

Susan Greener, human development specialist at Compassion International, designed the following Program Quality Assessment form. Susan has shared this form with Mission of Mercy as we are in process of designing a similar evaluation tool for our project managers and partners. Program managers are advised to print this form and use it now as a self-evaluation tool.

Program Quality Assessment

Today's Date: _____

Program Information

Project Number: _____

Number of years with Compassion: _____

Program Director/Contact Person: _____

(IPM 3.9.1, 3.9.6)

Age or Grade Range of Each Group Division in Project (e.g., 3-5, 6-9, 10-12, 13-18, etc.)	Number of Registered Children by Age or Grade Grouping	Number of Sponsored Children by Age or Grade Grouping	Number of Adults Assigned to Each Age or Grade Group (Divide by paid staff vs volunteers)	Adult-to-Child Ratio for Each Age or Grade Group

Times that classroom/groups are in session: (IPM 3.9.6)

Days of the week (circle all that apply): M T W Th F Sa

Times	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Starting time						
Ending time						

Total hours children meet per week: _____ (IPM 3.9.6)

Rater Information

Name and title: _____

Time rating/observation began: _____ Time ended: _____

Additional comments:

Age or Grade Range of Classrooms/Groups	Comments

Key Result Area #1: Learning Environment (not in IPM)

1-1. The project is a safe and healthy environment for children.

1	2	3	4	5
Project is crowded; areas for children used to store non-program materials such as broken equipment; there are safety/health hazards (broken toys, unsanitary surfaces; inadequate toileting facilities; flammable materials; exposed electrical outlets/cords; pieces of broken glass/metal; poisons); no First Aid Kit; inadequate ventilation/lighting; hygiene practices not followed		Project is somewhat crowded; minor safety/health problems (e.g., dirty surfaces/toys); First Aid Kit is present, but inadequately stocked; ventilation and lighting are somewhat inadequate; good hygiene practiced sometimes; some adequate toileting facilities		Project is not crowded; area is free of health/safety hazards; adequate ventilation and lighting; sanitary; First Aid Kit is present and well-stocked; good hygiene routinely practiced; toileting facilities are clean, private, and adequate in number

1-2. Project environment is intellectually stimulating with materials that appeal to multiple senses (sight, hearing, touch, smell, taste).

1	2	3	4	5
Project has no decorations or bright colors; no manipulative learning materials; available materials lead to only one outcome (e.g., coloring books, worksheets, cut-outs); materials do not cover all senses		Project has some decorations; some manipulative learning materials; materials challenge some, but not all senses; some materials are open-ended (e.g., can be used for multiple learning objectives)		Project has many manipulative materials that stimulate the senses and that are multi-sensory (e.g., objects from nature, children's work, samples of writing, blocks, fabric, art supplies, books, etc.); project is decorated with brightly colored items that are placed at the child's eye level

KRA Area #2: Project Routine and Guidance (not in IPM)

2-1. Adults establish a consistent project routine. Children are aware of the routine.

1	2	3	4	5
Adults and children do not follow a consistent schedule; events are unplanned; children are not aware of the routine and depend on adults to tell them what happens next		Adults & children sometimes follow a routine; adults sometimes refer to a schedule; children are somewhat aware of routine, but still dependent on adults for direction		Adults and children follow a consistent sequence of events; adults refer to the schedule; children are aware that there is a routine & can anticipate what comes next; schedule is posted publicly

2-2. Schedule is developmentally appropriate. Appropriate amounts of time are allotted for activities (they fit the child's capacity and attention span). Activities are well-balanced between active/quiet, indoor/outdoor, individual/small group/large group, free choice/adult-directed activities.

1	2	3	4	5
Children have too little or too much time for most activities as indicated by appearing rushed, frustrated, or bored; children spend too much time in 1 type of activity; little variety		Children have an appropriate amount of time for some activities as indicated by appearing rushed, frustrated or bored some of the time; activities are somewhat balanced		Children have an appropriate amount of time for activities as indicated by active engagement and focused appearance during activities; activities are well-balanced

2-3. Children clearly understand rules and consequences for breaking rules. Rules are developmentally appropriate and consistently enforced.

1	2	3	4	5
No written policy exists; rules or consequences are not apparent or children are not aware of rules; rules are too complicated or consequences are too severe for the children's age; enforcement is inconsistent		Some rules are understood by children; children have some sense that there are rules and consequences; rule/consequences somewhat appropriate for children's age; enforcement of rules is somewhat consistent		Written policy exists; simple rules and clear consequences are clearly understood by children; rules & consequences are appropriate for children's age & capacity; enforcement is consistent

2-4. The program has a child attendance policy that is clearly understood by staff, children and caregivers. Adequate records are kept and follow-up takes place for truant children. (IPM 3.9.5)

1	2	3	4	5
There is no attendance policy or it is not clearly understood; no follow-up occurs; records are not kept		There is an attendance policy, but it is not always implemented; records are incomplete		The attendance policy is known by all and is consistently implemented; complete records are kept

KRA Area #3: Adult-Child Interaction Quality

3-1. Children's basic physical needs are met. (IPM 3.9.3)

1	2	3	4	5
Nutritious food is not provided; denial of food is used as a form of punishment or control		Nutritious food is sometimes provided; denial of food is sometimes used for control or discipline;		Nutritious food is provided; denial of food is not used as a form of control or punishment

3-2. Prompt and appropriate health treatment is obtained (IPM 3.9.3).

1	2	3	4	5
Injuries/illness are not attended to promptly or appropriately; there are children with illness/injury; physical appearance of poor care/health		Injuries/illnesses are sometimes attended to promptly & appropriately; most children appear healthy and well cared-for		Injuries and illnesses are attended to promptly & appropriately; children appear healthy and well cared for

3-3. Adults create a warm and caring atmosphere for children. Adults know the children well and interact with them frequently and with respect. (IPM 3.9, supports 3.9.4, 4.2.5)

1	2	3	4	5
Adults rarely interact with children; adults primarily talk to one another or to maintain control; adults talk to one another about children in front of other children; adults use shouting, shaming, harsh words, harsh actions; adults do not attend to children who are upset; adults do not know the children well (e.g., name, family situation, preferences)		Adults sometimes show positive attention to children; adults sometimes interact harshly with children; adults sometimes attend to children who are upset; adults know some children well		Adults show positive attention to children (e.g., smiling, affection, calm voice, eye contact when culturally appropriate); adults frequently interact/play with children; adults attend to children who are upset; children go to adults for comfort, help, and guidance; adults know children & their situations well and use their names frequently

3-4. Adults acknowledge individual children's accomplishments. Children are encouraged to take initiative in the project. Adults encourage children in developing positive self-image and worth. (IPM 3.9.4, 4.2.5)

1	2	3	4	5
Adults do not acknowledge children's efforts; adults do not encourage children's initiatives; children are criticized frequently; children are not told of their worth		Adults sometimes acknowledge children's efforts; adults sometimes encourage initiatives; children are sometimes criticized; children are sometimes told of their worth		Adults acknowledge children's efforts; adults actively encourage initiative; children are praised frequently and reminded often of their worth

Key Result Area #4: Curriculum Planning and Assessment

4-1. Project uses a developmentally appropriate (age and culturally sensitive) and documented curriculum model to guide program practices. Curriculum is holistic, covering spiritual, physical, intellectual, and socio-emotional development. (IPM 3.9.1)

1	2	3	4	5
Project has no identifiable curriculum to guide practice; there is no documentation of curriculum planning; curriculum is not age-graded or based on sound practice; curriculum is not holistic; curriculum is not culturally sensitive		Project sometimes uses 1 or more identifiable curriculum modules; documentation exists for some curriculum components; some curriculum is age-graded & based on sound practice; some curriculum is culturally sensitive		Project consistently uses holistic curriculum; components are documented; approach is age-graded and based on sound educational practice; curriculum is based on cultural context (e.g., pictures & examples fit culture)

(Ken Wilson will not use this portion in his audit. It is too detailed and time-consuming. However, it may be useful for others). Please check the age groups and corresponding curricular areas that project covers:

Age/Grade Group	Literacy	Christian Educ.	Health/Physical	Socio-Emotional	Intellectual	Vocational

4-2. Project staff maintains records on children (child history form, health/immunization records, updates, development/observational child assessments, anecdotal records, referrals, school records, completion plans). Information is used to guide program practice. (IPM 4.2.5)

1	2	3	4	5
Staff does not maintain systematic records; records are not used to inform practice		Staff maintains some records, but they are not systematic or complete; records are sometimes used to inform practice		Staff maintains systematic and complete records on children in program; information is used to guide program practice

Key Result Area #5: Parental/Caregiver Involvement

5-1. Parents (caregivers) are welcome in project and well-informed about their children's progress. They are given information to enhance their children's development. (IPM 3.9.6)

1	2	3	4	5
Parents are not encouraged to volunteer; parents are not welcome in project; staff do not communicate with parents about child; staff do not educate parents about enhancing children's development		Parents are sometimes invited to participate in limited ways; staff and parents interact sometimes; some information is provided about project activities & child development		Parents are encouraged to participate in a variety of activities; staff & parents interact often; parents are given information to support their child's development

5-2. Parental (caregiver) input is actively sought and active parental participation is encouraged in project planning and oversight. (IPM 2.2, 3.6.2.1)

1	2	3	4	5
Parents are not represented on the project committee; no documented evidence that parental comments are not sought; parental comments are not considered to be important in project planning		Parents are somewhat represented on project committee; documentation indicates that parental input is sometimes sought; parental comments are sometimes incorporated in project planning		Parents are well represented on project committee; documented evidence that parental input is actively sought; parental comments are regularly incorporated into project planning

Key Result Area #6: Staff Qualifications, Development, and Turnover (IPM 3.6.2.2)

6-1. Project staff have appropriate experience and training. Job descriptions exist for staff positions. Potential staff members are screened for qualifications for working with children.

1	2	3	4	5
None of the staff have appropriate experience or training; no job descriptions exist; duties are not clearly understood; potential staff are not screened before working with children		Some staff have appropriate experience or training; job descriptions exist for some positions; duties are somewhat understood; staff are sometimes screened		All staff have appropriate experience or training; job descriptions exist; duties are clearly understood; staff are screened before working with children

6-2. The project has regularly-scheduled participatory, in-service training. Training is based on assessed program needs and is provided by qualified trainers, including the PF or TA. Training includes informal sessions, and does not necessarily mean large, formal events.

1	2	3	4	5
Staff do not participate in any training; if training occurs, it is infrequent; training is not relevant to program needs; training is primarily lecture; trainers are not qualified		Staff participate in some training (at least 2-3 times per year); training topics are relevant to program needs; some "hands-on" training is done; trainers are somewhat qualified		Staff participate in 5 or more training events per year; training topics are relevant to program needs; training is participatory; trainers are qualified

6-3. Staff are regularly observed in the program setting and provided with feedback by someone who is familiar with the project's goals and methods for working with children. (For example, a qualified observer could be the PF, project director, or a head teacher).

1	2	3	4	5
Staff are not observed or evaluated; OR the person observing is unfamiliar with the program		Staff are observed & evaluated by someone familiar with program, but do not participate in the evaluation or receive feedback on performance		Staff are observed & given feedback by person familiar with program; staff & observer discuss ways to improve program & personal performance

6-4. There is continuity in staff (and/or volunteers) who have regular contact with children.

1	2	3	4	5
Staff turnover is 40% or more in the past 12 months; significant turnover in several key positions		Staff turnover is 20-30% in the past 12 months; some turnover in key positions		Staff turnover is 10% or less in the past 12 months; continuity in key positions