

NATIONAL EARLY CHILDHOOD PROGRAM ACCREDITATION



Resource Guide and Standards Book



National Early
Childhood
Program
Accreditation

NECPA

*A voluntary, independent Accreditation
sponsored by the National Early
Childhood Program Accreditation
Commission, Inc*

The National Early Childhood Program Accreditation Commission, Inc.

**NECPA
P.O. Box 2948
Merrifield, Virginia 22116**

**1-855-706-3272 phone
1-855-806-3272 fax
www.necpa.net**

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History and Introduction to NECPA Accreditation

The National Early Childhood Program Accreditation (NECPA) Commission is committed to improving the quality of early childhood care and education programs. The NECPA Commission is doing this in several ways. The primary way is through the development and implementation of the instrument based accreditation system, The National Early Childhood Program Accreditation (NECPA). NECPA Accreditation is valid for both Family Child Care Providers and Child Care Centers, who are licensed for seven (7) children or more.

Accreditation serves a number of important functions. It verifies that an early childhood program meets established standards of excellence. This certification is an acknowledgment to the program that they are providing high quality child care. Further, this designation assists parents in selecting child care by identifying programs that meet high quality standards. Accreditation is also an excellent learning tool. During the accreditation process, the program's teachers and staff learn more about what is accepted as the best environment and practices for young children and how to implement these standards in their classroom.

NECPA has a long history of supporting the profession of early care and education. Beginning in 1991, NECPA was conceived by the National Child Care Association (NCCA) as a part of the organization's ongoing efforts to encourage the availability of high quality, affordable child care and early education programs for families. Accreditation is a logical step in these goals for excellence.

The NECPA instrument based accreditation system is a systemic indicator monitoring approach in which the program director, staff and parents evaluate the overall quality of their program. The indicator approach developed by Dr. Richard Fiene is based upon the compilation of key predictor items or indicators that have been identified as predicting the overall quality of a program and/or positive developmental outcomes for children by being in compliance with these key indicators. This approach has been developed, implemented and refined over the past 25 years in research studies Dr. Fiene has conducted in states across the nation and provinces in Canada. The indicator approach has demonstrated its efficiency and effectiveness in the monitoring of early childhood programs. By using the key indicator approach, the number of discrete items to be evaluated is substantially reduced but the overall confidence in the evaluation is maintained.

History and Introduction to NECPA Accreditation

Commonly Used Accreditation Terms

A full list of terms and references is located in the Standards Book Glossary beginning on page 79. The below terms are most commonly used throughout the NECPA accreditation process:

Program Site Number: Your Site Number is important to the accreditation process. It enables the NECPA Office to anonymously present your program's verified Self Assessment Instrument to the NECPA Commission and the National Accreditation Council with no identifying information. Please reference your Site Number in any communication with NECPA. Your program Site Number may be found by logging into your 'Client Profile' at www.necpa.net.

Standards Book (SB): The NECPA Standards Book (SB) is divided into 14 chapters which encompass all 219 numbered standards. The Standards Book provides additional references, resources, and guidance for implementing NECPA Standards and completing your Self Assessment instrument.

Self Assessment Instrument (SAI): The Self Assessment Instrument (SAI) is used to verify the NECPA Standards that have been implemented at your program. Each standard is directly referenced by a Verification Item located in the Self Assessment Instrument (SAI). The SAI is divided into two parts. **Part A** is dedicated to documentation review and **Part B** is dedicated to observable standards at the program.

Enrollment/Self-Study Period: This is the period of time allotted for programs to implement any necessary standards and make changes as needed before their verification visit. The enrollment/self-study period is valid for up to two years. On average, programs are able to implement any needed changes and complete their Self Assessment Instrument (SAI) within 6 to 12 months. New and renewing programs must be enrolled before they can request a verification visit.

Verification Visit: A program's answers in their Self Assessment Instrument are reviewed during their NECPA Verification Visit. The visit is conducted at the program by a NECPA Verifier. The Verifier's job is to review all documentation and observe all classrooms/areas and note each Verification Item as 'Verified' or 'Non-Verified.' These answers and all comments are presented to the NECPA National Accreditation Council and Commission for anonymous review and determination of Accreditation Result.

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Sample Templates follow Resource Guide Section Three.

Resource Section One

Accreditation

The following section provides resources and guidance to help meet your program goals of integrating NECPA Standards and attaining national recognition for your high quality program.

Figure 1: Overview of NECPA Standards



Figure 1: This chart reflects the percentage of standards in each category and represents a balanced approach to the verification of high quality programs. NECPA is committed to helping programs achieve 100% of these standards.

Content and Organization

The NECPA Standards Book (SB) is divided into 14 chapters which encompass all 219 numbered standards.

Each numbered standard is directly referenced by a Verification Item located in the Self Assessment Instrument (SAI).

The SAI is divided into two parts. **Part A** is dedicated to Documentation Review and **Part B** is dedicated to Observable Verification Items.

Accreditation Award Process

Figure 2: Overview of NECPA Accreditation Process

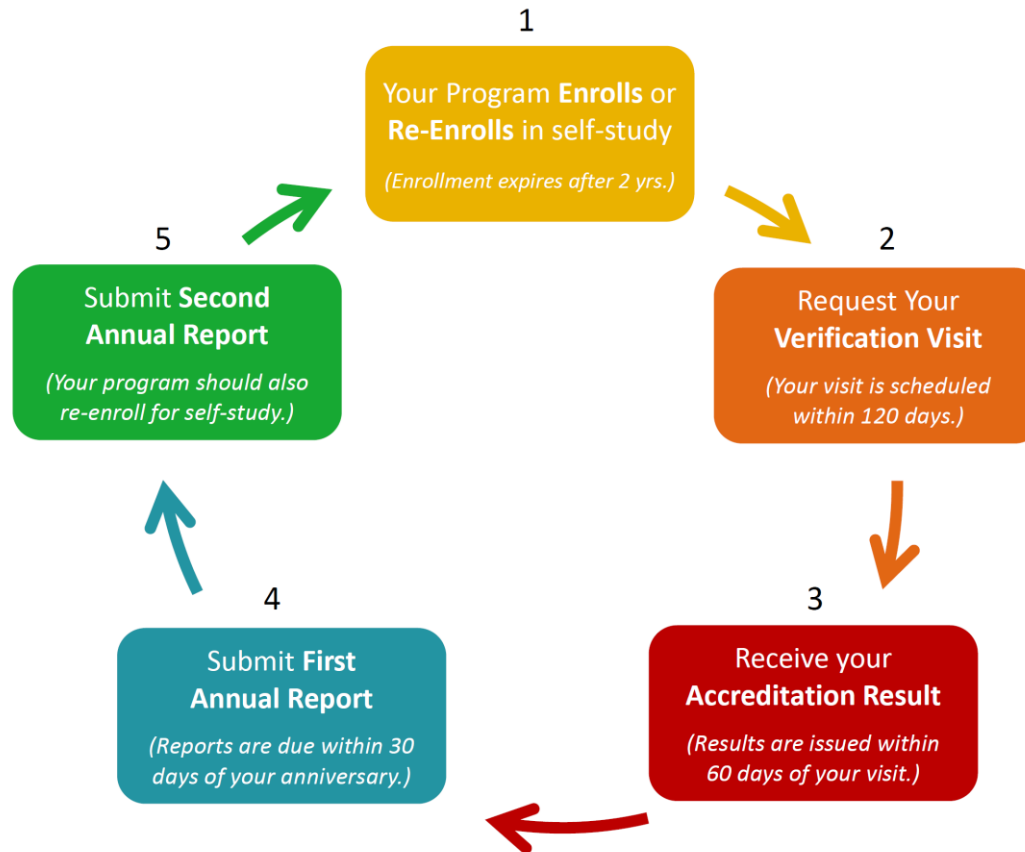


Figure 2: This graphic represents the accreditation process, which is achieved and maintained in five easy steps. A further in depth process review is available on pages 5-7

Accreditation Award Process Continued

The following five step overview of the NECPA Accreditation process will help you plan and assess your program's progress as you seek accreditation.

1. Enrollment and Self-Study:

- Once enrolled, your program's first step towards accreditation is to review the NECPA Standards. Reviewing the standards enables you to evaluate the program and implement any standards which are not currently in place.
- The enrollment/self-study period is valid for up to two years. On average, programs implement any needed changes and complete the Self Assessment Instrument (SAI) within 6 to 10 months.

2. Verification Visit:

- Once your program's Self Assessment Instrument (SAI) is complete and if the program has been in operation for one year, you may request a verification visit at any time during your enrollment period. All items in Part A and Part B must be answered and documentation for Part A labeled with each SAI verification item number in a well-organized box or file prior to submitting a verification visit request.
- You may submit your visit request online, by email, fax or mail. Please allow up to 120 days for the visit to take place. An expedited visit may be requested, but is subject to an additional fee. You are required to disclose any conflict of interest the program may have with an assigned NECPA Verifier.
- On the day of the visit the NECPA Verifier will verify ALL answers to each verification item in program's the Self Assessment Instrument (SAI) by reviewing the documentation box/file and observing all classrooms and outdoor areas. **Do not leave any verification items unanswered.** At the end of the program's visit the Verifier will allot time to conduct an Exit Interview to review any comments in Part A and/or Part B. During the Exit Interview, the Director is able provide written responses to all comments made by the Verifier.

3. Accreditation Results

- Your program's Self Assessment Instrument is compiled by the NECPA Office into an anonymous profile which is submitted for review by the NECPA National Accreditation Council and Commission. Results are issued by email within 60 days of your program's verification visit. The NECPA Council and Commission may determine one of the following results:
 - Full Accreditation: This award of Accreditation is valid for three years with proper award maintenance through Annual and Self Reports.

Accreditation Award Process Continued

- Pending: Pending requires submission of additional documentation for review before a program may attain full accreditation. Programs have up to 3 months to submit the required evidence. Evidence will be reviewed and results issued within 30 days of submission.
- Deferred with Items: This deferral requires substantial additional documentation to be submitted for review before a program may attain full accreditation. Programs have up to 6 months to submit the requested additional evidence. Evidence will be reviewed and results issued within 30 days of submission.
- Deferred with a Revisit: A Deferral with a Revisit requires an additional verification visit before a program may attain full accreditation. Programs have up to 6 months to request a Deferral Visit. The visit may take up to 120 days to schedule. Results will be issued within 60 days of the deferral visit.
 - Appeals: Appeals must be submitted in writing, clearly stating the reason for your appeal and must include documentation to support your appeal. Appeals will be reviewed within 30 days of submission.

4. Award Maintenance

- First and Second Annual Report
 - NECPA requires the submission of two Annual Reports in order to maintain accreditation for all three award years. These reports are due within the program's first and second anniversary months and must be submitted no later than the accreditation anniversary date.

5. Renewal Process

- Re-Enrollment: To prevent a lapse in accreditation, Accredited Programs should re-enroll at least one year prior to their current accreditation expiration date. This will allow your program enough time to complete a new Self Assessment Instrument, compile and organize supporting documentation, schedule the renewal visit, and receive your accreditation results.
- Renewal Visit: Accredited programs are encouraged to submit the verification visit request at least 8 months prior to their accreditation expiration date. This allows for the 120 days it may take the NECPA office to schedule a program's visit and the 60 days necessary for NECPA Council and Commission review.

RESOURCE - Verification Visit Scheduling and Accreditation Result Timetable

Visit Request Received by:	Visit Date Scheduled by:	Receive Results By:
January 31st	May 31 st	July 31 st
February 28th	June 30 th	August 31 st
March 31st	July 31 st	September 30 th
April 30th	August 31 st	October 31 st
May 31st	September 30 th	November 30 th
June 30th	October 31 st	December 31 st
July 31st	November 30 th	January 31 st
August 31st	December 31 st	February 28 th
September 30th	January 31 st	March 31 st
October 31st	February 28 th	April 30 th
November 30th	March 31 st	May 31 st
December 31st	April 30 th	June 30 th

My Goal Request Date:	My Goal Visit Date:	My Goal Result Date:

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

RESOURCE - My NECPA Accreditation Work Plan

Goal and/or Plan of Action	Start Date	Resources Needed	Goal Date
1. Review accreditation materials and become familiar with NECPA standards.			
2. Introduce accreditation process and importance to program staff.			
3. Introduce accreditation concept to parents and encourage their support.			
4. Copy and hand out staff and parent surveys. Provide an anonymous drop box.			
5. Collect completed surveys and identify areas of weakness.			
6. Director and teachers measure each classroom against applicable NECPA standards using sections of the Self Assessment Instrument.			
7. Assess each classroom and note areas of noncompliance.			
8. Brainstorm with staff and parents on improvement plan to address areas of observed noncompliance and weaknesses from the surveys collected.			
9. Meet with staff periodically to review progress in meeting NECPA standards.			
10. Once the improvement plan is met, including any necessary staff training and facility changes, complete the NECPA Self Assessment Instrument.			
11. Complete Part A, compiling the necessary documentation in an organized system, using the provided documentation labels to note each item.			
12. Complete Part B, these items will be verified through observation.			
13. Resurvey both staff and parents. Provide an anonymous drop box. Ensure you have collected surveys from at least 70% of staff and 50% of the families served.			
14. Review NECPA Self Assessment Instrument for completeness. Each item must be answered Yes, No* or N/A. <u>Do not leave any items unanswered.</u>			
15. Request a verification visit when all improvements have been made, the correct number of surveys collected, all items answered and documentation organized for the Self Assessment Instrument.			

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Resource Section Two

Documentation

The following section provides resources and guidance for items in Part A, the yellow Documentation Section, of the Self Assessment Instrument (SAI).

All suggested documents are also listed in the third column of the Standards Book Table, under the header 'Possible Evidence for Verification'.

This resource is not an all-encompassing list of sources and should be used in conjunction with Part A, the yellow Documentation section of your Self Assessment Instrument (SAI).

All sample documents are available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Possible Evidence for Staff and Parent Handbook Policies

This list may be used alongside your NECPA Self Assessment Instrument when creating and compiling your documentation. This is not an all-inclusive list for all standards, but is helpful for completing the documentation box/file for your verification visit.

Parent Handbook Policies:

- Parent Orientation
- Mission Philosophy, Principles and Goals
- Handbook Development and Review
- Program Review/Evaluation
- Confidentiality
- Maintenance of Children's Records and Immunizations, including:
 - Names, addresses, and phone numbers of parents or guardians;
 - Emergency contact information;
 - Emergency medical treatment authorization/permission form;
 - Physician's name and phone number;
 - Allergies;
 - Authorization to release to other than parent/guardian(s);
 - Immunizations or immunization exemptions;
 - Developmental history;
 - Health status/Results of annual health exam;
 - Instructions for any special needs or chronic illness;
 - Progress report;
 - Parent/guardian(s) conference reports;
 - Field trip permission forms;
 - Regular/recurring transportation permission form;
- Inclusion and Non-Discrimination
- Attendance and Exclusion Due to Illness
- Parent Communication, including at least:
 - Open Door' Policy;
 - Parent Conflict.
- Health and Safety
- Emergencies and Natural Disasters
- Food and Nutrition Services
- Physical Activity
- Curriculum
- Language Development
- Medication Administration
- Behavioral Management
- Child Abuse and Neglect
- Screening and Assessment
- Parent Workshops
- Classroom and Elementary Transition
- Community Outreach
- *And, if applicable:*
 - Infant Safe Sleep
 - Breastfeeding Support
 - Cloth Diapering
 - Transportation and Final Walkthrough
 - Pet Policy
 - Field Trips

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Possible Evidence for Staff and Parent Handbook Policies Continued

This list may be used alongside your NECPA Self Assessment Instrument when creating and compiling your documentation. This is not an all-inclusive list for all standards, but is helpful for completing the documentation box/file for your verification visit.

Staff Handbook Policies:

- Mission Philosophy, Principles and Goals
- Handbook Development and Review
- Program Review/Evaluation
- Confidentiality
- Facilities Maintenance
- Job Descriptions
- Hiring and Orientation
- Staff Scheduling
- Continuing Education and Professional Development
- Staff Communication and 'Open Door' Policy
- Material Requests
- Inclusion and Non-Discrimination
- Supervision
- Health and Safety
 - Handwashing
 - Diapering
 - Storage of Cleaning Products and Toxic Materials
- Emergencies and Natural Disasters
- Food and Nutrition Services
- Daily Health Screening
- Physical Activity
- Curriculum
- Language Development
- Medication Administration
- Behavioral Management and Discipline
- Child Abuse and Neglect
- Screening and Assessment
- Community Outreach
- *And, if applicable*
 - Infant Safe Sleep
 - Breastfeeding Support
 - Cloth Diapering
 - Transportation and Final Walkthrough
 - Pet Policy
 - Field Trips

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Possible Samples or Templates for Evidence

This list may be used alongside your NECPA Self Assessment Instrument when creating and compiling your documentation. This is not an all-inclusive list for all standards, but is helpful for completing the documentation box/file for your verification visit.

Staff Qualifications:

- Unofficial Transcripts
- Diplomas
- Resumes
- Staff Training Certificates or Records
- First Aid and CPR Cards or Certificates

Staffing:

- Staff Schedule
- Open Door/Available Meeting Times for Staff Communication
- Past Staff Memos or Meeting Agendas
- Classroom Material Request or Log

Staff Development:

- Signed Roster or Certificates from Discipline Policy Training
- Sample Classroom Observation Form
- Training Needs Assessment
- Professional Development Plan

Child Development/Child Records:

- Lesson Plans
- Sample Child Assessment
- Attendance Log

Facility and Playground:

- Program License or Exemption Letter
- Daily Playground Inspection Log – *Template Provided*
- Maintenance Request or Log

Health and Safety:

- Illness Log – *Template Provided*
- Injury Log – *Template Provided*
- Medication Administration Log – *Template Provided*
- Posted Handwashing Procedure *Template Provided*
- Posted Diapering Procedure - *Template Provided*

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

NECPA Timeline for Educational Qualifications

The following table outlines the current and emerging requirements for Lead Teachers'/Teachers' Educational Qualifications for Standard 1.2.

Effective January 2018
<p><u>ALL Lead Teachers/Teachers must:</u></p> <ul style="list-style-type: none">• Hold a Certified Childcare Professional® (CCP) or Child Development Associate™ (CDA) or an approved higher-quality, comparable credential approved by the state and at least two years of experience as a teacher in the age group(s) served.
Effective January 2023
<p><u>ALL Lead Teachers/Teachers must:</u></p> <ul style="list-style-type: none">• Hold a Certified Childcare Professional® (CCP) or Child Development Associate™ (CDA) or an approved higher-quality, comparable credential approved by the state and have at least two years of experience as a teacher in the age group(s) served. <p><u>AND AT LEAST 25 % of Lead Teachers/Teachers must:</u></p> <ul style="list-style-type: none">• Hold or be enrolled in an associate's degree program in early childhood education or an above noted field and have at least one year of experience under direct supervision.
Effective January 2028
<p><u>ALL Lead Teachers/Teachers must:</u></p> <ul style="list-style-type: none">• Hold a Certified Childcare Professional® (CCP) or Child Development Associate™ (CDA) or an approved higher-quality, comparable credential approved by the state and have at least two years of experience as a teacher in the age group(s) served. <p><u>AND AT LEAST 50 % of Lead Teachers/Teachers must:</u></p> <ul style="list-style-type: none">• Hold or be enrolled in an associate's degree program in early childhood education or an above noted field and have at least one year of experience under direct supervision.

NECPA Timeline for Educational Qualifications Continued

Effective January 2033

ALL Lead Teachers/Teachers must:

- Be enrolled in an associate's degree program in early childhood education or an above noted field and hold a Certified Childcare Professional® (CCP) or Child Development Associate™ (CDA) or an approved higher-quality, comparable credential approved by the state and at least two years of experience as a teacher in the age group(s) served.

AND AT LEAST 25 % of Lead Teachers/Teachers must:

- Hold an associate's degree program in early childhood education or an above noted field and have at least one year of experience under direct supervision.

AND AT LEAST 25 % of Lead Teachers/Teachers must:

- Hold or be enrolled in a bachelor's degree program in early childhood education or an above noted field and have at least one year of experience under direct supervision.

Effective January 2038

ALL Lead Teachers/Teachers must:

- Hold an associate's degree program in early childhood education or an above noted field and have at least one year of experience under direct supervision.

AND AT LEAST 50 % of Lead Teachers/Teachers must:

- Hold or be enrolled in a bachelor's degree program in early childhood education or an above noted field and have at least one year of experience under direct supervision.

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Resource Section Three

Observation

The following section provides resources and guidance for items in Part B, the blue Observation Section, of the Self Assessment Instrument (SAI).

All suggested observable items are also listed in the third column of the Standards Book Table, under the header 'Possible Evidence for Verification'.

This resource section is not an all-encompassing list of observable items and should be used in conjunction with Part B, the blue Observation Section of your Self Assessment Instrument (SAI).

All sample checklists are available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Classroom Observations

Infant Classroom Checklist Resource:

This checklist may be used alongside your NECPA Self Assessment Instrument when evaluating your classrooms. This is not an all-inclusive list for all standards, but includes some of the most commonly overlooked observable items.

Infant (Birth to 14 months) Classrooms (***If applicable.***) – All of the items on the checklist should be observable.

Observable Items

- | | |
|---|--|
| <ul style="list-style-type: none"><input type="checkbox"/> Reading area (with soft furniture)<input type="checkbox"/> Mirrors for developing self-awareness/self-concept (at child's eye level)<input type="checkbox"/> Family pictures (at child's eye level)<input type="checkbox"/> Artwork/Child's work (at child's eye level)<input type="checkbox"/> Room arrangement is child-friendly and developmentally appropriate<input type="checkbox"/> Child-size equipment<input type="checkbox"/> Low, open shelves<input type="checkbox"/> Books, toys and materials reflect multicultural and multiethnic diversity | <ul style="list-style-type: none"><input type="checkbox"/> Handwashing sink is adjacent to the changing table to prevent the spread of disease<input type="checkbox"/> Posted hand-washing procedure at each handwashing sink<input type="checkbox"/> Food preparation sink/area is separate from handwashing sink/area<input type="checkbox"/> Hands free trash receptacle is located in the changing area<input type="checkbox"/> Cleaning solution and sanitizer is out of children's reach<input type="checkbox"/> Diaper changing table is clear of clutter<input type="checkbox"/> Posted diapering procedure at changing table and any toilets where toilet training occurs<input type="checkbox"/> Emergency evacuation cribs present |
|---|--|

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Classroom Observations Continued

Toddler Classroom Checklist Resource:

This checklist may be used alongside your NECPA Self Assessment Instrument when evaluating your classrooms. This is not an all-inclusive list for all standards, but includes some of the most commonly overlooked observable items.

Toddler (15 mo. to 2 years) Classrooms – All of the items on the checklist should be observable.

Learning Centers	Observable Items
<ul style="list-style-type: none"> <input type="checkbox"/> Table Top Games/Manipulatives <input type="checkbox"/> Dramatic Play <input type="checkbox"/> Arts and Crafts <input type="checkbox"/> Large Muscle <input type="checkbox"/> Science/Nature <input type="checkbox"/> Block Building <input type="checkbox"/> Fine Motor <input type="checkbox"/> Math/Numbers <input type="checkbox"/> Language Arts/Literacy <input type="checkbox"/> Music/Movement <input type="checkbox"/> Nutrition 	<ul style="list-style-type: none"> <input type="checkbox"/> Reading area (with soft furniture) <input type="checkbox"/> Mirrors for developing self-awareness/self-concept (at child's eye level) <input type="checkbox"/> Family pictures (at child's eye level) <input type="checkbox"/> Artwork/Child's work (at child's eye level) <input type="checkbox"/> Room arrangement is child-friendly and developmentally appropriate <input type="checkbox"/> Child-size equipment <input type="checkbox"/> Low, open shelves <input type="checkbox"/> Books, toys and materials reflect multicultural and multiethnic diversity <input type="checkbox"/> Handwashing sink is adjacent to the changing table to prevent the spread of disease <input type="checkbox"/> Posted hand-washing procedure at each handwashing sink <input type="checkbox"/> Food preparation sink/area is separate from handwashing sink/area <input type="checkbox"/> Hands free trash receptacle is located in the changing area <input type="checkbox"/> Cleaning solution and sanitizer is out of children's reach <input type="checkbox"/> Diaper changing table is clear of clutter <input type="checkbox"/> Posted diapering procedure at changing table and any toilets where toilet training occurs <input type="checkbox"/> Emergency evacuation cribs present

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Classroom Observations Continued

Preschool and School-Age Classroom Checklist Resource:

This checklist may be used alongside your NECPA Self Assessment Instrument when evaluating your classrooms. This is not an all-inclusive list for all standards, but includes some of the most commonly overlooked observable items.

Preschooler (3-5yr) and School-Age (5-12yr) Classrooms – All of the items on the checklist should be observable.

Learning Centers	Observable Items
<ul style="list-style-type: none"> <input type="checkbox"/> Table Top Games/Manipulatives <input type="checkbox"/> Dramatic Play <input type="checkbox"/> Arts and Crafts <input type="checkbox"/> Large Muscle <input type="checkbox"/> Science/Nature <input type="checkbox"/> Block Building <input type="checkbox"/> Fine Motor <input type="checkbox"/> Math/Numbers <input type="checkbox"/> Language Arts/Literacy <input type="checkbox"/> Music/Movement <input type="checkbox"/> Nutrition <input type="checkbox"/> Woodworking/Carpentry* 	<ul style="list-style-type: none"> <input type="checkbox"/> Reading area (with soft furniture) <input type="checkbox"/> Mirrors for developing self-awareness/self-concept (at child's eye level) <input type="checkbox"/> Family pictures (at child's eye level) <input type="checkbox"/> Artwork/Child's work (at child's eye level) <input type="checkbox"/> Room arrangement is child-friendly and developmentally appropriate <input type="checkbox"/> Child-size equipment <input type="checkbox"/> Low, open shelves <input type="checkbox"/> Books, toys and materials reflect multicultural and multiethnic diversity <input type="checkbox"/> Handwashing sink is adjacent to the bathroom to prevent the spread of disease <input type="checkbox"/> Posted hand-washing procedure <input type="checkbox"/> Food preparation sink/area is separate from handwashing sink/area <input type="checkbox"/> Cleaning solution and sanitizer is out of children's reach

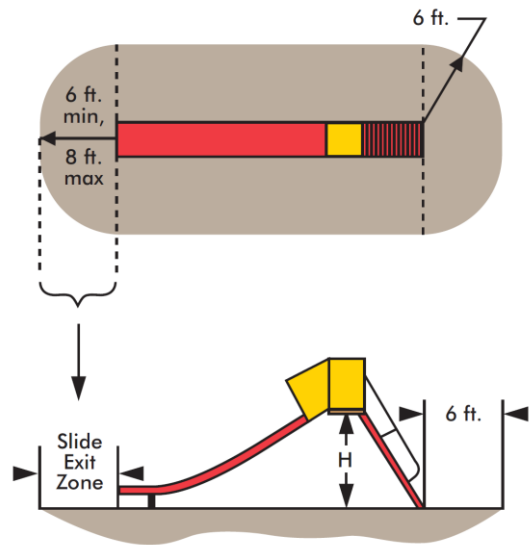
***Please Note:** Woodworking/Carpentry is defined as using or manipulating real wooden pieces, which can be cut, glued, and/or nailed in a developmentally appropriate manner. Any tools provided must be child-sized and age-appropriate. The use of blocks from the Block Area will not meet the requirements for this standard. Proper supervision and instruction are vital for successful implementation of Woodworking/Carpentry.

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

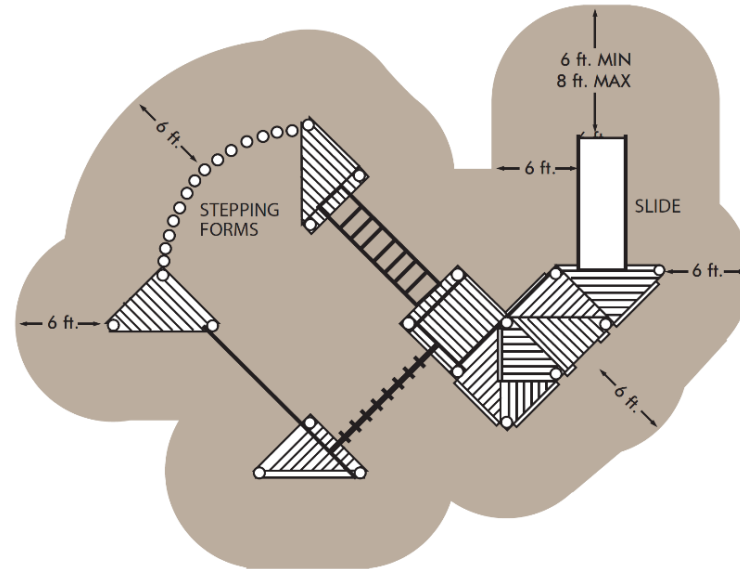
Playground Surfacing and Fall Zones

These examples provide further guidance on fall zones and playground surfacing requirements.

Sample Fall Zone for Slides



Sample Fall Zone for Multi-Use Structures



Minimum Compressed Loose-Fill Surfacing Depths

Inches of Compressed Fill	Type of Material	Protects up to a Fall Height of:
6* Inches	Shredded/recycled rubber	10 Feet
9 Inches	Sand	4 Feet
9 Inches	Pea Gravel	5 Feet
9 Inches	Wood Mulch	7 Feet
9 Inches	Wood Chips	10 Feet

* Shredded/recycled rubber loose-fill surfacing does not compress in the same manner as other loose-fill materials. However, care should be taken to maintain constant depth as displacement may still occur.

Source: *Public Playground Safety Handbook*. Bethesda, MD:U.S. Consumer Product Safety Commission, 2010. Print.

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Daily Playground Inspection Log

Week Start Date:	End Date:
Inspected by:	Daily Inspection Time:

Place a checkmark in each box if the statement is true.	MON	TUES	WED	THUR	FRI
1. Surfacing is free from broken glass, nails, trash, and animal excrement, and if applicable check for compressed/packed areas, prior to allowing children to enter the play area.					
2. There are no visible cracks, bending or warping, rusting or breakage of any equipment.					
3. There is no deformation of open hooks, shackles, rings, and links.					
4. There are no worn swing hangers or chains.					
5. There are no missing, damaged, or loose swing seats.					
6. There are no broken supports or anchors.					
7. There are no cement support footings that are exposed, cracked, or loose in the ground.					
8. There are no accessible sharp edges or points.					
9. There are no protruding bolt ends that have lost caps or covers.					
10. There are no loose bolts, nuts, and so forth that require tightening.					
11. There are no nails that have worked loose.					
12. There is no splintered, cracked, or otherwise deteriorating wood.					
13. There is no lack of lubrication on moving parts.					
14. There are no worn bearings or other mechanical parts.					
15. There are no broken or missing rails, steps, rungs, or seats.					
16. There are no worn or scattered surfacing material.					
17. There are no hard surfaces under swings and slides, checking places where resilient material has shifted away from any surface underneath play equipment.					
18. There is no chipped or peeling paint.					
19. There are no pinch or crush points, exposed mechanisms, juncture, and moving components.					
Initial Once Complete					

Illness Log

Name of Program:

Address of Program:

Date	Time	Name of Child	Symptoms	Action Taken By Staff	Parent/Guardian Contacted	Staff Initials

Also available for download under 'Program Resources' at www.necpa.net. Please login to your client profile to access.

Injury Report Form

Name of Program:	
Address of Program:	
Name of Child:	
Gender of Child: F M	Date and Time of Injury:
Age of Child:	

Staff Member Completing the Form:	Staff member responsible for supervising the child at the time of injury:
Description of the Injury:	Description of any consumer products involved:
Location of where the injury took place:	Body Parts Involved:
Actions taken on behalf of the injured:	

Medication Administration Log

Child's First and Last Name:	Child's Date of Birth:	Classroom:
Parent/Guardian First and Last Name:	Parent/Guardian Work #:	Parent/Guardian Home #:

Name of Medication:		Expiration Date of Medication:	
Strength of Medication:		Start Date for Medication:	
Age Appropriate/ Provider Specified Dosage:		End Date for Medication:	
Prescribing Health Provider and Phone Number (<i>if applicable</i>):		Instructions for Administration, Including Time to Administer:	
Medication Side Effects (<i>if applicable</i>):		Instructions for Storage and Disposal of Medication:	
Parent/Guardian Signature:			

Date Administered:	Time Administered:	Dosage/Amount Administered:	Staff Name:	Staff Initials:	Notes:

Handwashing Procedure



Thoroughly rub damp hands with liquid soap, optimally for 20 seconds but no less than 10, and rinse off hands with warm, clean, running water.



Dry hands with a single-use paper towel or dryer and turn off faucet with the paper towel or other hands-free method to prevent re-contamination.



Deposit used paper towel into hands-free trash receptacle.

Diaper Changing Procedure

1

HAVE DIAPERING SUPPLIES READY

Ensure supplies are within reach of staff, but not accessible to children. Perform proper handwashing and put on disposable gloves.

2

PLACE THE CHILD ON NON-POROUS SURFACE

Keep one hand on the child at all times. Unfasten the diaper, but leave the soiled diaper under the child. Avoid contaminating additional items.

3

CLEAN THE CHILD'S DIAPER AREA

Lift the child's legs as needed and use a fresh wipe each time you wipe front to back. Place the soiled wipes into the soiled diaper or directly into a covered, plastic-lined, hands-free trashcan.

4

REMOVE THE SOILED DIAPER

Fold the soiled surface of the diaper inward. Place soiled disposable diapers in a covered, plastic-lined, hands-free covered trash can. Remove gloves using the proper technique.*

5

PUT ON A CLEAN DIAPER AND DRESS THE CHILD

Slide a fresh diaper under the child. Use a clean disposable glove to apply any necessary diaper creams. Fasten the diaper.

6

WASH THE CHILD'S HANDS

Use proper handwashing technique.** Return the child to a supervised area.

7

CLEAN AND SANITIZE THE CHANGING TABLE

Clean changing table with water and soap solution. Rinse table. Wet the entire changing surface with a disinfectant. Put away the disinfectant and let sit according to manufacturer's instructions. Wash hands using proper procedure.

*Remove each glove carefully. Ball-up the dirty glove in the palm of the other gloved hand. With the clean hand strip the glove off from underneath at the wrist, turning the glove inside out.

**Please see Resource Section Three of the NECPA Standards Book for handwashing procedure.

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Introduction to NECPA Standards

This publication defines the quality core standards of the National Early Childhood Program Accreditation system (NECPA) and should be used as a guide and resource by the field and by programs seeking NECPA accreditation. The NECPA system continues to be based upon a weighted system approach. The system also allows for narrative input from the NECPA Verifier and program Director. This input ensures each program is assessed based on a complete understanding, including potentially mitigating factors that could impact accreditation.

NECPA standards encompass the whole child by assessing relationships between the child and teacher, program and center relationships with families, and program community relationships. Our focus is to ensure that each child is supported and encouraged by all the people and systems that are in their environment. The standards listed in this publication are the results of the past 30 years of research in the field of early care and education. These sources of information represent the current, best practices in the field. They include the following:

- The American Public Health Association/American Academy of Pediatrics National Health and Safety Performance Standards (APHA/AAP)
- The National Academy of Science, Committee on Family and Work Policies
- The U.S. Consumer Product Safety Commission (CPSC)
- ASTM International (American Society for Testing and Materials)

NECPA continues to be committed to high research quality of early childhood education. Between 2014 and 2017, NECPA undertook an extensive review of the existing standards. NECPA reviewed each standard, ensuring all indicators are based on current research and field recommendations. This exhaustive analysis ensures that programs who voluntarily participate in NECPA accreditation are offering children and families the highest quality of care. This review also included a voluntary pilot study to assess both the reliability and validity of the standards and self-assessment tool. This was done to ensure the standards are readily translatable into the real world, as well as ensuring consistency of verification.

The National Early Childhood Program Accreditation Commission continues to be a forerunner in setting high quality standards for child care programs across the United States and Internationally. This version of the NECPA standards is based upon the most recent knowledge and research on early childhood education and child brain development. These standards focus on the importance of quality child care curriculum, particularly that which focuses on the social emotional education, as well as that of health and nutrition.

Some programs may be subject to additional standards based upon State QRIS requirements. If your program is in one of the following states, please reference the corresponding ‘State Standards Section.’ *Colorado* and *Ohio*.

Using the NECPA Standards Table

The NECPA Standards Book (SB) is divided into 14 chapters which encompass all 219 numbered standards. For ease of review, the NECPA Standards are organized into a table.

The table is divided into four (4) columns:

- **Column 1** identifies the NECPA Standard Number.
- **Column 2** identifies the required criteria to meet the standard.
- **Column 3** identifies possible evidence that may be used during your verification visit.
- **Column 4** identifies the Self Assessment Instrument Item that is used to verify a particular standard.

1	2	3	4
#	NECPA Standard	Possible Evidence for Verification	SAI #
10.10	A playground inspection log must be maintained at all times to reflect daily playground inspections.	Documentation may include: <ul style="list-style-type: none"> • Daily Playground Inspection Log 	A-114

Chapter 1: Director, Teacher, and Staff Qualifications and Development

Programs must employ qualified teachers for direct work with children in a progression of roles such as those listed below:

- Director/Administrator
- Lead Teacher/Teacher
- Assistant Teacher
- Teacher Aide

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.1	<p><u>Qualifications of Directors/Administrators</u></p> <p>The Director or Administrator of a program must have the following qualifications:</p> <ul style="list-style-type: none"> • Must be at least 21 years old <p>AND meet ONE of the following for education and experience:</p> <ul style="list-style-type: none"> • Hold a bachelor’s degree in early childhood education, school-age care, child development, social work, nursing, sociology, psychology, human development and family studies, or another child-related field; <p>OR</p> <ul style="list-style-type: none"> • Hold an associate’s degree in early childhood education or an above noted field and at least two years’ experience as a teacher in the age group(s) served; <p>OR</p> <ul style="list-style-type: none"> • Hold a Certified Childcare Professional® (CCP) or Child Development Associate™ (CDA) or an approved higher-quality, comparable credential approved by the state and at least three years of experience as a teacher in the age group(s) served. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Unofficial Transcripts • Diploma • Resume • Staff Training Certificates or Records • First Aid and CPR Cards or Certificates 	<p>A-1</p> <p>A-2</p> <p>A-3</p> <p>A-4</p> <p>A-5</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>AND must have ONE of the following:</p> <ul style="list-style-type: none"> ● The National Administrator Credential® (NAC)® or an equivalent approved credential; <p>OR</p> <ul style="list-style-type: none"> ● A course in business administration; <p>OR</p> <ul style="list-style-type: none"> ● At least one-year experience as the administrator of an early childhood program. <p>AND must have ALL of the following:</p> <ul style="list-style-type: none"> ● At least 30 clock hours of job-related continuing education in the first year of employment and at least 24 clock hours of continuing education based on individual competency needs each year thereafter; <p>AND</p> <ul style="list-style-type: none"> ● Documented leadership training, if not a holder of The NAC®;* <p>AND</p> <ul style="list-style-type: none"> ● A valid certificate in both basic and infant/child first aid and CPR. <p><i>*Please Note: Leadership training may be provided in-house or through an outside agency and must include topics such as delegation, communication, teamwork/team building, coaching, conflict management, and motivation. Evidence of this standard is a certificate and/or agenda that includes/outlines the training topics</i></p>		

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.2	<p><u>Qualifications of Lead Teachers/Teachers</u></p> <p>Each Lead Teacher/Teacher at the program must have the following qualifications:</p> <ul style="list-style-type: none"> ● Must be at least 21 years old <p>AND meet ONE of the following for education and experience:</p> <ul style="list-style-type: none"> ● Hold a bachelor’s degree in early childhood education, school-age care, elementary education, child development, social work, nursing, sociology, psychology, human development and family studies, or another child-related field; <p>OR</p> <ul style="list-style-type: none"> ● Hold an associate’s degree in early childhood education or an above noted field and at least one year of experience under direct supervision;* <p>OR</p> <ul style="list-style-type: none"> ● Hold a Certified Childcare Professional® (CCP) or Child Development Associate™ (CDA) or an approved higher-quality, comparable credential approved by the state and two years of experience under qualified supervision.* <p><i>*Please Note: If the Lead Teacher/Teacher does not have a bachelor’s degree in one of the approved fields, they must meet the current requirements based upon the <u>NECPA Timeline for Educational Qualifications</u> as found in Resource Section 2.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> ● Unofficial Transcripts ● Diploma ● Resume ● Staff Training Certificates or Records ● First Aid and CPR Cards or Certificates 	<p>A-6</p> <p>A-7</p> <p>A-8</p> <p>A-9</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>AND must have ALL of the following:</p> <ul style="list-style-type: none"> • At least 30 clock hours of job-related continuing education in the first year of employment and at least 24 clock hours of continuing education based on individual competency needs each year thereafter; <p>AND</p> <ul style="list-style-type: none"> • Documented leadership training <u>if in a supervisory role</u>; <p>AND</p> <ul style="list-style-type: none"> • A valid certificate in basic and infant/child first aid and CPR. 		
1.3	<p><u>Qualifications of Assistant Teachers</u></p> <p>Assistant Teachers must have the following qualifications:</p> <ul style="list-style-type: none"> • Must be at least 18 years of age; <p>AND</p> <ul style="list-style-type: none"> • Have a high school diploma or general education certificate; <p>AND AT LEAST 33% of assistant teachers must meet ONE of the following for education and experience:</p> <ul style="list-style-type: none"> • Have six credits in early childhood education or early childhood development and six months experience serving the children of the age group(s) in care; <p>OR</p> <ul style="list-style-type: none"> • Have three credits in early childhood education or early childhood development and one year experience serving the children of the age group(s) in care; 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Unofficial Transcripts • Diploma • Resume • Staff Training Certificates or Records • First Aid and CPR Cards or Certificates 	<p>A-10</p> <p>A-11</p> <p>A-12</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>OR</p> <ul style="list-style-type: none"> • Hold a Certified Childcare Professional® (CCP) or Child Development Associate (CDA) or an approved high-quality, comparable credential approved by the state, and one year experience serving the children of the age group(s) in care; <p>AND must have ALL of the following:</p> <ul style="list-style-type: none"> • At least 30 clock hours of job-related continuing education in the first year of employment and at least 24 clock hours of continuing education based on individual competency needs each year thereafter; • A valid certificate in basic and infant/child first aid and CPR. 		
1.4	Assistant Teachers may be counted in the child:staff ratio and supervise children independently, but must work under the guidance of a Lead Teacher/Teacher.	Documentation may include: <ul style="list-style-type: none"> • Staffing Schedule • Staffing Policy/Procedure 	A-13
1.5	<p><u>Qualifications of Teacher Aides</u></p> <p>All Teacher Aides must have the following qualifications:</p> <p>AND</p> <ul style="list-style-type: none"> • Must be at least 18 years of age; • At least 30 clock hours of job-related continuing education in the first year of employment and at least 24 clock hours of continuing education based on individual competency needs each year thereafter. 	Documentation may include: <ul style="list-style-type: none"> • Hiring Policy/Procedure • Continuing Education Policy 	A-14

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.6	Teacher Aides may be counted in the child:staff ratio, but never left alone with children.	Documentation may include: <ul style="list-style-type: none"> • Staffing Schedule • Staffing Policy/Procedure 	A-15
1.7	<p><u>Qualifications of Substitute Teachers</u></p> <p>Substitute Teachers are defined as teachers hired for one day or for an extended period of time, who work under direct supervision of a permanent qualified teacher.</p> <p>Substitute Teachers must be at least age 18 years of age and meet the same requirements as an Assistant Teacher or higher.</p>	Documentation may include: <ul style="list-style-type: none"> • Hiring Policy/Procedure • Staffing Policy/Procedure 	A-16
1.8	Substitute Teachers must receive the same screening that all other staff has received.	Documentation may include: <ul style="list-style-type: none"> • Hiring Policy/Procedure 	A-20
1.9	<p>Substitute Teachers must be given an orientation to the program and policies, that at a minimum covers to follow topics:</p> <ul style="list-style-type: none"> A) Names and developmental needs of the children they are responsible for; B) Routines and transitions; C) Acceptable methods of behavior management/discipline; D) Meal patterns and food handling policies; E) General and emergency health and safety procedures; F) Handwashing procedures; G) Diapering procedures; H) Injury prevention and safety. 	Documentation may include: <ul style="list-style-type: none"> • Orientation Policy and Procedure 	A-18

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.10	<p>Substitute Teachers who are regularly scheduled to work at the program for an extended period of time must complete at least 30 clock hours of job-related continuing education in the first year of employment and at least 24 clock hours of continuing education based on individual competency needs each year thereafter.</p> <p><i>Please Note: For NECPA purposes, one college credit equals 45 clock hours.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Hiring Policy/Procedure • Continuing Education Policy 	A-24
1.11	<p><u>Volunteers</u></p> <p>Volunteers (parents, interns and high school students, etc.), must be at least 16 years old and must complete the same program orientation as Substitute Teachers. Volunteers must work under the supervision of a Lead Teacher and <u>are not counted</u> in the child:staff ratio.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Policy and Procedure • Orientation Policy and Procedure • Staffing Schedule 	A-17
1.12	<p><u>Supportive Staff</u></p> <p>All supportive staff (cooks, bus drivers, administrators, etc.), must have documented training in the developmental characteristics of the children in care, mandated child abuse and neglect reporting, and the behavioral management philosophy of the program.</p> <p><i>Please Note: This training may be completed during the orientation process.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Orientation policy and procedure • Staff Training Certificates or Records 	A-26
1.13	<p><u>Job Descriptions</u></p> <p>The program must have a written job description for ALL staff positions.</p> <p><i>Please Note: This may include the Director, Assistant Director, Lead Teacher, Assistant Teacher, Aide, Bus Driver, Cook, etc.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Job Descriptions in Staff Handbook 	A-19

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.14	<p><u>New Hire Background Checks and Procedure</u></p> <p>In hiring new employees, the director must check the applicant’s references and verify past employment.</p> <p>An applicant is not considered an employee until the director/administrator assesses his or her mental and physical health, their ability to work effectively with young children, and verifies that the applicant does not have a criminal background which would preclude their work with children. Additionally, all staff members must review and sign a statement of agreement to the discipline/behavior management policy, which specifically identifies the consequences for not adhering to these policies.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Hiring policy/procedure • Signed Agreement on the Discipline Policy 	A-20
1.15	<p><u>Initial Orientation of All Staff</u></p> <p>The program provides staff with a complete orientation to the program upon completion of the hiring process and prior to assuming responsibilities. Orientation methods for new employees may include but is not limited to:</p> <ul style="list-style-type: none"> A) Reviewing all policies and procedures, including the staff and parent handbooks and/or orientation manual; B) Observing the classroom assigned; C) Meeting children and coworkers; D) Participating in a supervisory observation, so the Director may assess the new teacher’s mental and physical ability to work effectively with young children; E) Participating in “in-service training”. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Orientation Policy/ Procedure 	A-21

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.16	<p><u>Staff Handbook</u></p> <p>The program has a staff handbook which is developed using staff input.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Handbook Development Policy/Procedure 	A-22
1.17	<p>The staff handbook must be reviewed and updated (if necessary based upon the review) annually.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Handbook Development Policy/Procedure 	A-23
1.18	<p><u>Continuing Education</u></p> <p>Directors, teachers and all staff working directly with children must have at least 30 clock hours of job related, continuing education in the first year of employment and 24 clock hours of continuing education based on individual competency needs each subsequent year.</p> <p><i>Please Note: For NECPA purposes, one college credit equals 45 clock hours.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Continuing Education Policy 	A-24
1.19	<p>The program must conduct an annual needs assessment to identify areas of training needs and create professional development plans for staff.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Training Needs Assessment Form • Professional Development Plan Sample/Template 	A-27
1.20	<p>The results of formal classroom observations are used to create individual professional development plans.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Classroom Observation Form 	A-28

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.21	<p>The following areas of training are made available to all teachers:</p> <ul style="list-style-type: none"> A) Knowledge of typical and atypical physical, cognitive, and social-emotional child growth and development; B) Designing and implementing developmentally appropriate lesson plans and group activities; C) Discipline and behavioral management strategies, including positive guidance techniques; D) Mandated child abuse and neglect identification and reporting; E) Appropriate care of infants, including shaken baby syndrome, safe sleep practices and conditions; F) First aid and CPR (including infant/child); G) Health practices and promotion, including: infectious disease control and prevention, proper handwashing, daily health checks, poison safety, knowing the signs and symptoms of childhood illnesses, and standard precautions; H) Appropriate classroom management, including indoor and outdoor supervision and successful transition strategies; I) Cultural diversity and working with diverse families; J) Proper nutrition, including age appropriate serving sizes; K) Developmentally appropriate physical activities, aimed at lowering the risk of childhood obesity; L) Room arrangement and classroom planning, including accidental injury prevention strategies; 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Continuing Education Policy • Staff Training Schedule 	A-25

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>M) Appropriate cleaning protocols for classroom environments;</p> <p>N) Management of job-related physical and mental health concerns;</p> <p>O) Effective child and parent/guardian communication strategies;</p> <p>P) Procedures and practice of handling emergency/disasters, including but not limited to: shelter in place, threatening incidents, natural/weather related disasters, and intruder emergency situations;</p> <p>Q) Knowledge of available community resources to address health and safety needs, including working with health consultants;</p> <p>R) Implementation of child assessment measures in use.</p>		
1.22	<p><u>Specialized Training of Staff Who Handle and Prepare Food</u></p> <p>All staff who have <u>food handling responsibilities</u>, such as serving snack or lunch, must receive training in food protection/handling or equivalent.</p> <p><i>Please Note: In-house food protection/handling training will suffice as evidence for this standard.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Training Certificates • Staff Training Schedule 	A-29
1.23	<p>The designated food service supervisor <u>responsible for food preparation</u> must have a certificate in food service and food safety.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Training Certificates • Staff Training Schedule 	A-30
1.24	<p><u>Specialized Training of Staff Who Serve Children with Special Needs</u></p> <p>If the program currently serves children with developmental delays and special health care needs associated with developmental delays, there must be a teacher who has had a minimum of eight hours of training in inclusion of children with developmental delays and special health care needs.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Training Certificates • Staff Training Schedule 	A-31

#	NECPA Standard	Possible Evidence for Verification	SAI #
1.25	<p><u>Teacher Retention Plan</u></p> <p>The program has a teacher retention plan that includes the following: a staff development plan or formal evaluation program, including a career ladder; training opportunities (which may include coverage of dues for professional organizations and/or training courses); merit raises and/or promotions (which may include bonuses); and employee benefits (which may include employee choice of health coverage or retirement savings plan).</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Policy/Procedure 	A-32
1.26	<p><u>Staff Communication</u></p> <p>Regular staff communication is fostered through weekly staff meetings, a staff newsletter, ample opportunity for individual staff/administrative meetings, and written memoranda, in either paper or electronic form. Weekly staff meetings are held to ensure ongoing care is provided which meets the program's short term and long term goals for children while using a team concept.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staff Meeting Schedule • Open Door Policy and Available Meeting Times • Prior Memos/Meeting Agendas 	A-33 A-34
1.27	<p>The program has a system in place for teachers to request the materials they need for class projects/activities and teaching supplies.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Material Request Policy/Procedure 	A-35

Chapter 2: Supervision

#	NECPA Standard	Possible Evidence for Verification	SAI #
2.1	<p><u>General Supervision</u></p> <p>Children must be under constant supervision by qualified teachers, by both sight and sound. This includes all ages of children, from infants to school-aged. Children must be supervised both indoors and out, and including nap time.</p> <p><i>Please Note: Children must be able to be seen and heard at all times by the teacher. For example, if the teacher is working momentarily one-on-one with a child, but is able to see all of the children by slightly moving their position, then this standard is met.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Policy/Procedure <p>Observable items may include:</p> <ul style="list-style-type: none"> • Active and Positive Supervision 	<p>A-36</p> <p>B-1</p>
2.2	<p>To ensure that all children are safe and accounted for, children must be counted by name to face on a regular basis. This includes any transition time (when going indoors to outdoors, moving from one room/area to another), during any field trip (including walks), when leaving vehicles (both on field trips and during regular transportation routes), and during emergency evacuations.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Attendance log is present and used during transitions. • Active and Positive Supervision 	<p>B-2</p> <p>B-3</p>
2.3	<p>Teachers must know and be able to accurately state how many children are in their care at any given time.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Active and Positive Supervision 	<p>B-4</p>
2.4	<p><u>Child:Staff Ratios</u></p> <p>Age appropriate child:staff ratios must always be met during all hours of operation, both indoors and outdoors. This includes any field trips or off site activities.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Developmentally appropriate child:staff ratios met at all times. 	<p>B-5</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #																												
	<p>Accepted practice in the early childhood care and education field today is to maintain the following child:staff ratios during all hours of operation including evening and overnight care, with the exception of nap and rest periods:</p> <table border="1" data-bbox="224 378 1264 937"> <thead> <tr> <th data-bbox="224 378 535 448">Age Group</th> <th data-bbox="535 378 846 448">Age Range</th> <th data-bbox="846 378 1056 448">Child:Staff Ratio</th> <th data-bbox="1056 378 1264 448">Max Group Size</th> </tr> </thead> <tbody> <tr> <td data-bbox="224 448 535 527">Infants</td> <td data-bbox="535 448 846 527">Birth to 14 months</td> <td data-bbox="846 448 1056 527">3/4:1</td> <td data-bbox="1056 448 1264 527">6/8</td> </tr> <tr> <td data-bbox="224 527 535 607">Toddlers</td> <td data-bbox="535 527 846 607">15 months to 23 months</td> <td data-bbox="846 527 1056 607">4/6:1</td> <td data-bbox="1056 527 1264 607">8/12</td> </tr> <tr> <td data-bbox="224 607 535 686">Twos</td> <td data-bbox="535 607 846 686">24 months to 35 months</td> <td data-bbox="846 607 1056 686">6:1</td> <td data-bbox="1056 607 1264 686">12/18</td> </tr> <tr> <td data-bbox="224 686 535 766">Pre-School/ Three/Fours</td> <td data-bbox="535 686 846 766">3 years to 4 years</td> <td data-bbox="846 686 1056 766">7/8:1</td> <td data-bbox="1056 686 1264 766">14/16</td> </tr> <tr> <td data-bbox="224 766 535 846">Pre-Kindergarten</td> <td data-bbox="535 766 846 846">4 years to 5 years</td> <td data-bbox="846 766 1056 846">9/10:1</td> <td data-bbox="1056 766 1264 846">18/20</td> </tr> <tr> <td data-bbox="224 846 535 925">School-Age</td> <td data-bbox="535 846 846 925">5 years to 12 years</td> <td data-bbox="846 846 1056 925">12:1</td> <td data-bbox="1056 846 1264 925">24</td> </tr> </tbody> </table> <p data-bbox="224 948 1203 1065"><i>*Please Note: NECPA will defer to state ratios only if teacher to child interactions are of high quality. This will be observed, verified and reviewed through NECPA Standards regarding teacher to child interactions.</i></p> <p data-bbox="224 1083 1260 1409"><i>When infants and toddlers are in a mixed age group, the child:staff ratio and group size for infants and toddlers must be maintained. The ratios do not include personnel who have other responsibilities that they must carry out simultaneously while watching children, such as cooks, maintenance workers, or bus drivers. When transporting children, child:staff ratios must be maintained. Bus drivers may not be used for the purposes of meeting ratio. No person under the age of 18 will be considered for the purposes of determining child:staff ratios.</i></p>	Age Group	Age Range	Child:Staff Ratio	Max Group Size	Infants	Birth to 14 months	3/4:1	6/8	Toddlers	15 months to 23 months	4/6:1	8/12	Twos	24 months to 35 months	6:1	12/18	Pre-School/ Three/Fours	3 years to 4 years	7/8:1	14/16	Pre-Kindergarten	4 years to 5 years	9/10:1	18/20	School-Age	5 years to 12 years	12:1	24		
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#	NECPA Standard	Possible Evidence for Verification	SAI #
2.5	<p>The program must have a plan/policy for maintaining required child:staff ratio at all times.</p> <p><i>*Please Note: This may include a procedure for calling-in a staff member early or requiring the Director or Assistant Director to join the classroom if attendance is higher than anticipated.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Schedule • Staffing Policy/Procedure 	A-37
2.6	<p>There must also be a documented prevention plan in place that states, at any given time, (even during times of low enrollment and/or attendance), there must be two staff members, (which may include the Director), present at the program during operational hours.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Schedule • Staffing Policy/Procedure 	A-38
2.7	<p>Each age group must have an assigned Lead Teacher/Teacher, including school-age. At all times of operation when children are in care, the program must have at least one teacher who meets the Lead Teacher/Teacher requirements on site, with the exception of nap and rest periods for overnight care.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Schedule • Staffing Policy/Procedure 	A-39
2.8	<p><u>Daily Attendance Records of Children</u></p> <p>Programs are required to have policies and maintain records of attendance for all the children in care. At the time of enrollment, parents/guardians must provide contact information, (for example email address, cell and work phone numbers), to help ensure there is always a method of contacting the parent/guardian. It should be stressed to parents/guardians, that this information must always be current. A printed roster of all children currently enrolled must be accessible and current in case of an emergency that requires evacuation.</p> <p>The program must maintain a daily attendance log that identifies the time of arrival and departure for each child.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Attendance Policy and Procedure • Attendance Records • Parent Communication Policy and Procedure 	A-40

#	NECPA Standard	Possible Evidence for Verification	SAI #
2.9	<p><u>Pick-Up and Drop-Off Procedures</u></p> <p>The program must have an established procedure for verifying who is authorized to pick up a child from care.</p> <p>Written authorization must be available in the child’s file and the teacher or the director/administrator must verify the identity of each person picking up a child from care. The program ensures that any staff member who may be responsible for verifying the identity of an individual picking up a child is trained on what to do in the case of having to deny the release of a child.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Attendance Policy and Procedure • Staff Training Certificates or Records 	A-41
2.10	<p><u>Active and Positive Supervision</u></p> <p>All teachers must practice active and positive supervision, both indoors and outdoors. Teachers must:</p> <ul style="list-style-type: none"> A) Be aware of children’s activities at all times by scanning play activities, circulating around the area, and standing in strategic positions; B) Monitor children’s behavior to help ensure children’s safety, and be aware of and scan for potential safety hazards; C) Establish clear and simple safety rules and teaching children how to use playground equipment appropriately and safely; D) Have knowledge of the skills and abilities of the children in care. 	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers using active and positive supervision both indoors and out. 	B-6

Chapter 3: Behavior Management

#	NECPA Standard	Possible Evidence for Verification	SAI #
3.1	<p><u>Behavioral Management Policies</u></p> <p>The program must have clear, written, behavioral management policies in place. These policies specify the program’s behavioral management philosophy, including responses to individual behaviors.</p> <p>Behavioral management policies clarify the program’s response to specific behaviors, both prevention and response oriented. These policies must be explained to parents/guardians at the time of enrollment and be defined for children in an age appropriate manner.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Behavioral Management Policy and Procedure 	<p>A-42</p> <p>A-43</p>
3.2	<p><u>Behavior Management Practices</u></p> <p>Discipline is seen as providing guidance to the child rather than punishment. Teachers must have knowledge of age appropriate behavior management techniques including positive guidance, redirection, and providing concise limits to help children develop self-control.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers utilizing positive behavior management techniques 	B-7
3.3	<p>These practices are clear, consistent and understandable to the child. Anytime a teacher redirects a child's behavior, they provide the child with a brief explanation of limits and rationale.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers utilizing positive behavior management techniques 	B-8
3.4	<p>The teacher assists the child in learning socially acceptable behavior, by focusing on the positive rather than the negative to teach a child what is safe and appropriate for them and other children.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers utilizing positive behavior management techniques 	B-11

#	NECPA Standard	Possible Evidence for Verification	SAI #
3.5	Positive behavior is encouraged through positive reinforcement. Teachers provide sincere, descriptive encouragement and attention for children's behaviors they would like to see again.	Observable items may include: <ul style="list-style-type: none"> Teachers utilize positive behavior management techniques. 	B-9
3.6	Teachers must intervene immediately when a child's behavior is a threat to themselves, to others, or to property. Teachers respond quickly and calmly to prevent children from hurting each other while showing understanding of the children's needs and feelings.	Observable items may include: <ul style="list-style-type: none"> Teachers utilize positive behavior management techniques. 	B-10
3.7	Teachers address the specific behavior or situation and never label a child 'good' or 'bad'. <i>Please Note: This standard refers to calling/labeling a child 'good' or 'bad' for a particular behavior or action, this does not refer to praising a child's work.</i>	Observable items may include: <ul style="list-style-type: none"> Teachers utilize positive behavior management techniques. 	B-12
3.8	<p><u>Prohibited Staff and Teacher Behaviors</u></p> <p>Any form of child maltreatment is prohibited. This includes: emotional abuse, including teasing, humiliating, ignoring, isolating, bullying, and harassment; the withholding or use of food, meals, or snacks; and verbal abuse, including taunting, speaking harshly, or sarcastically that is meant to demean the child in any way.</p> <p>The use of corporal punishment is not tolerated in any child care program, by any staff, teacher, substitute or volunteer. Corporal punishment is defined as physical punishment that intentionally causes pain and discomfort on children in response to undesired behavior.</p>	Documentation may include: <ul style="list-style-type: none"> Behavioral Management Policy and Procedure 	A-44

Chapter 4: Health Protection and Promotion

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.1	<p><u>Health Advocacy</u></p> <p>The program has a designated staff member(s) who is responsible for health and safety issues at the program.</p> <p>This person is responsible for the day to day issues related to the health and safety of the program, serves as an additional resource for children and parents, and ensures program-level health and safety concerns are addressed/resolved.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Health and Safety Policy • Parent Communication Policy and Procedure 	<p>A-54</p> <p>A-55</p> <p>A-56</p>
4.2	<p>The program has a formal or informal relationship with a medical professional who is available as a resource regarding health and safety issues, including mental and behavioral wellness.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Health and Safety Policy 	A-65
4.3	<p><u>Nutritional Planning</u></p> <p>When planning and preparing meals and snacks, the program must ensure that the child’s daily nutritional needs will be met, keeping in mind the number of meals and snacks the child will be eating at the program and at home. This is outlined in the program’s food and nutrition service policy.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Food and Nutrition Services Policy and Procedure 	A-70
4.4	<p>Attention is paid in teaching children proper portion size and healthy food choices. Calorie dense foods like sugary beverages, desserts and snacks should not be served. Teachers work with families to introduce new foods and promote healthy eating. The food and nutrition service policy also outlines foods brought from home.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Food and Nutrition Services Policy and Procedure • Parent Education 	A-70

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.5	<p><u>CPR and First Aid Training</u></p> <p>To ensure the health and safety of children in care, at least 90% of the staff involved in the provision of direct care must be certified in First Aid that includes rescue breathing and first aid for choking. Written verification of CPR certification must be kept on file.</p> <p>At least one certified staff person must be in attendance at all times and in all places that children are in care.</p> <p><i>Please Note: First aid training, including rescue breathing and first aid for choking, is consistent with training developed by the American Red Cross, the American Heart Association, the National Safety Council for First Aid Training Institute, any state approved organization, or the equivalent of one of the four.</i></p> <p><i><u>The NECPA Verifier must see the actual First Aid and CPR cards/certificates issued by the trainer for each employee or a notarized copy. The original card or certificate are required as proof of verification. Photocopies of the cards or certificates are not acceptable proof of verification. Rosters are not acceptable proof of verification. Printed certificates or cards with a verifiable certificate number and/or barcode are accepted.</u></i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Original/notarized CPR Cards or Certificates 	<p>A-51</p> <p>A-52</p> <p>A-53</p>
4.6	<p><u>First Aid Kits and Emergency Supplies</u></p> <p>There must be a fully-stocked, readily accessible first aid kit at the program , in every vehicle when children are being transported, and for all field trips or any activity away from the program, including walks and off-site outdoor play.</p> <p>This kit is stored in a designated location that is accessible to staff at all times, but inaccessible to children.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The program has readily accessible first aid kits which include all the required items. 	<p>B-14</p> <p>B-15</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.7	<p>This first aid kit must include the following:</p> <ul style="list-style-type: none"> A) Disposable nonporous gloves and sealable nonporous plastic bags for disposal of bloody materials; B) Sealed packages of alcohol wipes/wound cleaning solution; C) Scissors; D) Tweezers; E) Thermometer; F) Bandage tape; G) Sterile gauze pads and ‘Band-Aids’; H) Flexible roller gauze; I) Triangular bandage or arm-sling; J) Safety pins; K) Eye dressing; L) Pen/pencil and notepad; M) Cold pack; N) Current American Academy of Pediatrics or American Red Cross standard first aid text or equivalent first aid guide; O) Cell phone or coins for use at a pay phone;* P) Insect sting preparation (if allowed by state regulations); Q) Poison control center telephone number; R) Small plastic or metal splints, or rolled magazine, or newspaper; S) Soap (not bar soap); T) Emergency numbers; U) Flashlight; V) Whistle. <p><i>Please Note: If your state licensing/regulations prohibit any of the above, please include labeled documentation for verification item B-16.</i></p> <p><i>*Item O) A cell phone does not have to be kept in the first aid kit, however it must always be accessible for emergency use.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The program has readily accessible first aid kits which include all the required items. 	B-16

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.8	<p><u>Handwashing</u></p> <p>Teachers instruct children on hand washing by breaking the process into meaningful steps. The handwashing procedure must be posted at each handwashing sink.</p> <p>Staff and children wash their hands at the following times:</p> <ul style="list-style-type: none"> A) Before and after any food service activity (including preparation, handling, setting the table, or serving); B) Before and after eating meals or snacks; C) Before toileting or changing diapers/pull-ups (for staff ONLY); D) After toileting or changing diapers/pull-ups (for staff AND children); E) After assisting a child with toilet use or toileting accidents; F) After having any contact with bodily fluids (including mucous); G) Upon arrival to the classroom, including coming in from outdoors; H) After handling any animals (including fish, insects and reptiles). <p><i>*Please Note: All staff, children and volunteers must use a state approved handwashing procedure or the following handwashing procedure:</i></p> <ol style="list-style-type: none"> 1. Thoroughly rub damp hands with liquid soap, optimally for 20 seconds but no less than 10, and rinse off hands with warm, clean, running water. 2. Dry hands with a single-use paper towel or dryer and turn off faucet with the paper towel or other hands-free method to prevent re-contamination. 3. Deposit used paper towel into hands-free trash receptacle. <p><u>ONLY when clean, running water is unavailable</u>, the use of hand sanitizers by children over twenty-four months of age and adults in child care programs is an appropriate alternative to the use of traditional handwashing with soap and water. The use of alcohol based hand sanitizer is not an acceptable substitute for hand washing for children under the</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Staff follow the posted handwashing policy/procedure and wash hands at appropriate times • Children follow the posted handwashing policy/procedure and wash hands at appropriate times 	<p>B-17</p> <p>B-18</p> <p>B-19</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<i>age of 24 months because of the potential for them to eat the sanitizer rather than rubbing their hands together. Hand sanitizer using an alcohol-based active ingredient must contain 60% to 95% alcohol. A single pump of an alcohol-based sanitizer should be dispensed. Hands should be rubbed together, distributing sanitizer to all hand and finger surfaces and hands should be permitted to air dry.</i>		
4.9	There must be a trash receptacle readily accessible for each handwashing sink.	Observable items may include: <ul style="list-style-type: none"> • Trash cans are available for each sink. 	B-20
4.10	<u>Toileting Area</u> Children must be able to open toilet doors from inside and teachers must be able to open toilet doors from the outside so they may assist children when necessary.	Observable items may include: <ul style="list-style-type: none"> • Toilet doors are in proper working order. 	B-21 B-22
4.11	A closable, foot-pedal operated, or motor sensor operated, plastic-lined trash receptacle must be provided in the toileting area if toilet training is occurring for the disposal of diapers and/or pull-ups.	Observable items may include: <ul style="list-style-type: none"> • Trash cans are hands-free and in proper working order. 	B-20
4.12	<u>Medications</u> The administration of medicines at the program is limited to: <ul style="list-style-type: none"> • Prescription or nonprescription medication (including over-the-counter cold medicines or pain reliever) with written orders from a prescribing health care professional and written permission from a parent/guardian. • Medication is dated and kept in the original container or labeled by a pharmacist with the child's first and last name. The written orders or 	Documentation may include: <ul style="list-style-type: none"> • Medication Administration Policy 	A-58 A-59

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>label specifies the date the prescription was filled, the name of the health care provider who wrote the or order, the medication’s expiration date, and specific, legible instructions for administration, storage and information on any possible side effects.</p> <p>Only designated persons, who are certified through Medication Administration Training (MAT) or a state approved standardized training provided by a licensed health professional, are authorized to administer medications.</p> <p><i>Please Note: Non-prescription sunscreen and insect repellent must have parental/guardian consent, but do not require instructions from a health professional.</i></p>		
4.13	<p>A log is kept and filed of all medication administered. The medication log must contain the following:</p> <ul style="list-style-type: none"> A) Child's first and last name; B) Expiration date of medication; C) Name and strength of the medication; D) Age appropriate dosage; E) The manufacturer’s instructions or prescription label with specific, legible instructions for administration; F) Storage and disposal; G) If prescription, the name of the health care provider who wrote the prescription; H) Time to be administered and date; I) Parent/guardian(s) signature; J) Person who administered the medication, the dosage/amount and time administered. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Medication Administration Log 	A-60

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.14	<p><u>Child Abuse and Neglect Policy</u></p> <p>The program must have a written policy for reporting child abuse and neglect. When child abuse, neglect or exploitation is suspected reports are made to the appropriate jurisdiction, such as the Department of Social Services, Child Protective Services Agency, or police.</p> <p>All staff must be made aware that they are mandated reporters and are informed of their responsibilities in reporting child abuse and neglect. All teachers, staff, and volunteers at the program are given clear information about reporting child abuse. This includes the state child abuse reporting regulations, instructions on reporting, the chain of command, and a statement of reassurance that the person who reports abuse will not be fired merely because they made a report.</p> <p>When a child is enrolled in the program, the child’s parent/guardian is notified of the program’s legal responsibility to report any suspected incidence of child abuse.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Child Abuse and Neglect Policy 	A-46
4.15	<p><u>Health Protection and Promotion Policy</u></p> <p>The program must have policies in writing on the following:</p> <ul style="list-style-type: none"> A) Clear instructions for handling emergency and critical care situations; B) Illness inclusion and exclusion policies for both children and staff, that addresses reentry into the program after illness; C) Guidelines that address seasonal and pandemic flu policies, including reporting designated infectious diseases to the CDC; D) An explanation of common child care illnesses that includes a plan to handle sick children, as well as safety measures to protect the health of other children and staff; E) Prevention protocol for communicable diseases. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Health and Safety Policy 	A-45 A-63

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.16	<p><u>Illness/Injury</u> In order to minimize the spread of illness, there must be a separate area to care for children who are too ill to receive care in the regular group until a parent or guardian arrives to pick up the ill child. This separate area could be an administrative office or an area of the classroom, away from other children, but always within sight and sound supervision.</p>	Documentation may include: <ul style="list-style-type: none"> • Attendance Policy and Procedures • Exclusion Due to Illness Policy 	A-63
4.17	Parents must be notified as soon as possible when a child’s behavior indicates possible illness.	Documentation may include: <ul style="list-style-type: none"> • Attendance Policy and Procedures 	A-63
4.18	The program maintains a file or log, tracking all illnesses and/or communicable diseases. This illness log must include: <ol style="list-style-type: none"> A) The date, time, and name of the person impacted; B) Identification of the symptoms; C) Detailed explanation of how the teacher responded to the symptoms; D) Person contacted, including a parent/guardian, emergency contact, nurse, or local health department (if warranted); E) The name of the person who filled out the log. 	Documentation may include <ul style="list-style-type: none"> • Sample Illness Log 	A-61 A-62
4.19	The program has a system for daily health screenings along with a record of the teachers’ concerns. The daily screenings include the following: <ol style="list-style-type: none"> A) Changes in usual behavior or appearance; B) Taking the child’s temperature with a thermometer, if there are changes in the child’s behavior or appearance, C) Skin rashes, itchy skin, or lice/nits (during a lice outbreak); D) Complaints of pain or not feeling well; E) Other signs or symptoms of illness (including drainage from eyes, vomiting, and diarrhea); F) Reported illness or injury to child since last day of attendance. 	Documentation may include <ul style="list-style-type: none"> • Daily Health Screening Policy and Procedure 	A-50

#	NECPA Standard	Possible Evidence for Verification	SAI #
4.20	<p>The program maintains a file or log, tracking all injuries that occur at the facility. This injury log must include:</p> <ul style="list-style-type: none"> A) Name, gender, and age of the injured person; B) Description of the injury; C) Date and time of injury; D) Location where injury took place; E) Body part(s) involved; F) Description of any consumer product involved; G) Name of the staff member responsible for supervising the child at the time of the injury; H) Actions taken on behalf of the injured following the injury; I) Name of person who completed the report; J) Name and address of the facility. 	<p>Documentation may include</p> <ul style="list-style-type: none"> • Sample Injury Log/Form 	A-64
4.21	<p><u>Health and Developmental Screenings and Assessments</u></p> <p>The program must have a policy and procedure in place to ensure that within 90 days of enrollment children (excluding school-age) are referred to any needed health related screenings, including, vision, speech and language, hearing, and special health care needs. Health related screenings may be done at the program or through an outside health organization.</p>	<p>Documentation may include</p> <ul style="list-style-type: none"> • Screening and Assessment Policy 	A-47

Chapter 5: Physical Environment, Equipment, Prohibited Supplies and Transportation

#	NECPA Standard	Possible Evidence for Verification	SAI #
5.1	<p><u>Physical Environment</u></p> <p>The overall appearance of the program both inside and outside must be clean, free from clutter, well-maintained, odor-free, and welcoming. In order to best protect children, there must be an entry area to the facility for parents, children, and guests that is separate from play areas.</p> <p>Each room in the program must have adequate lighting and ventilation.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Well-maintained classrooms and common areas. • Distinct entrance or foyer to greet parents and visitors. 	B-23
5.2	<p>Facilities, equipment and toys (both indoor and out), are free of chipping or peeling paint. Indoor and outdoor play equipment is free of pinch or crush points. Broken and/or inoperable toys or equipment are removed until repaired or replaced.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Doors, windows, walls and other surfaces as well as equipment that children may come into contact with have no peeling or chipping paint both indoors and outdoors. • Toys and other classroom materials are operable. 	B-23
5.3	<p>In order to prevent food contamination, food preparation and feeding activities must be separated from diapering and toileting areas.</p> <p><i>Please Note: If only one sink is available in a classroom then it may be used for both handwashing and food preparation <u>as long as the sink is sanitized before each instance of food preparation.</u> This procedure must be posted at the sink.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Distinct feeding/eating and diapering/toileting areas. 	B-24

#	NECPA Standard	Possible Evidence for Verification	SAI #
5.4	Equipment is child-sized and adjusted for the developmental ages of the children.	Observable items may include: <ul style="list-style-type: none"> • Chairs, tables, book shelves and learning center equipment is the correct size for the children in care. 	B-25
5.5	Each classroom or area must have storage space for staff materials and classroom supplies. Staff member's personal items, hot beverages, and medication are limited to a designated area which is inaccessible to children.	Observable items may include: <ul style="list-style-type: none"> • Classrooms have areas for staff to store their equipment and personal belongings. 	B-26 B-27
5.6	<p><u>Indoor Gross Motor Area and Equipment</u></p> <p>The program provides space for gross motor play/development inside the facility on days when outdoor experiences are inappropriate.</p> <p><i>Please Note: This standard does not require a separate specific indoor gross motor area but requires that gross motor play/development is made available to children in the classroom on days when outdoor play is unavailable.</i></p>	Observable items may include: <ul style="list-style-type: none"> • Indoor gross motor play can be made available for children in care. 	B-28
5.7	<p>If the program provides indoor climbing equipment that is over 18 inches high, it must be placed on impact-absorbing mats* which extend a minimum of 6 feet** beyond the perimeter of the equipment.</p> <p><i>*Please Note: NECPA defers to the Consumer Product Safety Commission (CPSC) regarding the required fall-zone and surfacing for indoor play equipment. Evidence of meeting this standard may be the manufacturer's guidelines on the surfacing's installation and approved use. Include a hard copy of this in your labeled documentation file/box for item B-29.</i></p>	Observable items may include: <ul style="list-style-type: none"> • Indoor climbing equipment is on the proper surfacing with the required fall zone perimeter. 	B-29

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>**Please Note: If, and only if, state regulations/licensing permits the surface material to extend a minimum of 4 feet beyond the perimeter of the equipment, answer No to Item B and include a hard copy of the specific state regulation in your labeled documentation box/file for Item B-29.</p>		
5.8	<p><u>Cleaning Responsibilities and Schedule</u></p> <p>The program must have a planned and documented cleaning schedule that includes daily, weekly, and more extended cleaning duties. Major cleaning projects* must be anticipated and budgeted accordingly.</p> <p>*Please Note: A documented list of scheduled major cleaning may be used as evidence for Item A-76.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Cleaning Schedule 	<p>A-75 A-76</p>
5.9	<p>Teachers' responsibilities should include cleaning spills and accidents when necessary to maintain a clean and healthy environment. This includes maintaining the general classroom area, bathrooms and dining areas. Mouthed toys are put aside and cleaned before being made available to other children.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Cleaning Schedule • Job Descriptions 	<p>A-73</p>
5.10	<p>The following weekly cleaning tasks are conducted to ensure a healthy and safe environment between major cleanings:</p> <ul style="list-style-type: none"> A) Cots, mats, and cribs are kept separate, notated for individual child's use, and cleaned and sanitized; B) Sheets and blankets are kept separate, notated for individual child's use, and washed; C) Non-mouthed toys are cleaned and sanitized. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Cleaning Schedule 	<p>A-74</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
5.11	The program must have a system in place to order needed repairs or replacement of equipment in a timely fashion.	Documentation may include: <ul style="list-style-type: none"> Facilities Maintenance Policy 	A-77
5.12	<p><u>Toxic Substances</u></p> <p>Any potentially toxic materials must be stored in labeled containers and used only in accordance with the manufacturer’s directions and specific purpose.</p> <p>Cleaning, sanitizing and disinfecting products are not used in close proximity to children, and adequate ventilation is maintained during any cleaning, sanitizing or disinfecting procedure to prevent children and teachers from inhaling potentially toxic fumes. When not in actual use, such materials must be kept in a place inaccessible to children and separate from stored medications and food.</p>	Observable items may include: <ul style="list-style-type: none"> Cleaning products are properly stored and never left in reach of children. 	B-30
5.13	All arts and crafts materials used in the program must be nontoxic. To prevent accidental poisoning, children and staff are not be permitted to eat or drink while using arts and crafts materials. Arts and crafts are used in well-ventilated areas.	Documentation may include: <ul style="list-style-type: none"> Health and Safety Policy 	A-72
5.14	All plants accessible to children must be labeled and identified by name with the local poison control center to determine safe use. Potentially harmful plants must always be inaccessible to children.	Documentation may include: <ul style="list-style-type: none"> Health and Safety Policy 	B-31
5.15	No paint containing lead in excess of 0.06 percent is used when surfaces are repaired or when any new surfaces accessible to children are painted. Proof of lead levels of paint are required for buildings made before 1978.	Documentation may include: <ul style="list-style-type: none"> Health and Safety Policy Lead paint testing for buildings made before 1978. 	B-23

#	NECPA Standard	Possible Evidence for Verification	SAI #
5.16	<p><u>Transportation and Bus Driver Qualifications</u></p> <p>Programs that provide daily or regular transportation for children must have the following in place:</p> <ul style="list-style-type: none"> A) Regularly scheduled maintenance of the vehicle(s) and a maintenance log for each vehicle; B) A policy and routine to protect children from being forgotten in vehicles, or being left unattended and unsupervised, both inside and outside of vehicles during times of entering or departing; C) A protocol that includes a final bus walkthrough by a lead teacher, bus driver, or bus monitor; D) Current liability and vehicle insurance; E) Transportation logs; F) The use of age appropriate restraint systems for all children, <i>(if available or required by the state)</i>; G) Adequate supervision for children being transported; H) Emergency information for each child available on each vehicle; I) A first aid kit properly equipped for each vehicle. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Transportation Policy including a final walkthrough policy. • Facilities Maintenance Policy • Job Descriptions 	<p>A-78</p> <p>A-79</p>
5.17	<p>Any driver who transports children for a child care program must be at least 21 years of age and meet the following criteria:</p> <ul style="list-style-type: none"> A) Possess a valid driver’s license OR commercial license (if required by the state) that authorizes them to operate the type of vehicle being driven; B) Has evidence of a safe driving record for more than five years; C) Has no medical condition that would compromise driving, supervision or evacuation capability and no use of alcohol or any prescription, nonprescription, or over the counter medications that may impair driving abilities; D) Completed all state background checks. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Job Descriptions 	<p>A-80</p>

Chapter 6: Teacher:Child Interactions and Care

#	NECPA Standard	Possible Evidence for Verification	SAI #
6.1	<p><u>Relationship Development</u></p> <p>To ensure continuity of care, the program limits the number of qualified teachers who care for any one child during a normal day.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Staffing Policy/Procedure • Staffing Schedule 	A-81
6.2	<p><u>Verbal Interaction</u></p> <p>Staff greet each child and parent/guardian. Teachers address each child by name and provide children one-on-one attention as much as possible.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers refer to each child by name and are often seen actively engaged with children one-on-one. 	B-32 B-33 B-34
6.3	<p>The teachers must be available and responsive to children, encourage them to share experiences, ideas and feelings, and listen to them with attention and respect. The interaction should be a back and forth communication where the teacher encourages and expands upon children’s verbal communication.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers are often seen listening and responding to children, encouraging communication. 	B-35
6.4	<p>Teachers speak to each child frequently, making eye contact and using clear, correct language patterns and affectionate, supportive words.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers use clear, supportive language when speaking with children. 	B-35
6.5	<p>Teachers make a concerted effort to understand what children are trying to communicate, assist them in expressing themselves and respond sensitively when children are frustrated, angry and/or afraid (i.e. when they are separating from their parents). Teachers welcome children who come for support with a reassuring and nurturing response. For children with special needs, alternative methods of communication should be used if necessary.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers listen carefully and respond sensitively to children seeking support. 	B-35

#	NECPA Standard	Possible Evidence for Verification	SAI #
6.6	Children are encouraged to express their feelings of affection, joy, delight, sadness, anger, and other emotional responses to everyday events.	Observable items may include: <ul style="list-style-type: none"> Teachers are often seen listening and responding to children, encouraging communication. 	B-35
6.7	Teachers encourage children to feel good about their individual and group accomplishments by using positive reinforcement. They focus on the children as individuals.	Observable items may include: <ul style="list-style-type: none"> Teachers encourage children by focusing on their individual and group accomplishments. 	B-35
6.8	<u>Interaction Relating to Meals and Snacks</u> A relaxed routine is established to make mealtimes pleasant.	Observable items may include: <ul style="list-style-type: none"> Transitions into and out of mealtimes is relaxed due to an established routine present in the classroom. 	B-36
6.9	Teachers sit with the children, including those in high chairs, during meals while modeling appropriate behavior and using mealtime as a learning experience.	Observable items may include: <ul style="list-style-type: none"> Teachers sit with children and engage with them during meals. 	B-37
6.10	Teachers use mealtime as a time to encourage language and discussion, talking with children about the taste, size, color, smell and texture of foods.	Observable items may include: <ul style="list-style-type: none"> Teachers introduce and revisit language and learning topics regarding food and/or nutrition. 	B-38
6.11	Food is prepared and served in a manner that is appropriate for the developmental level of the child and which prevents cross-contamination.	Observable items may include: <ul style="list-style-type: none"> Teachers ensure that food is appropriately portioned and prepared for the children in care. 	B-39

Chapter 7: Infant and Toddler Care

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.1	<p><u>Relationship Based Approach</u></p> <p>Each qualified teacher has primary responsibility for, and develops deeper attachment to, an identified group of infants/toddlers. Every attempt is made to have continuity of adults who work with children, particularly infants and toddlers.</p> <p>A primary teacher is assigned to each child under the age of two years. The program also limits the number of qualified teachers who interact with any one infant to no more than three teachers (not staff members) in a given day.*</p> <p><i>*Please Note: This standard does not include staff members who relieve teachers for lunch breaks. This standard is referencing the specific team of teachers for this classroom and infant in order to ensure continuity of care. Continuity of care is evident in both policy and teacher scheduling.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Posted Primary Teacher and Staffing Schedule 	<p>B-40</p> <p>B-41</p> <p>B-56</p>
7.2	<p>Infants are allowed to establish and maintain their own eating and sleeping patterns. The teacher records each infant's feeding, sleeping, and diapering/toileting activities daily. This information is made available to parents at the end of the day.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Infants' activities do not follow a set schedule. • Information on infants' activities is recorded throughout the day and provided to parents. 	<p>B-42</p>
7.3	<p>Infants and toddlers are encouraged to engage in social play and interaction with teachers during feeding, bathing, dressing, and other aspects of care.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers are seen engaging with infants in a variety of activities throughout the day. 	<p>B-58</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.4	Teachers provide warm and loving physical contact with infants in a variety of ways from soothing to stimulating, depending on the infant's readiness and needs.	Observable items may include: <ul style="list-style-type: none"> Teachers are seen holding and nurturing infants throughout the day. 	B-43
7.5	The teacher is responsive to the young child's initiatives to play, move, and use toys and materials.	Observable items may include: <ul style="list-style-type: none"> Teachers are seen engaging with infants in a variety of activities throughout the day. 	B-59
7.6	<p><u>Health Promotion and Safety Equipment</u></p> <p>To help maintain a healthy environment, the program requires that all persons remove their shoes, put on shoe covers, or put on slippers/booties that are only worn in that room prior to entering a play area used by non-mobile infants.</p>	Observable items may include: <ul style="list-style-type: none"> Slippers or shoe covers are readily available before entering this area. 	B-44
7.7	<p>In order to prevent food contamination, food preparation and feeding activities must be separate from diapering and toileting areas in all infant and toddler classrooms.</p> <p><i>Please Note: If only one sink is available in a classroom then it may be used for both handwashing and food preparation as long as the sink is sanitized before each instance of food preparation. This procedure must be posted at the sink.</i></p>	Observable items may include: <ul style="list-style-type: none"> Distinct areas throughout the classroom. 	B-60
7.8	Teachers working with young infants must use coverings, including a burping cloth or child's bib, that are changed daily or more frequently if they become soiled. Each covering is specific to one infant in order to help prevent the spread of germs.	Observable items may include: <ul style="list-style-type: none"> Teachers are seen using child specific coverings when caring for infants. 	B-45

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.9	<p>Cribs that are touching must be separated by a see-through barrier to help prevent the spread of germs.</p> <p><i>Please Note: This barrier must not restrict direct line of sight supervision, for example, the barrier may be Plexiglas affixed to or between the cribs.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Clear barriers between cribs. 	B-46
7.10	<p>The program must have special evacuation equipment or cribs for enrolled infants.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Evacuation cribs present in the infant classroom. 	B-47
7.11	<p><u>Restrictive Infant Equipment Requirements</u></p> <p>Young infants are held and carried frequently and their positions and locations changed.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers are often seen holding and nurturing infants. 	B-48
7.12	<p>The use of infant swings, exersaucers, infant seats, molded seats or any other confining equipment, if used, is limited to no longer than 15 minute time periods. Equipment is only used when infants are age and developmentally capable.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers ensure the use of restrictive equipment is limited to 15 minutes or less at a time. 	B-49
7.13	<p><u>Verbal Interaction</u></p> <p>Qualified teachers working with infants encourage babbling and the development of verbal and social skills by repeating and expanding on their limited verbal skills and by naming familiar objects, discussing routine activities and by imitating common sounds. The teacher talks to the infants describing what they are doing and what they feel, hear, touch, and see.</p> <p>Teachers working with infants/toddlers play interactive games, talk, read and provide access to a variety of books, and sing to the children.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers are often seen engaged with infants in language development throughout the day in an informal manner. 	B-61

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.14	Teachers assist toddlers in learning the names of common objects and talk about their experiences and observations as they happen or soon thereafter.	<p>Observable items may include:</p> <ul style="list-style-type: none"> Teachers are often seen engaged with toddlers in language development throughout the day in an informal manner. 	B-61
7.15	<p><u>Diaper Changing Area/Toileting Area</u></p> <p>Teachers check infants and toddlers diapers/pull-ups on a regular basis and change wet or soiled diapers/pull-ups/clothing immediately.</p> <p>Teachers use diapering and toileting as a time to talk with and relate warmly to children.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Teachers talk warmly with infants and toddlers during diapering and toileting. 	B-62 B-66
7.16	<p>Changing tables must consist of impervious, nonabsorbent surfaces. Tables are sturdy and the appropriate adult height.</p> <p>Teachers ensure that children are protected from falling during the diapering procedure.*</p> <p>A closable, foot-pedal operated, or motor sensor operated, plastic-lined trash receptacle must be provided in every diaper/pull up changing area for contaminated diapers and wipes. This receptacle must be functionally operational and require no hand contact for disposal.</p> <p><i>*Please Note: The use of clips/belts on the changing table is prohibited.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Diapering tables are the appropriate height and consists of nonabsorbent material. Teachers never leave a child unattended on the diaper changing table. Trash cans are hands-free and in proper working order. 	B-63
7.17	The program must use either disposable diapers, or a recognized diaper service, or require that parents provide a sufficient daily diaper supply.	<p>Observable items may include:</p> <ul style="list-style-type: none"> Teachers have a ready supply of diapers for children in care. 	B-63

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.18	<p>A chart or policy showing proper diapering procedures must be posted at each changing table and in each toilet where toilet training is occurring. Teachers follow this procedure and ensure standard precautions are practiced at all times.</p> <p>To prevent the spread of germs, teachers should wear disposable gloves when changing diapers. New gloves must be used with each diaper change.</p> <p>Changing tables must be properly cleaned then sanitized/disinfected following the manufacturer’s instructions for cleaning the nonabsorbent changing surface.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Diapering procedures are posted at each changing table. • Teachers follow the posted procedures. 	B-63
7.19	<p>Handwashing sinks with liquid soap dispensers/bottles are provided and accessible to each changing table/toileting area. Handwashing sinks are located in the same room/area as the diaper changing table, optimally within arms-reach, to prevent the spread of contaminants and disease.</p> <p>One designated handwashing sink should be conveniently accessible for every two changing tables. To decrease the spread of germs, in infant and toddler classrooms, designated sinks and changing tables should be used only by the children and adults assigned to that classroom.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Handwashing sinks are located near diaper changing tables to prevent the spread of germs. 	B-64
7.20	<p>If the program accepts cloth diapers, the diaper must have an absorbent inner liner as well as an outer cover that is waterproof.</p> <p>A formal proper disposal/procedure for handling contaminated cloth diapers must be in place and conform to current state regulations and requirements. All teachers and staff who may change the cloth diapered child must be trained in the protocol.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Cloth Diapering Policy and Procedure 	A-82 A-83

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.21	<p>When toddlers are ready for toilet training, the teacher: coordinates a toilet training plan with the child’s parent/guardian; ensures supplies (toilet paper, soap, and paper towels) are available to the child; monitors the bathroom to ensure appropriate toilet hygiene occurs, including flushing toilets and making sure that toilet seats and floors are clean; and ensures that proper handwashing occurs after toilet use.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Teachers assist toddlers in toileting and ensure that the toileting area is clean. 	B-67
7.22	<p>Toileting areas in infant and toddler rooms must have barriers to prevent children from entering this space unattended.</p> <p><i>Please Note: This barrier does not have to be a permanent structure. A baby gate or modular structure is sufficient evidence for this standard.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Barriers are present in these areas. 	B-68
7.23	<p><u>Supervision</u></p> <p>Teachers must supervise infants and toddlers by sight and sound at all times, including when children are asleep.</p> <p><i>Please Note: Children must be able to be seen and heard at all times by the teacher. For example, if the teacher is working one-on-one with a child, but is able to see all of the children by slightly moving their position, then this standard is met.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Infants and toddler are always within sight and sound of teachers. 	B-69
7.24	<p>If there is only one teacher in the classroom, the diaper changing area must be located so the teacher is able to provide constant sight and sound supervision of all of the children entrusted to their care.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Diaper changing tables are placed to ensure continuous sight and sound supervision. 	B-70

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.25	If dividers are used to separate one area from another, they must be low enough to provide for easy supervision of all infants/toddlers.	Observable items may include: <ul style="list-style-type: none"> • Dividers do not block teachers' sight supervision. 	B-71
7.26	<p><u>SIDS Prevention</u></p> <p>The program must develop and implement a written policy using current American Academy of Pediatrics' (AAP) Guidelines that defines the safe sleeping practices to be used when infants are napping or sleeping.</p> <p>To minimize the risk of Sudden Infant Death Syndrome, qualified teachers do not swaddle infants and always puts infants and toddlers to sleep on their back on cribs with a flat, firm mattress. Teachers also ensure the following items are never placed in the crib; blankets, pillows/boppies, bumpers, soft toys, pacifier attachments, and jewelry.</p> <p><i>Please Note: If there is a medical reason for any exceptions to the current safe sleep plan, a physician's note must be on file and documentation of a care plan must be present in the classroom.</i></p>	Documentation may include: <ul style="list-style-type: none"> • Safe Sleep Policy Observable items may include: <ul style="list-style-type: none"> • Teachers follow the safe sleep policy. 	A-84 B-51
7.27	Parents are required to remove infants from their car seat upon arrival at the program, even if the child is asleep.	Observable items may include: <ul style="list-style-type: none"> • Parents abide by the posted infant drop-off policy/procedure. 	B-50
7.28	<p><u>Infant and Toddler Feeding</u></p> <p>Small objects and foods which frequently cause choking must not be accessible to young children.</p>	Observable items may include: <ul style="list-style-type: none"> • Teachers ensure small objects are inaccessible to young children. 	B-73
7.29	Young infants are fed individually and held for bottle feedings.	Observable items may include: <ul style="list-style-type: none"> • Teachers hold young infants during feedings. 	B-52

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.30	Infant foods are never warmed in a microwave. Bottles for infants are warmed under warm tap water or placed in a container of water that may not exceed 120 degrees Fahrenheit.	Observable items may include: <ul style="list-style-type: none"> Teachers warm infant foods and bottles without using a microwave. 	B-53
7.31	Mobile infants and toddlers are offered finger foods when developmentally appropriate. Toddlers are encouraged to feed themselves. Teachers encourage older infants and toddlers to use appropriate child-sized cups and utensils.	Observable items may include: <ul style="list-style-type: none"> Teachers provide toddlers with developmentally appropriate foods and utensils. 	B-74 B-75
7.32	<p><u>Support for Breastfeeding</u></p> <p>The program supports breastfeeding by having a policy regarding breastfeeding at the facility and proper care for breast milk brought from home.</p> <p>The program provides accommodations for mothers who choose to breastfeed and/or pump at the program.* Teachers must receive appropriate training on the proper handling, storing, and serving of breast milk.</p> <p><i>*Please Note: This may include a designated area or the use of the staff lounge, an empty room or office, or a curtained off area with seating within the classroom.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> Breastfeeding Support Policy Staff Training Certificates <p>Observable items may include:</p> <ul style="list-style-type: none"> The program provides space for requesting mothers to breastfeed and/or pump. 	A-85 A-86 B-77
7.33	<p><u>Use of Pacifiers</u></p> <p>If pacifiers are used, they must be cleaned before and after each use; be free of fluid before being given to the child; closely monitored to prevent shared use; and be free from strings or attachments.</p>	Observable items may include: <ul style="list-style-type: none"> Teachers monitor pacifier use and clean pacifiers as needed. 	B-78
7.34	<p><u>Space and Activity to Support Learning of Infants and Toddlers</u></p> <p>Infants are given ample opportunities for tummy time, and to crawl, explore, and walk as they develop, both independently and teacher supported.</p>	Observable items may include: <ul style="list-style-type: none"> Teachers engage infants and toddlers in varying activities throughout the day. 	B-54

#	NECPA Standard	Possible Evidence for Verification	SAI #
7.35	Infants and toddlers are also given opportunities to develop small muscles through activities and materials which they are able to grasp, drop, pull, push, throw, finger and mouth.	Observable items may include: <ul style="list-style-type: none"> Teachers engage infants and toddlers in varying small muscle development opportunities throughout the day. 	B-55
7.36	Teachers foster cognitive learning by providing opportunities and materials to encourage infants/toddlers to discover how they can make things happen and to solve simple problems.	Observable items may include: <ul style="list-style-type: none"> Teachers engage infants and toddlers in varying activities throughout the day. 	B-79
7.37	Teachers respect the toddler’s right to say “no” or not participate, understanding the normal developmental stages of young children.	Observable items may include: <ul style="list-style-type: none"> Teachers adjust the activities to the mood of the children in care. 	B-80
7.38	<u>Encouragement of Self Help Skills in Older Infants and Toddlers</u> Teachers provide physical assistance, support and encouragement for mobile infants and toddlers when walking, climbing, descending stairs, and performing other gross motor movements.	Observable items may include: <ul style="list-style-type: none"> Teachers engage infants and toddlers in varying gross motor development opportunities throughout the day. 	B-81
7.39	Teachers working with toddlers encourage self-help skills when eating, getting dressed, using toys and equipment, and cleaning up.	Observable items may include: <ul style="list-style-type: none"> Teachers engage toddlers in varying self-help opportunities throughout the day. 	B-82
7.40	Teachers encourage toddlers to follow good health practices by instructing them on how to wash their hands at the proper times and preventing the children from sharing feeding utensils, facial tissues, and other personal items.	Observable items may include: <ul style="list-style-type: none"> Teachers engage toddlers in good health practices throughout the day. 	B-83

Chapter 8: Curriculum

#	NECPA Standard	Possible Evidence for Verification	SAI #
8.1	<p><u>Program Philosophy</u></p> <p>The program must have a well-articulated, written statement of its mission, philosophy, principles, and goals for children.</p> <p>This information is used to shape the program and curriculum and is included in the staff handbook, parent handbook, and orientation materials.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Written statement of mission, philosophy, principles and goals for children in care. 	A-87
8.2	<p><u>Curriculum Plans</u></p> <p>The program must have a written comprehensive, coordinated, and planned curriculum based on the program’s philosophy, principles, goals for children’s development, that if applicable, aligns with state guidelines or principles.</p> <p>The curriculum plans must be based on developmentally appropriate practices and be modified based on; assessment of children’s individual needs and interests; ages of children; special needs of children; and the social, emotional, cognitive, physical and language development of individual children. Plans must also be developed with input from teachers; family needs, traditions and language; children’s progress reports; and be culturally sensitive.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Curriculum plan or policy that outlines the incorporation of the required practices and input. 	A-88 A-91
8.3	<p>Written curriculum plans provide a common understanding between the program, teachers, and parents/guardians.</p> <p>The daily schedule and routine are based off the curriculum plan to ensure they meet the developmentally appropriate learning goals for each child. The daily schedule allows for children to revisit experiences/concepts over time.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Curriculum plan or policy that outlines the incorporation of the required practices and input. 	A-92

#	NECPA Standard	Possible Evidence for Verification	SAI #
8.4	<p><u>Annual Review of Curriculum</u></p> <p>The curriculum plan and developmental program must be reviewed annually by administration, teachers, staff, and parents to be sure the plan is meeting the needs of every child.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Annual Program Review Policy and Procedure 	A-89
8.5	<p>Results of this review must be used to modify the program or curriculum plan, if necessary, which include specific, executable goals for the program.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Annual Program Review Policy and Procedure 	A-89
8.6	<p><u>Lesson Plans</u></p> <p>Teachers are required to develop written lesson plans for both indoor and outdoor activities and these are reviewed weekly by the director or education coordinator.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Lesson plans and review process. 	A-93 A-94
8.7	<p><u>Promoting Physical Activity</u></p> <p>The program has written outdoor play policies that include: addressing the benefits of physical activity; outlining the duration of required physical activity; and specifying the clothing requirements of children.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Physical Activity Policy 	A-95 A-96
8.8	<p><u>Curriculum for Children with Special Needs</u></p> <p>Wherever possible, children with special needs must be included in all classroom activities and opportunities. The program must have a philosophy and practice of inclusion.</p> <p><i>Please Note: NECPA defers to the Individuals with Disabilities Education Act (IDEA) and the U.S. Department of Education's Office for Civil Rights (OCR) to define children with special needs.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Policy regarding inclusion of children with special needs. 	A-99

#	NECPA Standard	Possible Evidence for Verification	SAI #
8.9	In addition, each child with special needs must have an individual program service plan and be professionally evaluated. Reviews of each child’s progress are done using a team concept. The program must have access to a referral system.	Documentation may include: <ul style="list-style-type: none"> • Policy regarding inclusion of children with special needs. • Information regarding local referral systems. 	A-97 A-98
8.10	<p><u>Ongoing Child Assessments</u></p> <p>Teachers must assess each child’s ongoing developmental progress with reliable and valid measures that they have been trained on. This assessment must align with the program’s curriculum goals.</p> <p>The tool(s) must assess and monitor children’s ongoing development (including sensory, cognitive, gross motor, fine motor, socio-emotional, and language), through observation and documentation of children’s work, play, behaviors, and interactions.</p>	Documentation may include: <ul style="list-style-type: none"> • Example Assessment • Screening and Assessment Policy 	A-100 A-101 A-102
8.11	The program takes into account families’ needs, traditions and language when choosing, evaluating and communicating child assessments, to ensure they will best meet each child’s developmental goals. This written assessment is used in teacher/parent conferences to keep parents abreast of their child’s milestones and to plan for future learning opportunities for the child.	Documentation may include: <ul style="list-style-type: none"> • Example Assessment • Screening and Assessment Policy 	A-103
8.12	Parents/guardians are encouraged to participate in and share their at-home observations. This information is used to influence children’s ongoing assessments at the program. Parents are encouraged to meet with teachers as needed through formal and informal meetings.	Documentation may include: <ul style="list-style-type: none"> • Example Assessment • Screening and Assessment Policy 	A-104

Chapter 9: Developmental Program

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.1	<p><u>Individual Classroom Layout, Arrangement of Equipment and Furnishings</u></p> <p>Separate indoor areas/classrooms are provided to meet the developmental needs of different age groups enrolled at the program.</p> <p>In each area/classroom there are separate areas to provide a variety of experiences and learning opportunities. Materials with similar use are placed together to make interest areas which are developmentally appropriate. Interest areas/learning centers are organized, accessible and inviting to children. The areas are set up so that traffic patterns do not interfere with activities and children have ample space to maneuver, work and play.</p> <p>Children’s work is displayed in the appropriate activity area at children’s eye-level. Quiet and active play areas are in separate areas of the room.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Children are separated by age group into different areas/classrooms. • The classroom is arranged to allow for children to work/play in unique learning areas/centers. Active and quiet areas are separate. • Children’s work is displayed throughout the program at the children’s eye-level. 	<p>B-84 B-85 B-86</p>
9.2	<p>Furniture, equipment and any dividers used to create areas are intentionally placed to prevent unintentional injuries and are low enough to ensure proper supervision of all areas.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Dividers do not block teachers’ sight supervision. 	B-87
9.3	<p>The room arrangement creates a warm, nurturing, comfortable atmosphere for children by using home-type furnishings, displaying photographs of the children and their families at child’s eye level, and by providing each child with a personal storage area and personalizing/labeling each child’s nap/rest materials.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Pictures of children’s families is displayed at children’s eye level. • Children’s personal items are kept in a labeled storage area and each child’s nap/rest materials are labeled. 	<p>B-85 B-88</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.4	Room arrangement provides separate areas for children to read or engage in individualized developmentally appropriate learning activities. These areas are made comfortable with the use of soft furniture, pillows, rugs and/or carpeting.	Observable items may include: <ul style="list-style-type: none"> Children are provided time to read or play independently in a comfortable area. 	B-89
9.5	<p><u>Daily Schedule/Routine</u></p> <p>Teachers foster the children’s sense of trust and confidence by developing a consistent daily routine which the children can rely on. Simple, consistent patterns are followed in transitioning from one activity to the next.</p> <p>Routines, activities, and materials are adjusted to the mood and energy changes for groups and individual children.</p>	Observable items may include: <ul style="list-style-type: none"> Teachers utilize the set routine but allow for flexibility depending on the children’s mood/energy. Children successfully transition from one activity to another. 	B-90 B-91 B-92
9.6	Children are encouraged to assist in maintaining their classrooms by giving them opportunities to engage in self-help activities that promote competency and mastery. The routine includes tasks for which the children themselves take responsibility, according to their ability, in order to encourage children’s sense of self-reliance.	Observable items may include: <ul style="list-style-type: none"> Teachers encourage children to assist in cleaning up after activity selection and serving themselves meals/snacks when developmentally appropriate. 	B-94
9.7	<p><u>Developmentally Appropriate Materials</u></p> <p>The program must provide developmentally appropriate materials of sufficient quantity and variety that are readily accessible to children. These materials are used to promote children’s exploration, experimentation and discovery.</p>	Observable items may include: <ul style="list-style-type: none"> Materials are of sufficient quantity and variety to engage all ages of children in work/play. 	B-95
9.8	Materials reflect diversity in gender, age, language, ability, culture and ethnicity.	Observable items may include: <ul style="list-style-type: none"> Materials are diverse throughout the program. 	B-96

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.9	Teachers ensure that toys, equipment, and other materials which are safe for older groups are not accessible to younger groups unless under close supervision.	Observable items may include: <ul style="list-style-type: none"> • Young children are restricted access to toys and equipment that is not age-appropriate. 	B-97
9.10	Classroom decorations are changed on a regular basis and are seasonally appropriate.	Observable items may include: <ul style="list-style-type: none"> • Classroom decorations are up to date throughout the program. 	B-98
9.11	<p><u>Developmental Program and Curriculum Units</u></p> <p>The program provides developmentally appropriate opportunities for children to build an understanding of mathematics and numbers through: naming and recognizing different shapes and patterns; counting objects and materials; recognizing quantity and number symbols; using measurements and sorting; and integrating mathematical terms and concepts, including time, into everyday use.</p>	Documentation may include: <ul style="list-style-type: none"> • The program provides children with opportunities to build an understanding of mathematics and numbers through the varying required means. This is evident through the program’s curriculum choices, lesson plans, and activities. 	A-106
9.12	The program provides developmentally appropriate opportunities for children to build an understanding of science and nature through: introducing, exploring and discussing varying scientific concepts and principles, including cause and effect; using the senses and simple tools to observe scientific features; collecting and documenting materials; and integrating scientific terms and concepts into everyday use.	Documentation may include: <ul style="list-style-type: none"> • The program provides children with opportunities to build an understanding of science and nature through the varying required means. This is evident through the program’s curriculum choices, lesson plans, and activities. 	A-107 A-108

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.13	<p>The program provides developmentally appropriate opportunities for children to build an understanding of technology.</p> <p><i>Please Note: Although not prohibited, this standard is not assessed for children under the age of three. Technology may include computers, tablets, listening centers and other forms of high technology and/or gears or wheels and other forms of age appropriate simple tools.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> The program provides children with opportunities to build an understanding of technology through the varying required means. This is evident though the program’s curriculum choices, lesson plans, and activities. 	<p>A-109 A-110</p>
9.14	<p>The program provides developmentally appropriate opportunities for children to build an understanding and appreciation of culturally diverse art, music, drama, and dance through: encouraging and engaging in creative expression and play; expanding artistic skills by manipulating age appropriate materials and child-sized tools; reviewing personal art and others art; and integrating artistic terms into everyday use.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> The program provides children with opportunities to build an understanding and appreciation of art, music, drama, and dance through the varying required means. This is evident though the program’s curriculum choices, lesson plans, and activities. 	<p>A-111</p>
9.15	<p>The program provides developmentally appropriate opportunities for children to build an understanding of social studies through: participating in group and community activities (including interactions with children of various ages); exploring diversity in non-stereotypical cultures, family structures, abilities, language, ages and genders; discussing fairness, friendship, responsibility, authority and differences; reviewing local geography and the varying communities at large; exploring positive and negative environmental effects; contributing to the well-being of the classroom and community; engaging in economic concepts (for children ages three and above); and connecting personal experiences to broader world concepts.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> The program provides children with opportunities to build an understanding of social studies through the varying required means. This is evident though the program’s curriculum choices, lesson plans, and activities. 	<p>A-112</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.16	The curriculum plan must also include units on nutrition, health, and safety.	Documentation may include: <ul style="list-style-type: none"> The program provides children with opportunities to build an understanding nutrition, health, and safety. This is evident though the program’s curriculum choices, lesson plans, and activities. 	A-105
9.17	<u>Developmentally Appropriate Learning</u> Teachers encourage children to engage in meaningful play and extend their learning.	Observable items may include: <ul style="list-style-type: none"> Teachers are seen engaging with children during play throughout the day. An example of extending children’s learning may be teacher scaffolding. 	B-99
9.18	Teachers encourage children to think, reason, question, and experiment by asking them questions and posing problems, regarding their experiences and play.	Observable items may include: <ul style="list-style-type: none"> Teachers are seen discussing with children their work/play and experiences throughout the day. 	B-100
9.19	Teachers expand on children’s emerging skills by repeatedly engaging them in activities of interest.	Observable items may include: <ul style="list-style-type: none"> Teachers engage with children during children’s work/play. 	B-101
9.20	Teachers must engage toddlers and preschoolers with at least the following age-appropriate learning centers: table top games, dramatic play, arts and crafts, large muscle, science and nature, blocks, fine motor, math and numbers, language arts, music/movement, nutrition, and woodworking (preschoolers and school age only*).	Observable items may include: <ul style="list-style-type: none"> The classroom is arranged to allow for children to work/play in unique learning areas/centers. Active and quiet areas are separate. 	B-102

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p><i>* Please Note: Woodworking/Carpentry is defined as using or manipulating real wooden pieces, which can be cut, glued, and/or nailed in a developmentally appropriate manner. Any tools provided must be child-sized and age-appropriate. The use of blocks from the Block Area will not meet the requirements for this standard. Proper supervision and instruction are vital for successful implementation of the Woodworking/Carpentry Area.</i></p>		
9.21	<p>When using sensory tables, all materials must be age-appropriate, nontoxic, and not pose a choking hazard.* Use of the sensory tables is closely supervised, ensuring safe conditions are met and play materials are clean.</p> <p><i>*Please Note: Although not prohibited, the use of food for sensory play must be closely supervised to prevent consumption and be culturally sensitive to the children in care.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers carefully supervise activities at the sensory table to ensure safety conditions are met and to engage children in their work/play. • Food items are not used in the sensory table. 	B-103
9.22	<p>Children are regularly provided with opportunities for creative, and possibly messy activities such as water play, sand play, finger painting, and playdough. Children also have access to developmentally appropriate unstructured materials, including blocks and representational toys.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The classroom is arranged to allow for children to work/play in unique learning areas/centers including messy play and unstructured materials. 	B-104 B-105
9.23	<p><u>Promoting Child-Choice</u></p> <p>The environment is designed to promote child-choice and independence. Toys and materials are placed on low, open shelves and children are encouraged to explore materials in their own ways.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The classroom is arranged to allow for children to work/play in learning areas/centers of their choice. 	B-106

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.24	Teachers encourage the children to offer their own suggestions for activity selections throughout the day. Teachers give children time and space for extended and concentrated play by reducing distractions and interruptions.	Observable items may include: <ul style="list-style-type: none"> • The classroom is arranged to allow for children to work/play in learning areas/centers of their choice. • Teachers provide children ample time to work/play independently in learning areas/centers of their choice. 	B-107
9.25	<u>Promoting Pro-Social Skills, Positive Relationships and Self-Awareness</u> Teachers encourage children to develop pro-social skills by developing relationships, learning to help others, working cooperatively with others, and learning from and with one another	Observable items may include: <ul style="list-style-type: none"> • Teachers encourage children to work well with others throughout the day. 	B-108
9.26	Teachers must foster positive relationships between children by helping them to listen and appropriately respond to one another.	Observable items may include: <ul style="list-style-type: none"> • Teachers encourage children to work well with others throughout the day. 	B-109
9.27	Teachers support a child's developing awareness of self by using mirrors, photographs, and other appropriate materials for promoting self-concept.	Observable items may include: <ul style="list-style-type: none"> • Teachers provide children opportunities to develop their sense of self through the varying means as noted. 	B-110

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.28	<p><u>Language and Pre-Writing Development</u></p> <p>Children are given daily opportunities to write, which may include scribbling, drawing, and practicing letters and numerals. Reading and purposeful writing opportunities are available daily and children are provided support and assistance when reading and writing.</p> <p>Meaningful print is used throughout the classroom at children’s eye-level. Teachers provide opportunities for children to familiarize and recognize print through the use of classroom and personalized labels as well as posted schedules/routines and procedures. Teachers also discuss and model functional writing with children.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The classroom is arranged to provide children a variety of opportunities for print and language development. 	<p>B-111 B-112 B-113</p>
9.29	<p>Children’s language development is encouraged through a variety of songs, stories, books and games, including those that are multicultural and diverse.</p> <p>Children are provided opportunities to expand their language development through follow up regarding their experiences and field trips, including walks.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers provide children a variety of opportunities for language development. 	<p>B-114</p>
9.30	<p>Teachers expand children’s print and language development daily by reading books to them individually or in a group setting. Children are provided opportunities to interact with the story and ask questions.</p> <p>Teachers read books that align with the goals and aspects of the curriculum.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Teachers provide children daily opportunities for print and language development by reading to them. 	<p>B-115 B-116 B-117</p>
9.31	<p>The program has a policy and practice of incorporating the family language whenever possible, into a child’s opportunities for language acquisition and communication development, if a child speaks a different language.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Language Development Policy 	<p>A-113</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
9.32	<p><u>Active Physical Play and Development</u></p> <p>Teachers encourage, promote and engage children in active physical play.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Teachers are seen engaging with children’s active physical play. 	<p>B-118 B-119</p>
9.33	<p>Teachers provide appropriate large-muscle activities for each child and the opportunity for the development of eye-hand and eye-foot coordination.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> Teachers provide children daily opportunities for gross-motor development. 	<p>B-120 B-121</p>
9.34	<p><u>Use of Television and Other Electronic Technology</u></p> <p>Television, computers, and other electronics are limited to 30 minutes per week for educational materials/activities that are suitable to the developmental level of the child. If children watch television or movies and use computers or other technological media, the teacher is with the children, asking questions and initiating conversations that will encourage children to think, reason, question, and experiment.</p> <p>If a television is present, it must be anchored or mounted to prevent tipping over.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> If technology is used it is only used for educational programs. Teachers are seen engaging with children during their use of technology. 	<p>A-110 B-124</p>

Chapter 10: Outdoor Play Area

Please Note: If the program does not have a dedicated or on-site playground/outdoor play space, the program is required to select N/A for Verifications Items B-125 through B-127 AND complete Section 10(B) of the NECPA Self Assessment Instrument.

#	NECPA Standard	Possible Evidence for Verification	SAI #
10.1	<p><u>Outdoor Play Materials and Activities</u></p> <p>Weather permitting,* the program provides all children, including infants, with daily outdoor opportunities for gross motor/large muscle development. Outdoor activities are both teacher-directed and child-directed. The outdoor play area must include age appropriate materials for the children served.</p> <p><i>*Please Note: The National Weather Service (NWS) identifies the following weather conditions as posing a significant health risk, wind chill factor at or below minus 15°F and heat index at or above 90°</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Children have daily opportunities for outdoor gross motor development. • Outdoor activities are both child and teacher directed. 	B-136
10.2	<p><u>Equipment, Enclosures, Coverings, and Surfacing of Outdoor Play Areas</u></p> <p>The facility should provide an outdoor play area that is adjacent to the interior classrooms OR can be safely accessed.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The outdoor play area is easily accessible from the program. 	B-126
10.3	<p>The program has adequate space for outdoor play, specifies outdoor play times by age group and limits the number of children from the program allowed on the outdoor play space at any one time.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • The program limits the number of children who the outdoor play area at any one time. 	B-131
10.4	<p>Outdoor play equipment must be of safe design and in good repair. The space also includes open space for running that is free of other equipment.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Equipment is in good repair. • Children are able to run and play without obstacles. 	B-126

#	NECPA Standard	Possible Evidence for Verification	SAI #
10.5	The surface under any playground equipment needing fall zones must extend at least 6 feet beyond the perimeter of any playground equipment and must be made of appropriate, non-abrasive, cushioning materials as recommended by the Consumer Product Safety Commission and ASTM International Standards. If fall zones are surfaced with ‘loose-fill’ materials, (ex: wood mulch or chips, fine loose sand, pea gravel, or shredded tires), it must meet an initial fill of 12 inches and/or a compressed/settled fill of 9 inches.	Resource: <ul style="list-style-type: none"> Guidelines for fall zones and additional examples of recommended playground surfacing materials may be found in <u>Resource Section 3</u>. 	B-126 B-127
10.6	The program provides children access to clean drinking water while outside.	Observable items may include: <ul style="list-style-type: none"> The program must provide children access to water when outside. 	B-133
10.7	The program posts written playground safety rules.	Observable items may include: <ul style="list-style-type: none"> If the program provides and on-site play area, it must post its outdoor safety rules. 	B-134
10.8	Each child has at least one change of clothing that is weather appropriate for daily outdoor play.	Observable items may include: <ul style="list-style-type: none"> The program must require parents to provide an extra change of clothing kept at the facility for the child. 	B-137
10.9	<u>Maintenance of Playgrounds and Outdoor Play Areas</u> All outdoor activity areas must be maintained in a clean and safe condition. The general playground surfaces is checked daily for broken glass, nails, trash, and animal excrement. Holes or abandoned wells within the site must be properly filled or sealed. The area is well drained with no standing water.	Observable items may include: <ul style="list-style-type: none"> The program ensures that the outdoor play area is free of hazards. 	A-115 B-126

#	NECPA Standard	Possible Evidence for Verification	SAI #
10.10	<p>The playground inspection log must be maintained at all times to reflect daily playground inspections for the following:</p> <ul style="list-style-type: none"> A) Visible cracks, bending or warping, rusting, or breakage of any equipment; B) Deformation of open hooks, shackles, rings, links, and so forth; C) Worn swing hangers and chains; D) Missing, damaged, or loose swing seats; E) Broken supports or anchors; F) Cement support footings that are exposed, cracked, or loose in the ground; G) Accessible sharp edges or points; H) Exposed ends of tubing that require covering with plugs or caps; I) Protruding bolt ends that have lost caps or covers; J) Loose bolts, nuts, and so forth that require tightening; K) Nails that have worked loose; L) Splintered, cracked, or otherwise deteriorating wood; M) Lack of lubrication on moving parts; N) Worn bearings or other mechanical parts; O) Broken or missing rails, steps, rungs, or seats; P) Worn or scattered surfacing material; Q) Hard surfaces, especially under swings, slides, and so forth (e.g., places where resilient material has shifted away from any surface underneath play equipment); R) Chipped or peeling paint; S) Pinch or crush points, exposed mechanisms, juncture, and moving components. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Daily Playground Inspection Log <p>Observable items may include:</p> <ul style="list-style-type: none"> • The program ensures that the outdoor play equipment is free of hazards. 	<p>A-114 A-115 B-135</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
10.11	<p><u>Enclosures for Outdoor Play Areas</u></p> <p>The outdoor play area is enclosed with a fence or natural barriers. Fences and barriers must not prevent the teachers' direct supervision of children.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> The program ensures that the outdoor play area is enclosed in a manner that does not block teachers' supervision. 	B-126
10.12	<p>Teachers ensure continuous sight and sound supervision when on the outdoor play space through:</p> <ul style="list-style-type: none"> A) Viewing the entire outdoor play space; B) Being responsible for a group of children; C) Being responsible for a specific area of the play space. <p><i>Please Note: Children must be able to be seen and heard at all times by the teacher. For example, if the teacher is working one-on-one with a child, but is able to see all of the children by slightly moving their position, then this standard is met.</i></p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> The program ensures that the outdoor play area enables teachers' continuous sight and supervision. 	B-132

Chapter 11: Staff-Family-Community Partnerships

#	NECPA Standard	Possible Evidence for Verification	SAI #
11.1	<p><u>Program Information to Parents/Guardians</u></p> <p>Information about the program is given to prospective families.</p> <p>New parents/guardians are oriented and informed in writing about the program, curriculum, child abuse reporting requirements, conflict resolution policy, parent activity opportunities, community social services, policy or regulatory changes, termination procedures, process for orienting a child to the program, open door policy, daily communication policy between parents and staff, parent conferences, and other critical issues that could potentially affect the program.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Parent Orientation Policy/Procedure • The program has an orientation process for new parents which includes a review of the policies in the parent handbook. 	<p>A-116</p> <p>A-117</p> <p>A-118</p>
11.2	<p>The program must offer a parent display/bulletin board which covers, at a minimum, program description, policy statements, philosophy, schedules, health care services and menus.</p> <p>Parents are given information regarding social services within the community including health care services, assistance with basic and emergency family needs, and tuition payment alternatives.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Parent Handbook <p>Observable items may include:</p> <ul style="list-style-type: none"> • The program offers parents a resource center or bulletin board with relevant policies and local social services. 	<p>A-118</p> <p>A-119</p> <p>B-138</p>
11.3	<p><u>Parent/Guardian Center and Program Involvement</u></p> <p>Parents are welcome visitors in the program at all times. Parents and other family members are encouraged to be involved in the program in various ways, taking into consideration other demands on the parents.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Open Door/Parent Involvement Policy 	<p>A-120</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
11.4	<p>Parents/guardians are invited to share their culture and traditions, their skills, and talents.</p> <p>Parent/guardians are encouraged to provide information about their culture and family traditions during the enrollment period and throughout their child's care at the program</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Parent Orientation Policy/Procedure • Open Door Policy 	A-121
11.5	<p>Teachers are encouraged to speak to each child's parents/guardians on a regular basis in order to briefly discuss the child's day and to report any unusual occurrence or special success.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Parent Communication Policy/Procedure 	A-122
11.6	<p><u>Parent/Guardian-Teacher Conferences</u></p> <p>Parent/guardian-teacher conferences are held at least twice a year and at other times as needed, to discuss individual children's needs, progress/assessment, and accomplishments. Records of these conferences are kept, documenting discussions of the child's development, health and any referrals made.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Parent Communication Policy/Procedure • Screening and Assessment Policy 	A-123
11.7	<p><u>Parent/Guardian Education</u></p> <p>The program provides parent education opportunities which are culturally sensitive and inclusive, and whenever possible, provided in the primary language of the families being served.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Parent Education Policy/Procedure 	A-125
11.8	<p><u>Transitioning Children from Program</u></p> <p>The program has a procedure for transitioning children to another program, elementary school, or classroom within the program. This process includes reviewing children's specific needs, a family needs assessment, and a</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Transition Policy/Procedure 	A-126

#	NECPA Standard	Possible Evidence for Verification	SAI #
	mechanism to share the summary of information to support the child's transition to another classroom or program. An informed consent form must be signed by the parent that identifies specifically what information will be shared.		
11.9	<p><u>Confidentiality of Records</u></p> <p>Information about children and families is held in strict confidence by the teachers and program staff. The teachers and staff must not discuss children or their families with one another except in private when necessary to plan for the best interest of the child.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Confidentiality Policy/Procedure 	A-139
11.10	<p><u>Community Outreach</u></p> <p>The program has a written process for reaching out to the community to make it aware of the program and its needs and services.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Community Outreach Policy/Procedure 	A-127

Chapter 12: Health and Safety

#	NECPA Standard	Possible Evidence for Verification	SAI #
12.1	<p><u>Evacuation Plan and Drills</u></p> <p>The program must have a written plan for reporting and evacuating in case of natural disasters that could create structural damage to the program or pose health hazards. The program must also have written plans for situations that may require evacuation, lockdown, and shelter in place.</p> <p>The program also includes procedures for staff training on these emergency plans.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure 	A-128
12.2	<p>Evacuation drills are practiced in accordance with the natural disasters most likely to occur near the program. At a minimum, the program must conduct monthly fire drills and record them in a log/record. Drills encompass all periods of time, morning to evening, when the program is open.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure • Fire Drill Log 	A-133 A-134
12.3	<p>The program has an emergency exit plan showing escape routes from each area/room. The number for poison control is posted in each area/room where it can be easily accessed during an emergency.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • Posted emergency exit routes in each classroom/area. • Posted poison control number. 	B-139 B-140
12.4	<p><u>Emergency Plans</u></p> <p>The program must have a written plan for reporting and managing any incident of unusual occurrence that is threatening to the health, safety, or welfare of the children or staff.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure 	A-130

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>The Emergency/Disaster Plan must include:</p> <ul style="list-style-type: none"> A) Knowledge of potential regional disaster situations that may impact the program and will need future planning and preparedness; B) Identification and contact information for the agencies that are the first point of contact in the event of emergency or disaster. These would include agencies that are knowledgeable of child care regulations, and that will provide guidance in these crisis situations. C) Program based, routinely scheduled emergency drills that occur with participation of community emergency preparedness exercises (such as, tornado drills accompanied by community air raid sirens); D) Joint planning that occurs with community partners, such as the Red Cross, local hospitals and physicians, the emergency management agency, first responders and emergency personnel, and others that will provide services during crisis situation; E) Communication strategies to be implemented during times of emergency and disaster, such website and email notifications, the use of texts and text alerts, or posting of information either at the facility or some other location; F) A system of communicating with emergency management personnel (such as, alternatives to cell phones if service is unavailable); G) Emergency management plans and practices that include responding to an intruder or threat, handling shelter in place situations, evacuation procedures, and arranging for any special health care needs of children in care; H) Identification and arrangement of a primary and secondary meeting location for parents/guardians to pick up their children; 		

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>I) Organizational continuity plans that address how the program will continue to operate in time of crisis or emergency. This includes making sure that all records are backed up and able to be accessed if needed. There should also be plans for how the program will continue to pay their bills, including paying staff;</p> <p>J) Plans should be developed for a variety of emergencies and scenarios, and should make provisions for inclusion of the following:</p> <ol style="list-style-type: none"> 1) Ensuring each child’s emergency contact information is readily available 2) A plan for caring for children until their parents/guardians are able to reach them; 3) Provisions for emergency food/water/supplies that may be needed by children and staff in the event of shelter in place or some other emergency. 4) Plans for medication administrations that are identified in children’s medical plans; 5) Protocols that should be implemented in case of an infectious disease outbreak; 6) Protocols that should be followed if a disaster or emergency occurs during a field trip or other times when the children are away from the facility; and 7) Clearly defined staff roles, responsibilities and tasks during varying emergencies. 		
12.5	<p>Details in the Emergency/Disaster Plan must be reviewed and updated bi-annually and immediately after any relevant event to incorporate any best practices into the document.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure 	A-131

#	NECPA Standard	Possible Evidence for Verification	SAI #
12.6	<p>One person is designated as responsible for safeguarding emergency contact information on each child and for taking charge in the event of an emergency. A second person is designated in writing if the primary person is absent.</p> <p><i>Please Note: Emergency contact information is easily accessible to staff, meaning the information is unlocked, labeled, and accessible in less than 60 seconds.</i></p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure 	<p>A-128 B-141</p>
12.7	<p><u>Urgent Medical Care or Threatening Incidents Plans</u></p> <p>The program must have a written plan for reporting and managing what they identify as an incident or unusual occurrence that is threatening to the health, safety, or welfare of the children, staff, or volunteers. The program must also include procedures of staff training on this plan.</p> <p>There must be a written plan for handling the following types of incidents:</p> <ul style="list-style-type: none"> A) Lost or missing child; B) Suspected maltreatment of a child; C) Suspected sexual, physical, or emotional maltreatment or abuse of staff, volunteers, or parents/guardians that occur at the program; D) Medical, dental, and mental health emergencies; E) Child or staff deaths, both as a result of an accident or a prolonged illness. These include plans that address deaths at the facility, as well as those that occur off site; F) Unauthorized, contentious, or intoxicated/impaired parents/guardians/family members; G) Dangerous intruders who try to gain admittance to the facility. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure 	<p>A-129</p>

#	NECPA Standard	Possible Evidence for Verification	SAI #
12.8	<p>The following procedures, at a minimum, should be addressed in the plan for urgent care:</p> <ul style="list-style-type: none"> A) Parent/guardian signed authorization for the teacher to seek emergency medical treatment; B) Parent/guardian signed consent forms allowing the program to share children’s health information with emergency medical professionals and other necessary service providers; C) Procedures to inform parents/guardians of the emergency situation; D) Parent/guardian identification of their preferred hospital, medical and/or dental provider; E) A written incident/injury report; F) Protocols to refill and restock the first aid kit if any supplies were used. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Emergency Policy/Procedure 	A-132
12.9	<p><u>Immunizations</u></p> <p>The program notifies parents of required health and immunization schedules, including time frames that they are to be completed.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Child Records Policy/Procedure 	A-139

Chapter 13: Program Evaluation

#	NECPA Standard	Possible Evidence for Verification	SAI #
13.1	At least annually, directors, parents, program staff and other ancillary professionals must be involved in a written evaluation of the program's effectiveness in meeting the needs of children and parents. This assessment is programmatic and is not an assessment of the individual child's progress.	Documentation may include: <ul style="list-style-type: none"> • Program Evaluation Policy/Procedure 	A-135
13.2	This evaluation is then be used to inform the program's continuous quality improvement plan. Based upon the annual evaluation, the program identifies at least two goals and the specific action steps towards completing those goals. This evaluation must also include feedback from both parents and staff.	Documentation may include: <ul style="list-style-type: none"> • Program Evaluation Policy/Procedure 	A-137
13.3	Asking parent/guardian input is important to developing and maintaining a quality child care program. This process can be accomplished by holding forums or small group meetings to receive feedback from parents/guardians. Programs also offer parents/guardians an opportunity to respond in writing anonymously.	Documentation may include: <ul style="list-style-type: none"> • Program Evaluation Policy/Procedure 	A-136

Chapter 14: Program Administration and Staff Relations

#	NECPA Standard	Possible Evidence for Verification	SAI #
14.1	<p><u>Licensing</u></p> <p>The program shall hold a license in good standing with the state agency responsible for licensing child care centers and early childhood programs. The NECPA Commission will consider license-exempt programs for enrollment on a case by case basis.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Program license or exemption letter. 	A-138
14.2	<p><u>Program Policies</u></p> <p>The program has the following policies in writing and these policies are updated annually. Policies are of no value if there isn't an implementation plan in place to ensure they are in effect.</p> <p>These policies and plans must include, but are not be limited to, the following:</p> <ul style="list-style-type: none"> A) Inclusion of children with developmental delays and special health care needs; B) Nondiscrimination in the classroom; based on race, color, national origin, family structure, religion, sex, gender identity (including gender expression), sexual orientation, disability, age, etc.; C) Required health and immunization schedules, including time frames that they are to be completed; D) Protocols in case of emergency medical situations, including accidents and crisis situations; E) When to use the services of child care health consultants (including mental/behavior health); F) Confidentiality of individual information and records;* 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Programmatic policies and procedures as listed. 	A-89 A-139

#	NECPA Standard	Possible Evidence for Verification	SAI #
	<p>G) Ensuring safety while sleeping, including supervision requirements, areas and materials used for sleeping as well as defining infant safe sleeping practices;</p> <p>H) Universal precautions, cleanliness, sanitation and hygiene requirements that include the policy on handwashing and expectations of child and staff handwashing procedures;</p> <p>I) Diaper changing and toilet training;</p> <p>J) Evening, weekend, and night care plans if the program offers;</p> <p>K) The storage and use of any toxic materials in and outside of the facility;</p> <p>L) Care and hygiene requirements for any pets that may be on-site, including fish, insects and reptiles (if applicable);</p> <p>M) Parent conflict resolution procedure;</p> <p>N) Prevention of unauthorized persons from observing in or entering the toileting area;</p> <p>O) Transportation and activities that occur off site, such as field trips;</p> <p>P) Schedule for reviewing all policies, plans and operations of the program;</p> <p><i>*Please Note: The confidentiality policy outlines that program staff do not discuss children or their families with one another except in private and only when necessary to plan for the best interest of the child.</i></p>		
14.3	<p><u>Maintenance of Records</u></p> <p>The program maintains the following records:</p> <p>A) Names, addresses, and phone numbers of parents or guardians;</p> <p>B) Emergency contact information;</p> <p>C) Emergency medical treatment authorization/permission form;</p> <p>D) Physician's name and phone number;</p> <p>E) Allergies;</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • One sample copy of a complete record OR a policy which includes all required documentation listed. 	A-140

#	NECPA Standard	Possible Evidence for Verification	SAI #
	F) Authorization to release to someone other than parent/guardian(s); G) Immunizations or immunization exemptions; H) Developmental history; I) Health status, which includes results of health exam and screenings indicating typical or atypical results and any necessary follow-up documented; J) Instructions for any special needs or chronic illness; K) Progress report; L) Parent/guardian(s) conference reports; M) Field trip permission forms; N) Regular/recurring transportation permission form.		
14.4	<p><u>Administrative Offices and Staff Areas</u></p> <p>The program should have a designated administrative office space or area. This space should be available for program administration, staff and other adults involved with the program. This space is not accessible to children, except those that are closely monitored by staff.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • An administrative office or area. 	B-144
14.5	<p>The program provides staff with a staff lounge or separate area where breaks may occur as well as a staff bathroom.</p>	<p>Observable items may include:</p> <ul style="list-style-type: none"> • An area dedicated to staff only and a staff restroom. 	B-142 B-143

Colorado Next Generation QRIS Standards

The following section is for **COLORADO PROGRAMS ONLY** who wish to pursue the Next Generation Level 4 Standing. The burden of proof falls entirely on the program. All evidence must be prepared and organized in the program's documentation box/file.

#	QRIS Standards for Level 4 Quality	Evidence for Verification	SAI #
CO. 3.3.A	<p><u>Benefits</u></p> <p>The program offers full-time staff a compensation package with benefit options that include paid holidays, paid time off, health/dental insurance and at least three additional benefits such as:</p> <ul style="list-style-type: none"> A) Life Insurance B) Employee Child Discount C) Retirement Plan D) Disability Insurance E) Other_____ 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Policies or information regarding staff benefits is given to staff AND • Information is provided to staff to outline at least three additional benefits as noted above 	CO-1
CO. 3.4.A	<p><u>Business Administration</u></p> <p>The program has a current business plan and/or strategic plan, created or revised in the past 36 months.</p> <p>The program has a current year operations budget and quarterly income and expense statements that show revenues, expenses, and budget compared to actual.</p> <p>The program provides documentation of a certified financial review.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Current strategic/business plan • Budget and income statement • Certified financial review or independent audit 	CO-2 CO-3 CO-4

Ohio Step Up To Quality (SUTQ) QRIS Standards

The following section is for **OHIO PROGRAMS ONLY** who wish to pursue the Step Up To Quality Level Three Standing and/or additional points for Level 4 or 5 Standing. The burden of proof falls entirely on the program. All evidence must be prepared and organized in the program's documentation box/file.

#	QRIS Standards for Level Three and Additional Points	Possible Evidence for Verification	SAI #
OH	<p><u>Curriculum and Planning</u> Program implements a written, research-based, comprehensive curriculum aligned with the Early Learning and Development Standards and/or Ohio's K-12 Standards (appropriate to the age groups served) and demonstrates its alignment to assessment. Teachers use a written, dated plan of activities that is aligned to all developmental domains in Early Learning and Development Standards and/ or Ohio's K-12 Standards (appropriate to the age groups served).</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Evidence that chosen curriculum and plan of activities meets Ohio's Early Learning and Development Standards 	OH-1
OH	<p><u>Child Screening and Assessment</u> Program ensures that all children (except school age children) receive a comprehensive, developmental screening that is valid and reliable within 60 business days of entry into the program and annually thereafter. Necessary referrals are completed within 90 days of identification of need, and the results are formally communicated with families. Program administers assessments that meet state requirements for all enrolled preschool- aged children.</p>	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Screening and Assessment Policy 	OH-2
OH	<p><u>Staff Education</u> Administrator has an AA in ECE (or approved related field for school age-only programs) or CPL 3. Fifty-percent of lead teachers have an AA appropriate to the age groups noted below or a CPL 3:</p> <ul style="list-style-type: none"> • Early Childhood Teachers—An AA in ECE or an approved related field. • School-Age Teachers— An AA in an approved field. 	<p>Documentation may include:</p> <ul style="list-style-type: none"> • Diploma • Certificate • Transcripts 	OH-3

GLOSSARY

Adequate Storage Space. The storage required is for extra toys and supplies that are not currently being used by the children and adults. The storage must be accessible to staff with only a momentary interruption of the visual supervision of children. Examples of convenient storage include:

- A built in closet or cupboard in the room,
- A high shelf in the room that only adults can reach,
- A closed cabinet that is added to the room to provide storage.

Age Group. NECPA defines age groups as follows:

Age Group	Age Range	Child:Staff Ratio	Max Group Size
Infants	Birth to 14 months	3/4:1	6/8
Toddlers	15 months to 23 months	4/6:1	8/12
Twos	24 months to 35 months	6:1	12/18
Pre-School/Three/Fours	3 years to 4 years	7/8:1	14/16
Pre-Kindergarten	4 years to 5 years	9/10:1	18/20
School-Age	5 years to 12 years	12:1	24

ASTM. Abbreviation for the American Society for Testing and Materials, an organization that provides voluntary standards through a consensus process for materials, products, systems, and services.

Assessment Tool. Continual child assessment is vital for young children’s successful development. The below examples are not an all-inclusive list of research based child assessment tools, but may provide assistance in researching and implementing an assessment tool that works best with you program’s curriculum.

Infant-toddler (0-35 months):
Assessment Technology Incorporated: Galileo®
HighScope: COR Advantage
Pearson: THE OUNCE SCALE
Teaching Strategies LLC: Teaching Strategies GOLD®

Pre-kindergarten (3-5 years):
Assessment Technology Incorporated: Galileo®
HighScope: COR Advantage
National Institute for Early Education Research (NIEER)/Early Learning Scale (ELS)
Pearson: THE WORK SAMPLING SYSTEM®
Pearson: THE WORK SAMPLING SYSTEM® for Head Start
Teaching Strategies LLC: Teaching Strategies GOLD®

Bleach/Water Solution. For disinfecting environmental surfaces. One-quarter (1/4) cup of household liquid chlorine bleach (sodium hypochloride) in one gallon of water, prepared fresh daily. See also Disinfect.

Body Fluids. Urine, feces, saliva, blood, nasal discharge, eye discharge, and injury or tissue discharge.

CDC. Abbreviation for the Centers for Disease Control and Prevention.

Child Sized. Furniture shall be durable and child-sized or adapted for children's use. Tables shall be at waist height of the intended child-user and the child's feet shall be able to reach a firm surface while the child is seated.

Children with Special Needs. NECPA defers to the Individuals with Disabilities Education Act (IDEA) and the U.S. Department of Education's Office for Civil Rights (OCR) to define children with special needs.

Choking Hazard. NECPA defers to Caring for Our Children, 'Standard 4.5.0.10: Foods that Are Choking Hazards.' Caregivers/teachers should not offer to children under four years of age foods that are associated with young children's choking incidents (round, hard, small, thick and sticky, smooth, compressible or dense, or slippery). Examples of these foods are hot dogs and other meat sticks (whole or sliced into rounds), raw carrot rounds, whole grapes, hard candy, nuts, seeds, raw peas, hard pretzels, chips, peanuts, popcorn, rice cakes, marshmallows, spoonfuls of peanut butter, and chunks of meat larger than can be swallowed whole. Food for infants should be cut into pieces one-quarter inch or smaller, food for toddlers should be cut into pieces one-half inch or smaller to prevent choking."

Clean. To remove dirt and debris by scrubbing and washing with a detergent solution and rinsing with water.

Communicable Disease. A disease caused by a microorganism (bacterium, virus, fungus, or parasite) that can be transmitted from person to person via an infected body fluid or respiratory spray, with or without an intermediary agent (such as a louse, mosquito) or environmental object (such as a table surface).

Compliance. The act of carrying out a recommendation, policy, or procedure.

Contamination. The presence of infectious microorganisms in or on the body, on environmental surfaces, on articles of clothing, or in food or water.

CPSC. Abbreviation for the U.S. Consumer Product Safety Commission, created in 1972 and charged with the following responsibilities: (1) to protect the public against unreasonable risks of injury associated with consumer products; (2) to assist consumers in evaluating the comparative safety of consumer products; (3) to develop uniform safety standards for consumer products and to minimize conflicting state and local regulations; and (4) to promote research and investigation into the causes and prevention of product-related deaths, illnesses, and injuries.

Daily Health Screening/Check. Assessment of a child's health each day through observation of the child, talking with the parent/guardian, and if applicable, with the child.

Demand Feeding. The feeding of infants whenever they indicate that they need to be fed, rather than feeding according to a clock schedule.

Developmentally Appropriate Practice. Developmentally Appropriate Practice, or DAP, was built upon knowledge of how children develop and learn. Because development and learning are so complex, no one theory sufficiently explains these events. DAP is built around a review of the literature on early childhood education. From this review, a set of twelve empirically based principles were developed to inform early childhood practice (Bredekamp and Copple, 1997, p. 9). These twelve principles are as follows:

1. Domains of children's development – physical, social, emotional, and cognitive -are closely related. Development in one domain influences and is influenced by development in other domains.
2. Development occurs in a relatively orderly sequence, with later abilities, skills, and knowledge building on those already acquired.
3. Development proceeds at varying rates from child to child as well as unevenly within different areas of each child's functioning.
4. Early experiences have both cumulative and delayed effects on individual children's development; optimal periods exist for certain types of development and learning.
5. Development proceeds in predictable directions toward greater complexity, organization, and internalization.
6. Development and learning occur in and are influenced by multiple social and cultural contexts.
7. Children are active learners, drawing on direct physical and social experiences as well as culturally transmitted knowledge to construct their own understanding of the world around them.
8. Development and learning result from interaction of biological maturation and the environment, which includes both the physical and social worlds that children live in.
9. Play is an important vehicle for children's social, emotional, and cognitive development, as well as a reflection of their development.
10. Development advances when children have opportunities to practice newly acquired skills as well as when they experience a challenge just beyond the level of their present mastery.
11. Children demonstrate different modes of knowing and learning and different ways of representing what they know.
12. Children develop and learn best in the context of a community where they are safe and valued, their physical needs are met, and they feel psychologically secure.

For a complete listing of Developmentally Appropriate Practice, refer to Bredekamp, S., & Copple, C. (1997). *Developmentally Appropriate Practice in Early Childhood Programs, Revised Edition*. National Association for the Education of Young Children, Washington, D.C.

Developmental Challenges and Risks. Physical, emotional, and mental tasks that encourage new skills are developmental challenges. Meeting those challenges means taking some risks. For example, to stand upright, a crawler risks falling. Young children need to be able to take such risks. However, while they are trying new skills that are right for their development, young children do need to be protected from real harm. Learning to walk means taking some falls. But that means falling on a carpet, a mat, or a floor, not off a ledge. Toddlers especially need safe risks. They need to discover the right balance between risk and safety, challenge and security. A space for both infants and toddlers should have a variety of physical challenges. Waterbeds, horizontal nets, mats, mattresses, lofts, and wading pools full of covered foam pieces or pillows can all encourage coordination, balance, and climbing skills.

Developmental Needs. General age related needs that are addressed by providing activities, materials, interactions and experiences in a safe, healthy, and challenging way to children.

Disinfect. To eliminate virtually all germs from inanimate surfaces through the use of chemicals (e.g., products registered with the U.S. Environmental Protection Agency as "disinfectants") or physical agents (e.g., heat). In the child care environment, a 1:64 dilution of domestic bleach made by mixing a solution of 1/4 cup household liquid chlorine bleach with 1 gallon of tap water and prepared fresh daily is an effective method to remove germs from environmental surfaces and other inanimate objects that have been contaminated with body fluids (see **Body Fluids**), provided that the surfaces have first been cleaned (see Clean) of organic material before applying bleach/water solution and to achieve maximum germ reduction with bleach, the precleaned surfaces should be left moderately or glistening wet with the bleach solution and allowed to air dry or be dried only after at least 2 minutes of contact time. Two minutes of contact with a coating of a sprayed 1:64 diluted solution of 1/4 cup household liquid chlorine bleach in one gallon of tap water prepared fresh daily is an effective method of surface-sanitizing of environmental surfaces and other inanimate objects that have first been thoroughly cleaned of organic soil. Commercially prepared detergent-sanitizer solutions or detergent cleaning, rinsing and application of a non bleach sanitizer that is at least as effective as the chlorine bleach solution is acceptable as long as these products are nontoxic for children, are used according to the manufacturer's instructions and are approved by the state or local health department for use as a disinfectant in place of the bleach solution. These methods are used for toys, children's table tops, diaper changing tables, food utensils, and any other object or surface that is significantly contaminated with body fluids. Sanitizing food utensils can be accomplished by using a dishwasher or equivalent process, usually involving more dilute chemicals than are required for other surfaces.

Economic Concepts. Providing children with activities and situations where they can gain the knowledge and skills to understand concepts such as value, cost, want vs. need, resources, scarcity, etc.

Emergency Response Practices. Procedures used to call for emergency medical assistance, to reach parents or emergency contacts, to arrange for transfer to medical assistance, and to render first aid to the injured person.

Emergent Literacy. This is the use of children's literature throughout the total curriculum. It is not using it only in the quiet/reading activity area but in all activity areas. Excellent examples of how this is done can be found in the following publications by Janice Beaty: "*Observing Young Children and Developmentally Appropriate Curriculum.*"

Emotional Tone. The general feeling created by a room or area is the emotional tone. But it is not just a feeling; the emotional tone affects behavior. The emotional tone of an area should match its function. For example, the emotional tone of the rest area should promote a quiet, secure, relaxed feeling. You create emotional tones with pillows, colors, fabrics, rugs, curtains, aquariums, lighting, and arrangement. More active play calls for a space that has more color, is harder and brighter, and is more open.

EPA. Abbreviation for the U.S. Environmental Protection Agency, established in 1970, which administers federal programs on air and water pollution, solid waste disposal, pesticide regulation, and radiation and noise control.

EPSDT. Abbreviation for Medicaid's Early Periodic Screening and Diagnostic Treatment program, which provides health assessments and follow-up services to income-eligible children.

Evaluation. Impressions and recommendations formed after a careful appraisal and study.

Exclusion. Denying admission of an ill child or staff member to a program.

Facility. The buildings, the grounds, the equipment, and the people involved in providing child care of any type.

Fever. An elevation of body temperature. Temperature above 101°F (38.3°C) orally, above 102°F (38.9°C) rectally, or 100°F (37.8°C) or higher taken axillary (armpit) or measured by an equivalent method.

Foodborne Pathogen. A germ contained in a food product that is transmitted to persons eating the food.

Gross- Motor Skills. Large movements involving the arms, legs, feet, or the entire body (such as crawling, running, and jumping).

Group Size. The number of children assigned to a teacher or team of teachers occupying an individual classroom or well-defined space within a larger room. See also **Age Group** and **Ratio**.

Health Care Provider. A health care professional who practices medicine by an established licensing body with or without supervision. The most common types of health care providers include physicians, nurse practitioners, and physician's assistants.

Health or Medical Consultant. A physician, certified pediatric or family nurse practitioner, or registered nurse who has pediatric or child care experience and is knowledgeable in child care, licensing, and community resources. The health consultant provides guidance and assistance to child care staff on health aspects of the facility.

Health Plan. A written document that describes emergency health and safety procedures, general health policies and procedures, and policies covering the management of mild illness, injury prevention, and occupational health and safety.

Illness log. The program maintains a file or log, tracking all situations where illnesses are reported by a parent or become evident while a child or staff member is at the facility and may potentially require exclusion.

Immunizations. Vaccines that are given to children and adults to help them develop protection (antibodies) against specific infections.

Incubation Period. Time between exposure to an infectious microorganism and beginning of symptoms.

Individualized Education Program (IEP). A written document, derived from Part B of IDEA (the Individuals with Disabilities Education Act—PL 94-142), that is designed to meet a child's individual educational program needs. The main purposes for an IEP are to set reasonable learning goals and to state the services that the school district will provide for a child with special educational needs. Every child who is qualified for special educational services provided by the school is required to have an IEP.

Individualized Family Service Plan (IFSP). A written document, derived from Part C of IDEA (the Individuals with Disabilities Education Act), that is formulated in collaboration with the family to meet the needs of a child with a developmental disability or delay, to assist the family in its care for a child's educational, therapeutic, and health needs, and to deal with the family's needs to the extent to which the family wishes assistance.

Infection. A condition caused by the multiplication of an infectious agent in the body.

Ingestion. The act of taking material (whether food or other substances) into the body through the mouth.

Injury Log. When an injury occurs in the program that requires first aid or medical attention for a child or adult, the program shall complete a report form.

Medications. Any substance that is intended to diagnose, cure, treat, or prevent disease or is intended to affect the structure or function of the body of humans or other animals.

Midinfancy. The middle of the infancy period or the first year of life, that is, approximately 9 to 15 months of life.

Motor Skills. Coordinated muscle movements involved in movement, object control, and postural control perceived as occurring after a stage (or stages) involving birth reflexes, with the idea that fundamental motor skills must be mastered before development of more sport-specific skills. Ref: Barnett, L. M., E. van Beurden, P. J. Morgan, L. O. Brooks, J. R. Beard. 2009. Childhood motor skill proficiency as a predictor of adolescent physical activity. *J Adolescent Health* 44:252-59.

Nonprescription Medications. Drugs that are generally regarded as safe for use if the label directions and warnings are followed. Nonprescription medications are also called "over-the-counter" (OTC) drugs because they can be purchased without a prescription from a health care provider. Foods or cosmetics that are also intended to treat or prevent disease or affect the functions of the human body (such as suntan lotion, fluoride toothpaste, antiperspirant deodorants, or antidandruff shampoo) are also considered to be nonprescription medications.

Organization. Environmental organization is a system of arrangement. The arrangement can be of anything: space, materials, books, or toys. A system of arrangement creates guidelines that show where things go and why. For example, environmental organization would mean putting the wheeled riding toys in the large-motor area. Hand toys would go on a shelf in a play area. Soft, cuddly toys might go in the rest or quiet areas. The best organization is simple and orderly; items used together are arranged together - water toys near the water troughs, and art materials near the art workspace. Infants and toddlers are trying to make sense of the world, and organization makes the job easier for them. The children learn to expect certain things in certain places. Organization also makes caregiving easier. When the setting is well organized, children can find things for themselves and help put them away. You can tell the toddlers: "The crayons are in the art center." "The block goes next to its picture here."

OSHA. Abbreviation for the Occupational Safety and Health Administration of the U.S. Department of Labor, which regulates health and safety in the workplace.

Parent Education. Parent education shall be culturally sensitive. Written material shall address health and safety issues for all age groups served and in a language understood by families.

Positive Guidance. This form of discipline includes redirection and setting clear cut limits that foster the child’s ability to become self-disciplined. Disciplinary measures shall be clear and understandable to the child, shall be consistent, and shall be explained to the child before and at the time of any disciplinary action.

Prescription Medications. Medications that can only be dispensed by a licensed practitioner, such as a physician or nurse practitioner.

Pro-Social. Pro-social behaviors include those that encourage kindness and cooperation within the classroom community. Teachers can help promote pro social awareness and learning by creating opportunities for children to participate in situations that encourage kindness. Teachers can act as coaches for children’s emotions and emotional regulation. This includes responding to children’s emotional displays, labeling the emotions, and in a supportive manner helping children with strategies to regulate their emotional displays.

Qualified Teacher. Qualified teacher means the early childhood professional that is the staff person providing direct care and education to children. All teachers must be 18 years of age or older. Persons younger than 18 may assist in the child care program if they have direct, on site supervision, however they are not considered to be a qualified teacher. A qualified teacher is one that meets all NECPA requirements.

Ratios. The maximum number of children permitted per teacher. NECPA recommends child:staff ratios as follows:

Age Group	Age Range	Child:Staff Ratio	Max Group Size
Infants	Birth to 14 months	3/4:1	6/8
Toddlers	15 months to 23 months	4/6:1	8/12
Twos	24 months to 35 months	6:1	12/18
Pre-School/Three/Fours	3 years to 4 years	7/8:1	14/16
Pre-Kindergarten	4 years to 5 years	9/10:1	18/20
School-Age	5 years to 12 years	12:1	24

Sanitize. To remove filth or soil and small amounts of certain bacteria. For an inanimate surface to be considered sanitary, the surface must be clean (see **Clean**) and the number of germs must be reduced to such a level that disease transmission by that surface is unlikely. This procedure is less rigorous than disinfection (see **Disinfect**) and is applicable to a wide variety of routine housekeeping procedures involving, for example, bedding, bathrooms, kitchen countertops, floors, and walls. A number of EPA-registered "detergent-disinfectant" products are also appropriate for sanitizing.

School-Age Child. This term describes a developmental period associated with a child who is enrolled in an elementary school, usually from 5 to 12 years of age.

School-Age Child Care Program. A center offering a program of activities before and after school and/or during vacations.

Screening. Individual examination to detect the need for additional health related evaluations, early intervention and/or treatment.

Special Evacuation Equipment/Crib. A modified standard size steel crib with large wheels that meets fire standards used for the evacuation of non-walking children from the child development facility during emergency situations. (Department of Defense (2006), Child Development Policy Institute).

Staff. Used here to indicate all personnel employed at the program, including both teachers as well as personnel who do not provide direct care to the children (such as cooks, drivers, and housekeeping personnel).

Substitute Staff. Teachers hired for one day or for an extended period of time, who work under direct supervision of a trained, licensed/certified permanent teacher. Substitute staff must successfully complete the criminal background checks and meet, at a minimum, the qualifications for “Assistant Teachers”.

Sudden Infant Death Syndrome (SIDS). The sudden and unexpected death of an apparently healthy infant, typically occurring between the ages of 3 weeks and 5 months and not explained by an autopsy.

Sufficient Quantity. Children can use the equipment or materials without having to wait with no other appropriate equipment or material options. Numerous materials/equipment are not required and no specific number of materials/equipment is needed. Verifiers will observe to see if there is something for each child to use.

Supervision. Teachers shall directly supervise infants, toddlers, and preschool children by sight and hearing at all times, even when the children are in sleeping areas.

Systemic. Pertaining to a whole body rather than to one of its parts.

Technology. Technology includes both high and low forms. High technology may include computers, tablets, listening centers, and other forms of age appropriate tools. Low technology may include gears or wheels and other forms of age appropriate simple tools.

Transmission. The passing of an infectious organism or germ from person to person.

Universal Precautions. Apply to blood, other body fluids containing blood, but not to feces, nasal secretions, sputum, sweat, tears, urine, saliva and vomitus unless they contain visible blood or are likely to contain blood. Universal precautions include avoiding injuries caused by sharp instruments or devices and the use of protective barriers such as gloves, gowns, aprons, masks, or protective eyewear, which can reduce the risk of exposure of the worker's skin or mucous membranes that could come in contact with materials that may contain blood-borne pathogens while the worker is providing first aid or care.

Variety. An environment that offers plenty of choices has variety. Variety means choices about what to look at, what to hear, what or whom to play with, and what to do. When certain areas are set up for particular activities, the environment offers variety. When the environment meets the changing needs of both infants and toddlers, it has variety. Another example of variety is texture. A child care setting can offer a rich variety of textures: the smooth floor, the rough rug, the porcelain sink, the wood tabletop, the nubby fabric on the couch, or the soft velvet pillow on the floor. You can offer variety for the senses by pulling the shades or using a dimmer to change the lighting, putting up new materials and pictures, playing different kinds of music or tapes, bringing in a large new plant, changing the toys, or offering a new art activity.

Unless otherwise noted, the source of these definitions is the American Academy of Pediatrics (2002) Caring for our Children, IL: National Resource Center for the Health and Safety in Child Care.

References

- Alkon, A., J. Bernzweig, K. To, J. K. Mackie, M. Wolff, J. Elman. 2008. Child care health consultation programs in California: Models, services, and facilitators. *Public Health Nurs* 25:126-39.
- American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. 2011. Caring for our children: National health and safety performance standards; Guidelines for early care and education programs. 3rd edition. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association.
- American Academy of Pediatrics. 2011. *Handbook of common poisonings in children*. 4th ed. Elk Grove Village, IL: AAP.
- American Academy of Pediatrics, Committee on Drugs. 2009. Policy statement: Acetaminophen toxicity in children. *Pediatrics* 123:1421-22.
- American Academy of Pediatrics, Task Force on Sudden Infant Death Syndrome. 2009. Policy statement: The changing concept of SIDS: Diagnostic coding shifts, controversies regarding the sleeping environment, and new variables to consider in reducing risk. *Pediatrics* 123:188.
- American Academy of Pediatrics. 2007. *Pediatric first aid for caregivers and teachers*. Rev ed. Elk Grove Village, IL: AAP.
<http://www.pedfactsonline.com/>.
- American Academy of Pediatrics, Committee on School Health. 2006. Policy statement: Corporal punishment in schools. *Pediatrics* 118:1266.
- American Academy of Pediatrics, Committee on School Health. 2003. Policy statement: Out-of-school suspension and expulsion. *Pediatrics* 112:1206-9.

- Aronson, S. S., ed. 2007. *Pediatric first aid for caregivers and teachers*. Rev. 1st ed. Elk Grove Village, IL: American Academy of Pediatrics; Sudbury, MA: Jones and Bartlett.
- Aronson, S. S., T. R. Shope, eds. 2009. *Managing infectious diseases in child care and schools: A quick reference guide* 2nd ed. Elk Grove Village, IL: American Academy of Pediatrics.
- Art and Creative Materials Institute. 2010. Safety - what you need to know. <http://www.acminet.org/Safety.htm>.
- Art and Creative Materials Institute, Arts, Crafts, and Theater Safety, Inc., National Art Education Association, U.S. Consumer Product Safety Commission (CPSC). *Art and craft safety guide*. Bethesda, MD: CPSC. <http://www.cpsc.gov/cpscpub/pubs/5015.pdf>.
- Birch, L., W. Dietz. 2008. Eating behaviors of young child: Prenatal and postnatal influences on healthy eating, 59-93. Elk Grove Village, IL: American Academy of Pediatrics.
- Bradely, J., P. Kibera. 2006. Closing the gap: Culture and promotion of inclusion in child care. *Young Children* 61:34-40.
- Breitenstein, S., D. Gross, I. Ordaz, W. Julion, C. Garvey, A. Ridge. 2007. Promoting mental health in early childhood programs serving families from low income neighborhoods. *J Am Psychiatric Nurses Assoc* 13:313-20.
- Brennan, E. M., J. Bradley, M. D. Allen, D. F. Perry. 2008. The evidence base for mental health consultation in early childhood settings: A research synthesis addressing staff and program outcomes. *Early Ed Devel* 19:982-1022.
- Campbell, F. A., Pungello, E. P., Burchinal, M., Kainz, K., Pan, Y., Wasik, B. H., Sparling, J. & Ramey, C. T. (2012). Adult outcomes as a function of an early childhood educational program: an Abecedarian Project follow-up. *Developmental Psychology*, 48 (4), 1033.
- Carl, B. (2007). *Child caregiver interaction scale (CCIS) revised edition manual*. Unpublished doctoral dissertation). Indiana, PA.: Indiana University of Pennsylvania.
- Carl, B. (2010). *Child caregiver interaction scale* (Unpublished doctoral dissertation). Unpublished instrument. Retrieved from Author.
- Center for Law and Policy (2007). Improve Child Care Ratios and Group Size. Retrieved 7/9/16 from <http://www.clasp.org/resources-and-publications/publication-1/0473.pdf>
- Centers for Disease Control and Prevention (CDC). 2012. Announcement: Response to the advisory committee on childhood lead poisoning prevention report, low level lead exposure harms children: A renewed call for primary prevention. *MMWR*. Atlanta, GA: CDC.
- Chen, X., M. Beran, R. Altkorn, S. Milkovich, K. Gruaz, G. Rider, A. Kanti, J. Ochsenhirt. 2006. Frequency of caregiver supervision of young children during play. *Intl J Injury Control and Safety Promotion* 14:122-24.
- Copple, C., S. Bredekamp. 2009. *Developmentally appropriate practice in early childhood programs serving children at birth through age 8*. 3rd ed. Washington, DC: National Association for the Education of Young Children.
- Cornelius, A. N., J. P. D'Auria, L. M. Wise. 2008. Pacifier use: A systematic review of selected parenting web sites. *J Pediatric Health Care* 22:159-65.
- Crowley, A. A., J. M Kulikowich. 2009. Impact of training on child care health consultant knowledge and practice. *Pediatric Nurs* 35:93-100.
- Cryer, D., S. Hurwitz, M. Wolery. 2003. Continuity of caregiver for infants and toddlers. ERIC Clearinghouse on Elementary and Early Care Education. <http://www.ericdigests.org/2004-3/infants.html>.
- De Schipper, E. J., J. M. Riksen-Walraven, S. A. E. Geurts. 2006. Effects of child-caregiver ratio on the interactions between caregivers and children in child-care centers: An experimental study. *Child Devel* 77:861-74.

- Dowda, M., W. H. Brown, et al. 2009. Policies and characteristics of the preschool environment and physical activity of young children. *Pediatrics* 123: e261-66.
- Dunlap, S., L. Fox, M. L. Hemmeter, P. Strain. 2004. *The role of time-out in a comprehensive approach for addressing challenging behaviors of preschool children*. CSEFEL What Works Series. <http://csefel.vanderbilt.edu/briefs/wwb14.pdf>.
- Duran, F., K. Hepburn, M. Irvine, R. Kaufmann, B. Anthony, N. Horen, D. Perry. 2009. *What works?: A study of effective early childhood mental health consultation programs*. Washington, DC: Georgetown University Center for Child and Human Development. <http://gucchdtacenter.georgetown.edu/publications/ECMHCTestudy>
- ECELS, Healthy Child Care Pennsylvania. 2007. Car seats and swings are not safe for sleeping. *Health Link Online* 18:1-2. <http://ecels-healthychildcarepa.org/publications/heath-link-online/item/36-spring-2007>.
- Fiene, R. 2002. *13 indicators of quality child care: Research update*. Washington, DC: U.S. Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation. <http://aspe.hhs.gov/hsp/ccquality-ind02/>.
- Gartrell, D., K. Sonsteng. 2008. Promoting physical activity: It's proactive guidance. *Young Children* 63:51-53.
- Gilliam, W. S. 2005. *Prekindergarteners left behind: Expulsion rates in state prekindergarten programs*. Foundation for Child Development (FCD). Policy Brief Series no. 3. New York: FCD. http://www.challengingbehavior.org/explore/policy_docs/prek_expulsion.pdf.
- Gilliam, W. S., G. Shahar. 2006. Preschool and child care expulsion and suspension: Rates and predictors in one state. *Infants Young Children* 19:228-45.
- Gilliam, W. S. 2007. *Early Childhood Consultation Partnership: Results of a random-controlled evaluation*. New Haven, CT: Yale University. <http://www.chdi.org/admin/uploads/5468903394946c41768730.pdf>.
- Goldstein, A., K. Hamm, R. Schumacher. *Supporting growth and development of babies in child care: What does the research say?* Washington, DC: Center for Law and Social Policy (CLASP); Zero to Three. <http://main.zerotothree.org/site/DocServer/ChildCareResearchBrief.pdf>.
- Gonzalez-Mena, J. 2008. *Diversity in early care and education: Honoring differences*. 5th ed. Boston: McGraw-Hill.
- Gonzalez-Mena, J. 2007. *50 early childhood strategies for working and communicating with diverse families*. Upper Saddle River, NJ: Pearson Merrill Prentice Hall.
- Gonzalez-Mena, J. 2007. *50 early childhood strategies for working and communicating with diverse families*. Upper Saddle River, NJ: Pearson Merrill Prentice Hall.
- Gottesman, B. L., L. B. McKenzie, K. A. Conner, G. A. Smith. 2009. Injuries from furniture tip-overs among children and adolescents in the United States, 1990-2007. *Clin Pediatrics* 48:851.
- Grenier, D., D. Leduc, eds. 2008. *Well beings: A guide to health in child care*. 3rd ed. Ottawa, Ontario: Canadian Paediatric Society.
- Gross, D., C. Garvey, W. Julion, L. Fogg, S. Tucker, H. Mokos. 2009. Efficacy of the Chicago Parent Program with low-income multiethnic parents of young children. *Preventions Science* 10:54-65.
- Guard, A., S. S. Gallagher. 2005. Heat related deaths to young children in parked cars: An analysis of 171 fatalities in the United States, 1995-2002. *Injury Prevention* 11:33-37.

- Hagan, J. F., J. S. Shaw, P. M. Duncan, eds. 2008. *Bright futures: Guidelines for health supervision of infants, children, and adolescents*. 3rd ed. Elk Grove Village, IL: American Academy of Pediatrics.
- Hamre, B., Hatfield, B., Pianta, R., and Jamil, F., (2014). Evidence for General and Domain-Specific Elements of Teacher-Child Interactions: Associations with Preschool Children’s Development. *Child Development*, May/June 2014. Volume 85, Number 3, Pages 1257-1274.
- Harbin, G., B. Rous, N. Peeler, J. Schuster, K. McCormick. 2007. *Research brief: Desired family outcomes of the early childhood transition process*. <http://community.fpg.unc.edu/connect/Desired-Family-Outcomes-of-the-Early-Childhood-Transition-Process-1.pdf>.
- Harms, T., R. M. Clifford, D. Cryer. 2005. Early childhood environment rating scale, revised ed. Frank Porter Graham Child Development Institute, University of North Carolina. <http://ers.fpg.unc.edu/node/82/>.
- Harms, T., D. Cryer, R. M. Clifford. 2005. Infant/toddler environment rating scale, revised ed. Frank Porter Graham Child Development Institute, University of North Carolina. <http://ers.fpg.unc.edu/node/84/>.
- Harvard Family Research Project. 2010. *Family engagement as a systemic, sustained, and integrated strategy to promote student achievement*. <http://www.hfrp.org/publications-resources/browse-our-publications/family-engagement-as-a-systemic-sustained-and-integrated-strategy-to-promote-student-achievement/>.
- Healthy Child Care America. 2010. Healthy futures: Medication administration in early education and child care settings. American Academy of Pediatrics. <http://www.healthychildcare.org/HealthyFutures.html>.
- Henderlong, J., M. Lepper. 2002 The effects of praise on children’s intrinsic motivation: A review and synthesis. *Psychological Bulletin* 128:774-95.
- Hodgkin, R. 1997. Why the “gentle smack” should go: Policy review. *Child Soc* 11:201-4.
- Jenny, C. 2007. Recognizing and responding to medical neglect. *Pediatrics* 120:1385-89.
- Kagan, S. L., K. Tarrent, K. Kauerz. 2008. *The early care and education teaching workforce at the fulcrum*, 44-47, 90-91. New York: Teachers College Press.
- Kleinman, R. E., ed. 2009. *Pediatric nutrition handbook*. 6th ed. Elk Grove Village, IL: American Academy of Pediatrics.
- Korjenevitch, M., and Dunifon, R. (2010). *Child Care Center Quality and Child Development*. Research Brief. Cornell University, College of Human Ecology. Retrieved June 22, 2016 from https://www.human.cornell.edu/pam/outreach/parenting/parents/upload/Child-20Care-20Center-20Quality-20-20Development-20Brief_FINAL.pdf.
- Kotch, J. B., P. Isbell, D. J. Weber, V. Nguyen, E. Gunn, S. Fowlkes, J. Virk, J. Allen. 2007. Hand-washing and diapering equipment reduces disease among children in out-of-home child care centers. *Pediatrics* 120: e29-e36.
- Laughlin, Lynda (2013). *Who’s Minding the Kids? Child Care Arrangements: Spring 2011*. Current Population Reports, P70-135. U.S. Census Bureau, Washington, DC.
- Lennell, A., S. Kuhlmann-Berenzon, P. Geli, K. Hedin, C. Petersson, O. Cars, et al. 2008. Alcohol-based hand-disinfection reduced children’s absence from Swedish day care centers. *Acta Paediatrica* 97:1672-80.
- Maschinot, B. 2008. *The changing face of the United States: The influence of culture on early child development*. Washington, DC: Zero to Three. http://www.zerotothree.org/site/DocServer/Culture_book.pdf?docID=6921.

- Matthews, H. 2008. Supporting a diverse and culturally competent workforce: Charting progress for babies in child care. Charting Progress for Babies in Child Care: A CLASP Child Care and Early Education Project, Washington, DC.
<http://www.clasp.org/babiesinchildcare/recommendations?id=0005>.
- Mayo Clinic. 2009. Infant and toddler health. Pacifiers: Are they good for your baby? <http://www.mayoclinic.com/health/pacifiers>
- Moon R. Y., T. Calabrese, L. Aird. 2008. Reducing the risk of sudden infant death syndrome in child care and changing provider practices: Lessons learned from a demonstration project. *Pediatrics* 122:788-79.
- Moon, R. Y., R. P. Oden. 2003. Back to sleep: Can we influence child care providers? *Pediatrics* 112:878-82.
- National Center on Child Care Quality Improvement, A Service of the Office of Child Care (2015). Retrieved on June 15, 2016 from https://qrisguide.acf.hhs.gov/files/QRIS_Levels_Rating.pdf.
- National Institute of Child Health and Human Development Early Child Care Research Network (2006). *Child care effect sizes for the NICHD Study of Early Child Care and Youth Development*. *American Psychologist*, 61, 99-116.
- National Program for Playground Safety. 2006. Playground supervision training for childcare providers. University of Northern Iowa.
http://www.playgroundsafety.org/training/online/childcare/course_supervision.htm.
- National Program for Playground Safety. 2006. NPPS Website. <http://www.playgroundsafety.org>.
- National Association for the Education of Young Children. 1996. Position Statement. Prevention of child abuse in early childhood programs and the responsibilities of early childhood professionals to prevent child abuse.
- National Forum on Early Childhood Program Evaluation, National Scientific Council on the Developing Child. 2007. *A science based framework for early childhood policy: Using evidence to improve outcomes in learning, behavior, and health for vulnerable children*. Cambridge, MA: Center on the Developing Child, Harvard University.
http://developingchild.harvard.edu/index.php/library/reports_and_working_papers/policy_framework/.
- National Institute of Child Health and Human Development (NICHD). 2006. *The NICHD study of early child care and youth development: Findings for children up to age 4 1/2 years*. Rockville, MD: NICHD. http://www.nichd.nih.gov/publications/pubs/upload/seccyd_051206.pdf.
- National Scientific Council on the Developing Child. 2008. Mental health problems in early childhood can impair learning and behavior for life. Working Paper no. 6. http://developingchild.harvard.edu/library/reports_and_working_papers/working_papers/wp6/.
- National Scientific Council on the Developing Child. 2007. A sciencebased framework for early childhood policy: Using evidence to improve outcomes in learning, behavior, and health for vulnerable children. Cambridge, MA: Center on the Developing Child, Harvard University.
http://developingchild.harvard.edu/index.php/library/reports_and_working_papers/policy_framework/.
- Nell, M. 2009. Using the integrative research approach to facilitate early childhood teacher planning. *J Early Child Teach Edu* 30:79-88.
- Null, J. 2010. Hyperthermia deaths of children in vehicles. San Francisco State University. <http://ggweather.com/heat>
- Perry, D. F., M. D. Allen, E. M. Brennan, J. R. Bradley. 2010. The evidence base for mental health consultation in early childhood settings: A research synthesis addressing children's behavioral outcomes. *Early Ed Devel* 21:795-824.
- Perry, D. F., R. Kaufmann, J. Knitzer. 2007. *Early childhood social and emotional health: Building bridges between services and systems*. Baltimore, MD: Paul Brookes Publishing.

- Perry, D. F., M. C. Dunne, L. McFadden, D. Campbell. 2008. Reducing the risk for preschool expulsion: Mental health consultation for young children with challenging behaviors. *J Child Fam Studies* 17:44-54.
- Reineke, J., K. Sonsteng, D. Gartrell. 2008. Nurturing mastery motivation: No need for rewards. *Young Children* 63:89, 93-97.
- Reynolds, A. J., Temple, J. A., Ou, S.-R., Robertson, D. L., Mersky, J. P., Topitzes, J. W., & Niles, M. D. (2007). Effects of a school-based, early childhood intervention on adult health and well-being. *Archives of Pediatrics & Adolescent Medicine*, 161(8), 730–739. doi:10.1001/archpedi.161.8.730
- Richardson, H. L., A. M. Walker, R. S. Horne. 2010. Influence of swaddling experience on spontaneous arousal patterns and autonomic control in sleeping infants. *J Pediatrics* 157:85-91.
- Ross, Scott W., Horner, Robert H. 2009. Bully prevention in positive behavior support. *J Applied Behavior Analysis* 42:747-59.
- Schwebel, D. C., A. L. Summerlin, M. L. Bounds, B. A. Morrongiello. 2006. The stamp-in-safety program: A behavioral intervention to reduce behaviors that can lead to unintentional playground injury in a preschool setting. *J Pediatric Psychology* 31:152-62.
- Schweinhart, L. J., Montie, J., Xiang, Z., Barnett, W. S., Belfield, C. R. & Nores, M. (2005). Lifetime Effects: The High/Scope Perry Preschool Study Through Age 40. Monographs of the High/Scope Educational Research Foundation. Retrieved June 23, 2016 from http://www.highscope.org/file/Research/PerryProject/specialsummary_rev2011_02_2.pdf
- Shiller, V. M., J. C. O'Flynn. 2008. Using rewards in the early childhood classroom: A reexamination of the issues. *Young Children* 63:88, 90-93.
- Theilheimer, R. 2006. Molding to the children: Primary caregiving and continuity of care. *Zero to Three* 26:50-54.
- Tamis-LeMonda, Catherine S., Marc H. Bornstein, and Lisa Baumwell. (2001). *Maternal Responsiveness and Children's Achievement of Language Milestones*. *Child Development* 72(3): 748 – 67.
- U.S. Consumer Product Safety Commission (CPSC). 2010. Public playground safety handbook. <http://www.cpsc.gov/cpsc/pub/pubs/325.pdf>.
- U.S. Consumer Product Safety Commission (CPSC). 2008. *Public playground safety handbook*. Bethesda, MD: CPSC. <http://www.cpsc.gov/cpsc/pub/pubs/325.pdf>.
- U.S. Consumer Product Safety Commission (CPSC). *The tipping point: Preventing TV, furniture, and appliance tip-over deaths and injuries*. <http://www.cpsc.gov/cpsc/pub/pubs/5004.pdf>.
- Votruba-Drzal, E., Coley, R.I., and Chase-Landsale, P.I., (2004). Child care and low income children's development: Direct and moderated effects. *Child Development*, 75, 296-312.
- Winterbottom C., and Jones, I. (2013). National accreditation and its role in early education: An analysis of Florida's Gold Seal Quality Child-Care program and licensing standards *Journal of Early Childhood Research February 2014 12: 64-76, first published on October 30, 2013* doi:10.1177/1476718X13492942
- Zero to Three. 2007. *The infant-toddler set-aside of the Child Care and Development Block Grant: Improving quality child care for infants and toddlers*. Washington, DC: Zero to Three. http://main.zerotothree.org/site/DocServer/Jan_07_Child_Care_Fact_Sheet.pdf.



PO BOX 2948
Merrifield, VA 22116

1.855.706.3272 phone
1.855.806.3272 fax

www.necpa.net