

FAMILY PROVIDER SCALE

SURVEY OF PARENTS CHILD CARE STUDY

APRIL 2002

PROVIDER ID: 6	DATE OF OBSERVATION: -20 Month Day
DATA COLLECTOR ID:	START TIME: : AM/PM
AGE OF FOCUS CHILD: Months	END TIME: : AM/PM

FAMILY DAY CARE RATING SCALE

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DATA COLLECTION BOOKLET (Adapted from Family Day Care Rating Scale by Thelma Harms and Richard M. Clifford.
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Survey of Parents Child Care Study
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INSTRUCTIONS FOR USING THE FDCRS

Review the entire scale carefully before attempting to rate family child care home. In order to be accurate, all ratings have to be based as exactly as possible on the descriptions provided in the scale items.

Before starting the observation ask the careprovider to let you know which areas are used for the children. Include both indoor and outdoor spaces. Ask about the ages of the children enrolled in the group, and note them. Look to see where information is posted, such as a schedule, emergency plans, or information for parents.

Ratings are to be assigned in the following way:

- Ratings are based on the current situation that is observed or reported, not on future plans.
- A rating of 1 is given if any part of that description applies.
- A rating of 3 or 5 is given only if all parts of the description are met. All positive descriptions in 3 must be met before any higher rating is given for an item.
- A mid-point rating of 2 is given if nothing in 1 is present and half or more of 3 is observed.
- Any observations listed under rating 3 (minimal) that have an asterisk beneath the check box are considered “negative minimal” observations. If any of these behaviors are NOT observed (and so not checked), you may advance to the next rating level if all other observations are checked.
- A mid-point rating of 4 or 6 is given when all of the lower and half or more of the next higher description applies. **Partial credit within indicators may be given for mid-point ratings.**
- A rating of 7 is given only when all of the description in 5 plus all of the description in 7 applies.
- Some items and indicators apply only to certain age groups. If even one child is within that age group, the item should be rated.
- Be sure to read the Notes when they are provided for an item (*f* refers to notes at bottom of page).

If an item is not applicable because it refers to older or younger children than those enrolled, write N/A next to the box. Score the item as if that indicator wasn’t there.

Here are some hints about the order in which to do the items:

- Begin with those items most easily observed (furnishings for routine care and learning, furnishings for relaxation and comfort, child-related display, and indoor space arrangement: Items 1-4).
- Some activities happen only at specific times of the day. Be aware of those items and rate them as they occur (arriving/leaving, meals/snacks, nap/rest, diapering/toileting, personal grooming: Items 7-11).

Questions to use have been provided in the Probes for those items that require information that is not likely to be observed. The numbers refer to the quality level (1, 3, 5 or 7) followed by the indicator number. Thus, (3.3) means a question for indicator 3 under level 3. Q (1-7) means that the question must be asked for information needed to rate all the levels of quality, 1 through 7 for the item.

Ask only those questions needed to decide on a score. For example, if you can give a score of 3 based on your observation, and are not sure whether you can give a higher score because you were not able to observe all indicators, then you can ask the questions necessary to find out whether the score can be a 4 or 5. Do not ask the questions needed for a 7 until you know that the score is at least a 5. If you already know, based on what you observed, that the score can be no higher, do not ask further questions.

Items with additional notes will be indicated by a # symbol on the bottom of the page.

Using the **Family Provider Scale**: take notes as you do the observation. If you have obtained information during the interview, record that data before starting the observation. The CCS-FDCRS Booklet has a box to check near each indicator that is met, as well as numerical scores for the item as a whole.

- It is advisable to use pencil on the booklet during the observation. The score you finally decide on should be marked clearly.
- Check each indicator that is met based on observation or reported by the caregiver.
- The CCS-FDCRS can be marked to indicate which item(s) you need to ask questions about in order to get additional information. Use the questions that are provided in the CCS-FDCRS for various indicators. By preparing yourself in this way, questions can be asked systematically in a short period of time. Remember to ask only those questions needed to check the indicators for a score.

FAMILY DAY CARE SCALE (FDCRS)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

	Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
ITEM #1: FURNISHINGS FOR ROUTINE CARE AND LEARNING	1.1 <input type="checkbox"/> Not enough furniture for eating, sleeping, and storing children's things#		3.1 <input type="checkbox"/> Enough pieces of furniture to meet basic needs of all children		5.1 <input type="checkbox"/> Furniture used for child care routines and play activities made suitable to children's size (e.g., high chairs or adult chairs with cushions used while eating or doing art work, booster seats)		7.1 <input type="checkbox"/> Some child-sized furniture appropriate for age of children (e.g., small table and chairs)#
	1.2 <input type="checkbox"/> No furnishings provided for play activities		3.2 <input type="checkbox"/> Some furnishings used for play activities (e.g., kitchen table used for art, couch used for reading)		5.2 <input type="checkbox"/> Furnishings well cared for (e.g., sheets changed weekly or more, tables washed after eating or art activity)		7.2 <input type="checkbox"/> Furniture does not crowd space used for child care
	1.3 <input type="checkbox"/> Furniture broken or not safe		3.3 <input type="checkbox"/> Furnishings are safe and in good repair				7.3 <input type="checkbox"/> Child-sized play furnishings (e.g., play kitchen, easel)
			3.4 <input type="checkbox"/> Place to store children's own things				

1.1 Since children are different sizes at different ages, the intent here is that furniture should be the right size for the children in care. Furniture that is smaller than adult-size may not be the right size to be considered child sized for a 2- and 3-year-old but may be child-sized for a 6- or 7-year-old. For example, when child sits in chair, child's feet rest on floor; table height comfortable (knees fit under table, elbows above table).

1.1 Child sized: The intent is to have furnishing of proper size for infants and toddlers. For example, if a child is using a little chair, the child's feet should rest on the floor. Table height should be comfortable, knees fitting under table, elbows above table.

1.1 To score *No* for this indicator, there must be some arrangement made to store children's things, such as coat hooks or a shelf for coats and diaper bags or backpacks.

7.1 *N/A* for infants (less than 12 months) and children aged 7 years or older.

ITEM #2: FURNISHINGS FOR RELAXATION AND COMFORT	1.1 <input type="checkbox"/> No soft furniture, cushions, or rugs available for children to use, except for cribs or cots	3.1 <input type="checkbox"/> Children allowed to use at least one piece of soft furniture in area used for child care (e.g., a soft chair or couch, cushions)	5.1 <input type="checkbox"/> Children allowed to use 2 or more soft pieces of furniture or 4 pillows in area used for child care	7.1 <input type="checkbox"/> Soft, child-sized furnishings provided especially for children (e.g., floor cushions, beanbag chairs, child-sized rocker, padded high chair do not include cribs)#
		3.2 <input type="checkbox"/> Some carpeted area for children's use	5.2 <input type="checkbox"/> Many soft or stuffed toys for daily use	
			5.3 <input type="checkbox"/> Adult provides body	

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

contact for infants and toddlers under 24 months (*e.g., holds and rocks children*)

7.1 To provide comfort, relaxation, and reassurance.

ITEM #3:

CHILD-RELATED DISPLAY

1.1 No child-related pictures, mobiles or children's artwork put up for children to look at

3.1 Some children's artwork displayed

5.1 Much children's work displayed: at least two items per child enrolled#

7.1 Many items of interest to children on child's eye level or where children are held up to see (*e.g., in feeding area, near cribs, crawling and play areas*)

3.2 Some store-bought or adult-made pictures put up especially for children to look at (*e.g., nursery rhymes, ABC's, numbers, holidays*)

5.2 Some children's work down low on child's eye level

7.2 Display changed at least monthly to match children's activities and interest

PROBES:

3.1 *If there is artwork displayed, ask:*

Whose artwork is this? (Note that credit is given only for artwork done by the children in care.)

7.2 How long do you keep the same pictures up?

How do you decide what to put up for them to look at?

5.1 Some flexibility can be used in determining whether there is enough art work displayed to give credit. First, no art work is required for any child under 12 months of age. However, art work done by children in this age group should be counted if it is displayed. Second, interpret "at least 2 items per child enrolled" to mean that the total number of displayed items should be twice the enrollment (i.e., if there are 6 children enrolled, there should be approximately 12 items displayed.) In addition, it should be evident that most of the enrolled children over 12 months of age are represented in the display. If it is not easy to determine whether the work of most children is displayed, ask the provider to tell you about who did the various items.

ITEM #4:

INDOOR SPACE ARRANGEMENT

1.1 Inadequate space set aside for use by children

3.1 Adequate space set aside for use by children: crawling space for infants, play space for toddlers and

5.1 Space is well arranged (*e.g., not crowded with furniture, traffic patterns do not interfere with*)

7.1 Additional materials organized and available to add to or change play areas

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
or playpens for long periods (If no children under 24 mo.--Code N/A)# 1.3 <input type="checkbox"/> Area used lacks good ventilation, heat, or light		preschoolers 3.2 <input type="checkbox"/> Space cleared of breakable objects and other “no-no’s” so children can play with few restrictions 3.3 <input type="checkbox"/> Area used for child care has good light, ventilation, and temperature		activities, materials with similar use placed together)# 5.2 <input type="checkbox"/> Two or more play areas clearly defined (e.g., doll play, blocks, art, or book areas)# 5.3 <input type="checkbox"/> Adequate storage and space to play in each activity area (e.g., box or shelves for storing blocks near space on floor for block play)# 5.4 <input type="checkbox"/> Space set up so children of different ages can use it at the same time #		7.2 <input type="checkbox"/> Arrangements made to promote independent use by children (e.g., labeled storage boxes or shelves)

PROBE:

- 7.1 Do you have any additional play materials that are not out now? (Ask to see.)
- 1.2 When infants and toddlers are confined in swings, cribs, playpens, infant seats, or highchairs, and thus prevented from moving around freely, they cannot learn through exploration. They may also be cut off from interaction with others. Generally, a very young child should not be confined at all if unhappy. Even if a child is playing happily, confinement should not exceed a period of half an hour at a time. Most of the day should be spent unconfined.
- 5.1 5.1 can be score *No*, even if 5.3 is cored *Yes*. 5.1 requires an evaluation of spaces used for both play and four routines. 5.3 evaluates only the storage and space used for play activity areas.
- 5.2 If 5.2 is scored *No* (i.e., there are not 2 or more play areas clearly defined) it is unlikely that 5.3 would be scored *Yes*.
- 5.3 Adequate storage and space must be provided for the clearly defined areas required in 5.2. Materials that are brought out occasionally, are not considered here.
- 5.4 The intent of this indicator is for all children enrolled to be able to use the space used for child care, whether there are several age groups or just one.

ITEM #5:

ACTIVE PHYSICAL PLAY

1.1 <input type="checkbox"/> No safe outdoor or indoor space used for active physical play (e.g., no space for tricycle riding, ball playing, climbing; or infants not taken	3.1 <input type="checkbox"/> Safe outdoor physical play for all ages provided at least 3 times a week year-round except in bad weatherf (e.g.,	5.1 <input type="checkbox"/> Outdoor space used by children for 1-3 hours daily year-around, except in bad weather 5.2 <input type="checkbox"/> Physical activity	7.1 <input type="checkbox"/> Many materials for each age group 7.2 <input type="checkbox"/> Materials provided for toddlers’ and preschoolers’
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MATERIALS:
INFANTS:
OUTDOOR
PAD OR BLANKET,
CRIB GYM, PUSH/
PULL TOYS

TODDLERS AND
PRESCHOOLERS:
WAGON,
TRICYCLE,
SCOOTER, DOLL
CARRIAGE, BALLS,
CLIMBING
OBJECTS, SLIDE,
CUSHIONS OR RUG
FOR TUM-
BLING, LARGE
CARDBOARD
BOXES

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
<p><i>outdoors)</i></p> <p>1.2 <input type="checkbox"/> No crawling space used indoors for infants and toddlers</p> <p>1.3 <input type="checkbox"/> No materials, or materials unsafe, in poor repair#</p>		<p><i>safety assured by close supervision; area fenced if needed)#</i></p> <p>3.2 <input type="checkbox"/> Clean, safe indoor space provided for infants and toddlers to crawl and walk around much of the day</p> <p>3.3 <input type="checkbox"/> Some materials, all in good repair</p>		<p>provided indoors for all ages in bad weather</p> <p>5.3 <input type="checkbox"/> Materials stimulate variety of large muscle skills (<i>e.g., crawling, walking, balancing, climbing, swinging, playing ball</i>)</p>		<p><i>imaginative play (e.g., movable boards and crates for creative building)#</i></p> <p>7.3 <input type="checkbox"/> New challenge added each week through planned activity (<i>e.g., obstacle course, crawling tunnel, games with beanbags, tumbling on mat, ball games</i>)</p>

PROBES:

- 3.1 & 5.1 How often do the children play outside? For how long? When do you keep the children inside all day?
- 7.1 & 7.2 Do you have any additional play materials that you use outdoors? (Ask to see.)
- 7.3 Do you plan any outdoor play activities? If so, about how often do you have planned outdoor activities? Please give examples.
- 1.3 Children should be dressed properly and allowed to play outdoors except on the few days of very bad weather, such as rain or snow.
- 1.3 This indicator is scored *Yes* if there are no materials, or if some materials are in such poor repair that they are dangerous, or if most of the materials are in poor repair. A few materials may be in poor repair as long as they do not pose a serious threat to children's safety.
- 3.1 Some material in poor repair allowed if not serious safety threat.
- 7.2 *N/A* if *only* infants (less than 12 months) are in care.

ITEM #6a:

SPACE TO BE ALONE (INFANTS/TODDLERS)

<p>1.1 <input type="checkbox"/> Children left alone without interaction for half an hour or longer while awake (<i>e.g., kept in crib or playpen, isolated in room alone</i>)</p> <p style="text-align: center;">OR</p> <p>1.2 <input type="checkbox"/> No chance to play alone</p>	<p>3.1 <input type="checkbox"/> Caregiver provides space to be alone, protected from others, for infants/toddlers (<i>e.g., puts baby in playpen or crib while playing with popular toy for a short period of time</i>)</p>	<p>5.1 <input type="checkbox"/> Careprovider interacts frequently (more than once every 10 minutes) with infants/toddlers who are in space to be alone (<i>e.g., smiles at or talks to infant in high chair playing with toys; brings new toys to two toddlers playing</i>)</p>	<p>7.1 <input type="checkbox"/> Planned activities provided for play-alone spaces</p> <p>7.2 <input type="checkbox"/> Play-alone activities used by careprovider to give individual time and attention (<i>e.g., play special game, talk about mobile</i>)</p>
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CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
protected from others		3.2 <input type="checkbox"/> Removes child from alone space within half an hour, or sooner if child seems unhappy or bored # 3.3 <input type="checkbox"/> Interacts with child at least every 10 minutes		together in protected area)		

PROBES: *If infants and toddlers have not been observed in protected space, ask:*

- 1.2 & 3.1 Do you ever need to give the infants and toddlers protection from being bothered by the others, such as when they want to play with a special toy? If so, how do you do that?
- 5.1 If you have one or two of them playing protected from the others, about how often do you check on them?
- 7.1 Do you ever plan activities so that 1 or 2 children can play alone? *If yes, ask:* What kind of activities?

Space to be alone is not to be confused with time out. The intent of Item 6 is to provide relief from the constant social pressure of groups of children. For infants and toddlers, being kept in a crib or playpen without interaction for periods of half an hour or more while awake is an inappropriate use of alone space, even if toys are provided. Score this item N/A if no infants/toddlers are enrolled or if the children generally get along very well and the caregiver uses other effective means of protecting a child from being annoyed by others. For example, space to be alone is not needed (score item N/A) if the caregiver successfully redirects annoying children to use other toys, rather than the toy another child is already using. However, the item must be scored if *a space to be alone is used that impedes a child's ability to explore and learn for a significant amount of time during the observation or if a child is often annoyed by others, and there is no safe space for the child to escape the annoyance.*

Score N/A - if children generally get along and the caregiver uses other effective means of protecting a child from being annoyed by others.

3.2 Score N/A if caregiver does not place child into an alone space that the child cannot leave independently.

ITEM #6b:

**SPACE TO BE ALONE
(2 YEARS AND OLDER)**

1.1 <input type="checkbox"/> No possibility for children to play alone, protected from being bothered by others	3.1 <input type="checkbox"/> Children are allowed to find space to be alone (e.g., in play equipment, behind furniture)	5.1 <input type="checkbox"/> Space is set aside and made safe for one or two children to play, protected from others (e.g., no-interruption rule, space out of sight of other children)#	7.1 <input type="checkbox"/> Caregiver uses play-alone space to avoid problems or to help concentration on an activity
			7.2 <input type="checkbox"/> Play-alone activities provided on a regular basis

PROBES: *If children 2 and older have not been observed in protected "play alone" space, ask:*

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

1-5 Do you ever need to give the children over 2 years of age protection from being bothered by the others? How do you do that?

7.1 How do you use play alone or protected space?

7.2 About how often do you provide play-alone activities? Can you give me an example of what you might provide?

The intent of this item is to give children respite from the pressures of group care in programs where children participate in routines and play together most of the day. In a program where playing alone is enforced during much of the observation, and children are not allowed to play together, then the intent of this item is not being met at all, so score 1.

5.1 The space that is “set aside” must be observed, although children do not have to be observed using the space during the observation. The space must be accessible daily. If children are not observed using the space, look for evidence to show whether the provider is inclined to limit children from getting away from the group, for example, by calling them back to the group when they try to go off to play alone. If the provider limits children so they cannot access private space, then do not give credit.

ITEM #7:

ARRIVING/LEAVING

- 1.1 Greeting of children neglected
- 1.2 Children’s leaving not prepared for (e.g., children’s possessions not ready for parent)

- 3.1 Some children greeted
- 3.2 Children greeted only when convenient for caregiver#
- 3.3 Some talking with parents

- 5.1 Individual greeting and good-bye for all children
- 5.2 Parents greeted as well as children
- 5.3 Caregiver uses arriving/leaving time to share information with parents

- 7.1 Warm, organized greeting and departure for all children regardless of when they arrive or leave (e.g., conversation on arrival; art work, clothes ready for leaving)
- 7.2 Caregiver helps children adjust to arriving/leaving (e.g., directs to favorite toy, talks about plans for tomorrow)

PROBES:

1-7 *If arrival or departure is not observed, ask:* What usually happens when the parents bring their children in the morning?

1-7 Please describe what usually happens when the children leave?

If the caregiver provides transportation to the family child care home for some or all of the children, then ask questions to find out whether the requirements of this item are met under these circumstances.

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

3.2 This indicator must be scored *No* to score 5 or higher.

ITEM #8:

MEALS/SNACKS

IF ALL FOOD SUPPLIED BY PARENTS, CODE 1.5 AND 3.1 AS N/A.

IF PROVIDER SUPPLIES ONLY SNACKS, CODE ON NUTRITIONAL VALUE OF SNACKS.

1.1 Meal/snack schedule not dependable and consistent

1.2 Cooking and eating area not kept clean

1.3 Infants have bottle propped, not held for feeding#

1.4 Infants/toddlers put to bed with bottles#

1.5 Nutritional quality of food is questionable

3.1 Well-balanced meals/snacks served on regular schedule#

3.2 Cooking and eating area clean#

3.3 Sanitary preparation of food#

3.4 Infants held while bottle fed#

3.5 Toddlers seated or head propped when holding own bottle

3.6 Infants/toddlers not put to bed with bottles#

5.1 Careful organization of meal time (*e.g., meal and table prepared ahead*)

5.2 Feeding of different ages handled to avoid waiting (*e.g., babies are bottle-fed before older ones eat, activity provided for children who are fed later*)

5.3 Caregiver talks with children and provides pleasant social time

7.1 Self-help skills encouraged (*e.g., infant/toddler encouraged to finger-feed self; fork and spoon introduced when ready; children set table, help prepare food, pour and serve when able*)

7.2 Caregiver sits with children, eating with them when possible

7.3 Parents made aware of menus

***Notes continued on reverse page.**

PROBES:

If meals/snacks/bottle feeding are not observed, ask to see food preparation area to rate 1.2 and 3.2. *Also, ask:*

How do you handle feeding the children of different ages? How is bottle feeding handled? Do babies ever have to be put to bed with bottles?

3.1 Do parents send the food for the children or do you provide the food?

5.1, 5.2 & 5.3

Can you describe what happens at mealtimes? How do things go?

7.1

How much can the children do by themselves at mealtime?

7.2

Do you sit with the children at mealtime? Do you eat with them?

7.3

Do the parents know what you will be serving for snacks and lunch? How do you manage that?

1.3 & 3.4 *N/A* if *no* infants (less than 12 months) are in care.

1.4 & 3.6 *N/A* if *no* children under 24 months are in care.

ITEM #9:

NAP/REST

1.1 Nap/rest time or place not right for children (*e.g., too early or late, too*)

3.1 Nap/rest is scheduled daily

5.1 Nap/rest is scheduled appropriately for each age group (*e.g., babies,*

7.1 Children helped to relax (*e.g., cuddly toy, soft music, back*)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
<p><i>short/too long, irregular schedule, crowded area, noisy, no fresh air, not clean)</i></p> <p>1.2 <input type="checkbox"/> Little or no supervision provided</p>		<p>3.2 <input type="checkbox"/> Each child has own crib, cot, or bed with clean sheets, blankets, etc.</p> <p>3.3 <input type="checkbox"/> Same bedding not used by different children unless washed</p> <p>3.4 <input type="checkbox"/> Caregiver remains in house and is alert to handle problems</p>		<p><i>toddlers, and preschoolers have different schedules)#</i></p> <p>5.2 <input type="checkbox"/> Space used is good for resting (e.g., home is quiet, children placed at least 3 feet apart)#</p>		<p><i>rubbed)</i></p> <p>7.2 <input type="checkbox"/> Individual needs of children are met (e.g., quiet activities for early risers and non-nappers; schedules are changed to suit as children grow)</p>

PROBES: (If nap/rest is not observed) Could you please show me where the children nap and describe how naptime is handled?

Are you able to supervise the children when they are napping? How do you manage that?

What supplies and equipment do you have for each child: cot, crib, sheets, etc.?

5.1 Are all the children on the same nap schedule?

If no, ask: How do you decide when children should nap?

5.2 How close are the cribs or cots placed?

5.1, 7.1 What happens if a child does not want to take a nap or needs help falling asleep?

5.1 “Different age groups” should be interpreted as “each age group.”

5.2 Due to new information on the transmission of respiratory illnesses 3 feet is required between cots/mats or unless solid barrier separates sleeping spaces.

ITEM #10:

**DIAPERING/
TOILETING**

<p>1.1 <input type="checkbox"/> Problems with meeting toileting needs (e.g., diapers not changed often enough, infants unsafe on diapering table, children left on toilet seat too long)</p> <p>1.2 <input type="checkbox"/> Basic sanitary conditions not met (e.g., diapers not disposed of properly,</p>	<p>3.1 <input type="checkbox"/> Diapering/toileting area meets basic sanitary conditions (e.g., diapering area thoroughly cleaned or protective pad changed after each use)#</p> <p>3.2 <input type="checkbox"/> Caregiver washes hands with soap after each diapering or when</p>	<p>5.1 <input type="checkbox"/> Diapering done near source of hot water</p> <p>5.2 <input type="checkbox"/> Equipment promotes self-help (e.g., steps near sink, child-sized toilet seat if needed)#</p> <p>5.3 <input type="checkbox"/> Caregiver works with parents to toilet train toddlers#</p>	<p>7.1 <input type="checkbox"/> Diapering/toileting used as time to talk with and relate warmly to children</p> <p>7.2 <input type="checkbox"/> Diapering/toileting used to promote self-help in cleanliness and dressing skills (e.g., hand washing, using toilet paper,</p>
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CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
<p><i>toilet area not clean, inconsistent handwashing)#</i></p> <p>1.3 <input type="checkbox"/> Caregiver punishes or gets angry when toileting accidents occur</p>		<p>helping children with toileting#</p> <p>3.3 <input type="checkbox"/> Diapers checked and changed often</p> <p>3.4 <input type="checkbox"/> Children's hands washed after using toilet or after being diapered</p> <p>3.5 <input type="checkbox"/> Caregiver handles toileting accidents calmly</p>		<p>5.4 <input type="checkbox"/> Pleasant tone between adult and child during diapering/toileting</p>		<p><i>buttoning and snapping)#</i></p>

***Notes continued on reverse page.**

PROBE: 5.3 How do you handle toilet training?

1.2 Adequate sanitary procedures are essential to avoid the spread of germs when diapering babies and helping to toilet children. The purpose of the sanitary procedures is to prevent the germs in the urine or stool from remaining on the caregiver's or child's hands, on the diapering surface, or on any other surface the children might touch. Four measures are essential to cut down on the spread of gastrointestinal illness: thorough handwashing after each diaper change with warm water and soap, using a different sink than the one used in food preparation; disinfecting the diapering surface after each diaper change; hygienic disposal of diapers in a covered can, preferably with a step pedal so the caregiver's hands do not get recontaminated; physical separation of diapering area from food preparation area. The provider can use antibacterial wipes on his/her hands.

Potty chairs should be avoided since they are very hard to sanitize and must be thoroughly disinfected after each use.

1.2 Occasional lapse allowed. If the same sink used for food and diapering, it must be sanitized before food-related use. If a regular practice of adequate basic sanitary conditions is observed, with only an occasional lapse, then score 1.2 *No* and 3.1-3.4 accordingly.

1.2, 3.1 If the same sink is used for both diapering/toileting and food-related activities, then it must be sanitized after diapering/toileting use. If the sink is used for several diapering/toileting activities in succession, it does not have to be sanitized between each, but must be sanitized before food-related use.

ITEM #11:

PERSONAL GROOMING

<p>1.1 <input type="checkbox"/> Little attention paid to personal grooming (<i>e.g., no hand or face washing, hair combing</i>)</p> <p>1.2 <input type="checkbox"/> No easy place for children to wash, can't reach sink</p>	<p>3.1 <input type="checkbox"/> Easy place for children to wash hands (<i>e.g., steps near sink</i>)</p> <p>3.2 <input type="checkbox"/> Each child has own towel/washcloth (paper or cloth)</p> <p>3.3 <input type="checkbox"/> Children wash before</p>	<p>5.1 <input type="checkbox"/> Self-help encouraged in personal grooming (<i>e.g., easy-to-use aprons for art activities, mirror at child's eye level, towels within preschooler's reach</i>)#</p>	<p>7.1 <input type="checkbox"/> Individual toothbrush used for each child at least once during the day#</p> <p>7.2 <input type="checkbox"/> Personal care activities planned to teach children self-help skills (<i>e.g.,</i></p>
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CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
1.3 <input type="checkbox"/> Same towel or washcloth used by different children		and after meals		5.2 <input type="checkbox"/> Bibs available for infants/toddlers at mealtimes#		song about how to wash, practice in brushing hair)
	3.4 <input type="checkbox"/> Extra clothes available to change children			5.3 <input type="checkbox"/> Care given to children's appearance (e.g., cleaned up after messy play, hair combed after nap)		

PROBES: *If you do not observe any hand or face washing, ask:*

- 3.1 How do you handle washing the children's hands and faces? Where is this done? Can any of the children do this themselves?
- 3.2 How do you manage towels and wash clothes?
- 3.3 When do the children's hands get washed?
- 3.4 What about extra clothes?
- 7.1 Does each child have a toothbrush? When is it used?
- 7.2 Do you try to teach self care hygiene skills? *If yes, ask: How?*

N/A as follows:

- 5.1 If only infants, less than 6-7 months are in care.
- 5.2 If no 24 months are in care.
- 7.1 N/A for infants under 12 months. This indicator requires that a toothbrush be used for each child. Score *Yes* if this is true, whether or not toothpaste is used.

ITEM #12:

HEALTH

TOYS WASHED WEEKLY AND AIR DRIED. FLOOR AREAS VACUUMED OR DAMP MOPPED WITH DISINFECTANT. FEEDING CHAIRS CLEANED DAILY WITH SANITIZING SOLUTION.

1.1 <input type="checkbox"/> Caregiving areas and equipment not kept clean (e.g., toys never washed, signs of animal contamination in house or yard)	3.1 <input type="checkbox"/> Caregiving areas clean (e.g., washing all toys at least once a week, floor vacuumed or mopped with disinfectant frequently, feeding chairs cleaned daily with sanitizing solution)#	5.1 <input type="checkbox"/> Careprovider cuts down spread of germs most of the time (e.g., runny noses kept wiped with clean tissue for each child, few lapses allowed [e.g., not washing after sneeze, forgetting a hand washing])#	7.1 <input type="checkbox"/> Careprovider has arranged for medical consultant, such as a local doctor or nurse practitioner, to handle child care questions
1.2 <input type="checkbox"/> Caregiver does not have immunization, emergency care, and other health records for children	3.2 <input type="checkbox"/> Caregiver has emergency care and	5.2 <input type="checkbox"/> Special health	7.2 <input type="checkbox"/> Quiet area for sick child available
			7.3 <input type="checkbox"/> Health information provided for parents

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
1.3 <input type="checkbox"/> Caregiver has not had health exam within one year		health information for each child with written permission from parent for medical care, information about child's doctor (and dentist), and parent's work phone		problems such as allergies, hearing loss, or hyperactivity are recorded and# information is used in planning		(e.g., pamphlets on nutrition, childhood illnesses, local health care services)
	3.3 <input type="checkbox"/> Caregiver reports suspected child abuse			5.3 <input type="checkbox"/> Caregiver shows awareness of children's health status (e.g., checks irritable child for fever)		7.4 <input type="checkbox"/> Good health habits encouraged (e.g., nutrition activities, storybooks about health used with children)
	3.4 <input type="checkbox"/> Caregiver has yearly health exam			5.4 <input type="checkbox"/> Parents made aware of rules for attendance during illness		7.5 <input type="checkbox"/> Caregiver is good model of health practices (e.g., eats healthful food, doesn't smoke in front of children)
				5.5 <input type="checkbox"/> Medication given only from original container with written permission from parents		

*Notes continued on reverse page.

PROBES:

- 3.1 What do you do to keep the caregiving areas clean? How frequently do you wash the toys and other things you use with the children?
- 3.3 What would you do if you suspected that any of the children were being abused?
- 3.4 How often do you have a health exam yourself?
- 5.5 Do any of the children in your care have special health problems, such as allergies? If so, how do you handle this?
Do you have any rules for attendance if a child is ill? *If yes, ask:* How do you make the parents aware of these rules?
- 5.6 How do you handle giving medicine to children?

- 7.1 Do you have any health care professional (like a doctor or nurse) that you can ask if you have questions about the health of the children?
- 7.2 What do you do if a child becomes ill while the child is here? Where would the child stay till the child could be picked up?
- 7.3 Do you have any health information that you give to the parents? Can you give me an example?
- 7.4 Are there any activities or stories you use to help children develop good health habits? Can you give me an example?
- 7.5 Do you try to provide a good model for children to follow concerning health habits? *If yes, ask:* How? What are your rules about smoking around the children?

ITEM #13:

SAFETY

1.1 <input type="checkbox"/> No phone in home or no transportation available for emergency use	3.1 <input type="checkbox"/> Phone in home and transportation available for emergency use (e.g., own car, rescue squad)	5.1 <input type="checkbox"/> Emergency exit plans posted and practiced at least monthly with children	7.1 <input type="checkbox"/> First aid training includes CPR for children; CPR renewed annually#
1.2 <input type="checkbox"/> Obvious safety problems indoors (e.g., loose electrical cords, no covers on outlets, medicines not locked up,	3.2 <input type="checkbox"/> First aid supplies well stocked, ready to use	5.2 <input type="checkbox"/> Caregiver uses car safety restraints for all (e.g., infant/toddler seats, separate seat	7.2 <input type="checkbox"/> Safety information shared with parents (e.g., pamphlets on car restraints, home

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
<p><i>cleaning supplies within children's reach, no gates or staircase)#</i></p> <p>1.3 <input type="checkbox"/> Hazards present in outdoor area (e.g., equipment unsafe, sharp or dangerous objects present)</p>		<p>3.3 <input type="checkbox"/> Emergency numbers posted near phone</p> <p>3.4 <input type="checkbox"/> Home has passed official fire safety inspection#</p> <p>3.5 <input type="checkbox"/> Hot water managed safely</p> <p>3.6 <input type="checkbox"/> No obvious safety problems indoors or outdoors#</p> <p>3.7 <input type="checkbox"/> Alternate caregiver available for emergencies</p>		<p><i>belt for each older child and adult)#</i></p> <p>5.3 <input type="checkbox"/> Alternate caregiver familiar with caregiving activities, specific children in home, and emergency plans</p> <p>5.4 <input type="checkbox"/> Caregiver has had first aid training within last 3 years</p>		<p><i>safety tips, and safety plans at day care homes)</i></p> <p>7.3 <input type="checkbox"/> Safety taught to children (e.g., rules for riding in car and crossing streets)</p>

***Notes continued on reverse page.**

PROBES:

- 3.1 What transportation would you use in an emergency? Do you have a phone in your home?
- 3.2 & 3.5 What kinds of things have you done in your home to keep the children safe, that is to avoid poisoning and other dangers? Do you have first aid supplies? Can you show me your first aid supplies? (Observe, or ask what and where kept in interview.) What emergency numbers do you have? Where do you keep emergency phone numbers? Has your home passed an official fire safety inspection?
- 3.7 & 5.3 If you were called away in an emergency, who would take care of the children? What arrangements have you made to cover your absence? Does the substitute caregiver know the children, your routine, and the emergency plans in your home? How did you manage this?

- 5.1 Do you have a plan for leaving the house quickly in an emergency? May I see it? (Observe) How often do you practice your emergency exit plan with the children?
- 5.2 Do you ever take the children out in a car? Do you use car seats, booster seats or seat belts for the toddlers?
- 5.4 Have you ever had first aid training? If so, when?
- 7.1 Did your first aid training include CPR for children?
- 7.2 Do you have safety information to give to the parents? If yes, ask to see.
- 7.3 Are there any activities or stories you use to help the children learn good safety habits. Can you give an example?

ITEM #14a:

INFORMAL USE OF LANGUAGE (INFANTS/ TODDLERS)

<p>1.1 <input type="checkbox"/> Little or no talking to infants and toddlers</p>	<p>3.1 <input type="checkbox"/> Talking used mainly to control child's behavior (e.g., "come here," "take this," "no, no!")#</p> <p>3.2 <input type="checkbox"/> Some social talking to children</p>	<p>5.1 <input type="checkbox"/> Careprovider responds to sounds infants and toddlers make, takes part in verbal play (e.g., sings to child, imitates child's sounds)#</p> <p>5.2 <input type="checkbox"/> Maintains eye contact while talking to child</p>	<p>7.1 <input type="checkbox"/> Caregiver talks to infants and toddlers during routines about child's activities#</p> <p>7.2 <input type="checkbox"/> Repeats what toddlers say, adding words and ideas when appropriate#</p> <p>7.3 <input type="checkbox"/> Encourages toddlers to</p>
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CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

use words

- 3.1 This indicator must be scored *No* to get a score of 5 or higher. To give a score of 3 or 4, this indicator may be scored *Yes*.
- 5.1 Interpret “infants” as “infants and toddlers.” This requirement applies to both age groups.
- 7.1 & 7.2 *N/A* if *only* infants (less than 12 months) are in care.

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

ITEM #14b:
INFORMAL USE OF LANGUAGE (2 YEARS AND OLDER)#

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
1.1 <input type="checkbox"/> Talking used mainly to control children's behavior and manage routines		3.1 <input type="checkbox"/> Careprovider does some social talking with children		5.1 <input type="checkbox"/> Much social talking between caregiver and children		7.1 <input type="checkbox"/> Careprovider makes sure to have an informal conversation with each child every day
		3.2 <input type="checkbox"/> Children are asked "yes/no" or short-answer questions		5.2 <input type="checkbox"/> Language used to share information with children		7.2 <input type="checkbox"/> Preschoolers are asked "why, how, what if" questions needing longer and more complex answers#
				5.3 <input type="checkbox"/> Children's talk encouraged (<i>e.g., caregiver listens, asks questions to get children to talk more</i>)		7.3 <input type="checkbox"/> Children encouraged to use talking to solve problems
				5.4 <input type="checkbox"/> Caregiver adds to ideas presented by children		
				5.5 <input type="checkbox"/> Caregiver helps children enjoy language (<i>e.g., sings with children, rhymes words</i>)		

If caregiver has both age groups present, rate both *a* and *b*. If one age group is present, rate only the appropriate item.

7.2 Interpret "preschoolers" as children 3 years or older. *N/A* if children are *less than* 3 years of age.

ITEM #15a:
HELPING CHILDREN UNDERSTAND LANGUAGE (INFANTS/TODDLERS)

1.1 <input type="checkbox"/> Fewer than 4 children's books and no pictures available in home	3.1 <input type="checkbox"/> At least 8 books suitable for infants/toddlers (<i>e.g., cloth or hardback books, books with clear, colorful pictures</i>)	5.1 <input type="checkbox"/> At least 12 books accessible for infants/toddlers#	7.1 <input type="checkbox"/> Caregiver plans and carries out at least one language activity for each infant/toddler daily
1.2 <input type="checkbox"/> Caregiver does not name objects or pictures for infants/toddlers	3.2 <input type="checkbox"/> Materials used by caregiver with children at least 3 times a week	5.2 <input type="checkbox"/> Careprovider names many objects, talks about pictures, says nursery rhymes <u>or</u> sings songs#	7.2 <input type="checkbox"/> Works on improving understanding of language all day (<i>e.g., gives clear directions to toddlers, describes infant's actions</i>)
	3.3 <input type="checkbox"/> Caregiver names some objects or pictures for children (can be in		

MATERIALS FOR INFANTS AND TODDLERS: CLOTH OR HARDPAGE BOOKS, PICTURES OF FAMILIAR OBJECTS, OR COMMON HOUSE-HOLD OBJECTS THAT CHILDREN CAN PLAY WITH.

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

books)#

PROBES: *If no books are out, ask:* Do you have any books for the children? May I see them? (Also ask if more available, even if some are out.)

3.2 & 5.2 Do you ever read to the infants and toddlers?

If yes, ask: About how often do you read to the infants and toddlers? Do you sing and say nursery rhymes?

If yes, ask: How often do you say nursery rhymes, talk about picture books or sing songs with them?

Note: Use of TV for language activities is rated separately under Item 24.

3.3 For this indicator, pictures can include those in books.

5.1 The books must be accessible to the children and appropriate for the age group. Violence or other frightening content in books and pictures is not appropriate for infants, toddlers. If there are any such books accessible to children, then credit cannot be given for this indicator.

5.2 To give credit for this indicator, many of these types of interactions must be observed, but not all that are listed in the indicator. For example, credit will be given for 5.2 when the provider does not say nursery rhymes with the children, but she has many of the other types of required interactions.

ITEM #15b:

HELPING CHILDREN UNDERSTAND LANGUAGE (2 YEARS AND OLDER)

MATERIALS FOR TWO-YEAR OLDS AND OLDER: CHILDREN'S BOOKS, MAGAZINES, OR RECORDS; COMMERCIAL OR HOMEMADE PICTURE GAMES LIKE LOTTO, TALKING ABOUT PICTURES.

1.1 Fewer than 6 children's books and no picture games available in home

3.1 At least 10 children's books available; some picture games and records present#

5.1 At least 20 children's books and 3-5 picture games accessible to children daily for independent use#

7.1 Caregiver checks out materials from library once a month, or adds to materials in other ways

3.2 Materials used by caregiver with children at least 3 times a week (e.g., caregiver names pictures in books, reads story, plays a record and sings along)

5.2 Materials for all age groups#

7.2 Works on improving understanding of language all day (e.g., gives clear directions, uses words exactly, points out items of interest indoors and outdoors, such as reading food labels and road signs)

5.3 At least one planned activity daily (e.g., reading, story telling, talking about picture books, saying nursery rhymes)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

PROBES: If no books, picture games or records/tapes are out for children over 2, ask if there are any. *If yes, ask:*

3.2 & 5.3 About how often do you read to the children over 2 years of age?

How often do you sing songs, talk about picture books or say nursery rhymes with them?

7.1 Do you feel that you need to add new books and picture games periodically? If yes, how do you manage that? About how often are new books made available to the children?

Note: Use of TV for language activities is rated separately under Item 24.

3.1 Any children's books *for age 2 and older* are acceptable for this indicator. Books do not have to exactly match ages of children in care.

5.1 There needs to be several (3-5) different picture games to give credit. Multiples of the same game do not count as several. Different *versions* of the same type of game are counted, such as 3 different sets of flash cards, 3 different versions of a memory game.

5.2 This indicator requires that both books and picture games be appropriate for all age groups considered in this item. Some materials may be appropriate for more than one age group. Violence or other frightening content in books and pictures is not appropriate. If there are any books accessible to younger children that show violence in a graphic or frightening way, or that glorify violence, then credit cannot be given for this indicator.

ITEM #16:

HELPING CHILDREN USE LANGUAGE

MATERIALS: PUPPETS, BOOKS, PROPS FOR DRAMATIC PLAY, TOY TELEPHONES, RECORDS, DOLLS, MIRRORS, PICTURES.

ACTIVITIES: REPEATING NURSERY RHYMES, SINGING AND BABBLING TO BABIES, NAMING FAMILIAR OBJECTS, TALKING ABOUT DRAWINGS OR PICTURES IN BOOKS, DICTATING STORIES, SHOW & TELL.

1.1 No materials or activities for helping children practice talking

3.1 Few materials for helping children practice talking (*e.g., puppets, toy telephones*)#

5.1 Many materials for helping children practice talking accessible for independent use daily

7.1 Daily plans provide a wide variety of activities to encourage talking in each age group, including infants, toddlers, preschoolers, and school-Agers (*e.g., encourages infants/toddlers to name objects and pictures, preschoolers to talk about experiences, dictate stories*)#

3.2 Careprovider uses one activity a day to encourage children to talk (*e.g., finger plays, show and tell, singing, repeating nursery rhymes, babbling back to baby*)#

5.2 Caregiver uses 2 activities a day to encourage children to talk#

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

PROBES:

1.1 & 3.1 If materials not out, ask if there are any, and ask to see. When are they used?

5.2, 7.1 What do you do to encourage the children to make sounds, babble and talk as best they can?

Can you give me examples?

How often during the day would you do these things?

3.1 This indicator must be scored *No* to get a score of 5 or higher.

3.2, 5.2 To give credit for these indicators, the activities must be adult-initiated.

7.1 (**Note:** Activities must be observed for a 7.)

ITEM #17:

HELPING CHILDREN REASON (USING CONCEPTS)

MATERIALS: EITHER COMMERCIAL OR HOMEMADE TOYS TO LEARN COLORS, SIZES, SHAPES, NUMBERS AND LETTERS; PUZZLES.

ACTIVITIES: NATURE, SCIENCE, COOKING.

1.1 No materials or activities for helping children reason

OR

1.2 Inappropriate teaching of school skills to children who are too young or not interested

3.1 Some materials present and used

3.2 Daily experiences used to help children learn concepts of size, shape, color, number, and relationship (*observer must see at least one example*)

5.1 Variety of games and/or materials accessible and in good repair#

5.2 While children are using materials, caregiver helps children think by talking about shape, size, etc. (*e.g., asks questions to help preschoolers reason--"How many?"*)

7.1 Careprovider makes sure to work with every child on an appropriate concept-development game at least once a week (*e.g., shape sorting boxes for infants, measuring cups and puzzles for toddlers, numbers for preschoolers*)

7.2 Encourages children

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
				“What’s different?” 5.3 <input type="checkbox"/> At least one nature/ science/cooking activity each week (e.g., talks about leaves in fall, has children help make a snack)		to reason throughout the day by pointing out the sequence and results of daily events (e.g., “First let’s change your diaper, then you can play,” “What might happen if you play ball in the house?”)#

PROBES:

If materials are not out, ask if there are any. If yes, ask to see.

5.3 Do you ever have a cooking or nature experience for the children? *If yes, ask:* Can you give me examples? About how often?

3.3, 5.3, 7.1 Do you ever do anything to help the children learn about size, shape, color or number? *If yes, ask:* Can you give me examples. How often do you do these things?

5.1 Since a wide range of children may be in a family child care home, the requirement for “games” is only applicable if there are children over two years of age in care. However, the requirement for materials refers to all ages. Developmentally appropriate *materials* for infants and toddlers are required. Variety requires 3-5 different materials for each age group. In a very large family child care group, more would be needed.

7.2 (**Note:** 7.2 must be observed.)

ITEM #18:

EYE-HAND COORDINATION

**FOR 2 YEAR OLDS:
BLOCKS, PUZZLES,
CRAYONS, PENCILS,
CHILDREN’S SCISSORS,
SMALL BUILDING TOYS,
PEGBOARD AND PEGS.**

**FOR TODDLERS:
GRASPING TOYS,
HOUSEHOLD
ITEMS SUCH AS
CLOTHESPINS, NESTED
MEASURING CUPS OR
OTHER HOUSEHOLD
ITEMS.**

1.1 No appropriate eye-hand materials are available for daily use by children

3.1 Some eye-hand materials accessible to children for independent use daily

3.2 At least 5 materials for each age group in care available (infants, toddlers, preschoolers, school-Acers)#

5.1 At least 3-5 eye-hand materials, in good repair, accessible daily#

5.2 At least 8 materials for each age group available (e.g., infants: rattles, objects of different sizes to pick up; toddlers: pegboards, small building toys)#

7.1 Materials rotated to maintain interest

7.2 Materials organized to encourage self-help (e.g., picture labels for open storage shelves or boxes) (MUST OBSERVE)

7.3 Caregiver helps children develop skills (e.g., with scissors, puzzles, pegboard)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

5.3 Space provided to play with materials

PROBES:

1.1, 3.2, 5.2 *If materials are not out, ask:* Do you have any toys to help the children learn eye-hand coordination such as grasping toys, pegboards, and puzzles?

5.3 Where are these toys used?

7.1 Are the same materials put out every day? *If no, ask:* Are any different materials added? What do you do to change, the things that are out?

7.3 Do you help the children in any way with these materials? *If yes, ask:* Can you give me some examples?

3.2 & 5.2 As long as there is variety, there can be duplication in the number of materials required for these indicators. For example, a family child care home may have two different busy boxes, a pegboard with big pegs, and two different simple puzzles to meet the requirement for 3.2 for toddlers. In addition, there can be some overlap of materials for the different age groups. For example, both toddlers and younger preschoolers may enjoy using large interlocking plastic blocks, and so the blocks would count for each age group.

5.1 The *variety* in this indicator requires at least 3-5 different types of materials for each age group to be accessible during the required time, so children have different experiences.

ITEM #19:

ART

EXAMPLES: CRAYONS, PAINTS, MODELING DOUGH, CUTTING AND PASTING SUPPLIES, WOOD AND OTHER SUPPLIES FOR GLUING AND CARPENTRY.

DO NOT GIVE CREDIT FOR COLORING BOOKS.

1.1 No art materials available for use by children

3.1 Some materials, including drawing, used at least twice a week#

5.1 Crayons and paper, or other drawing materials accessible daily for free expression (*e.g., toddlers offered materials, preschoolers get own materials*)

5.2 Art materials needing supervision planned at least 3 times a week (*e.g., cutting and*

7.1 At least 2 different activities offered children 2 years old and older daily (*e.g., drawing, cutting and pasting, painting*)#

7.2 Activities include at least one 3-dimensional materials per week (*e.g., modeling dough, clay, carpentry, or wood gluing*)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
pasting, painting, modeling dough)						
5.3 <input type="checkbox"/> Creativity encouraged, very few projects have children copy an example						

PROBES:

- 1.1-7.1 *If no art materials are out, ask:* Do you have any art materials for the children to use? If yes, ask to see.
- 3.1 & 5.1 About how often is (ITEM) brought out for the children to use? (Name the various materials you see.)
- 5.2 Do you ever have art activities that require supervision? *If yes, ask:* What art activities might be included? How often?
- 7.1 Do you ever have more than one art activity a day for the children? About how do you do more than one art activity a day?
- 7.2 Does that include activities like play dough or working with wood?
- 3.1 Drawing is an opportunity for children to create designs of their own. Coloring books are not considered drawing.
- 7.1 For this indicator, preschoolers include children aged 2 years or older. *N/A* if no children aged 2 or older are in care.

ITEM #20:

MUSIC AND MOVEMENT

RECORD/TAPE/CD PLAYER, RECORDS/TAPES/CDS, MUSIC BOXES, MUSICAL TOYS AND INSTRUMENTS, STORY RECORDS, DANCE PROPS.

1.1 <input type="checkbox"/> No materials for music or movement available for children	3.1 <input type="checkbox"/> Some musical experience available to children once a week (<i>e.g., radio on for dancing, careprovider sings with children, musical toys, record/tape player with at least 5 selections available</i>)	5.1 <input type="checkbox"/> Musical experiences regularly available to children at least 3 times a week#	7.1 <input type="checkbox"/> Space and time planned for music and movement daily
OR			
1.2 <input type="checkbox"/> Loud background music interferes with ongoing activities		5.2 <input type="checkbox"/> Careprovider sings with children informally daily (MUST OBSERVE ONE INSTANCE)	7.2 <input type="checkbox"/> Variety of dance props and musical instruments accessible for independent use by children 2 years old and older (MUST OBSERVE)#
		5.3 <input type="checkbox"/> Musical experiences provided for all age groups (<i>e.g., music boxes and musical toys for infants/toddlers,</i>	

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

record player and records for preschoolers)#

PROBES:

- 1.1 If no materials observed, ask if there are any, and if yes, ask to see.
- 3 How often do you have music for the children? *Ask: About how often?*
Do you ever sing for the children? *If yes, ask: About how often?*
- 5.3 Do you have musical toys or records for the infants and toddlers? What do the older children like?
- 7.1 Do you have a time planned for music every day? If so, when?
Do you have a time planned for movement and dance every day? If so, when?
When do the children usually have their music and movement activities?
- 5.1 & 5.3 To give credit, musical experiences in addition to informal singing (given credit in 5.2) must be provided.
- 5.3 If all age groups participate in any of the musical experiences observed, give credit for this item.
- 7.2 For this indicator, only musical toys are required for children under 24 months of age. Dance props can include scarves, hats, musical instruments that can be held, and generally anything a child is allowed to use while dancing.

ITEM #21:

SAND AND WATER PLAY#

INCLUDE SAND AND SAND-LIKE SUB-STANCES SUCH AS CORNMEAL OR DRY COFFEE GROUNDS, KITCHEN UTENSILS, SHOVEL AND BUCKETS, SMALL CARS AND TRUCKS.

1.1 Neither sand nor water play not available to children indoors or outdoors#

3.1 Some sand or water play provided outdoors or indoors at least once every 2 weeks year-round

5.1 Sand or water play at least once a week

5.2 Variety of toys for sand and water play (*e.g., cups, funnels, trucks, pots, pans, spoons*)#

7.1 Either sand or water play at least 3 times a week and each presented at least once a week#

PROBES: 3-7 Are sandplay and waterplay available? *If yes, ask: Where?*

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

Are there any things for the children to play with in the sand/water?

How often is sandplay available for the children?

How often is waterplay available for the children?

What about playing in the snow?

Do you have any sandlike material?

Snow play can be a substitute for sand or water play in the winter.

1.1 This indicator means that neither sand nor water is available to children. If one of these is present, a higher score will be given.

5.2 Interpret “toys for sand and water play” as “toys for sand and/or water play.”

7.1 This does not mean sand 3 times a week and also water 3 times a week. However, each must be provided weekly, and between the two, this should happen 3 times a week.

ITEM #22:

DRAMATIC PLAY

**MATERIALS:
DRESS-UP CLOTHES,
PLAY-HOUSE,
CHILD-SIZED
FURNISHINGS, DISHES,
POTS AND PANS,
DOLLS, DOLLHOUSE,
GARAGE;
ACCES-SORIES THAT
CAN BE USED TO
ENHANCE PLAY SUCH
AS DOLL BEDS AND
DOLL CLOTHES OR A
BACKPACK AND
CAMPING GEAR.**

**DRAMATIC PLAY
MEANS “MAKING
BELIEVE” SUCH AS
PRETENDING TO BE
SOMETHING OR
PRETENDING A DOLL
CAN TALK.**

1.1 No materials available for dramatic play

3.1 Some dramatic play materials available (e.g., dress-up clothes, dolls, playhouse, dishes, child sized furnishings)

3.2 Some accessories (e.g., beds or dishes for dolls)#

5.1 Variety of dramatic play materials, with accessories available daily#

5.2 Materials accessible to children for both indoor and outdoor use

5.3 Props for more than just housekeeping, including transportation, work roles, or adventure (e.g., dress-ups for various roles, plastic carpentry tools, doctor kit, things to use to play store, small trucks or plastic zoo animals)

7.1 Dramatic play materials well organized for independent use (e.g., play dishes in separate box or on shelf instead of piled in a toy chest; play clothes hung on pegs) (MUST OBSERVE)

7.2 Some child-sized play furniture (e.g., small stove, baby stroller) (MUST OBSERVE)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

PROBES:

- 1.1, 3.1, 5.1, 5.3 If no materials are out, ask if there are any dress up clothes, dolls, or play dishes. If yes, ask to see. Rate on amount and variety.
- 5.1 When are these materials available?
- 5.2 May the children use these materials both indoors and outdoors?
- 3.2 For this indicator, interpret “few” as “some.”
- 5.1 “Variety” requires materials for acting out family roles, such as dolls, doll beds, pots and pans, dress-ups, etc. The variety required will vary by age group in care, with less variety needed to meet the needs of toddlers, but more will be required for preschoolers to act out more complicated roles.

ITEM #23:

BLOCKS

**MATERIALS:
DIFFERENT SIZED
BLOCKS, LARGE
INTERLOCKING
BLOCKS.**

**ACCESSORIES:
SMALL PEOPLE, TOY
TRUCKS, AND TOY
ANIMALS TO USE
WITH BLOCKS.**

1.1 No materials available for block building

3.1 Some blocks and accessories available (e.g., small people, toy trucks and toy animals to use with trucks)#

5.1 Variety of blocks and accessories gathered together and accessible for daily use

5.2 Space used for block play out of traffic #

7.1 Blocks and accessories well organized for independent use (e.g., blocks and accessories in separate labeled boxes or on labeled, open shelves)

PROBES:

- 1.1, 2.1, 3.1 If no materials are out, ask if there are any blocks and trucks, people, animals, etc. If yes, ask to see.
- 5.1 How often are these used by the children? How are they set out?
- 5.2 Where do they play with blocks?

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

- 7.1 What do you do to make the blocks and block accessories easy for the children to use by themselves?
- 3.1 At least 6 blocks for toddlers and 20 for older children.
- 3.1 Enough blocks must be present for simple block building, such as stacking blocks or putting blocks in a line to make a road. Interlocking blocks (such as Lego, Duplo) are acceptable for this indicator. For toddlers, at least 6 blocks must be present to score Yes, while for older children at least 20 blocks are required. Lincoln Logs are not counted for this item, as they are small building materials considered under the Fine motor item.
- 5.2 Credit can be given if blocks are used on a table or in a corner of the room where block play will not be interrupted (i.e., a place that is not in traffic). It must be obvious during the observation that blocks are generally used in the protected space, rather than in traffic. If 2 or more spaces are used for blocks, only 1 must meet the requirements of this indicator.

ITEM #24:

USE OF T.V.

1.1 T.V. is always on, causing background noise and distraction, whether or not anyone is watching

1.2 T.V. on for caregiver's entertainment (e.g., "soaps" or other adult programs)

3.1 T.V. is used as a "babysitter" to amuse and keep children busy in place of play activities#

3.2 T.V. is used no more than 2 hours daily#

3.3 Programs not limited to those that are educational and good for children#

5.1 Careprovider limits use of T.V. to programs and video games regarded as good for children (e.g., "Mr Rogers' Neighborhood," "Electric Company," and "Sesame Street," educational video games, but not most cartoons)#

5.2 Activities provided as an alternative while T.V. is on

7.1 Caregiver uses T.V. as an educational experience

7.2 Joins children in viewing, asks questions, adds information

7.3 Some play activities planned to follow up on T.V. programs (e.g., points out objects with letters introduced on shows, conducts art activity seen on program)

OR

7.4 Caregiver chooses not to use T.V. at all

PROBES:

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

1.1 Do you have the TV on for your yourself any time while the children are here? If yes, ask when and for how long?

3.2 Do the children watch TV or videos here? About how long do they watch TV or videos during the day?

7.2 Do you ever watch TV programs or videos with the children?

7.1 & 7.3 Do you think children learn from the TV they watch? Please explain.

Note: If caregiver does not use TV while children are in care, score 7.4 *Yes*, and mark N/A for all other indicators. If caregiver uses TV while children are in care, 7.4 is N/A, and all other indicators must be scored.

3.1 & 3.3 Must be *No* to score 5 or higher. (However, a score of 4 can still be considered.)

3.2 If 3.2 is *No*, give a score of 2.

5.1 All programs must be appropriate.

ITEM #25:

SCHEDULE OF DAILY ACTIVITIES

1.1 Lack of planning and organization results in children's routine needs not being met (*e.g., crying children, rushed meal times, delays in diapering*)#

1.2 No time between routines for talking with children or scheduled play activities (*e.g., caregiver does not read books, play with children or provide art activities*)

3.1 Schedule permits careprovider to successfully handle basic routines for each age group#

3.2 Caregiver provides play activities as part of the daily schedule along with routines

5.1 Variety of play activities provided for children's choice both morning and afternoon

5.2 At least two special activities scheduled daily, one indoors and one outdoors weather permitting (*e.g., story, art, music, water play, walks*)#

5.3 Schedule provides a balance of indoor and outdoor activities#

5.4 Schedule provides a balance of active and quiet play

7.1 Caregiver uses routines as learning experiences (*e.g., teaches self-help skills, talks to children*)f

7.2 Provides smooth transitions (*e.g., sets out play materials for preschoolers before putting babies down for nap*)#

PROBES: Look at the schedule, if one is posted, in order to help in scoring this item. Check to see if the schedule coincides with what is going on during the observation. If there is no written schedule, ask what the schedule of the day usually is. For babies, ask if each one is on an individual schedule.

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

5.1 & 5.2 What usually happens in the afternoon?
 5.2, 5.3, 5.4 How do you decide on what activities to include in your schedule?

1.1 & 3.1 This indicator is *not* true when there is only a small problem (e.g., one infant’s diaper not check for 2 hours) while all other routines are managed appropriately. However, 3.1 would not be given credit in this circumstance.

5.2 (**Note:** 7.1 and 7.2 should be observed.)

5.2 The 2 special activities do not have to be completed during the observation. Look for evidence of 2 activities (e.g., on schedule or activity plan) and ask caregiver to get more information. “Special activity” means something that the caregiver initiates that goes beyond what is regularly accessible to the children. This is not intended to mean an overly controlled or adult-directed activity.

5.3 Determining whether there is a *balance* of indoor and outdoor activities will depend on a number of factors, including the ages of the children in care, the mood and needs of the children, and the weather. The balance will change somewhat from day to day, so no specific amount of time can be applied to this indicator. However, it is expected that most very young babies would get to go outdoors for some time during the day, and as children get older, this time would increase. If the weather is especially nice, the balance would require that more time is spent outdoors. “Outdoor activities” can include both active physical play or more quiet activities, such as riding in a stroller or having a picnic.

7.2 This means the activity is caregiver initiated and goes beyond what is regularly accessible to children.

ITEM #26:

SUPERVISION OF INDOORS AND OUTDOORS

1.1 No supervision provided except if problems occur

1.2 Careprovider is mainly concerned with her own work or interests (e.g., talking on the telephone, watching T.V., doing housework)

1.3 Caregiver does not go outdoors with children

3.1 Supervision provided near children (limited lapses 2-4 minutes allowed)#

3.2 Attention given to safety, cleanliness, proper use of materials

3.3 Caregiver’s work or interests do not take away from caregiving (e.g., work done while children are asleep, or children have fun helping to set the table or hang up the wash)

5.1 Careprovider interacts frequently with children, discusses ideas, and helps with materials

5.2 Helps children solve conflicts when necessary

5.3 Supervision suited to individual needs (e.g., close supervision of toddlers, more independence for 3- and 4-year-olds)

7.1 Caregiver looks for chances to extend learning (e.g., dramatic play idea recalled at later time by reading story)

7.2 Careful setting up of activities avoids conflicts (e.g., duplicate toys for toddlers, enough blocks for several children at once)

PROBE:

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

1.3 *If outdoor time is not observed, but there is provision for outdoor time in the schedule, ask:* What do you usually do when the children go outdoors?

Do you ever need to be indoors while some of the children play outdoors? If yes, ask what do you do?

3.1 In family child care, it is usually necessary for providers to leave children for short periods of time, for example, to use the toilet, prepare food, answer the door or phone, etc. To meet the requirements of 3.1, the provider is only allowed limited momentary lapses in supervision (2-4 minutes), and when children are out of sight, they must be within hearing range. In addition, children must be in a safe place while not within view, and checked on frequently. Children under the age of 6 generally cannot be left outdoors unsupervised, and older children must be checked regularly. Flexibility is allowed in determining the amount of supervision children require, based on how safe the environment is, the ages of the children and their abilities.

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

ITEM #27:

TONE

GENERAL QUALITY OF INTERACTION BETWEEN CAREGIVER AND CHILDREN AND AMONG CHILDREN.

Inadequate ①	②	Minimal ③	④	Good ⑤	⑥	Excellent ⑦
1.1 <input type="checkbox"/> Caregiver and children seem tense, voices sound angry, children cry often		3.1 <input type="checkbox"/> Physical contact mainly for routine care of children, little display of affection#		5.1 <input type="checkbox"/> Caregiver uses physical contact to show affection to all children (e.g., <i>gentle holding, hugging, pat on the head</i>)#		7.1 <input type="checkbox"/> Careprovider and children show respect for and kindness to one another
1.2 <input type="checkbox"/> Physical contact used mainly for control (e.g., <i>hurrying children along, punishing</i>)		3.2 <input type="checkbox"/> Caregiver does not often smile at, talk to, or listen to children#		5.2 <input type="checkbox"/> Careprovider and children seem relaxed, voices cheerful, a lot of smiling		7.2 <input type="checkbox"/> Caregiver praises children for being kind and helpful to others
		3.3 <input type="checkbox"/> May have favorite child who gets most of the attention#				

Tone refers to the warmth and pleasantness of the adult-child and child-child interactions.

3.1, 3.2 and 3.3 must all be *No* to score a 4 or 5. If 2 of the indicators are *No*, then score a 4.

3.1, 3.2, 3.3 All indicators in 3 must be scored *No* to score 5 or higher. If 2 of the indicators are scored *No*, then score 4.

5.1 To give credit for this indicator, physical contact to show affection must be observed for each child present during the observation. For some older children this can be shown through something as simple as a hand on the child's back or shoulder, while for infants/toddlers, it should be more substantial and frequent.

ITEM #28:

DISCIPLINE

DESCRIPTIONS APPLY TO METHODS USED WITH ALL CHILDREN PRESENT, INCLUDING CAREGIVER'S OWN CHILD(REN).

1.1 <input type="checkbox"/> <u>EITHER</u> discipline is so strict that children are punished often, <u>OR</u> so lax that there is no order or control	3.1 <input type="checkbox"/> Caregiver never uses physical punishment	5.1 <input type="checkbox"/> Alternatives to physical punishment used effectively (e.g., <i>time out, removing child from activity</i>)	7.1 <input type="checkbox"/> Careprovider thinks ahead and tries to avoid problems
1.2 <input type="checkbox"/> Severe discipline such as spanking, constant shouting, or withholding food used as means of control	3.2 <input type="checkbox"/> Caregiver maintains enough control to keep children from hurting themselves and others#	5.2 <input type="checkbox"/> Praise and attention are given for good behavior	7.2 <input type="checkbox"/> Caregiver handles minor problems before they become serious (e.g., <i>helps children share toys before they quarrel, makes taking turns easier by using sign-up sheets or a timer, redirects children to other activities</i>)
		5.3 <input type="checkbox"/> Age and ability of children considered when rules are made and enforced	
		5.4 <input type="checkbox"/> Reasons for rules are explained to children	7.3 <input type="checkbox"/> Careprovider helps

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate

①

②

Minimal

③

④

Good

⑤

⑥

Excellent

⑦

5.5 Caregiver follows through with both rewards and punishment

children find positive solutions to problems through discussion#

PROBES:

3.1 & 5.1 In case of unacceptable behavior, how do you discipline the children?

Do you ever have to use spanking, threats, shouting, or time out for long periods to control any of the children?

5.1 What rules do you have for the children?

How do you decide on these rules?

3.2 (**Note:** 7.3 is N/A for infants and toddlers.)

3.2 Both social/emotional and physical hurting of others is included in this indicator. If children persistently tease, harass, or show discrimination against others and the care provider ignores this behavior, score *No* on this indicator.

7.3 *N/A if only children under 24 months are in care.*

ITEM #29:

CULTURAL AWARENESS

1.1 All toys and displayed pictures are of one race only

1.2 No ethnic and racial variety in dolls, book illustrations, or pictorial materials

1.3 Boys and girls limited to traditional roles (*e.g., girls directed towards housekeeping roles*)

3.1 Dolls or play mobile figures from at least 2 racial groups, and at least 2 books or pictures showing different races#

3.2 Boys and girls not limited to traditional roles in choice of play activities

5.1 Many examples of racial variety in dolls, pictures, and books

5.2 Holidays and cultural customs of all children in group included#

5.3 Boys and girls encouraged to choose activities without being limited to traditional roles (*e.g., girls encouraged to do carpentry*)

7.1 Planned use of multicultural, multiracial and non-sexist materials (*e.g., reads books introducing non-traditional roles for men, women, and minorities; boy and girl dolls*)

CHECK (✓) ALL THAT APPLY THEN CIRCLE ONE RATING FOR EACH ITEM

Inadequate
①

②

Minimal
③

④

Good
⑤

⑥

Excellent
⑦

^{5.4} People of all ages represented in pictures and books#

PROBES:

- 5.2 Do you ever celebrate holidays? If yes, ask are the holidays of all the children celebrated? Are any of the other cultural customs of the children included. How do you do that?
- 7 How do you use the multicultural materials you have for the children?
- 3.1 Interpret “dolls” broadly to include small figures such as Lego or Playmobile figures, doll house figures, or even paper dolls being used by older children. To give credit materials must be accessible for at least 1 hour daily.
- 5.2 Interpret “included” broadly, so that if provider acknowledges children’s holidays and customs rather than celebrating them, for example, by talking about them, credit can be given.
- 5.4 To give credit for pictures, they must be where children can easily see them, although not necessarily on the child’s eye level. Consider the size, clarity and placement of pictures. To give credit for “people of all ages” at least 1 example of the following must be observed in a book and a displayed picture: baby or toddler, older child, teenager, younger adult, or senior adult.

INTERVIEWER: THE FOLLOWING ITEMS ASSESS THE CLASSROOM'S OVERALL LITERACY ENVIRONMENT. WHEN ANSWERING QUESTIONS THAT REFER TO ADULTS, PLEASE CONSIDER ALL ADULTS WHO WERE PRESENT IN THE CLASSROOM, INCLUDING LEAD AND ASSISTANT TEACHERS, TEACHERS' AIDES, PARENTS, AND VOLUNTEERS, AND CONSIDER ALL CHILDREN WHO WERE PRESENT.

1. HOW MANY FULL-GROUP BOOK-READING SESSIONS DID YOU OBSERVE?

ELLCO	0	1	2	3	4	5+
	00	01	02	03	04	05

2. WHAT WAS THE TOTAL NUMBER OF MINUTES SPENT ON FULL-GROUP BOOK-READING?

ELLCO	0-5	5-10	10-15	15-20	20+
	01	02	03	04	05

3. WHAT WAS THE TOTAL NUMBER OF BOOKS READ DURING THE FULL-GROUP BOOK-READING SESSION(S)?

ELLCO	0	1	2	3	4	5+
	00	01	02	03	04	05

4. HOW MANY ONE-TO-ONE BOOK-READING AND/OR SMALL-GROUP BOOK-READING SESSIONS DID YOU OBSERVE?

ELLCO	0	1	2	3	4	5+
-------	---	---	---	---	---	----

5. WHAT WAS THE TOTAL NUMBER OF MINUTES SPENT ON ONE-TO-ONE AND/OR SMALL-GROUP BOOK-READING?

ELLCO	0-5	5-10	10-15	15-20	20+
	01	02	03	04	05

6. WHAT WAS THE TOTAL NUMBER OF BOOKS READ DURING THE ONE-TO-ONE AND/OR SMALL-GROUP BOOK-READING SESSION(S)?

ELLCO	0	1	2	3	4	5+
	00	01	02	03	04	05

7. IS TIME SET ASIDE FOR CHILDREN TO LOOK AT BOOKS ALONE OR WITH A FRIEND?

YES.....01
NO.....00

8. DID YOU SEE CHILDREN INCLUDE WRITING IN THEIR PLAY?

INTERVIEWER: THIS ITEM MAY INCLUDE CHILDREN WRITING OR SCRIBBLING AS PART OF AN ART ACTIVITY OR DRAMATIC PLAY ACTIVITY OR WHILE USING BLOCKS OR MANIPULATIVES. DO NOT INCLUDE COLORING IN A BOOK OR COLORING AS AN ART ACTIVITY.

ELLCO

YES.....01 → (CODE 9=01 AS WELL)
NO.....00

9. DID YOU SEE CHILDREN ATTEMPTING TO WRITE LETTERS OR WORDS?

INTERVIEWER: WRITING INCLUDES HOLDING A WRITING UTENSIL (E.G., CRAYON, MARKER, PENCIL, PEN) AND MAKING CONTACT WITH PAPER IN A WAY THAT RESEMBLES WRITING, TRYING TO WRITE (HIS/HER) NAME, DRAWING SHAPES IN A WAY THAT RESEMBLES WORDS AND/OR LETTERS; THESE ATTEMPTS MAY INCLUDE SCRIBBLING, BUT THE SCRIBBLING MUST BE INTENTIONAL AND THE CHILD SHOULD INDICATE WHAT HE OR SHE WROTE OR INTENDED TO WRITE.

ELLCO	0	1	2	3	4	5
	00	01	02	03	04	05

YES.....01
NO.....00

ELLCO

10. HOW MANY TIMES DID YOU SEE AN ADULT HELP A CHILD WRITE?

ELLCO

11. DID AN ADULT MODEL WRITING?

ELLCO

YES.....01
NO.....00

FOCUS CHILD ACTIVITIES

INTERVIEWER: THE NEXT ITEMS ASSESS THE *FOCUS CHILD'S* ACTIVITIES. ONLY CONSIDER THE FOCUS CHILD WHEN ANSWERING QUESTIONS. PLEASE CONSIDER *ALL* ADULTS WHO WERE PRESENT IN THE CLASSROOM, INCLUDING LEAD AND ASSISTANT TEACHERS, TEACHERS' AIDES, PARENTS, AND VOLUNTEERS WHEN ANSWERING QUESTIONS THAT REFER TO ADULTS.

1. WHAT WAS THE TOTAL NUMBER OF MINUTES THE FOCUS CHILD SPENT ATTEMPTING TO WRITE LETTERS OR WORDS?

INTERVIEWER: WRITING INCLUDES HOLDING A WRITING UTENSIL (E.G., CRAYON, MARKER, PENCIL OR PEN) AND MAKING CONTACT WITH PAPER IN A WAY THAT RESEMBLES WRITING, TRYING TO WRITE (HIS/HER) NAME, DRAWING SHAPES IN A WAY THAT RESEMBLES WORDS AND/OR LETTERS; THESE ATTEMPTS MAY INCLUDE SCRIBBLING, BUT THE SCRIBBLING MUST BE INTENTIONAL AND THE CHILD SHOULD INDICATE WHAT HE OR SHE WROTE OR INTENDED TO WRITE.

0-5	5-10	10-15	15-20	20+
01	02	03	04	05

2. WHAT WAS THE TOTAL NUMBER OF MINUTES THE FOCUS CHILD ENGAGED IN A READING ACTIVITY?

INTERVIEWER: READING ACTIVITIES INCLUDE LOOKING THROUGH A BOOK, TELLING ANOTHER ADULT OR CHILD THE STORY WHILE FLIPPING THROUGH A BOOK, PLAYING A COMPUTER GAME THAT INVOLVES WORDS OR LETTERS, PARTICIPATING IN A FULL-GROUP, SMALL-GROUP, OR ONE-TO-ONE BOOK-READING SESSION WITH AN ADULT.

0-5	5-10	10-15	15-20	20+
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01 02 03 04 05

3. WHAT WAS THE TOTAL NUMBER OF MINUTES THE FOCUS CHILD SPENT WATCHING TV?

0-5	5-10	10-15	15-20	20+
01	02	03	04	05

4. WHAT WAS THE TOTAL NUMBER OF MINUTES THE FOCUS CHILD SPENT WANDERING AIMLESSLY?

0-5	5-10	10-15	15-20	20+
01	02	03	04	05

5. WHAT WAS THE TOTAL NUMBER OF MINUTES THE FOCUS CHILD SPENT UPSET OR CRYING?

0-5	5-10	10-15	15-20	20+
01	02	03	04	05

6. WHAT WAS THE TOTAL NUMBER OF TIMES THE FOCUS CHILD BECAME UPSET OR CRIED?

0-5	5-10	10-15	15-20	20+
01	02	03	04	05

7. WHAT WAS THE TOTAL NUMBER OF MINUTES THE FOCUS PROVIDER SPENT NOT INTERACTING WITH ANY CHILDREN?

INTERVIEWER: THIS INCLUDES THE *FOCUS PROVIDER* AND ALL CHILDREN WHO WERE PRESENT. INCLUDE TIME SPENT WATCHING TV, TALKING ON TELEPHONE. DO NOT INCLUDE ROUTINE TASKS THAT ARE REQUIRED SUCH AS PREPARING MEALS FOR CHILDREN OR CLEANING UP AFTER THEM.

0-5	5-10	10-15	15-20	20+
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- 3.1 Morning snacks should include 2 of the following: ½ cup milk; ½ cup fruit or vegetable, or ½ cup of 100% fruit juice; ½ slice bread or ½ cup cereal; ½ ounce meat, nut product, beans or meat alternative.
- Lunch for 12 to 24 month olds should include ½ cup milk, ¼ cup vegetable, 100% fruit juice and/ or fruit; ½ slice bread or ¼ cup pasta or cereal; 1 ounce of meat or cheese or 1 egg, ¼ cup beans, or 2 tablespoons peanut butter.
- 3.2 “Eating area clean” means that the eating surface is sanitary. If a table itself cannot be sanitized, then a place-mat (e.g., vinyl) that is sanitized may be used or a clean disposable place-mat. Highchair trays must be sanitized.
- 3.3 To determine whether sanitary preparation of food can be scored *Yes*, observe to see whether there are any severe problems (such as dropping food on the floor and then serving it to children). Also ensure that the caregiver washes her hands before preparing foods and that serving of the food is sanitary (i.e., clean dishes and utensils used, foods are not contaminated during food service).
- 3.2 Since new research has shown that waterless washes are an adequate sanitary measure, it is required that caregivers wash with soap and water during diapering or toileting. Therefore, disregard the statement about waterless washes in the note for this item.
- 5.2 *N/A if only infants (less than 12 months) are in care.*
- 5.3 *N/A if no toddlers or children being toilet trained are in care.*
- 7.2 *N/A if only young infants (e.g., less than 6-7 months) are in care.*
- 3.1 Keeping caregiving areas clean includes washing all toys at least weekly and air drying if possible. Floor areas should be vacuumed or damp mopped with a disinfectant frequently to kill the germs that can live for days and even weeks on floors, rugs, and furniture. Feeding chairs should be cleaned daily with a cloth dampened with a sanitizing solution.
- 5.1 Hand washing is considered under this indicator. “Cutting down on the spread of germs” means that avoiding contamination is obviously an important part of the program that is practiced consistently, which relatively few (3-4) lapses during the observation (such as sneezing without washing hands, forgetting to ensure that a child’s hands have been washed, not wiping a nose immediately). However, no major problems (such as using the same sink for both diapering and other needs without sanitizing in between, animal contamination in space used by children, contents of potty chair accessible to unsupervised children, or much Hand washing ignored) can exist to give credit for this indicator.

The following list of obvious hazards is not meant to be complete. Be sure to note all safety problems on the score sheet.

Some indoor safety problems

- no safety caps on electrical sockets
- loose electrical cords
- heavy toys or other things child can pull down

Some outdoor safety problems

- tools accessible
- garden sprays accessible
- tool shed or garage unlocked

- cleaning materials, medicines, and other dangerous substances not locked away
- trash accessible
- pot handles on stove accessible
- stove controls accessible
- toy box with heavy lid
- crib or playpen slats far enough apart to catch baby’s head
- crib mattress doesn’t fit crib snugly
- water temperature too hot
- mats or rugs that slide
- pieces of toys that can be swallowed accessible
- unprotected hot stove or fireplace in use
- open stairwells accessible

- poisonous plants around
- unsafe play equipment
- unsafe walkways or stairs
- easy access to road

General safety hazard

- provider picks up infant or toddler by hand or arm
- infant under 6 months is put to sleep on the stomach

1.2 & 3.6 Bleach and water solution, used to sanitize surfaces, do not have to be locked, but must be stored out of reach of young children. Cabinets that contain hazardous materials must be locked (i.e., lock and key, magnetic lock). Safety latches are not sufficient.

3.4 “Official fire safety inspection” means that there is a signed report from the fire inspector. In North Carolina counties where Fire Inspectors will not complete fire safety inspections on family child care homes ask the caregiver whether the fire extinguisher is charged, the smoke alarm is working, and monthly fire drills are completed, to meet the requirements of this indicator.

3.6 If adults pick up infants/toddlers by hand or arm, putting children at risk for joint injuries, then this indicator must be scored No. The same is true if infants under 6 months of age are put to sleep on their stomachs, putting children at risk for Sudden Infant Death Syndrome.

5.2 *N/A* if family child care provider *never* transports children.

7.1 CPR training must be renewed yearly.

Start by marking "Family Day Care Rating Scale Score Sheets" as Want to Read: Want to Read savingâ€¦ Want to Read. Currently Reading. Read. Family Day Care Rating... FDCRS consists of 32 items, organized under six major headings: Space and Furnishings for Care and Learning -- Basic Care -- Language and Reasoning -- Learning Activities -- Social Development -- Adult Needs. Eight additional items are included for rating a day care home's provisions for special-needs children. Each book contains one score sheet. Packages of 30 score sheet FDCRS consists of 32 items, organized under six major headings: Space and Furnishings for Care and Learning -- Basic Care -- Language and Reasoning -- Learning Activities -- Social Development -- Adult Needs. Family day care in the United States. Final Report of the National Day Care Home Study. Washington, DC: Department of Health and Human Services. Google Scholar. Dowsett, C. J., Huston, A. C., Imes, A. E., & Gennetian, L. (2008). Structural and process features in three types of child care for children from high and low income families. *Early Childhood Research Quarterly*, 23, 69-93. CrossRef PubMed PubMed Central Google Scholar. Farran, D., & Son-Yarbrough, W. (2001). Family day care rating scale. New York, NY: Teachers College Press. Google Scholar. Harms, T., Clifford, R., & Cryer, D. (1998). Early childhood environment rating scale (Rev ed.). New York, NY: Teachers College Press. Google Scholar. Harms, T., Cryer, D., & Clifford, R. (2007).