

Questionnaires for Service Providers

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The Meso "Family" Questionnaire Introduction

Through several studies and many encounters with parents and professionals, we have learned a lot about the importance of the relationship between the parents of a child who is risk for developmental delays and the professionals who work with this child. By filling out this portion of the questionnaire you will be helping to determine what is important in the parent/professional relationship.

Please note that these questionnaires are completely anonymous. However, by specifying your community (at bottom), we can try to determine where some of the difficulties experienced by the families you work with seem to come from.



Section A: Information about Services (1)



I would like to know more about services for the following so I can then direct parents to them:

1. Funding f	1. Funding for children with special needs						
O Yes	O No	O Not sure	O Not applicable				
2. Ministry o	2. Ministry of child and family development services						
O Yes	O No	O Not sure	O Not applicable				
3. Ministry of	of health servi	ces					
O Yes	O No	O Not sure	O Not applicable				
4. Ministry o	of education s	ervices					
O Yes	O No	O Not sure	O Not applicable				
5. Marriage	counseling an	d/or therapy					
O Yes	O No	O Not sure	O Not applicable				
6 General a	ounceling and	or psycho-therapy					
O Yes	Ourisering and O No	O Not sure	O Not applicable				



Section B: Information about Services (2)



I would like to know more about services for the following so I can then direct parents to them:

7. General cl	hild developm O No	O Not sure	O Not applicable	
_	levelopment v	<u> </u>		
O Yes	O No	O Not sure	O Not applicable	
9. Communi	cation develo	pment warning sign	IS	
O Yes	O No	O Not sure	O Not applicable	
_	*	nt warning signs		
O Yes	O No	O Not sure	O Not applicable	
11. Social/er	notional warn	ing signs		
O Yes	O No	O Not sure	O Not applicable	
12 Where to	go for financ	pial support		
O Yes	O No	O Not sure	O Not applicable	
O Tes	O NO	O Not suic	• Not applicable	
13. Informat	ion about resp	oite care		
O Yes	O No	O Not sure	O Not applicable	
14 Informat	ion about pare	ent support groups		
O Yes	O No	O Not sure	O Not applicable	
J 105	3 110	1.00 5410		



The Exo "Community" Questionnaire Introduction

Through several studies and many encounters with parents and professionals, we have learned a lot about the importance of the relationship between the parents of a child who is risk for developmental delays and the professionals who work with this child. By filling out this portion of the questionnaire you will be helping to determine what is important in the parent/professional relationship.

Please note that these questionnaires are completely anonymous. However, responses will be tallied by getting the first 3 digits of your postal code. This will help determine where some of the difficulties you are experiencing might be coming from.



Section A: Organizational availability (status)

agency:				
~	~		ne a child with special needs into its system	
O Yes	O No	O Not sure	O Not applicable	

My organization/institution/school/preschool/day care center/community

2. Is open to any/all children regardless of developmental issues

O Yes

O No

O Not sure

O Not applicable

Section B: Organizational availability (wants)



My organization/institution/school/preschool/day care center/community agency would like to:

3. Have all	the necessary	resources to welco	me a child with special needs into its system
O Yes	O No	O Not sure	O Not applicable
4 -		1 11 2	
4. Be open	to any/all chile	dren regardless of o	developmental level
4. Be open O Yes	to any/all chile	dren regardless of o	developmental level O Not applicable



Section C: Organizational needs (1)



My organization/institution/school/preschool/day care center/community agency needs help in:

5. Providing	quality progr	ramming to children	n with special needs
O Yes	O No	O Not sure	O Not applicable
C 11' '	1:0 1 0	. 1	
6. Hiring qu	alified profess	sionals	
O Yes	O No	O Not sure	O Not applicable
7. Training a	qualified profe	essionals	
O Yes	O No	O Not sure	O Not applicable
J ies	O No	O Not sure	O Not applicable
8. Locating	qualified prof	essionals	
O Yes	O No	O Not sure	O Not applicable
9. Having th	e right equipr	ment for a child wit	h special needs
O Yes	O No	O Not sure	O Not applicable
10. Informin	ng the parents	of typical children	about the inclusion of a child with special
needs in	the program a	and/or classroom	
O Yes	O No	O Not sure	O Not applicable
11. Finding	the necessary	funds to include ch	nildren with special needs in our programs
O Yes	O No	O Not sure	O Not applicable
12. Finding	the necessary	resources to make	the program and/or school accessible to a
	th special need		
O Yes	O No	O Not sure	O Not applicable
Yes	O No	O Not sure	Not applicable



Section D: Organizational needs (2)



What would make your school/preschool/day care center/community agency/organization fully accessible to children with special needs?

13. Having mo	ore qualified pe		
O Yes	•		
	O No	O Not sure	O Not applicable
14. Having mo	ore resources a	nd materials	
O Yes	O No	O Not sure	O Not applicable
15. Having mo	ore funding		
O Yes	O No	O Not sure	O Not applicable
16 Having fee	ver students in	our classrooms	
O Yes	O No	O Not sure	O Not applicable
17. Having a l	nigher teacher/s	student ratio	
O Yes	O No	O Not sure	O Not applicable
18. Having a s	special child w	ho does not need a	special aide with him/her at all times
O Yes	O No	O Not sure	O Not applicable
10 Having a s	magial ahild w	ho does not have be	ahayiaral issuas
19. Having a S	O No	O Not sure	O Not applicable



Section E: Organizational obstacles



In your opinion, what are the obstacles to having a child with special needs in your school/preschool/day care center/community agency/organization?

20. Not havi	ng qualified	personnel	
O Yes	O No	O Not sure	O Not applicable
21. Financia	l support serv	vices	
O Yes	O No	O Not sure	O Not applicable
22. Not havi	ng appropria	te material and equ	ipment
O Yes	O No	O Not sure	O Not applicable
23. Not havi	ng enough pe	ersonnel	
O Yes	O No	O Not sure	O Not applicable
24. Afraid o	f what the pa	rents of typical chil	ldren would say
O Yes	O No	O Not sure	O Not applicable
25. Afraid th	nat typical ch	ildren will "copy" i	inappropriate behaviors of atypical child
O Yes	O No	O Not sure	O Not applicable
26. Afraid at	typical child	will hurt typical ch	ildren
O Yes	O No	O Not sure	O Not applicable
27. Afraid at	typical child	will destroy proper	ty and/or toys and equipment
O Yes	O No	O Not sure	O Not applicable
28. Afraid h	naving one at	ypical child will lea	ad to others also wanting to be in the program
O Yes	O No	O Not sure	O Not applicable



Section F: Values (1)

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K.

I believe that:

	O No	O Not sure	O Not applicable
80. Every s	school should b	e accessible to AL	L atypical children
) Yes	O No	O Not sure	O Not applicable
1 Even	aragahaal ghay	ld ha agaggihla ta	ALL atypical children
			* *
) Yes	O No	O Not sure	O Not applicable
32. Every 6	day care center	should be accessib	le to ALL atypical children
) Yes	O No	O Not sure	O Not applicable
- 1	l children O No	O Not sure	o young children should be accessible to ALL O Not applicable
- 1	al children shounicate effectiv		l with typical children if they are able to
O Yes	O No	O Not sure	O Not applicable
35. Atynic	al children shoo	ald only be allowed	I with typical children if they do not have
	O No	O Not sure	O Not applicable
behavio			
behavi			



Section F: Values (2)

V	
	-

I would like to:

36. See more j community ag	•	•	nool and/preschool/day care center/
O Yes	O No	O Not sure	O Not applicable
37. See smalle	er class sizes		
O Yes	O No	O Not sure	O Not applicable
		ed programming for cy/home based prog	r children in my school/preschool/day care gram
O Yes	O No	O Not sure	O Not applicable
39. Have fede	ral and provin	cial documents wri	itten in a language that is accessible to all
O Yes	O No	O Not sure	O Not applicable
40. Have fede and/or Fre	1	cial documents wri	itten in several languages not just English
O Yes	O No	O Not sure	O Not applicable
41. Have a con	ntact person at	the ministry of ch	ildren and family development
O Yes	O No	O Not sure	O Not applicable
42. Have a con	ntact person at	t the ministry of he	alth
O Yes	O No	O Not sure	O Not applicable
43. Have a con	ntact person at	t the ministry of ed	ucation
O Yes	O No	O Not sure	O Not applicable
44. Please wri	te your City/T	own:	
45. Please wri	te your Provin	nce/State	
46. Please wri	te the first 3 le	etters of your Posta	l Code: