

Teacher - Baseline Questionnaire

This questionnaire forms part of the initial consultation to further understand the needs and requirements of the school but will also form a baseline for you to compare to a similar Evaluation Questionnaire which we will ask you to complete at the end of one month and again after a further four or five months.

Name:

Date:

Name of the School:

Postcode:

Contact Number and Email Address:

- 1) What level of adult input do you feel the children in your class need in play?
Mark on a scale of 1-5 with 5 representing a high level of input. For example, children may ask for advice on selecting a new activity once they are bored of the current one.

1 2 3 4 5

- 2) Are there children in your class who tend to be left out of/ shy away from group activities?
If yes, feel free to add additional comments considering percentages.

- 3) Do you feel the children challenge themselves while playing?
Mark on a scale of 1-5 with 5 representing very well.

1 2 3 4 5

- 4) Do the children find it difficult to settle after play time?
Mark on a scale of 1-5 with 5 representing very well.

1 2 3 4 5

- 5) Is time after breaks taken up resolving playground conflict? If so how often does this happen and what type of incident are these?
- 6) Are there children in your class that lack concentration after play time? If so, what percentage of the class?
- 7) How often would you say you handle concerns from parents regarding incidents in the playground / children being left out at play time?
- Weekly
 Monthly
 At least once a term
 Other (please specify)
- 8) Do you ever use play as a means of delivering a lesson to your class?
If so, could you perhaps give an example of the sort of activity you would offer.
- 9) Any other comments or thoughts about how the children use play in and outside of the classroom setting.

Thank you for filling in the questionnaire.