

**Program Quality Dimensions  
and  
Best Practices for  
Center-Based Programs and Family Child  
Care Home Education Networks**

**Desired Results for Children and Families  
May 2007**



**California Department of Education**

Desired Results for Children and Families is the name of a system designed to encourage progress toward the achievement of desired results by providing information and technical assistance to improve program quality. The system has been built on existing processes and procedures, and programs and services are coordinated to support the continuum of children’s developmental progress from birth through 12 years of age. It documents the progress made by children and families in achieving desired results and provides information to help child care and development practitioners improve their services.

The desired results for children and families are as follows:

- Children are personally and socially competent.
- Children are effective learners.
- Children show physical and motor competence.
- Children are safe and healthy.
- Families support their child’s learning and development.
- Families achieve their goals.

The system consists of the following components: the program dimensions, a program review process called the agency self-evaluation, the categorical program monitoring/contract monitoring review (CPM/CMR), the Desired Results Developmental Profiles revised for children from birth to 12 years of age, The Harms/Clifford/Cryer Environmental Rating Scales and the parent survey.

The program dimensions are found in the *California Code of Regulations*, Title 5, sections 18023, 18270.5, 18272, 18273, 18274, 18275, 18279, 18280, and 18281. The regulations and the program dimensions provide the foundation for the CPM/CMR. The CPM/CMR instrument is designed to determine compliance with the regulations. The program dimensions should be used as the core resource to implement the entire Desired Results system

The program dimensions represent the requirements set for center-based programs and family child care home networks that are funded by the Child Development Division (CDD) of the California Department of Education (CDE). All CDD-subsidized programs will be held accountable for meeting these program requirements. The program standards ensure program quality and alignment with and support the desired results for children and families. The section called Suggestions for Implementation is designed to assist programs in appropriately implementing the program standards. Suggestions for implementation may pertain to programs serving all age levels or to programs serving particular age groups and include family child care home networks.

Throughout this document the term “adults” generally refers to the following persons: “caregivers” for infant programs, “teachers” for prekindergarten and school-age programs, or “providers” for family child care home networks. It may also include teacher aides, volunteers, and student interns.

In developing the program dimensions, CDD reviewed and has relied on the following documents, regulations, and organizations:

- *California Code of Regulations* (Title 5)
- *Head Start Program Performance Standards*
- *National School-Age Care Alliance Standards for Quality School-Age Care*
- National Association for the Education of Young Children's (NAEYC) *Developmentally Appropriate Practice in Early Childhood Programs*
- California Department of Education/WestEd Program for Infant/Toddler Caregiving guides
- California Department of Education's *Prekindergarten Learning and Development Guidelines* (2000)
- California Department of Education's *Kids' Time: A School-Age Care Program Guide* (1994)
- National Association for Family Child Care's *Quality Standards for Accreditation* (2003)
- *Americans with Disabilities Act* (ADA)

Additional reference documents include:

- *Model Work Standards for Teaching Staff in Center-based Child Care*, which may be used to examine and ameliorate staff turnover rates
- NAEYC's *Anti-Bias Curriculum: Tools for Empowering Young Children*

A full list of references and information on how to order them is provided at the end of this document.

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# Quality Dimensions

## I. Involvement

- A. The agency has implemented a process for reaching out to the community, informing the community about the program, and soliciting its support.**

### Suggestions for Implementation

#### *All Age Levels*

1. The agency develops a community outreach plan and demonstrates effort in this area.
2. The agency is an active participant or has made contact by attending meetings of their county's local child care planning council, local service organization meetings, the Family Child Care Home Association, local chapter of the National Association for Education of Young Children, or Chamber of Commerce.

- B. The agency has written information describing its program's eligibility for services and distributes information to keep the community aware of its program.**

- C. There is a plan for parent involvement and education. The program ensures that effective two-way communication between staff and parents is carried out regularly throughout the program year.**

### Suggestions for Implementation

1. The agency develops a plan for parent involvement and education that provides evidence of opportunities for parent participation and education and is related to the agency goals and objectives.
2. The agency has implemented a parent orientation plan that discloses the program's philosophy, policies, goals and objectives, activities, eligibility criteria, priorities for enrollment, fee requirements, and due process.
3. Adults work in collaboration with parents to effect two-way communication in an effort to build trust and mutual understanding.
4. The agency holds scheduled parent meetings.
5. Parent conferences are held twice a year with information on the child's development as reflected in the teacher's anecdotal records and on the Desired Results Developmental Profile.
6. Parents receive informal communication about their children daily. Examples of such communication would include conversations at greeting and departure time, a communication log, and notes.
7. The program seeks parent's ideas on all aspects of the program and seeks to better understand the unique characteristics of each child.

**D. A parent advisory committee or council, selected by parents, has been established.**

**Suggestions for Implementation**

1. The agency develops an outreach plan to contact parents and interested community members to serve on the council.
2. The agency forms the advisory council and helps the members develop goals and objectives.
3. The agency establishes regular meeting dates for the advisory committee to discuss agenda items. The program administrator works with the chair of the council to prepare meeting agendas.
4. The advisory committee participates in the self-evaluation process. The agency provides leadership and direction and has a clear and appropriate framework for the committee's suggestions.

**E. Families' health and social service needs have been identified and documented. Referrals and follow-up on referrals are made when necessary.**

**Suggestions for Implementation**

1. The agency has assigned staff to identify resources available to families in the community.
2. The agency has a well-thought-out, responsive system in which teachers and administrators work together to identify families' needs in a sensitive way, make appropriate referrals, and follow up with families to ensure they receive adequate services.

**F. The agency allows parents unlimited access to their children and to the providers caring for their children during normal hours of provider operation and whenever the children are in the care of the provider.**

**Suggestions for Implementation**

1. Parents are welcome at the program, included in activities, and have a comfortable place to sit and observe their children.
2. The agency has an open-door policy for parents to visit their children whenever possible.

## **II. Governance and Administration**

- A. The agency has informed all applicants and recipients for service of the right to appeal any agency decision contained in the Notice of Action.**
- B. The program refrains from religious instruction or worship.**

### **Suggestions for Implementation**

#### *All Age Levels*

1. Programs demonstrate respect for traditions throughout the curriculum but establish a distinction between learning about holiday/religious rituals and celebrating them.
- C. Each site has a current license issued by the authorized licensing agency unless the site is exempt from licensing.**
  - D. The agency has adopted policies and procedures for recording and reporting attendance that are consistent with:**
    - **The certified hours of care**
    - **Statutes and regulations on excused and unexcused absences**
    - **Regulations regarding documentation of attendance**

## **III. Funding**

**Allocation and use of funds meet statutory requirements for allowable expenditures. This is addressed through audit requirements.**

## IV. Standards, Assessment and Accountability

Assessment of program quality and compliance with program dimensions is accomplished through the required annual self-evaluation and the Categorical Program monitoring (CPM) process every four years (or Contract Monitoring Review (CMR) processes every three years). These accountability procedures, in addition to the training and targeted technical assistance provided to agencies, ensure that programs implement the program standards and thereby contribute to the achievement of desired results for children and families served by the Child Development Division (CDD) of the California Department of Education.

*Note: Standard A refers to the requirement that agencies use the Desired Results Developmental Profiles Revised (DRDP-Rs) and parent surveys to record data on the achievement of desired results for children and families served by the agency. Agencies use these data, along with data from the Environment Rating Scale (ERS), for the purpose of program planning and modification to better meet the needs of the children and families they serve. Programs are held accountable for the collection and appropriate use of these data and for meeting the following Desired Results Program Quality Standards.*

- A. The agency maintains the Desired Results Developmental Profile and family survey data for children and families. The agency uses the information to plan and conduct age-and developmentally appropriate activities and monitor family involvement and satisfaction.**

### Suggestions for Implementation

#### *All age levels*

1. The Desired Results Developmental Profile Revised (DRDP-R) is used to assess program services as a whole and identify ways of supporting the needs of individual children. When used along with the appropriate version of the Environment Rating Scale (ERS), the profile reveals areas for program improvement to be addressed by the program staff and administrator.
2. Classroom and program trends are identified through the use of the program dimensions, ERS, and the DRDP-R. Assessment information gathered is linked to curriculum planning and implementation to ensure that attention is paid to skill enhancement in identified areas. Programs use the best practices identified by the CDD such as those advocated by the Program for Infant/Toddler Caregivers, *the Prekindergarten Learning and Development Guidelines*, and *Kids' Time: A School-Age Care Program Guide*.
3. If it is determined that an individual child is not making satisfactory progress, agencies work directly with the child and his or her parents to determine if: (a) more opportunities for practice need to be planned in the context of the program's curriculum; (b) specific skills need to be reinforced and practiced at home; (c) tutoring needs to be arranged; and/or (d) a referral needs to be made to another agency.

4. Children participating in CDD programs who have either an individualized family service plan or an individualized education program benefit from teachers, specialists, and family members working together. Although Special Education staff members are responsible for assessing children with disabilities by using the DRDP-R or Desired Results Access Profile, collaboration is needed for conducting the assessment and for planning and implementing the child's program. Information should be shared reciprocally across agencies. Both CDD staff and special education staff attend meetings on behalf of the child and family regarding planning and implementing individual goals as well as access to the core curriculum.

**B. The agency has developed and implemented an annual evaluation plan that determines whether the program goals and objectives are being met.**

**Suggestions for Implementation**

*All age levels*

1. Programs develop a plan and conduct an annual self-evaluation to collect information, evaluate progress, and set goals and objectives.
2. The planning steps consist of developing a method for distributing and collecting the parent surveys, implementing the use of the Desired Results Developmental Profile Revised (DRDP-R), using the Environment Rating Scale (ERS) in each classroom, and comparing program practices with the CPM/CMR program dimensions.
3. The program evaluation includes an assessment by parents, staff, and board members.
4. The program compiles the findings from the Desired Results tools using the sample work sheets provided by CDD or by an equivalent system the agency has designed.
5. Programs review the results of the annual evaluation with all staff members.
6. Programs make a plan of action to rectify items scoring below a 5 on the ERS. In addition, the program demonstrates how it has enhanced or modified its curriculum based on information from the DRDP-Rs. Changes based on the results of the parent survey are also included in program planning.
7. Programs modify their goals and objectives based on the results of the self-evaluation.
8. The results of the program self-evaluation are used to assess program services as whole. The self-evaluation process is intended to facilitate continuous program improvement and to prepare programs for the CPM/CMR validation visit.

## **V. Staffing and Professional Development**

### **A. The agency has developed and implemented a staff development program.**

#### **Suggestions for Implementation**

##### *All Age Levels*

1. Staff development programs are related to the program goals and objectives as determined through the self-evaluation. At a minimum, staff development programs include ongoing opportunities for the staff and volunteers to acquire the knowledge and skills necessary to implement the content of California's *Program Quality Dimensions and Best Practice for Center-based Programs and Family Child Care Home Education Networks*.
2. Staff development programs provide academic credit whenever possible. The programs are designed to help build relationships among staff and volunteers and to assist them in acquiring or increasing the knowledge and skills necessary to fulfill their job responsibilities.
3. Adults have at least 21 hours per year of professional development that is planned with a qualified professional growth adviser.
4. The agency incorporates staff relations and conflict management into their staff development program. Adults use open communication and work as a team to facilitate better planning, organization, and work.
5. Professional development includes training in child and occupational health and safety.
6. Professional development includes training in cultural diversity and working with exceptional needs children.
7. Professional development includes training on the program's written guidelines and policies that explain the adults' responsibility in protecting children and reporting cases of suspected child abuse or neglect.
8. Professional development includes training on literacy and numeracy development.
9. Administrators support and encourage adults in continually improving educational practices. The staff development program reflects adult needs and interests and allows for time away from the program for site visitations and other training. The administrators provide direct support to programs by ensuring that materials and supplies are available at the sites when needed, facilities are well maintained, and equipment is kept in good condition.

- B. Each program operating two or more sites has a qualified program director.**
- C. Each program with more than one site has a qualified site supervisor at each site.**
- D. Each site has qualified teachers.**
- E. The applicable staff-child ratios are met for each age group and program.**

## **VI. Opportunity and Equal Educational Access**

- A. Families with children enrolled in the program have met the eligibility requirement of that program, and required documentation is complete.**
- B. Families with children enrolled in the program have met the need requirement.**
- C. A basic data file has been established for each family, including a completed application for services and supporting documentation. For all programs except GPRE, the agency verifies the eligibility and need of each family or child within 30 days of change in “eligibility” status or “need” or at intervals not to exceed 12 months.**
- D. Families with children enrolled in a program are selected according to the priorities of that program.**
- E. The program does not discriminate on the basis of sex, sexual orientation, gender, ethnic group identification, race, ancestry, national origin, religion, color, or mental or physical disability in determining which children are served. There is evidence that the program:**
  - Welcomes the enrollment of children with disabilities**
  - Understands the requirement of the Americans with Disabilities Act (ADA) to make reasonable accommodations for such children**
  - Implements those accommodations**

## VII. Teaching and Learning

The program dimension of Teaching and Learning addresses the major child development learning areas of cognition, language, social, emotional, and physical development. It also addresses the major teaching areas of inclusion, respect, transitions, health, safety and nutrition. In addition the program dimension of Teaching and Learning is imbedded throughout the other program quality dimensions. The Teaching and Learning dimension is connected to families, social services, accountability, professional development and equal opportunity through those specific quality dimensions.

- A. The program’s approach to child development and education is developmentally, linguistically, and culturally appropriate, recognizing that children have individual rates of development as well as individual interests, temperaments, languages, cultural backgrounds, and learning styles.**

### Suggestions for Implementation

#### *All age levels*

1. Adults build a relationship with each child and family in the program through direct interaction. They use this knowledge to develop curriculum that will meet the needs of all the children enrolled in the program.
2. Adults use observation to gather information about individual children and adapt activities and the environment in response to these observations.
3. Adults respond to the needs of the children enrolled in the program by creating a schedule and routine, establishing indoor and outdoor environments that support children’s development, and establishing room arrangements that support large-group, small-group, and individual play.
4. Adults provide adequate supervision and interactions with children as they explore, make choices, and participate in program activities.
5. Adults find effective ways to communicate with all children.
6. Adults create an atmosphere free of bias with consistent limit setting and fair resolution of conflicts.
7. No child is made to feel excluded from being part of the environment due to lack of access.

#### *Infants/Toddlers*

8. Adults provide a wide variety of experiences for infants/toddlers, including floor activities, one-to-one interaction, and holding/carrying.
9. Adult interactions with infants/toddlers are sensitive to their individual levels of tolerance. Sensitivity to schedule or routine transitions, volume of music or adult voices, and swift movement in a classroom setting can support individual tolerances.
10. Adults are sensitive to infant/toddler interests and desires, supporting their involvement with activities and encouraging their engagement.

11. Adults work with families to create consistency between what happens at home and what happens in care. Adults ask questions about family child-rearing practices in an effort to duplicate them and support their children in care.

### *Prekindergarten*

12. The program environment is designed to provide optimal child-initiated learning during free-choice time.
13. Adults provide a balanced program that includes books and pictures, blocks, sand and water, nature and science, math and numbers, art, music, and movement in the curriculum to provide a wide variety of experiences to meet the needs and interests of children in the program.
14. Each child is supported to develop a sense of self as a valued and responsible member of the group. Adults provide many opportunities for children to work individually and in small groups on tasks that are meaningful to them.

### *School Age*

15. The program curriculum is designed with regard to the children's areas of interest and activities such as learning centers, clubs or specialty groups, child-initiated activities, games, free-choice and discovery centers reflecting these interests, adult-planned activities, or other observed needs of the children.
16. The program environment provides opportunities for a variety of activities to occur simultaneously: gross motor, reading/theater, homework, games, art, or science.
17. The program supports a variety of strategies to help build a sense of community. Adults hold class meetings regularly in an effort to provide children with opportunities to practice group decision making, voting, consensus building, and group activities.

### *Family Child Care*

18. Adults adapt the interactions, activities, or the home environment to meet children's needs and temperamental differences.
19. Adults recognize signs of distress in children and respond and comfort them with stress-reducing activities.
20. Adults make tasks easier or more complicated as needed to engage a wide age range of children or to extend their interest.

**B. The program is inclusive of children with exceptional needs, is consistent with their individualized family service plan (IFSP) or individualized education program (IEP), and promotes an environment of acceptance.**

### **Suggestions for Implementation**

#### *All age levels*

1. The program is inclusive in its ability to acknowledge the age and individual needs of children with exceptional needs.
2. Adults support children's interactions with staff and peers in an effort to provide them with multiple opportunities to learn.
3. Adults provide accommodations and individualization, when appropriate, in an effort to support children with exceptional needs.
4. Adults supervise peers and peer interactions to support social and language skill development for children with exceptional needs.
5. The program includes children with exceptional needs as members of the group socially, intellectually, and physically. Necessary supports are provided to ensure the child's needs are being met.
6. Adults work with parents, content area experts, and other adults to implement an IFSP or IEP. Staff members adapt materials and equipment so that all children can share in activities; provide spaces that make play equipment and materials accessible to all children; assist children, if necessary, in using and playing with materials; are sensitive to parent expectations; and adapt activities, make accommodations, and use other strategies that integrate children socially and enable them to participate in all activities regardless of abilities.
7. Adults modify activities as needed, so that all children, including those with disabilities, can participate.
8. If a child has been identified with a particular disability, the provider follows the IFSP or the IEP.

**C. The program encourages respect for the feelings and rights of others, supporting and respecting the gender, ethnicity, home language, culture, and family composition of each child in ways that support the child's health and well-being.**

**Suggestions for Implementation**

*All age levels*

1. Programs encourage and support appreciation of and respect for individual and group similarities and differences, making the acceptance of diversity a theme that is central to the classroom climate.
2. Program materials such as books and music reflect nonstereotyped characteristics, values, and practices of diverse cultural groups and biracial perspectives.
3. Adults encourage child and family contributions of their home culture and language so children feel accepted and gain a sense of belonging.
4. Adults facilitate relationships with the child's family to provide effective open communication regarding the developmental needs and health and safety of the child. They become familiar with families' cultural practices regarding food, discipline, etc., and support the child's development through joint problem solving and mutual support.

5. When children are curious about people's differences, adults respond honestly, factually, and respectfully to foster acceptance of differences.
6. Adults create a sense of acceptance of diversity by fostering each child's language development, including American Sign Language. Adults use strategies to sustain and expand the home language while children are learning English. Adults learn key words from the child's home language and the English equivalents.
7. Adults include all interested children in activities and events. Games and sports are open to all regardless of athletic skill. Adults do not separate children or discriminate on the basis of race, gender, ethnicity, family structure, appearance, disability, and so forth.
8. Visual displays show a variety of cultures. Print in the classroom includes the home languages of children in the program.

### ***Infants/Toddlers***

9. Whenever reasonable, adults engage in practices that are consistent with practices in the children's homes.
10. Adults work toward understanding the culture of the families they serve in order to handle the issues of discipline, food, routines, health, and safety in caring for the child.

### ***Prekindergarten***

11. Adults provide opportunities for children to explore concepts related to understanding more about themselves, their family, others, and the world.
12. Adults communicate regularly with parents regarding their children's development in an effort to build consistency between home and school.

### ***School Age***

13. Adults plan activities that assist children in constructing a sense of identity in the context of family and culture. They help children understand their interdependence with others in the group.
14. Adults pay attention to culture and gender variations in learning styles. They help children move beyond gender stereotypes in their choices. They encourage children to try new activities.
15. Children are encouraged to develop strategies to use when they encounter social injustice, bias, and prejudice.

**D. The program supports social and emotional development by building trust; fostering independence; encouraging self-control by setting clear, consistent limits; and having realistic expectations.**

### **Suggestions for Implementation**

#### ***All Age Levels***

1. Adults model, coach, and encourage positive social behaviors, such as cooperating, helping, taking turns, and respecting the feelings and rights of others. Adults discuss the consequences of various behaviors and redirect children without using punitive techniques or corporal punishment.
2. Adults regard inappropriate social behavior during play as a valuable opportunity to provide a child with new social strategies. Adults listen patiently when children explain their behaviors and help children understand the impact of their behavior on themselves and others. Children are provided with alternative acceptable ways to express their feelings.
3. Adults treat children with respect. They take children's comments seriously and use supportive language. They respond appropriately when children show affection. They stay calm in all situations and handle conflicts in a way that reduces fear or distraction.
4. Adults help children feel secure by keeping staffing consistent. Relationships are nurturing; room arrangements, schedules, and daily expectations are routine. Adults are aware of the effects of sights, sounds, and motions on children. Adults offer security and comfort to each child by being responsive to children's cries or other cues and communicating in the child's home language.
5. Adults participate in many activities with children, spending little time on tasks that do not involve children. Adults sit with children at mealtime. They enjoy the children and seem involved and cheerful rather than bored, tired, or distant.
6. Adults build trust by maintaining confidentiality in discussions about children or families, understanding that children or other adults may overhear.

### ***Infants/Toddlers***

7. Adults respond consistently to the infant's need for food and comfort and without delay thus enabling the infant to develop trust in the adults who care for them.
8. Adults have appropriate expectations for toddlers and are supportive as toddlers acquire skills.
9. Adults ask parents what sounds and words their toddler uses so that the caregiver will understand what the child is saying when she uses beginning speech or a home language other than English.
10. Children are acknowledged for their accomplishments and helped to feel increasingly competent and in control of themselves.
11. Adults patiently redirect children to help guide them toward controlling their own impulses and behavior.

### ***Prekindergarten***

12. Adults develop clear and consistent expectations. Adults involve preschool-age children in the development of simple classroom rules. Adults help children to develop age-appropriate self-control and problem solving by guiding them and by modeling how to solve problems and resolve differences.
13. Adults recognize that routine tasks of living such as eating, toileting, and dressing are important opportunities to help children learn about their world, acquire skills, and regulate their own behavior.

They encourage self-help skills, such as brushing teeth, washing hands, wiping spills, and setting the table.

14. Adults use books, stories, puppets, and other experiences to reinforce positive social behaviors.
15. Adults patiently redirect children to help guide them toward controlling their own impulses and behavior.

### *School Age*

16. Adults promote children's development of respect for others and self-control through positive techniques that establish clear and reasonable rules in a group, redirecting behavior, and meeting with children individually. Adults allow children the opportunity to resolve conflict on their own, intervening only when necessary.
17. Adults promote positive social behavior and self-regulation by providing engaging activities, encouraging choice and providing children with ample time to complete their work.
18. Adults provide numerous opportunities for children to spend individual time with them.
19. Adults support the development of social skills by facilitating negotiation and problem solving when children engage in disagreement.

### *Family Child Care*

20. The adult helps children stand up for each other and themselves and ensure that the outcome is fair and considerate of all.

**E. The program supports social and emotional development by planning for routines and transitions so that they occur in a timely, predictable, and unhurried manner according to each child's needs and provides a balanced daily program of child-initiated and adult-directed activities, including individual and small-group activities.**

### **Suggestions for Implementation**

#### *All Age Levels*

1. Adults acknowledge children when they arrive and depart, projecting a tone of welcome in their voices and gestures.
2. The environment is stable and the schedule is predictable enough to allow children to form expectations, practice emerging skills, and feel the security of a familiar routine.
3. Schedules are flexible and smooth, dictated by children's needs.
4. Transitions are planned for and built into the schedule. They occur as infrequently as possible in order to reduce disruptions.

### *Infants/Toddlers*

5. A greeting and departure routine for infants/toddlers and their parents is established. The routine includes acknowledgment of the family when they enter the room, assisting parents in saying good-bye, helping the child transition into the group, and acknowledging parents when they return at the end of the day.
6. Adults adjust to infant's individual schedules in feeding and sleeping. Infants' food preferences and eating styles are respected.

### *Prekindergarten*

7. Adults allow time so that routines are unhurried and purposeful. Adults develop schedules that are predictable and agree with children's natural timetables.
8. Adults give children notice to prepare for transitions and explain to them what will happen next. They provide children with opportunities to participate in routines, such as picking up toys and setting and cleaning the table, and minimize waiting.

### *School Age*

9. Adults provide a supportive environment that allows children opportunities to make choices, take risks, and move freely from one activity or area to another by keeping open and ongoing communication with the children and other staff.

## **F. The program helps children develop emotional security and facilitate social relationships.**

### **Suggestions for Implementation**

#### *All Age Levels*

1. Adults facilitate opportunities for children to develop social skills and nurture children's friendships with peers. Adults design activities that support children's interactive or dramatic play. To reduce conflict, adults model effective communication, use conflict resolution techniques, and equip the environment with multiple sets of materials.
2. The adult is responsive to children's emotional needs. Adults have conversations with each child, expresses affection to each child in some way, and offer help to children when needed.
3. Adults provide daily opportunities for children to communicate and interact with peers in small-group settings so they can explore similar or diverse interests and work at similar or varied ability levels.
4. Adults let parents know about their children's friendships in the program so that, if possible, those friendships can be cultivated outside the program.

### *Infants/Toddlers*

5. Adults engage in many one-to-one, face-to-face interactions with infants.

6. All infant–adult interactions are characterized by gentle, supportive responses.
7. Adults know that infants are curious about each other. At the same time adults help ensure that children treat each other gently.
8. Adults respect toddlers’ solitary and parallel play.

### ***Prekindergarten***

9. Adults helps children show respect for each other, cooperate and work together, and (when problems occur) discuss their differences and work out a solution.
10. Children are guided and supported to form and maintain satisfying relationships with others.
11. Adults encourage contact among children by creating opportunities for them to perform small tasks and chores together.

### ***School Age***

12. The program establishes flexible groupings of children in an effort to promote social relationships. Adults establish large-group times to discuss program-wide issues and develop smaller, more intimate groups to work on short-or long-term projects.
13. Adults model respectful and caring concern for others and establish clear and consistent expectations for positive interactions between children and adults to help children acquire those skills.

## **G. The program provides for the development of each child’s cognitive and language skills by using various strategies, including experimentation, inquiry, observation, play, and exploration.**

### **Suggestions for Implementation**

#### ***All Age Levels***

1. Adults encourage children’s learning through experimentation, inquiry, play, and exploration by taking the following actions:
  - Plan experiences for children of all ages to learn the functions and properties of objects and classify materials into groups, offering a rich variety of experiences, projects, materials, problems, and ideas to extend children’s thinking.
  - Support children’s development by posing problems, asking questions, and making comments and suggestions that stimulate children’s thinking and extend their learning.
  - Have conversations with children to expand their thinking and learning.
  - Provide opportunities for children of all ages to discover knowledge in areas such as science, social studies, the creative arts, numeracy, and language and literacy.
2. Adults take time to think about children’s questions and comments. Adults pursue children’s ideas and extend discussions by asking open-ended questions.

### ***Infants/Toddlers***

3. Adults provide an environment that encourages active sensory and motor exploration, blending novelty with routine for supporting growing curiosity.

### ***Prekindergarten***

4. Adults assist children in observing the environment around themselves and the natural world and attach meaning to those observations.
5. Adults support children's abilities to make generalizations based on observation, to remember those generalizations, and to make predictions based on them.
6. Adults provide opportunities for children to combine activities and materials in new ways.
7. Adults provide children ample time to repeat tasks or activities that build on the child's understanding of a concept or skill.
8. Classroom and outdoor play space allow children to work and converse together comfortably during activities and projects. Adults extend children's activities and projects through conversation, open-ended questions, and documentation.

### ***School Age***

9. Adults ask questions that encourage children to think for themselves. Adults take time to think about children's responses, pursue children's ideas, and extend the discussion by asking open-ended questions.
10. Adults encourage children to use journal writing, art projects, and group discussions as a way to express their ideas.
11. Adults provide a variety of opportunities for children to share their skills and resources to gain information, solve problems, and locate resources to find answers to their questions.
12. Adults encourage children to practice basic life skills. When children face problems they cannot solve by themselves, adults encourage them to discuss their issues with others.
13. Adults vary the approaches they use to help children learn. Adults teach children a new task or game by showing the steps, verbalizing the steps, and recording the instructions in writing so children can refer to them for assistance.

### ***Family Child Care***

14. The adult takes advantage of the many natural learning experiences and teachable moments as they arise and builds upon them.

**H. The program provides for the development of each child’s cognitive and language skills by ensuring opportunities for creative self-expression through activities such as art, music, movement, and dialogue.**

**Suggestions for Implementation**

***All Age Levels***

1. The program curriculum is designed to integrate children’s interests.
2. Adults support children’s creativity by demonstrating appreciation of each child’s self-expression. The program provides ample time for:
  - Exploration of materials
  - Exploration of the environment
  - Expression of thoughts and emotions
  - Development of the imagination through language-rich experiences
  - Engagement in dialogues to learn about others, to enhance communication skills, and to expand vocabulary
3. There are regular opportunities for creative arts and dramatic play. The program has a wide variety of arts and crafts materials: clay, paint, markers, beads, yarns for weaving and knitting, and so forth. Costumes, puppets, and props are on hand for dramatic play. Children have access to musical instruments and audiotapes.
4. Adults use music or other recorded materials during appropriate activities or when requested by children.
5. Adults plan with children the design and building of three-dimensional art projects, such as models, clay sculpture or carpentry projects.
6. Many different forms of children’s art are carefully and proudly displayed at the child’s level.
7. Books, music, and other forms of creative expression are culturally diverse and nonstereotypic.

***Infants/Toddlers***

8. Toddlers are given appropriate art materials, such as large crayons, watercolors, markers, and large paper. Toddlers are given the opportunity to explore and manipulate art materials. The process of exploring and manipulating the materials is the focus of the activity.

***Prekindergarten***

9. Adults encourage children to act out familiar plays, stories, or songs. Materials and props stimulate creative dramatic play.

10. Adults encourage individual expression in the use of art, dramatic play, and musical materials.
11. Adults encourage children to appreciate the arts as both a participant and as part of an audience.

### ***School Age***

12. Adults allocate ample time for children to get deeply involved and engaged in investigating ideas and creating projects such as planning block structures, mural painting, pottery, playwriting, or puppeteering.
13. Adults provide opportunity for children to plan, anticipate, and reflect on their project. Adults assist children in articulating their plans through writing, drawing, or verbalizing to help them clarify their goals and engage them in problem solving around their work plan.
14. The program offers opportunities for children to explicitly study art, music, dance, or theater through special clubs or extracurricular activities.

### ***Family Child Care***

15. Art activities are open-ended and child-directed.
16. Adults comment specifically on the process of the children's artwork rather than the end product.
17. Adults use music and dance activities with children in a variety of ways, giving children opportunities to make their own music or dance or move creatively.

## **I. The program provides for the development of each child's cognitive and language skills by promoting interaction and language use among children and between children and adults.**

### **Suggestions for Implementation**

#### ***All Age Levels***

1. Adults take the following actions to establish a climate in which children communicate effectively:
  - Give children time to talk to one another and to ask questions.
  - Understand the language development of young children, including the importance of supporting the home language.
  - Use a variety of strategies for children to learn new and interesting vocabulary, and to expand their language skills through songs, games, poems, and stories from their own and other cultures.
  - Engage in dramatic play in which children act out familiar activities.
  - Engage in meaningful conversations that children initiate; model appropriate language use; expand upon, rather than correct, children's speech.

2. Adults use simple, clear sentences when conversing with an infant or toddler and more complex language with older children.
3. Adults respect children's developing skills in English and in their home language.
4. Adults in the program model appropriate interactions with children and other adults.

### ***Infants/Toddlers***

5. Adults frequently read to children, individually on a caregiver's lap or in groups of two or three. Caregivers sing with children and do fingerplays.
6. Adults recognize infant's communication skills and respond to their cues, both verbal and nonverbal.
7. Adults are sensitive to and respond to infant/toddler speech sounds as the beginning of communication. Adults return the infant/toddler communication by repeating the sound or words they heard and adding their response. An example of this would be an infant lying on the floor repeating the sound "ba ba ba ba." The adult would respond by repeating "ba ba ba ba" and then adding "I hear you talking. Are you telling me something?"

### ***Prekindergarten***

8. Adults frequently read to children, individually on a caregiver's lap or in groups of two or three. Caregivers sing with children, do fingerplays, act out simple stories or folktales with children participating actively, or tell stories using a flannel board.
9. Adults stimulate problem solving through well-timed open-ended questions.
10. Adults help children use language skills through frequent conversations. They allow children the time they need to fully express themselves. Adults take extra time with children who speak another language at home or who have communication difficulties. Adults use verbal and nonverbal cues in their communication with children.

### ***School Age***

11. The program supports the development of increasingly complex vocabulary words, riddles, jokes, and double meanings.
12. Adults ask children how, why and what if questions that require longer, more complex answers.
13. Adults verbally expand on ideas presented by children.
14. Adults use children's names when engaging them in conversation or assisting them with an activity.

### ***Family Child Care***

15. Adults respond to children's language and babies' vocalizations and have conversations with each child.
16. Adults listen attentively to children and encourage conversations among children, helping them to learn to listen and respond to each other.

17. Adults encourage interaction between younger and older children in mixed age groups.

**J. The program provides for the development of each child’s cognitive and language skills by supporting emerging literacy and numeracy development through materials and activities suited to the developmental level of each child.**

### **Suggestions for Implementation**

#### *All Age Levels*

1. Adults support the development of literacy and numeracy skills by taking the following actions:
  - Read and discuss stories from the children’s own and other cultures.
  - Make reading and writing materials accessible to children to support their awareness of and emerging skills with letters and numbers.
  - Plan opportunities for children to listen to stories read aloud by an adult or on tape; encourage oral traditions through storytelling.
  - Provide opportunities for children to reflect upon experiences and to see their own words being written by adults.
  - Provide books and stories with repetitive verses, words, or sounds or in which the pictures follow the text closely so that children can relate what they hear to what they see; helping children develop awareness of the sounds of language by using rhymes and by identifying sounds.
  - Help children to see the functional uses of print in the program (e.g., street signs, shopping list).
  - Provide objects for counting, sequencing games, and one-to-one corresponding toys, as age appropriate.
  - Design opportunities for children to discover how numerical concepts relate to other concepts through activities such as food experiences, science, games, dramatic play, fingerplays, puzzles, blocks, calculators and abacuses, and computers.
  - Inform parents of ways in which they can encourage literacy and numeracy development at home; plan family activities that provide children with memorable experiences.
2. Programs include basic information for parents on how children acquire a first and second language.

#### *Infants/Toddlers*

3. Adults use words to describe children’s participation in activities (for example, “It looks like the grass is tickling your toes,” “ I see you really want that toy. May I help you?”).

4. Adults provide playthings in infant and toddler environments to encourage the understanding of cause and effect, the use of tools, and spatial relationships.

### ***Prekindergarten***

5. Programs support learning and development in both language and literacy by including phonological awareness (a sensitivity to spoken sounds, such as rhyming and alliteration), alphabet knowledge, the concept of print (it has meaning), vocabulary, comprehension of a story that is read, and emergent writing. (For a fuller description of these concepts see the California Department of Education's *Prekindergarten Learning and Development Guidelines*, pp. 95–106.)
6. Programs provide language-rich and print-rich environment across the curriculum areas.
7. Programs implement a language arts curriculum as the foundation for children's success in language arts in elementary school.
8. Adults read stories out loud and expressively and wonder aloud with children about what might happen next or how one of the characters might be feeling.
9. The program schedule provides children with activity times to explore and interact; reflect with the group on their experience; and document through writing, drawing, or talking about what they did.

### ***School Age***

10. The program develops and integrates listening, speaking, reading, writing, and language skills and an appreciation of literature through a language arts, writing, reading, and phonics program.
11. Children have opportunities to develop language, writing, spelling, and reading abilities by reading high-quality children's literature and nonfiction for pleasure and information. They draw, dictate, and write about their experiences; plan and implement projects involving research at suitable levels of difficulty; interview various people for a newsletter or project; make books; and use the library or classroom reading area regularly.
12. Children have a chance to join enrichment activities that promote basic skills and higher-level thinking. Children may work together on science projects. Math games and materials are available to explore. Children can study the plants and animals that live in or around the building. They can create a newspaper, write a play, do homework, or use computers.
13. The program's curriculum helps children to acquire an understanding of mathematical concepts and practice the skills. Adults provide opportunities for problem solving, math games, manipulative materials, oral "math stumpers," and number games.
14. Materials are developmentally appropriate for the age range of children in the program. There are enough materials for the number of children in the program. Materials are complete and in good repair. Activities are aligned with the styles, abilities, and interests of the individuals in the program. Activities are well suited to the age range of children in the program.
15. The program provides a homework area that is quiet, uncrowded, and suitably furnished; reference materials are available.

## *Family Child Care*

16. Adults take advantage of and build on the many spontaneous, natural learning experiences as they occur. They build on children's emerging interest in print and writing in the context of ongoing activities.
17. Adults help children talk about what they are doing and thinking by asking open-ended questions. They help children learn particular skills and concepts.
18. Adults read to children at least once per day or, if children are able, allow opportunities to read to themselves. Adults encourage children to look at or read books on their own.

**K. The program promotes each child's physical development by providing sufficient time, indoor and outdoor space, equipment, materials, and guidelines for active play and movement that support the development of gross motor skills. The program promotes each child's physical development by providing appropriate time, space, equipment, materials, and adult guidance for the development of fine motor skills according to each child's developmental level.**

## **Suggestions for Implementation**

### *All Age Levels*

1. Adults provide daily opportunities for all children to develop gross and fine motor skills by taking the following actions:
  - Plan experiences for developing motor skills, coordination, balance, and strength.
  - Increase the complexity of age-appropriate activities by adding manipulative materials.
  - Foster self-help skills, such as buttoning, lacing, and zipping.
  - Provide time for children to practice new skills.
  - Encourage parents to find developmentally appropriate opportunities to enhance their child's fine motor skills.
  - Provide adult supervision and guidance during all activities for safe active learning.
2. Consideration is given to children's varying rates of development and acquisition of skills. Programs are designed so that the same activity has varying levels of difficulty. Children are encouraged to attempt new tasks in a safe environment.
3. The outdoor space is suitable for a wide variety of activities. There are open areas where children can run, jump, and play. There is a protected area for quiet play and socializing.
4. Outdoor play equipment is suitable for children of all sizes and ability levels and offers various levels of challenge. Older children have access to more challenging equipment. Equipment is accessible for use by children with disabilities.

5. There are regular opportunities for active physical play indoors and outdoors.

### ***Infants/Toddlers and Prekindergarten***

6. Adults provide opportunities for children to practice fine motor skills such as grasping objects, pulling toys toward them, and learning to pick up finger foods.
7. Adults provide older toddlers the opportunity to use finger paints, paintbrushes, large crayons, sidewalk chalk, and knob puzzles.
8. Adults provide ample physical space so children have room to roll over, crawl, sit, walk, and test new skills.
9. Adults provide play equipment, such as low slides and padded and safe structures for exploration, which are easily accessible and provide both challenges and opportunities for success.
10. Adults encourage the use of riding, pushing, and pulling wheeled toys, such as scooters, wagons, and trucks, and provide supervision and guidance during all activities.
11. Programs provide children with opportunities to practice writing, lacing beads, weaving, pouring, zipping, molding, cutting, and threading in the context of free-choice activities.

### ***School Age***

12. The program provides for outdoor play on a regular basis. Children have the opportunity to run, be loud, and engage in active games during this time or to participate in quiet activities.
13. The outdoor equipment is designed and conforms to licensing standards for the protection, health, and safety of all children.
14. The program has access to large, grassy areas for team games, such as soccer, softball, kickball, and so on and a blacktop area for small groups to play games such as basketball, foursquare, hopscotch, and so forth.
15. The program emphasizes cooperative group games in addition to competitive games.

### ***Family Child Care***

16. Adults provide an outdoor environment that gives children opportunities to practice large motor skills such as crawling, walking, climbing, running, dancing, jumping, throwing, catching, and riding wheel toys.
17. Adults provide opportunities for children to practice fine motor skills such as fingerplays, grasping, using crayons, pencils, and scissors.

- L. The program maintains health and safety practices. The program includes a nutritional component that ensures that children have nutritious meals and snacks while they are in the program. Health and nutrition education is integrated into the program activities.**

### **Suggestions for Implementation**

#### *All Age Levels*

1. Adults model good health practices and integrate them into the curriculum in the following ways:
  - Provide books, pictures, videos, and special guests to provide information related to health and nutrition and engage individual children in conversations and dramatic play regarding concerns, fears, or issues identified by the children themselves.
  - Include props and opportunities for learning through dramatic play.
  - Provide experiences in food preparation and sampling of a variety of nutritious foods.
2. The program serves healthful food that is high in nutrients and low in fat, sugar, and salt. The menu reflects the cultural diversity of the group. Drinking water is available at all times. The amount and type of food offered are appropriate for the ages and sizes of the children. Snacks and meals are timed appropriately for all children.
3. Adults promote effective dental hygiene.
4. Adults and children wash hands frequently, particularly after using the toilet or before and after preparing food.
5. The environment of the program protects children and enhances their health and safety; facilities/homes are clean; there are no observable health hazards; the ventilation, noise level, and lighting are comfortable; and children and youth are carefully supervised to maintain safety.
6. Adults know where children are and what they are doing at all times.
7. To limit the spread of infectious disease, adults follow health and safety procedures, including proper hand washing and observance of the universal precautions.
8. Health records, including those for immunizations and particular health problems (e.g., allergies) are filed separately for each child and confidentiality is ensured.
9. Adults are aware of the symptoms of common illnesses and notice changes in children's behavior that may signal illnesses or allergies. Caregivers conduct daily health checks, making note of any signs of illness. Sound, written policies state that children and adults are excluded for illness.
10. There is a system for recording and checking medication administered to a child; other vital information is accessible to adults.
11. Emergency evacuation plans are posted on the wall, and a bag of emergency supplies and emergency information forms are immediately accessible. Evacuation drills are practiced regularly.

### ***Infants/Toddlers***

12. Diaper-changing areas are routinely disinfected after each change.
13. Toys that are mouthed are removed when a child has finished playing with them so that they can be disinfected.

### ***Infants/Toddlers and Prekindergarten***

14. Extra clothing for both indoors and outdoors is available.
15. Adults perform safety checks of both indoors and outdoors several times a day to ensure that they are safe (e.g., electric outlets are covered, no objects are on the floor that an infant or toddler could choke on, no splinters or nails are exposed on furniture or equipment).
16. Adults directly supervise children by sight and sound even when they are sleeping or toileting.

### ***School Age***

17. The program provides instruction on health and safety practices (for example, earthquake preparedness, first aid, fire prevention, nutrition).

### ***Family Child Care***

18. Children cannot lock themselves inside rooms. Privacy locks on bathroom or bedroom doors are inaccessible to children, or locks can be opened quickly from outside.
19. The indoor space is not cold. If the temperature is hot, air conditioning or fans are used.
20. Parents are informed of any pets before enrollment. Pets are in good health, even-tempered, and friendly, or they are kept in areas not accessible to children. Litter boxes, pet food, dishes, and pet toys are kept out of reach of children. If there are cats or dogs, rabies and distemper immunization records are on file and signed by a veterinarian within the past year. Pets are free of parasites and fleas.

# Best Practices

## VIII. Best Practice

This document includes a list of best practices that exceed the minimum quality standards required for program compliance. These best practices are optional for programs. A program may meet one or more of these practices if it chooses and is able to do so. These practices are based on current research and promising practices that have been found to be supportive of children and families in achieving desired results.

The CDD recognizes that many of its contracted agencies go beyond the minimum program dimensions that are required by law. The CDD recognizes that these best practices may require additional staff or costs. These practices are additional dimensions that programs may wish to achieve.

- A. In center-based programs the applicable group sizes are met. A group is defined as a primary and coherent unit of several children and adults. Usually, but not always, a group is defined as the number of children cared for in a defined space. The intent is for the children to interact with a limited number of adults and peers.**

<u>Age range</u>	<u>Group size</u>
Birth through 17 months	6–8 children
18 through 35 months	12–14 children
3 years through prekindergarten	24 children
Kindergarten through 12 years	28 children

- B. The program groups children with certain primary caregivers to support the development of the child.**

### Suggestions for Implementation

#### *All Age Levels*

1. Primary caregiving supports relationship building with families and fosters attachment and security in children. Each child is assigned a primary caregiver (adult) when they enter the child care program. All family members know who the child's primary caregiver is.
2. Primary caregiving allows for a team of adults to care for the same group of children each day. Adults have overlapping daily schedules to provide continuity of care for the children. Inappropriate mixed-age grouping in order to meet staffing ratio requirements is avoided.

- C. Children have continuity of care**

### Suggestions for Implementation

#### *All Age Levels*

1. The staffing pattern is designed to ensure continuity over time for each child’s relationship with a consistent adult caregiver. Priority is given to keeping children in the same group for many months (and from year to year if possible) to enable the child and the primary caregiver to form and maintain a reciprocal relationship.
2. Children retain their primary caregiver for more than one year in the program, and/or children are able to “visit” their “former” primary caregiver if they choose to after being “moved” to a new group and caregiver.
3. Adults in the program and families communicate to enhance the continuity of care and caregiving practices.
4. Peer groups are stable within the program and over time.

**D. The program keeps turnover of high-quality, trained staff to a minimum, or the program describes what would be required to develop a turnover reduction plan.**

**Suggestions for Implementation**

*All Age Levels*

1. If center-based programs have annual staff turnover rates higher than 25 percent for teachers and 33 percent for aides, they examine and implement a plan to lower these rates.
2. The program develops a turnover-reduction plan. The program determines the annual staff turnover rate, identifies factors that contribute to staff turnover, and develops objective(s) to reduce staff turnover and strategies to achieve objectives (e.g., increase compensation and staff benefits, develop mentor programs, increase training opportunities).
3. Procedures are developed to continually identify and address those factors contributing to staff turnover in the program. If obstacles beyond the immediate control of the program exist, the turnover plan includes a specific description of what would be required to meet the program’s goals of lowering staff turnover (e.g., what additional funding would be required to address program objectives for staff compensation, as a strategy for reducing turnover?).

*Family Child Care*

4. If the provider turnover rate in the family child care home education network is greater than 25 percent, the program develops a plan for reducing turnover.

**E. The program provides opportunities to include parents in the development of the curriculum and approach to child development and education.**

**Suggestions for Implementation**

*All Age Levels*

1. The program provides a variety of alternatives to encourage family involvement in children’s programs.

2. Parents are encouraged to add to the curriculum by suggesting and implementing curriculum activities such as:
  - Reading stories at group time
  - Assist in the planning of field trips or invitation of special guests
  - Sharing cultural or familial traditions around holiday celebrations
  - Sharing a culture or familial foods through cooking activities
  - Presenting information about their profession or other special skills
  - Presenting dance, music, stories, clothing, and so on that may reflect the families' heritage
3. Adults develop and implement skills to engage parents in an appropriate level of dialogue about program activities and approaches to education. They hold periodic parent meetings to discuss issues of mutual concern and develop a process that incorporates parent perspectives into the curriculum and approaches to child development and education.

**F. Communication with parents is carried out in the parent's primary or preferred language or through an interpreter to the extent feasible.**

**Suggestions for Implementation**

*All Age Levels*

1. The program hires staff members with the same linguistic and cultural background as the community it serves.
2. The program publishes enrollment information and the parent handbook in the languages used by the community served.
3. The program has a well-designed responsive system for providing interpreter services, including the use of current staff, the hiring of an interpreter, or collaborating with other area programs to share services.

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To order, contact:

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1620 Carpenter Road Suite C-16  
Modesto, CA 95351  
Phone: (209) 572-1587  
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Portions of this publication that have been revised since its initial printing are also available online  
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