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

If you want your child to thrive while you are away from his 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 child 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 are using the checklist to help you remember what you have seen. You may wish to leave a blank copy with 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 child 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 one 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 a 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?

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

Family Child 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: 4 children Two year olds: 1 adult: 5 children

Three year olds: 1 adult: 5 children Four year olds: 1 adult: 7 children Four year olds: 1 adult: 8 children Five year olds: 1 adult: 9 children School-Age children: 1 adult: 10 children

- □ The total group size should be about two times the staff/child ratio.
- □ 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.
- Caregivers have good character references. A background check has been done.
- □ Caregivers are warm, affectionate, and seem to enjoy being with children.
- □ Caregivers pay attention to the children and interact with them, rather than chatting



with other caregivers or attending to personal things.

- □ Caregivers use a pleasant tone of voice and talk a lot to children, including babies and toddlers.
- □ 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.
- □ Caregivers seem to be easy to talk to and work with.
- □ Caregivers are energetic, in good physical health, and able to keep up with the children.
- □ Caregivers have had a physical exam within the past two years.
- □ 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

- Reasonable discipline is maintained through careful supervision, clear limits, ageappropriate explanations and redirection. No spanking or corporal punishment is ever used, nor harsh discipline such as shouting, shaming, or withholding of food.
- □ Caregivers avoid conflicts between children by listening and watching carefully so that they can step in early, before situations escalate.
- □ Caregivers appropriately use praise and attention to encourage cooperation and helpfulness. They call

attention to children who are being good more often than those who are not.

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

- □ Toys are organized so that they are easy to put away.
- □ Children, including babies and toddlers, have easy access to some safe toys kept for them on open shelves or in organized boxes.
- □ There are age-appropriate toys and games to build eyehand coordination, such as grasping toys for infants, nesting cups for toddlers, and puzzles and small building toys and safe scissors for older children.
- □ 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.
- Music 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.
- Building toys, such as blocks, are available; toy people, cars, and other accessories are added to enhance imaginary play.
- □ Soft toys and dolls, toy dishes, and dress-up clothes are available for imaginary play.

- □ Clean sand and water are available for play outdoors and sometimes indoors.
- □ 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.
- □ 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 the use such materials.
- □ Space is provided for children to play alone, or in small groups, protected from the pressure and competition of other children.
- □ There are rugs and soft furniture for the children to relax on.
- □ Colorful pictures of everyday things are hung at the child's eye level without the use of sharp objects such as tacks.
- □ Children's artwork is displayed where it is visible to children.

## FACILITY OPERATION AND POLICIES

- □ Substitute caregivers with whom the children are familiar, are knowledgeable about the program, and are available when the main caregiver is absent.
- ☐ The indoor caregiving 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.
- □ The children play outdoors in a safe area every day, except in bad weather.
- □ 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 and singing time. An alternative activity is available for children who do not want to join the group activity.

## SAFETY

- □ Electrical outlets and heaters are covered and stairs have safety gates.
- 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.
- Cleaning fluids, medicines, and other harmful substances are stored in locked cabinets out of the reach of children.
- □ The outdoor play are is fenced and cleared of debris and poisonous plants.
- ☐ The outdoor play area is protected from animal contamination, including covering the sandbox when not in use.
- There are fire extinguishers in the building and an adequate number of working smoke detectors.
- Emergency numbers for the fire station, rescue squad, police, poison control, etc., are posted near the telephone.
- □ 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.
- □ Safety restraints and car seats are used every time a child is in a car, bus, van, or other moving vehicle.

## HEALTH AND NUTRITION

- □ Telephone numbers of parents and another relative or friend are recorded and are easily accessible for contact in an emergency.
- Parents are told immediately about any accident that a child has. They are also told about an contagious illnesses in the group.
- □ Caregivers wash their hands with soap and water each time they change a diaper or toilet a child, and before they prepare to serve food, in order to prevent the spread of germs.

- □ At least one caregiver has had CPR and first aid training within the past two years.
- □ The caregiver will give the child medicine only if approved by the state, and only with parent and doctor written permission.
- □ Caregiver or center is part of CACFP. Wholesome, nutritious meals and snacks are served daily on a suitable schedule.
- □ 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.
- □ 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.
- 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

- □ There is an "open door" policy for parents. You are welcome to visit your child and the facility at any time of the day.
- □ The facility is registered or licensed with the state.
- □ The operating policies covering fees, hours of operation, procedures if a child becomes ill, vacations, and meals are available in writing.
- □ Information about the program, including discipline methods used, the children's schedule of activities, and weekly menus, is available to you in writing.
- □ 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 a good child care program, continue to monitor and observe the care your child received. 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:

- 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.
- Parents must drop off the child in the office and may not come into the care-giving areas.
- 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 would be attended to.
- Your child talks about being afraid of or dislikes a particular caregiver, or seems quiet and fearful in her presence.
- There is frequent staff turnover and you notice unfamiliar people caring for the children when you drop off or pick up your child.
- 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.
- Your child has an excessive number of injuries that the caregiver can not explain adequately.
- The caregiver's voice or manner seems harsh, rude, or indifferent toward any of the children.

- There are unsufficient 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.
- When you express any concerns, the caregiver becomes upset or defensive and cannot discuss the matter rationally with you.
- 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