. Are my mornings the same or is it different every day?
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| **Breakfast**1. Do I eat breakfast in the morning? What food is available? What do I like to have? Is it the same every day or different?
2. Does someone make my breakfast for me or is there someone to help me make breakfast?
3. Do I eat breakfast with others or by myself?
4. Do I eat breakfast at the table or in front of the TV?
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| **Questions** | **Responses** | **Notes** (including observations) |
| **Dressing**1. Do I have enough clothes?
2. Are my clothes clean, the right size for me, right for the weather?
3. Does someone help me to get dressed or do I do it myself?
4. Do I have water/a toothbrush and does someone help me to brush my teeth?
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| **Childcare**1. Where do I go in the day? Do I go to a pre-school / nursery / childminder? How far away is it? How do I get there?

Who takes me / picks me up? Is it the same people each day or does that change regularly?1. Do I usually arrive at my setting on time or am I late?
2. Do I eat at my pre-school/nursery? Do I like my food and eat it well?
3. Do I like my pre-school/nursery or who looks after me? Do I settle well there? Do I get on well with other children there? What do I like doing when I am there?
4. Does anyone give me extra help with things like my behaviour or development in the setting, e.g. home visits for SEND Children?
5. Does the setting ensure my carers communicate with me in ways which enable me to understand what they are saying?
6. Does the setting provide me with activities which support my development?
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| **Questions** | **Responses** | **Notes** (including observations) |
| **At home**1. How much time do I spend at home? Who is there to look after me? Is there anyone else who looks after me other than my main carers?
2. Do I have any brothers or sisters? If yes, how do you get on with them? Do your parents care and treat you all the same? If not, how does this differ?
3. Does anything I watch scare me? If so, why is it scary?
4. What type of food do I eat at home? Do I have regular meals? Who makes them for me? What is my favourite food?

Do I eat that food all the time or do I try new things?1. Do I eat with others, and at the table, or do I eat by myself?
2. Is there anyone I can tell if I am hungry and do they provide food for me?
3. Do I have toys and games at home? Are they age appropriate, can I use them on my own/do they help me to learn? What is my favourite toy to play with?
4. How do your parents/carers play with you? What things do you do together as a family? What things do you like to do on your own?
5. Who talks to me at home? Is this communication positive and encouraging?
6. Who in the family gives me the most positive attention?
7. What do my parents/carers do when I misbehave? What are the rules set by my parents/carers?

Do I agree with the rules? If not, can I challenge them or ask for situation to be dealt with differently? |  |  |
| **Bedtime**1. Do I go to bed at the same time every night?
2. Who decides when it is bedtime?
3. Does someone help me wash and get ready for bed?
4. Where do I sleep?
5. Do I like where I sleep?
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| **Questions** | **Responses** | **Notes** (including observations) |
| **Bedtime** (continued)1. Who else is in the house at night time?
2. Do I have my own room or do I share with others?
3. Do I have what I need in my room (bed, curtains, heating)?
4. Do I sleep well at night or do I get up a lot? Do I have nightmares? Am I dry at night?
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| **Medical/Health/Disability**1. If I have an alternative feeding method (e.g. tube fed) is this consistently followed? Has this been agreed with all carers and relevant professionals? Do people know what to do if I choke?
2. Do I have any additional needs and, if so, do I attend appropriate and relevant activities for my development, such as short breaks for children with disabilities?
3. Are my medical and care needs (e.g. medication and moving/ handling procedures) met in my childcare setting and consistent with at home?
4. Am I given my medicine/treatment if I need it?
5. Are all medical needs being met and treatment instructions being followed?
6. Is all my equipment maintained and operating effectively?
7. Are my measurements being recorded (e.g. height, weight and saturation levels) as required by my health professionals?
8. Am I or my parent/carer sleep deprived as a result of my condition?
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| **Hospital Inpatients**1. Am I being visited regularly by my family?
2. Am I having my social and emotional needs met while I am in hospital?
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| **Questions** | **Responses** | **Notes** (including observations) |
| **Pets**1. Are there any pets in my family and, if so, are they under control and do they behave appropriately around me?
2. Who looks after the pets?
3. Do I like the pets?
4. Am I scared of any of my pets?
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| **Additional Considerations**1. Do I have any additional or complex needs (e.g. do I have a physical or learning disability; poor mental health; am I an asylum seeker or have been trafficked or am I a young carer) which can impact on my life?
2. Do I need additional support to help me reach my full potential, and if so, do I get that support?
3. Could a day in my life be improved, and if so how?
4. Do my parents have additional or complex needs and how does this impact upon me?
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