



Infant & Toddler Care



The Child Care Council of Westchester, Inc.

Proudly Serving the Westchester County Community...

for Over 40 Years

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313 Central Park Avenue, Scarsdale, NY 10583
914-761-3456
www.ChildCareWestchester.org

Infant/Toddler Child Care

10 COMPONENTS OF QUALITY CHILD CARE FOR INFANTS AND TODDLERS

1. Licensed Programs Following Appropriate Health and Safety Practices

- Licensing insures that basic health and safety requirements have been met.
- Staff wash their own and children's hands frequently.
- Separate areas for food prep, diapering and toileting.
- Detailed procedures for emergencies posted.
- Health plan in place.
- Infants placed on their back to sleep.
- Nutritious meals and snacks.
- Approved to administer medication.

2. Staff Well Trained in Early Childhood Development (0-3)

- Caregiver education and level of participation in ongoing training in the field of early childhood development and care is critically important.
- Caregivers should apply their knowledge of early childhood and use curricula and materials to plan appropriate activities.
- Caregivers use routines such as diapering, transitions, and mealtimes to promote learning.

3. Age Appropriate Environments

- Room arrangement allows for quiet and active play, dramatic and messy play, small group activities and individual care.
- Multiple sets of toys available for access at the child's eye level to promote independent choosing and use.
- Arrangements of classrooms based on the facilitation of learning by young children, rather on the preferences of caregivers.
- Infants and toddlers must have separate outdoor space for play.

4. Small Groups with Optimal Ratios (Fewer children mean less noise and less activity to interfere with infants' and toddlers' ability to learn.)

- Create a greater sense of intimacy and safety.
- Allow for rich dialogue, less noise and less activity, which are optimal conditions for this age group.
- Build stronger relationships and enable the ability to adapt activities to meet challenging interests and needs of the group.
- The recommended group size is six to eight for infants and no larger than ten for toddlers.
- The best adult-to-child ratio is one adult for every three to four infants and one adult for every 5 toddlers.
- Fewer children mean less noise and less activity to interfere with infants' and toddlers' ability to learn.

5. Primary Caregiver and Continuity of Care (Each child is matched with a primary caregiver who develops a positive relationship with the child's family)

and, whenever possible, is the staff person who changes the child's diapers, puts him or her down for nap and cuddles to look at a book together every day.)

- Relationships between caregivers and children are crucial in quality childcare.
- Each child enrolled in-group care should be assigned a primary caregiver that has the principle responsibility for that child, building a positive, constant, intimate relationship with the child and the family.
- Having one caregiver from entry into childcare until the child is three years old is optimal for the child's development given that each change from one caregiver to another takes a toll.
- Having to learn and relearn a caregiver's ways may slow the child's overall development and leave them reluctant to form new relationships.

6. Active and Responsive Caregiving to Support Children's Development

- Caregivers take cues from each child to know when to expand on what the child is doing, when to guide, when to teach and when to intervene
- The caregiver is alert to signs of stress in a child's behavior and responds with appropriate stress reducing activities and techniques.
- The caregiver facilitates the development of self-esteem by respecting and accepting children, regardless of their behavior.

7. Emerging Language and Literacy (Caregivers promote the development of language through the use of simple words and maintain a balance between listening and talking with the child.)

- Caregivers expand on the sounds made by infants and toddlers and add words and ideas to what very young children express feel or say.
- Caregivers promote the development of language through the use of simple words and maintain a balance between listening and talking with the child.
- Staff creates a learning environment that includes age appropriate books and other print material.
- The use of songs, nursery rhymes, and finger plays promote language and literacy development.
- Caregivers promote the development of language through the use of simple words and maintain a balance between listening and talking with the child.

8. Curriculum Observation and Individualized Programming (Caregivers use curriculum guides specifically designed for infants and toddlers.)

- Learning is an interactive process in need of a variety of choices in activities and materials.
- Caregivers must understand the temperaments, moods, and preferences of each child and should adapt their care to meet individual needs.
- Young children sleep, eat and play in regular routines rather than forcing rigid conformity.
- Based on curriculum and observations, caregivers plan for each day. Individualizing activities, materials and schedules according to the developmental stage of each child.

9. Family Involvement and Cultural Continuity (Whenever possible, caregivers use the child's home language, following cultural norms related to daily routines, and celebrating diverse cultures.)

- Incorporating practices reflecting the values and beliefs of the families and the culture of the communities.
- Use of the child's home language, following cultural norms related to daily routines, and celebrating diverse cultures.
- Communicate each day with families, welcome parents into their child's classroom and organize special events that include the child's family members.

10. Comprehensive Support Services (Links to Community agencies provide children in care with a medical home, mental health and social services, and therapeutic interventions.)

- Community agencies are essential to provide a medical home, mental health and social services, and therapeutic interventions.
- Ongoing communication can ensure continuity of care across multiple disciplines and promote holistic support services and treatment.

Adapted from:

Teen Parent Child Care Quality Improvement Project – www.cpeip.fsu.edu – Florida State University Center for Prevention & Early Intervention Policy.

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call the Child Care Council of Westchester, Inc
at (914) 761-3456 ext. 140 ~ Monday thru Friday 9am to 5pm
Or visit our website at www.ChildCareWestchester.org

A Good Caregiver is...

...Loving and Responsive :

- One who hugs, rocks, cuddles, seeks eye contact and enjoys the child...
- Who responds to the baby's smiles and emerging skills and interests...
- Who finds ways to expand upon each experience...
- Is sociable and interested.
- One who talks with the baby about what they do and see...
- A playful partner who introduces new ideas, objects and games...
- Who supports children in their social contacts with other children and adults.

...Respects the Baby's Individuality:

- One who understands and welcomes babies development...
- Recognizes the baby's personal rhythms, style, strengths and limitations...and tunes into these when planning the pace and time for eating, sleeping and playing...
- Is comfortable with a special need or disabling condition.

...Offers Good Surroundings :

- An area that is clean and safe so babies can explore their surroundings...
- An area filled with interesting and stimulating things to explore...
- Set up to promote learning through free play...
- Changed to accommodate the needs of growing infants and toddlers...
- Eating and diapering areas well organized so as to be comfortable and practical for adults while allowing them to focus on the child.

Matching your child's style to your caregiver...

Selecting a child care provider is one of the most important decisions that you will make as a parent. It can also be a stressful one! You may find yourself feeling:

- ❑ **Positive** - "I'm looking forward to going back to work."
- ❑ **Anxious** - "Will they really give her enough attention?"
- ❑ **Ambivalent** - "I want to go back to work, but I feel guilty about leaving him with someone else."
- ❑ **Jealous** - "Will she still know that I'm her mother/father?"
- ❑ **Sad** - "I am going to miss this little guy so much!"
- ❑ **Vulnerable** - "I'm on the waiting list...will there be space for her? What will we do if there's not?"
- ❑ **A Loss of Control** - "What if something happens and I'm not there?"

Feelings like these are normal. Talking with other parents and the director of your child care center can help with the transition.

As a parent, you know your child best. Below are some guidelines on how to use what you know about your baby--her personal style, activity level, need for social interaction, and tolerance--to select a child care setting that's right for her. Use the questions below to develop a profile of your child, and to learn more about the type of care that might meet her needs best. Information is also included on issues to consider such as health and safety, sleep, cultural identity, and special needs.

Many parents find themselves making child care arrangements before their baby is born. That's normal and, often, necessary. Once you have had a chance to get to know your baby, use these guidelines to help you re-evaluate her child care arrangement. Does it complement her needs? Encourage her strengths?

What is your child like? What is your child's personal style?

If most of the time, you child is:	Look for:
<p>Adaptable Your child is flexible, and approaches new situations and new people with ease. She doesn't usually have trouble with transitions and tends to "go with the flow."</p>	<p>Large group settings that provide lots of opportunities for social interaction and new experiences.</p>
<p>Cautious Your child is thoughtful, and approaches new situations and new people slowly (and sometimes with fear). She often has difficulty with transitions and needs lots of support to feel safe and comfortable.</p>	<p>Small group settings, which may be less overwhelming for her.</p>
<p>Feisty Your child is very passionate and feels things intensely. She often has difficulty controlling her strong feelings, wants, and needs. She may or may not work well with transitions but, either way, she always lets you know what she's feeling.</p>	<p>Settings where each child is assigned a primary caregiver, someone who knows her and understands her intense expressions of emotion. (Note: All children would benefit from this.)</p>

Does your child react intensely to the world around him?

If most of the time, you child is:	Look for:
<p>A Big Reactor Your child tells the world whether he's feeling happy or sad, and he doesn't hold back! Big Reactors usually respond with equal intensity to physical stimuli (an itchy shirt tag) as well as to emotional stimuli (being denied a second cookie).</p>	<p>Caregivers who respect your child's feelings while helping him to express them in a more controlled way. You may also want to locate a center that uses discipline techniques like redirection (distracting the child with another toy, area, or activity), labeling feelings, and limiting choices.</p>
<p>A Low Reactor As infants, Low Reactors are often less demanding than other babies. They fuss very little, tend to be quiet, and sleep a lot. You may find yourself working harder to get their attention during play or other activities.</p>	<p>Caregivers who gently introduce new activities, and allow Low Reactors to choose their own toys and engage in the quieter activities they prefer.</p>

How active is your child?

If most of the time, you child has:

Look For:

High Activity Level These children are always on the go-crawling, climbing, toddling, and running until they drop. They will reach for, touch, and taste anything and everything.	Settings that provide safe, active exploration and lots of opportunities for physical play. Also look for providers who allow for individual schedules so that your child won't be expected to lie down or sit still for very long.
Low Activity Level These children are content to sit quietly and explore the world through their eyes and ears. Their interest in the world around them is as sharp as high activity children, but their need to move about is fairly low.	Caregivers who engage children in sensory-rich activities.

How social is your child?

If most of the time, you child is:

Look For:

Super-Social Does your child approach new people-adults and children-with a smile and outreached arms? Super-social kids are most content when they are surrounded by, and interacting with, other adults and children.	Settings that encourage group play; a larger group program may be a good fit.
Take-It-Slow Children who prefer to "take it slow" may be more hesitant and shy around strangers, and need time to warm up before they feel comfortable or safe enough to join in. They may be happy to play alone, or with just one or two other adults or children.	Caregivers who allow children to choose when they would like to meet and play with others; a smaller group program might be a good choice.

Is your child tolerant of changes and challenges?

If most of the time, your child is:

Look For:

<p>High Tolerance These children don't seem to be too bothered by changes, whether it's new babysitters, new shoes, or new food. Adaptable, they tend to cope with frustration well. They're persistent and patient, and keep trying even when faced with a difficult task.</p>	<p>Early childhood educators recommend mixed-age settings that offer challenge and stimulation.</p>
<p>Low Tolerance Low tolerance children are sensitive to change and often become very upset when their routine is altered in some way. They are also apt to feel frustrated and lose patience with when faced with obstacles (like a puzzle piece that won't fit).</p>	<p>Early childhood educators recommend same-age settings where the toys, games, and activities are more uniformly targeted to your child's current level of development.</p>

What are your child's unique needs?

Sleep

Some children's sleep-wake patterns adapt easily to a group schedule, while others' do not. Parents should look for centers that offer:

- * individual schedules (vs. group routines);
- * separate sleeping areas; and,
- * appropriate lighting (dim), temperature (comfortable) and noise level (low).

Cultural Identity

- * Are staff interested in your family's culture and beliefs?
- * Do staff speak your home language, or find effective ways to communicate with you about your child?
- * Are staff open to including books and other aspects of your child's culture?
- * Are objects in the center labeled with your child's home language?
- * Are staff's values and practices consistent with your family's?

Special Needs

- * Are staff members open and enthusiastic about accommodating your child?
- * Are staff trained and supported to accommodate children with special needs?
- * Do staff members understand the medical/therapeutic procedures and assistive technology necessary to support your child?
- * Is the setting (including playground) accessible to your child?
- * Do any books or toys feature children with special needs?
- * Are staff willing to help your child develop the skills that your family believe are important?

Responsive Care

Among the items we've discussed, there is one common thread: **the need for caregiving staff to adapt their approach to meet your child's needs.** This is called *responsive care*. To do so, caregivers need to be excellent observers of the children in their care, and search for the meaning behind children's gestures, gurgles, cries, and glances. Responsive caregivers wonder why a particular behavior is occurring, come up with an educated guess, and interact with the child to see if they're correct. Is a crying baby tired? Hungry? Wet? Lonely? Frustrated?

Responsive caregivers adapt their responses based on the reason behind the behavior as well as *the style of the individual child*. This ensures that all children are treated as unique, with their own thoughts, feelings, needs, and preferences.

Responsive Child Care: Issues to Consider

1. Do caregivers allow children to function according to their own individual schedules (or do children have to adhere to a group routine)?
2. Do parents receive daily written reports about their children's day? Do caregivers chat with parents at pick-up about children's daily activities?
3. Do caregivers document children's development through photos, transcripts of children's comments, and art displays? Do they provide formal progress reports to parents at least twice each year?
4. Are parents free to visit at any time during the day?
5. Does the program adhere to state-regulated caregiver/child ratios? What is the size of your child's group?
6. Is the turnover rate for families under 20%? Why do families leave?
7. What is the staff turnover rate? Are there staff retention strategies in place? (The reality is that staff turnover is likely to be high - 50 to 75 percent is not uncommon. Be wary of programs who claim to have no, or very low, turnover. Look for a program that will be honest with you about turnover, but who also share their strategies for retaining staff.)
8. When caregivers leave, do they help children understand the transition through activities like good-bye parties, reading books about separation, and taking photos of the departing caregiver? Does the new caregiver have a chance to spend time with the departing caregiver to learn about the children?
9. Does the program offer standard medical benefits and vacation leave? Does it support caregivers' continuing education through tuition reimbursement?

programs and/or by sponsoring staff at regional/national conferences on early childhood development?

10. Do caregivers use everyday moments in the center for learning and skill development? How do caregivers respond to child-initiated interests?
11. Do parents volunteer in the classroom? Do parents have a voice on the curricula committee or other operational/administrative groups? Is there a parent Board position?
12. What is an example of a time where the program had to make accommodations for a child's culture, disability or other unique needs?
13. Ask the program director or a caregiver to tell you about an experience they've had that made them feel really proud of the care they offer.

Health and Safety

Quality child care providers are ones that also make health and safety issues a top priority. Use the questions below as general guidelines, and contact [Child Care Aware](http://www.childcareaware.org) for more information (1-800-424-2246).

Health and Safety: Issues to Consider

1. Are diapering, sleeping, food preparation and play areas separate?
2. Are there clearly written sanitation procedures specific to each area? Are there instructions posted on proper diapering and food storage/preparation procedures?
3. Do staff receive training on health and safety issues?
4. Are infants' and toddlers' toys washed and disinfected regularly?
5. Is there a sick-child policy?
6. Do adults regularly conduct safety checks of all areas inside and out for potential safety hazards?
7. Do staff maintain children's personal grooming standards (for example, hand-washing)?
8. Are all infants put to sleep on their backs?
9. Is the staff equipped with appropriate first aid materials? Do staff members know basic first aid techniques (for example, CPR)?
10. Do staff practice fire drills and evacuation procedures? Is there a written policy in place for evacuation procedures?

"Matching Your Infant's or Toddler's Style To the Right Child Care Setting" was downloaded and adapted from the "Parenting A-Z" section of the **Zero to Three** Website (www.zerotothree.org). "Matching Your Infant's or Toddler's Style To the Right Child Care Setting" is available as a brochure and is a joint production of Child Care Aware and **ZERO TO THREE: National Center For Infants, Toddlers and Families.**

Disclaimer: The names are intended as referral options only and not recommendations. The information about the child care providers on our database is supplied by the providers themselves and has not been verified by the Council. The Council does not recommend any particular provider nor can we guarantee a provider's capabilities or the quality of care. Therefore, inclusion on the database should not be seen as an endorsement of nor recommendation by the Council. Since selecting a provider is a subjective decision, you should visit several providers to determine which is best for your family and decide for yourself if any fulfill your needs.