



The best way to play™

QUEST 2 SCORE SHEET

Please complete all information listed below.

Organization: _____ Assessment Date: _____

Assessor: _____ *Assessor directly responsible for program: Yes/No (circle one)
 (*Does the assessor supervise staff, control budget or have any other responsibility for the program)

Program Name: _____ **Site: _____
 (**Name of the facility or location where a program takes place)

Program and Participant Information

Program Type (select one):

- | | | |
|--|--|------------------------------------|
| <input type="checkbox"/> Camps and Playgrounds | <input type="checkbox"/> Before and After School | <input type="checkbox"/> Creative |
| <input type="checkbox"/> Physical | <input type="checkbox"/> General | <input type="checkbox"/> Childcare |
| <input type="checkbox"/> Competitive | <input type="checkbox"/> Aquatics | <input type="checkbox"/> Other |

Program Duration: weeks: ___ days/week: ___ hours/day: ___ minutes ___

% of Female Participants: _____

Participant Age: From _____ To _____

Total number of children in the program being observed: _____

Total number of staff in the program being observed: _____

Leader Information:

Please record all observed leaders information:

	Name	Position	HIGH FIVE® Training Yes/No
Leader 1			
Leader 2			
Leader 3			
Leader 4			
Leader 5			
Leader 6			

Please use this Score Sheet in conjunction with pages 14- 24 of your QUEST 2 Tool

Section 1: Leader-Child Interactions

Quality Indicator	Score 1-9	Comments
Warmth		
Interest		
Respect		
Individualized Approach		
Involvement		
Positive Leadership		
Children Have Priority		
Total Score		Action:
Multiply by 1.72 = Weighted Score		

Section 2: Supervision and Safety

Quality Indicator	Score 1-9	Comments
Awareness		
Age/stage Appropriate		
Activity Risk Awareness		
Supervision in Transition Areas		
Site Safety		
Total Score		Action:
Multiply by 1.44 = Weighted Score		

Section 3: Child to Child Interactions

Quality Indicator	Score 1-9	Comments
Familiarity Among children		
Respect and Cooperation		
Inclusionary Behaviour		
Atmosphere		
Total Score		Action:
Multiply by 1.34 = Weighted Score		

Section 4: Leader Behaviour and Interactions

Quality Indicator	Score 1-9	Comments
Appropriate Behaviour & Language		
Discretion with Confidential Matters		
Team Effort		
Total Score		Action:
Multiply by 1.26 = Weighted Score		

Section 5: Program Characteristics and Supports

Quality Indicator	Score 1-9	Comments
Program Planning		
Activity Appropriate Space		
Welcoming Environment		
Developmentally Appropriate Equipment		
Access and Quantity of Equipment		
Balance Variety and Choice		
Pace of Activities		
Individual Growth through Group Involvement		
Total Score		Action:
Multiply by 1.00 = Weighted Score		

QUEST 2 Total Score (add the total weighted score for each section)		Action:
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The table below indicates a pre-calculated weighted score for each category. Check your weighted score for each section as well as your total score to see recommended action required.

Leader/Child Interactions	Supervision / Safety	Child/Child Interactions	Leader Behaviour & Interactions	Program Characteristics & Supports	QUEST 2 Total score	Percentage/ Interpretation	Recommended Action
0 to 60.20	0 to 36.00	0 to 26.80	0 to 18.90	0 to 40.00	0 to 181.90	0-60% Poor/Below Average	Immediate Action Required
60.21 to 74.65	36.01 to 44.64	26.81 to 33.23	18.91 to 23.44	40.01 to 49.60	181.91 to 225.56	60-70% Average	Strategy for Improvement Required
74.66 to 93.91	44.65 to 56.16	33.24 to 41.81	23.45 to 29.48	49.61 to 62.40	225.57 to 283.76	70-90% Above Average	Minor Improvements Required
93.92 to 108.36	56.17 to 64.80	41.82 to 48.24	29.49 to 34.02	62.41 to 72.00	283.77 to 327.42	Over 90% Excellent	Maintain High Standard

Follow up Required: Yes/No

Issue Severity: Major/Minor (circle one)

If a major issue is selected in the Database, an email will be sent to the primary and senior contacts of the organization which will include the Issue Overview below.

Follow Up Complete: Yes/No Date: _____

Issue Overview: _____

Supervisor Name (if follow up is required): _____

The purpose of QUEST 2 is to help practitioners determine the quality of a child’s experience in a program based on the determinants of healthy child development. QUEST 2 enables practitioners to identify program strengths as well as those areas that fall short in providing a high quality experience and therefore, require attention.