

Draft list of questions for the Country Questionnaire and for the Case Studies Survey using a structure-process-outcome model and the five themes (10 key principles) of quality in IPPE

Key Principles for a Quality Framework	Country Survey questionnaire (Quality IPPE Structure)	Case studies (Quality IPPE Process) (Interviews with IPPE provision stakeholders and class observation)	Outcomes (interviews and observations)
1. ACCESS, PROCEDURES AND PARTICIPATION			
<p>1.1. Provision that is available and affordable to all families and their children.</p> <p>1.2. Provision that encourages participation, strengthens social inclusion and embraces diversity</p>	<p>Policy and legal provision at national level</p> <ol style="list-style-type: none"> 1. Is policy and legal entitlement to pre-primary education (PPE) available for all children from 3 years onwards? Is there regulation for PPE provisions to accept for enrolment all children without exception, whatever their characteristics? 2. Has a 1-2-year PPE been made compulsory for all children? 3. Are arrangements in place for smooth transition from home/ECEC into PPE and from PPE into primary education for all children, particularly those at risk of discrimination and social exclusion? 4. Is there any specific policy calling for PPE provision to be inclusive? 5. Is there any specific policy for ensuring that children who may have difficulty attending or participating in PPE activities are identified early? 6. What additional policy measures of support (e.g. social welfare, health, etc) are available for children at risk and their families? <p>Practice at national level</p> <ol style="list-style-type: none"> 7. What proportion of children 3yrs to compulsory (primary) education attend PPE provision? 8. What proportion of children at risk (e.g. children with identified disabilities, minority ethnic status ...) attend PPE? 9. Which children and families have most difficulty accessing PPE? Are there children who actually cannot access PPE for any reason? If yes why? 10. What arrangements are available for inter-services economic, health and social collaboration for supporting families at risk to be able to take their children to PPE? 11. Is there provision for additional support, including technological support, for children with additional needs to access PPE? 	<p>Interpretation of national and regional policy provisions at local level</p> <p>Interviews with IPPE provision stakeholders</p> <ol style="list-style-type: none"> 1. Do you have any formal or informal policies regarding inclusive PPE provisions? How are your policies related to national or regional policy? 2. Can all children in the locality enrol at your PPE provision (3yrs to compulsory education)? 3. Do all children in the locality aged 3yrs-compulsory education attend PPE? What proportion attends? If not, why not? 4. Are children of families from disadvantaged backgrounds actively encouraged and enabled to attend PPE? 5. What proportion of children aged 3yrs-compulsory education do you consider to be at risk? What types of individual and contextual conditions create risk for attendance and engagement? 6. Are there any families in your locality who do not try or do not succeed to access PPE? If yes, what type and why? 7. Have you had to turn away applicants to your PPE provision? If yes why? 8. What transition arrangements do you make for all children to move from home/early childhood care to PPE and from PPE to primary education? 9. Can children and families visit the program before starting to attend it? 10. Can parents negotiate attendance hours? 11. How regular is the attendance of children and particularly of those at risk? 12. What multisectorial support (e.g. social welfare and health) is available for children who attend your PPE? How far is it used by families and your facility? 13. Is your PPE provision physically accessible to all, including wheelchair users? 14. Is transport provision to and from your PPE facilities adapted for children at risk? 15. Are any children formally identified as having additional needs? How are they usually identified? 16. Do you have a support system to ensure that all children, including those at risk, can be enabled to engage actively in learning? 	<p>Interviews with IPPE provision stakeholders and class observations</p> <ol style="list-style-type: none"> 1. Are children happy to attend IPPE? 2. Are all children increasingly actively engaged in learning and social activities? 3. Are children at risk participating increasingly more actively in all learning and social activities? 4. Are children at risk interacting increasingly more with peers? 5. Are all children, particularly those at risk, improving their competences in physical, cognitive, language, social and emotional development and learning? 6. Are the competences of children at risk becoming more age-appropriate? 7. How satisfied are parents with their involvement in the PPE process? 8. How far do families regard the PPE curriculum and experience as useful for their children's wellbeing and holistic development?
2. WORKFORCE			
<p>2.1. Well-qualified staff whose initial and continuing training enables</p>	<p>Policy and legal provision</p> <ol style="list-style-type: none"> 12. What general qualification is required for staff to work with children at PPE from 3yrs to compulsory education? 	<p>Interviews with IPPE provision stakeholders</p> <ol style="list-style-type: none"> 17. What qualifications do your staff have? 18. Does staff training include aspects of pedagogy for young children? 	

<p>them to fulfil their professional role</p> <p>2.2. Supportive working conditions including professional leadership which creates opportunities for observation, reflection, planning, teamwork and cooperation with parents.</p>	<p>13. What regulation is there for staff-child ratio in PPE? Is there supplementary regulation for staff-child ratios for children with additional needs?</p> <p>14. What internal or external support systems (e.g. support assistants, psychologists ...) are available for staff to meet the needs of all children, including those with diverse and additional needs?</p> <p>15. What general qualification is required for support staff?</p> <p>16. What regulation and possibilities are offered for in-service training of PPE staff?</p> <p>17. Does the initial training of staff include aspects of pedagogy and of understanding and supporting students with diverse and additional needs?</p> <p>18. Are there policy measures for the collaboration between regular and support staff, and staff and parents?</p> <p>19. Are additional support staff assigned to individual children or to classrooms?</p> <p>Practice</p> <p>20. In actual practice what proportion of staff have the standard qualification?</p> <p>21. In actual practice what is the staff-child ratio?</p> <p>22. What kind of support staff is available in inclusive PPE provision?</p> <p>23. What is the support-staff to child ratio in inclusive PPE?</p> <p>24. How effective is the collaboration between regular and support staff, staff and parents?</p> <p>25. What is the usual role of the support assistants in the classroom?</p> <p>26. How attractive are salaries and working conditions for staff in PPE?</p>	<p>19. What in-service training is available to staff?</p> <p>20. What other training would you wish to provide for your staff? Why?</p> <p>21. Have they had any training in responding to children's diversity or additional needs during their initial or in-service training?</p> <p>22. How attractive are salaries and working conditions for staff? Do you think working conditions influence the kind of staff that seeks employment at your PPE and level of staff retention?</p> <p>23. What is the staff-child ratio in your facility?</p> <p>24. What is the support-staff-child ratio in your facility?</p> <p>25. Is there any additional support staff (e.g. support assistants, psychologists ...) for children at risk?</p> <p>26. What qualifications are possessed by support staff?</p> <p>27. Does you PPE access any support from external local or national services?</p> <p>28. Are there any provisions for ensuring that staff understands the individual social, emotional, cognitive and language needs of each child?</p> <p>29. Are there systems for the collaboration between regular and support staff, and staff and parents?</p> <p>30. How effective is the collaboration between regular and support staff, staff and parents?</p> <p>31. Are support staff assigned to specific children or specific classrooms?</p> <p>32. What is the usual role of the support assistants in the classroom?</p>	
3. CURRICULUM			
<p>3.1. A curriculum based on pedagogic goals, values and approaches which enable children to reach their full potential in a holistic way.</p> <p>3.2. A curriculum which requires staff to collaborate with children, colleagues and parents and to reflect on their own practice.</p>	<p>Policy and legal provision</p> <p>27. Is there a national and/or local curriculum plan for fostering children's learning? Is the curriculum plan fostering the holistic development of children or does it focus on particular needs (e.g. academic, social, physical ...)?</p> <p>28. Does the regular curriculum plan take into account the diversity of children's needs or are there separate additional curricular provisions for children at risk?</p> <p>29. Is there provision for formative assessment of children's development and learning?</p> <p>30. Is there provision for ensuring the equal valuing and treatment of each child?</p> <p>31. Are there policies and measures for regular and support staff and parents to collaborate in the identification, assessment and provision for children's individual needs (e.g. IEPs)?</p>	<p>Interviews with IPPE provision stakeholders</p> <p>Curriculum</p> <p>33. Do you make use of a national or a local curriculum plan?</p> <p>34. What areas of child development does the curriculum include – physical, cognitive, language, social and emotional development?</p> <p>35. Does the curriculum emphasize content that is connected to children's real world experiences?</p> <p>36. Does the curriculum include free play and opportunities for individual children's particular interests and initiative?</p> <p>37. Do staff members and/or specialists individualize, adapt, and modify the curriculum to meet the individual educational or care needs of children?</p> <p>38. Do staff implement flexible, comprehensive curricular plans that are oriented to the children, family, and cultural contexts?</p>	

Practice

32. Are there any national evaluations of the outcomes of PPE for children in general, and particularly for children at risk? If yes what are the findings?
33. Are there provisions for the active engagement of each child, whatever his or her needs, in learning and social activities in PPE?
34. What proportion of children 3yrs to compulsory education are identified as having SEN?
35. What provisions are there for meeting the additional needs of children who are identified as having SEN?
36. Do staff implement flexible, comprehensive curricular plans that are oriented to the children, family, and cultural contexts?
37. How far is the actual PPE curriculum child-centred?
38. Are staff able to meet the needs of children who, while not being formally identified as having SEN, need additional support to engage actively in the learning and social activities of the PPE?
39. Are meetings held regularly at the PPEC provision between staff and parents for the determination of children's individual needs and relevant curricular accommodations?

Children at risk

39. Is there an identified person in charge of planning, coordinating, and monitoring the delivery of services for children at risk?
40. Is there any procedure for staff to realise when some children may be encountering difficulties in reaching adequate development and learning goals?
41. How are the needs of such children identified and assessed?
42. Are there provisions for the active engagement of each child, whatever his or her needs, in learning and social activities in PPE?
43. What proportion of children 3yrs to compulsory education are identified as having SEN?
44. What support provisions are there for meeting the additional needs of children who are identified as having SEN?
45. Are staff able to meet the needs of children who, while not being formally identified as having SEN, need additional support to engage actively in the learning and social activities of the PPE?
46. Do children get individual reports on their achievement and formative needs?

Parents' involvement

47. Are meetings held regularly at the IPPE provision between staff and parents for the determination of children's individual needs and relevant curricular accommodations?
48. Are opportunities provided for families to be involved in PPE program planning and activities?
49. How easy is it for children and parents to access the support of specialised staff?
50. Are families involved in the enhancement of their children's learning at home?

Class observation

51. Is every child enabled to participate actively in all learning and social activities?
52. Are curriculum materials and equipment provided where necessary for children at risk to engage actively in learning and social activities?
53. Do staff have a supportive teaching and caring relationship with children?
54. Do staff engage each child in verbal interaction?
55. Do staff use positive language when speaking to children?
56. Are children involved in setting learning goals?
57. Do children contribute ideas for planning curriculum activities?
58. Are there play activities in which children can take initiative?

		59. Are there opportunities for children to interact actively with their peers?	
4. EVALUATION AND MONITORING			
<p>4.1. Monitoring and evaluating produces information at the relevant local, regional and/or national level to support continuing improvements in the quality of policy and practice.</p> <p>4.2. Monitoring and evaluation which is in the best interest of the child</p>	<p>Policy and Legal provision</p> <p>40. Are there any criteria or standards for the quality PPE provision at national and/or local level?</p> <p>41. Is there provision for national evaluation and monitoring of the quality of PPE provision?</p> <p>42. Is there a system for establishing accountability of staff and systems for quality practice?</p> <p>43. Do quality standards include reference to the level of inclusivity of and response to diversity in PPE provision?</p> <p>44. Is there provision for studying the possible gaps between regulation and implementation of quality provision?</p> <p>45. Is there provision for monitoring and evaluation of the learning and development of children from age 3yrs? Is the provision for evaluation of children’s development holistic?</p> <p>Practice</p> <p>46. How far is national and local PPE provision actually evaluated and monitored?</p> <p>47. Do PPE providers have to submit reports on meeting standards, and if yes, how often and what are the findings?</p> <p>48. How far are children acquiring the age appropriate skills relevant to life-long learning?</p> <p>49. How far are children’s voices listened to in PPE practice?</p>	<p>Interviews with IPPE provision stakeholders</p> <p>50. Are there any quality criteria that your PPE provision has to follow?</p> <p>51. Is the quality of your PPE facility evaluated in any way – by yourselves, local or national authorities?</p> <p>52. Do the quality criteria for your PPE provision make any reference to the level of inclusivity and response to diversity?</p> <p>53. How far does your PPE facility meet the standards for quality PPE provision?</p> <p>54. What makes your IPPE provision a quality service?</p> <p>55. What do you think is the quality factor that has the greatest impact on the wellbeing and development of children at risk?</p> <p>56. Is there any supervision or monitoring of the quality of staff relations with children and/or of the level of children’s participation in learning and social activities?</p> <p>57. Are there procedures that enable parents to give feedback or make complaints about processes in the PPE?</p> <p>58. Are there procedures for evaluating children’s progress in the main areas of development (physical, cognitive, language, social and emotional)?</p> <p>59. Are there procedures for involving children and parents in the evaluation of the PPE services?</p>	
5. GOVERNANCE AND FUNDING			
<p>5.1. Stakeholders in the IPPE system have a clear and shared understanding of their role and responsibilities, and know that they are expected to collaborate with partner organisations.</p> <p>5.2. Legislation, regulation and/or funding supports progress towards a universal legal</p>	<p>Policy and practice</p> <p>60. Under which ministry(ies)/department(s) are PPE provisions regulated?</p> <p>61. Is there consensual agreement at national level on the aims, objectives, and standards of inclusive PPE provision?</p> <p>62. Are the standards for PPE provision regulated at national (central), regional, or local levels?</p> <p>63. Is free or affordable provision guaranteed to all children age 3yrs and over?</p> <p>64. Which entity(ies) provide funding for PPE provision?</p> <p>65. What additional economic measures are available for children at risk and families to access PPE?</p>	<p>Interviews with IPPE provision stakeholders</p> <p>60. Under which ministry(ies)/department(s) is your PPE provision regulated?</p> <p>61. Are the aims of the inclusive PPE services shared among the leadership, staff and parents?</p> <p>62. What are the main characteristics of the leadership of your PPE provision?</p> <p>63. Does the leadership have any significant impact on the inclusivity and response to diversity of the PPE provision? If yes how?</p> <p>64. How are any conflicts about the aims and processes of PPE between regular and support staff, and between staff and parents resolved?</p> <p>65. Is enrolment in your PPE free and/or affordable for all children and families in the locality?</p> <p>66. Is there additional funding available for enabling children at risk to attend the PPE? How many parents access such funding?</p>	

<p>entitlement to publicly subsidised or funded IPPE, and progress is regularly reported to all stakeholders.</p>	<p>66. Is additional funding for children at risk allocated to individual children and families or to the classroom and school, or in some other way?</p> <p>Practice</p> <p>67. How far does the standard of PPE provision vary across regions and localities?</p> <p>68. What proportion of children 3yr-compulsory education make use of additional funding?</p> <p>69. What proportion of total funding for PPE provision is made up by additional funding for children at risk?</p>	<p>67. Is additional funding allocated to the school or to the child and parents?</p> <p>68. Who finances this PPE service?</p>	
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