Digital Learning Framework Trial Evaluation
Questionnaire for PDST staff: PDST Visit 1

Thank you for your involvement in the trial of the Digital Learning Framework (DLF). This trial is being carried out in 20 post-primary and 30 primary schools.

The Educational Research Centre, Drumcondra, Dublin, has been asked by the Department of Education and Skills to evaluate this trial. This questionnaire is part of that evaluation.

The purpose of the questionnaire is to gather information about your experiences during your first visit to each DLF trial school that you are supporting. It is intended to take no more than 20 minutes to complete. You will be invited to complete a questionnaire for each school again towards the end of the trial in April/May 2018.

Most questions require you to tick a box, while some ask you to type your response.

Your views are very important in contributing to improvements to the DLF when it is rolled out nationally in Autumn 2018.

This PDF version of the questionnaire is for review purposes only: responses should be submitted using the online version.

The questionnaire needs to be completed in one 'sitting'. Please be sure to **click on the SUBMIT button** when you reach the end of the questionnaire, otherwise your responses will not be saved.

Responses of individual schools and PDST staff members will not be identified in published reports. Numeric results will be reported as group averages. Any published comments are anonymised, and for illustrative purposes only.

If you are having any difficulties in completing the questionnaire, please email **DLF@erc.ie.**

If possible, please submit your responses for each school within three days of your first visit to the school.

Thank you!

Logging in to start the questionnaire

1. **Roll number of school:**
   Please ensure that you choose the correct roll number.

   [   ]

2. **Two-digit school ID:**
   Please enter the two-digit school ID assigned by the ERC.
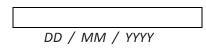
   [   ]

3. **One-digit PDST ID:**
   Please enter the one-digit PDST ID assigned by the ERC. This ID is needed to keep track of responses and will never be used to identify you.

   [   ]

Details of the first school visit

4. **Date of first visit:**

   [   ]

   DD / MM / YYYY

5. **Length of first visit:**

   Less than an hour ☐
   1-2 hours ☐
   2-3 hours ☐
   3-4 hours ☐
   4-5 hours ☐
   5-6 hours ☐
   More than 6 hours ☐

6. **What was the format of this visit?**

   Small group ☐
   Whole school ☐
   Small group, followed by whole school ☐
   Other *(please type below:)* ☐

   [   ]

7. **Number of school staff members (including all staff – teachers, administrative staff, special education staff, etc.) present (all or part of the visit):**

1-2 staff	☐
3-4 staff	☐
5-6 staff	☐
7-8 staff	☐
9-10 staff	☐
11-15 staff	☐
16-20 staff	☐
21-30 staff	☐
31-40 staff	☐
41-50 staff	☐
51 or more staff	☐

8. **Were any non-school staff members present (e.g. parents, external technical support staff)?**

Yes	☐
No	☐

If 'Yes', who else was present?
(please type below:)

9. **Please indicate preparatory activities undertaken by you prior to this first school visit, if any.**
(*tick all that apply*:)

Review of school's plan/documentation relevant to the DLF (e.g. general plan, digital technology plan)	☐
Review of school's draft targets	☐
Phone contact with school	☐
Email contact with school	☐
Other activities *(please type below:)*	☐

Planning for subsequent visits to this school

10. How many further visits to this school are envisaged during the DLF trial?

One ☐
Two ☐
Three ☐
Four ☐
Unsure/not decided ☐

11. Have dates/times for subsequent visits to this school been set?

Yes, all ☐
Yes, some ☐
No, none ☐

12. Please type the number of teachers involved in the DLF trial in this school (i.e. the number of teachers who should receive a questionnaire about the DLF trial to complete):

☐

Your views on the first visit to this school

13. What were the main goals of your first visit to this school?

☐

14. Please indicate your level of satisfaction with this visit, in terms of achieving the visit's goals:

Very satisfied ☐
Satisfied ☐
Not satisfied ☐

15. What were the main challenges identified during this first visit, if any?
These can be typed as a short list or in paragraph form, whichever you prefer.
Type 'none' if none were identified.

>

16. What were the main solutions identified during this first visit, if any?
These can be typed as a short list or in paragraph form, whichever you prefer.
Type 'none' if none were identified.

>

17. Please describe the aspects of the visit that you felt worked best or were most successful.
These can be typed as a short list or in paragraph form, whichever you prefer.
Type 'none' if you have no comments.

>

18. Please describe the aspects of the visit that you felt were most challenging or did not work so well.
These can be typed as a short list or in paragraph form, whichever you prefer.
Type 'none' if you have no comments.

>

19. If you wish, please make additional comments below:

>

Important: Please click on SUBMIT to complete the questionnaire.
Thank you!