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ABSTRACT

This Child Care Action Campaign (CCAC) Information Guide focuses on questions for parents to ask when looking for the right childcare program. The guide provides a checklist for parents to use when evaluating potential or currently used childcare programs. By sharing and discussing the checklist with caregivers, parents and caregivers can work together to improve the quality of care. Sections in the checklist are: (1) "Caregivers: How Many Children Is Each Caregiver Responsible For?"; (2) "Emotional Development and Discipline"; (3) "Play Activities," including toys, safety, space, cleanliness, and comfort considerations; (4) "Facility Operation and Policies"; (5) "Safety"; (7) "Management Policies"; and (8) "Warning Signs of Poor Child Care," which include feelings of uneasiness, children's dislike or fear of a caregiver, and inaccessibility of caregiving areas when visiting the site. (BGC)

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Finding Good Child Care: The Essential Questions to Ask When Seeking Quality Care for Your Child

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If you want your child to thrive while you are away from him or her, and if you want to be able to work confident that your child is well cared for, you need to spend some time looking for the right child care program. You can use the checklist below to evaluate family day care homes and child care centers. Make a separate copy for each program you are considering. Before you start, explain to the caregiver or director that you're using the checklist to help you remember what you've seen. You may wish to leave a blank copy for the caregiver to look over later. If your child is already in child care, you can use the checklist to evaluate his or her current situation.

Remember, no center or family day care home is likely to meet every qualification on the list – at least not at first. However, by sharing and discussing this checklist with your child's caregiver, you can work together to improve the quality of care.

INSTRUCTIONS FOR USING THE CHECKLIST

- Plan to visit each program for at least one hour.
- Complete the checklist during the observation. Write "Y" or "N" on the line to indicate "yes" or "no." If you wish, jot down notes on a piece of paper to help you remember details.
- As part of your visit, make an appointment to talk with the caregiver for about fifteen minutes after you've had time to observe the program. This may have to be during the children's nap time, with a follow-up conversation by telephone.

- Keep in mind the best time to visit is in the morning. Try to include drop-off time in your observations so you can see how the children, parents, and caregivers interact.

CAREGIVERS: HOW MANY CHILDREN IS EACH CAREGIVER RESPONSIBLE FOR?

__1. The staff is the most important factor in the quality of care. Optimal staff/child ratios vary by age and type of care.

Family day care:

1 adult: 5 children, including the caregiver's children. There should be no more than two infants.

Child care centers:

Infants and toddlers: 1 adult to 4 children

Two year olds: 1 adult to 4-6 children

Three year olds: 1 adult to 7-8 children

Four year olds: 1 adult to 8-9 children

Five year olds: 1 adult to 8-10 children

School-age children: 1 adult to 10-12 children

__2. The total group size should be about two times the staff/child ratio.

__3. Caregivers should have some training in child care, child development, or early childhood education. They continue to learn about children by reading books and articles, taking courses, and/or belonging to a professional organization.

__4. Caregivers have good character references. A background check has

been done if your state requires one.

__5. Caregivers are warm, affectionate, and seem to enjoy being with children.

__6. Caregivers pay attention to the children and interact with them, rather than chatting with other caregivers or attending to personal things.

__7. Caregivers use a pleasant tone of voice and talk a lot to the children, including babies and toddlers.

__8. Caregivers change their style of supervision to suit the age and abilities of the child – very close supervision for infants and toddlers, more independence for three- and four-year-olds. Children are never left unsupervised.

__9. Caregivers seem to be easy to talk to and work with.

__10. Caregivers are energetic, in good physical health, and able to keep up with the children.

__11. Caregivers have had a physical examination within the past two years.

__12. Many of the caregivers have been working at the center for an extended period of time and plan on staying in the child care profession.

EMOTIONAL DEVELOPMENT AND DISCIPLINE

__1. Reasonable discipline is maintained through careful supervision, clear limits, age-appropriate explanations, and use of "time out." No spanking or corporal punishment is ever used, nor is harsh discipline such as shouting, shaming or withholding of food.

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__2. Caregivers avoid conflicts between children by listening and watching carefully so that they can step in early, before the situation escalates.

__3. Caregivers appropriately use praise and attention to encourage cooperation and helpfulness. They call attention to children who are being good more often than those being bad.

__4. There is a pleasant, generally happy tone in the group much of the day. Caregivers show warmth and affection by smiling, talking to, and hugging children. Infants and toddlers are held often.

__5. Caregivers are patient when annoying and unanticipated events happen, such as spills at the table or accidents with toileting.

__6. Caregivers are able to talk with parents about discipline methods, and are willing to work with parents and other staff to find ways to solve a child's problems.

PLAY ACTIVITIES

__1. Toys are organized so that they are easy to find and easy to put away.

__2. Children – including babies and toddlers—have easy access to some safe toys kept for them on open shelves or in organized boxes.

__3. There are age-appropriate toys and games to build eye-hand coordination, such as grasping toys for infants; nesting cups for toddlers; and puzzles, small building toys, and safe scissors for older children.

__4. Safe and easy-to-use art materials, such as non-toxic crayons, paints, and play dough, are provided so that children can create their own work as soon as they are able.

__5. Records for listening, singing along and dancing to – as well as musical toys and instruments – are available. The caregiver sings simple songs with children of all ages.

__6. Building toys, such as blocks, are available; toy people, cars, and other accessories are added to enhance imaginary play.

__7. Soft toys and dolls, toy dishes, and dress-up clothes are available for imaginary play.

__8. Clean sand and water are available for play outdoors, and sometimes indoors.

__9. Infants and toddlers have many age-appropriate toys to use (soft toys, musical toys, balls, etc.) and there is enough safe crawling space to encourage their exploration of the environment.

__10. Challenging materials, such as scissors or toys with many pieces, are introduced – with supervision – as children are ready for them. A caregiver stays with the children while they use such materials.

__11. Space is provided for children to play alone or in small groups, protected from the pressure and competition of other children.

__12. There are rugs and soft, comfortable furniture for the children to relax on.

__13. Colorful pictures of everyday things are hung at the child's eye level without the use of sharp objects such as tacks.

__14. Children's artwork is displayed where it is visible to children.

FACILITY OPERATION AND POLICIES

__1. Substitute caregivers with whom the children are familiar, who are knowledgeable about the program, and who are available when the main caregiver is absent.

__2. The indoor care-giving area is large enough for the group, and is clearly organized so that children know where different activities take place, and where they can get toys and put them away.

__3. The children play outdoors in a safe area every day, except in bad weather.

__4. There is a schedule that covers the basic care routines and play periods (both indoors and outdoors), including some daily planned activities, like story time for preschoolers or singing time for babies. An alternative activity is available for children who do not want to join the group activity.

SAFETY

__1. Electrical outlets and heaters are covered, and stairs have safety gates.

__2. Equipment is maintained to ensure safety, and there is enough space for active physical play outdoors (and to some degree, indoors) for all age groups.

__3. Cleaning fluids, medicines, and other harmful substances are stored in locked cabinets out of the reach of children.

__4. The outdoor play area is fenced and cleared of debris and poisonous plants.

__5. The outdoor area is protected from animal contamination, including covering the sandbox when not in use.

__6. There are fire extinguishers in the building and an adequate number of working smoke detectors.

__7. Emergency numbers for the fire station, rescue squad, police, poison control, etc. are posted near the telephone.

__8. There is an emergency exit plan so that the caregiver can get all the children out quickly. Fire drills are held monthly, so that children and caregivers know what to do in case of an emergency.

__9. Safety restraints and car seats are used every time a child is in a car, bus, van, or other moving vehicle.

HEALTH AND NUTRITION

__1. Telephone numbers of parents and another relative or friend are recorded and are easily accessible for contact in an emergency.

__2. Parents are told immediately about any accident that a child has; they are also told about any contagious illnesses in the group.

__3. Caregivers wash their hands with soap and water each time they change a diaper or toilet a child, and before they prepare or serve food, in order to prevent the spread of germs.

__4. At least one caregiver has had first aid and CPR training within the past two years.

__5. The caregiver will give the child medicine only with a parent's permission, and following precise written instructions.

__6. Wholesome, nutritious meals and snacks are served daily, on a suitable schedule.

__7. If a caregiver provides food, weekly menus are posted where parents can see them. Caregivers also discuss a child's eating habits with parents, and make note of any allergies or other special food needs.

__8. Babies are held while being bottle-fed. Babies and toddlers are not put to bed with bottles; this can cause tooth decay and ear infections.

__9. Caregivers supervise a suitable nap/rest time, and provide each child with a cot or bed with clean linen. Quiet activities are planned for non-nappers.

MANAGEMENT POLICIES

__1. There is an "open door" policy for parents: you are welcome to visit your child and the facility at any time of the day.

__2. The facility is registered or licensed if required. (Not all states require licensing or registration of family day care homes or certain types of centers.)

__3. The operating policies covering fees, hours of operation, procedure if a child becomes ill, vacations, and meals are available in writing.

__4. Information about the program including discipline methods used, the children's schedule of activities, and weekly menus is available to you in writing.

__5. The caregiver will regularly report to you about your child's activities and interests while at the center or child care home.

The National Association for the Education of Young Children (NAEYC), has an accreditation system for child care centers that are willing to meet high standards. Ask the centers you visit whether they are involved in the NAEYC accreditation process.

WARNING SIGNS OF POOR CHILD CARE

Even after you've selected good child care, continue to monitor and observe the care your child receives. The quality of a program can vary greatly over time, especially if there is staff turnover. Here are some danger signals to check on immediately:

__1. Parents are not allowed to drop in unannounced at all times of the day. You are required to call before visiting or coming to pick up your child at a different time.

__2. Parents must drop off the child in the office and may not come into the care-giving areas.

__3. After several months, your child continues to be unhappy about going to the child care facility, or your child suddenly becomes unhappy after she or he seems to have adjusted. This may or

may not be a danger sign, since children often have problems with separation, but it should be attended to.

__4. Your child talks about being afraid of or disliking a particular caregiver, or seems quiet and fearful in her presence.

__5. There is frequent staff turnover and you notice unfamiliar people caring for the children when you drop off or pick up your child.

__6. The care seems lax and indifferent. You see children being made to wait for long periods of time or left to play unattended indoors or outdoors.

__7. Your child has an excessive number of injuries that the caregiver cannot explain adequately.

__8. The caregiver's voice or manner seems harsh, rude, or indifferent toward any of the children.

__9. There are insufficient toys for the children to play with or few interesting activities. Toys may be put on display but are not used regularly by the children.

__10. When you express any concerns, the caregiver becomes upset or defensive and cannot discuss the matter rationally with you.

__11. You feel uneasy about the care, are not confident about the caregivers, or worry about how your child is doing. A visit to spend time with your child and observe what her life in care is like should reassure you.

*Adapted from an article by
Thelma Harms.*



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Organization/Address: <i>Child Care Action Campaign 330 7th Avenue, 17th fl. New York, NY 10001</i>	Telephone: <i>212-239-0138</i>	FAX: <i>212-268-6515</i>
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