

## Day In My Life: Pre-School Child

Questions	Responses	Notes
<p><b>Waking Up In The Morning</b></p> <ol style="list-style-type: none"> <li>1. What time do I normally get up?</li> <li>2. Do I normally sleep well? Am I kept awake by TV or anything?</li> <li>3. Am I dry at night, if not do I have help to change my sheets?</li> <li>4. Does someone help me get up or do I get myself up?</li> <li>5. Is there anyone else up when I get up, do I have to get anyone else up?</li> <li>6. Do I have a morning routine or is everyday different?</li> </ol>		
<p><b>Dressing</b></p> <ol style="list-style-type: none"> <li>1. Do I have clean clothes, that fit, are they appropriate</li> <li>2. for the weather?</li> <li>3. Does someone help me get dressed or do I do it myself?</li> <li>4. Do I have help every morning to wash and brush my teeth?</li> </ol>		
<p><b>Breakfast</b></p> <ol style="list-style-type: none"> <li>1. Do I eat breakfast in the morning, what do I have for breakfast, do I get a choice of what I like?</li> <li>2. Is there someone to help me make breakfast?</li> <li>3. Do I eat my breakfast with others or by myself?</li> <li>4. Do I eat my breakfast at the table or in front of a TV?</li> </ol>		

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<p><b>Childcare</b></p> <ol style="list-style-type: none"> <li>1. Do I go to any childcare settings, do I walk or drive, who takes and picks me up?</li> <li>2. Do I tend to arrive at my setting on time or am I late?</li> <li>3. Do I have meals at my childcare setting? Do I tend to eat them well?</li> <li>4. Do I like my setting? Do I settle well there? Do I interact well with other children there? What do I like doing when I am there?</li> <li>5. Do I see anyone for extra help in the setting e.g. Portage?</li> </ol>		
<p><b>Health and Development</b></p> <ol style="list-style-type: none"> <li>1. Do I have access to a health visitor, GP and dentist?</li> <li>2. Have I received my health and development checks from my health visitor?</li> <li>3. Am I achieving my age appropriate milestones?</li> <li>4. Do I receive support from other services to achieve my developmental potential and do always attend these appointments?</li> <li>5. Am I able to communicate/express my thoughts and feelings?</li> <li>6. Do I attend all my medical appointments?</li> </ol>		

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<p>Health and Family</p> <ol style="list-style-type: none"> <li>1. How much time do I spend at home? Who is there to look after me? Is there anyone else who looks after me other than my main carers?</li> <li>2. Do I have any siblings? How is care split between us?</li> <li>3. Do I watch TV and if so, is what I watch okay for my age?</li> <li>4. Do I have regular mealtimes in the home or out of the home?</li> <li>5. Do I sit with others in my household for meals?</li> <li>6. I can get snacks if I tell somebody I am hungry?</li> <li>7. Do I have toys and games at home, are they age appropriate / help me to learn, what is my favourite toy to play with?</li> <li>8. What do my carers do? Do we spend time together or do our own things?</li> <li>9. Do my carers need any extra support for their own health and wellbeing, and do they engage well?</li> <li>10. Have I moved with my family from another country because it was unsafe to live there? Do we have support from other services that are aware?</li> <li>11. Do I have other family members or friends I look forward to visiting?</li> </ol>		

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<p><b>Bed Time</b></p> <ol style="list-style-type: none"> <li>1. Do I have a bedtime routine – who helps me get ready?</li> <li>2. Do I have a set bedtime?</li> <li>3. Do I brush my teeth before I go to bed? Do I need help to do this?</li> <li>4. Where do I sleep?</li> <li>5. Do I like where I sleep?</li> <li>6. Who else is in the house at night-time?</li> <li>7. Do I have my own room, do I share with others, where do I sleep?</li> <li>8. Do I have what I need in my room (bed, curtains, warm floors)?</li> <li>9. Do I sleep well at night or do I get up a lot?</li> </ol>		
<p><b>Additional Considerations</b></p> <ol style="list-style-type: none"> <li>1. Do I have any additional or complex needs (e.g. do I have a physical or learning disability; poor mental health; am I an asylum seeker or have been trafficked or am I a young carer) which can impact on my life?</li> <li>2. Do I need additional support to help me reach my full potential, and if so, do I get that support?</li> <li>3. Could a day in my life be improved, and if so how?</li> <li>4. Do my parents have additional or complex needs and how does this impact upon me?</li> </ol>		



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