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To be effective at their jobs, today’s caregivers need more than a love of children. Quality child care requires a high level of professionalism.

In this study unit, you’ll learn about quality child care, what’s expected of a caregiver, and how to start thinking about your own child care beliefs and principles.

To accomplish these objectives, you’ll study the material presented and form your own opinions. At the same time, you’ll gain confidence as you begin to see your place in this growing field.

**When you complete this study unit, you’ll be able to**

- Describe why there’s an increasing demand for child care
- Begin to design your child care program
- Define *quality child care* and discuss its benefits
- List your responsibilities as a caregiver to meet licensing requirements and children’s needs, provide a safe and healthy learning environment, communicate with parents, manage staff, provide customer service, and be financially sound
- Describe the advantages and responsibilities of in-home care, family day care, and day care centers
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THE NEED FOR CHILD CARE

What do you think of when you hear the word “family”? A husband and wife and their children? Or perhaps a single mother or father with children? This may be true today, but a few decades ago, the term *family* brought to mind a much larger group—the *extended family*. The extended family included not only a husband and wife with children, but also the grandparents, sisters, brothers, cousins, nieces, nephews, aunts, and uncles. Although they didn’t all live in the same house, they often lived nearby and were in close contact with each other. The extended family provided built-in babysitters any time the mother or father needed them.

As you’ll learn later in this study unit, many factors worked to change the makeup of the family. For example, parents traveled far from their families to find jobs in new industries.

As the extended family shrank to the *nuclear family* (only parents and children), the isolated mother and father had to find someone outside of the family to care for their children. From this need, there arose a new extended family: the parents and their children, supported by others, including people in the child care field (Figure 1).

As you enter this new extended family, through the exciting child care field, you’ll find that your membership in it offers many rewards. First, you’ll receive financial rewards from caring for children in your

*FIGURE 1—A Nuclear Family*
own home, in a day care center, or in other child care arrangements. Second, you’ll have an increased sense of purpose as you help to mold the children in your care. The frustration of caring for a child who won’t share is more than balanced on the bright day that same child shares a wagon with a new friend.

Third, you’ll be helping the parents by substituting your tender loving care for theirs when they’re absent, and by filling them in on their child’s achievements. Parents want to share their child’s first steps, or first ride on a seesaw, if only through your reports.

In addition, you’ll find other personal rewards in the exciting profession of caring for children.

Today most small towns have a day care center nearby. The need for caregivers (people to care for children) is a fact of life, and this need is increasing rapidly. The number of working women has risen in our country from 5.1 million in 1900, to 18.4 million in 1950, to nearly 65 million in 2004. The number of working women is projected to exceed 77 million by 2012; this increase of women in the workforce directly impacts our children and the continually growing need for child care. You can see how the percentages have changed for employed mothers from 1994 to 2010 in Figure 2.

**FIGURE 2—Percent of families where the mother is employed: 1994–2010**
Who Is Caring for the Children?

Who is caring for these children? Relatives, babysitters, caregivers in the child’s home, caregivers in family day care homes, caregivers in day care centers, and caregivers in preschools (prekindergarten schools). *(Family day care refers to care a child receives in someone else’s home.)*

About 64 percent of the preschool children whose mothers work are cared for in day care centers, while about 36 percent of these children are in family day care homes, in group homes, or cared for in the child’s home.

Some of the remaining children are left unsupervised in their homes, because no care can be found. Such children face dangers inside and outside of their home.

Consider the five-year-old boy from California who was left at home to watch television. The boy turned up the sound and pointed his toy gun at the screen. A police officer, called by neighbors because of the noise, opened the door, saw the shadow of a gun on the wall, and heard shouts (from the TV). He yelled a warning and then fired. The body of the boy tumbled into sight. This was an unusual accident, but other more commonplace dangers face a child who is alone: being burned, drowned, cut, or assaulted. Such young children are sorely in need of someone to care for them.

Quality Child Care

The decision to seek child care isn’t always an easy one. Many people, especially mothers, have mixed feelings about child care. They need, or want, to work, yet they feel guilty about having their child cared for by someone else. (However, research has shown that quality care usually isn’t harmful to the child, and can even be beneficial in many respects. In fact, quality child care by adults has been shown to be an important factor in the development of many children.)

“Quality child care” refers to a child care system that will meet many of the needs of the children. When evaluating the quality of a day care system, all parts of the system must be considered: the caregiver, the facility (the place where child care takes place), the program (what the children do),
the total number of children cared for, the number of caregivers in relation to the number of children, the interactions between caregivers and children, and the relations between caregivers and the parents.

This program will teach you what makes up a quality day care system. It will enable you to become a quality caregiver and to develop a quality program and facility.

Many times during your child care career, parents may ask questions such as: “How will child care benefit my child? How will it affect me?”

If the child care is quality care, it may possess many benefits for the child:

- A gain in independence
- A gain in social skills—learning to relate to and get along with adults and children outside of the immediate family (Figure 3)
- A gain in intellectual and language abilities, such as problem solving, creativity, and expressive language
- An opportunity for experiences he or she may not have at home (field trips, outdoor play, or caring for an animal) (Figure 4)
There are some benefits from quality child care for the family, which the parents might not be aware of, such as

- Providing an opportunity for parents to learn about a child’s development from a professional caregiver

- Reducing strain on the family during a crisis (separation, divorce, need to work because of money problems)

- Giving parents a chance to network (communicate and share experiences) with other parents

- Freeing the mother or father to work without having to worry about the child (Figure 5)

There are also benefits from child care for society as a whole. Child care enables low-income single mothers to work, thereby avoiding total dependence on public assistance. In addition, mothers who do work are more productive when they know their children are well cared for. Children have opportunities to learn, in addition to being cared for in a safe environment. Child care for the school-age child is also beneficial. School-age children who are unsupervised by an adult after school are commonly referred to as *latchkey children* because many carry a key to let themselves into their homes. Such children may suffer physical or psychological damage or develop...
problems in their relations with others. For example, a nine-year-old latchkey girl received third-degree burns over 75 percent of her body while cooking an after-school snack for herself and her brother.

Many latchkey children have fears about being left alone and being harmed. One seven-year-old boy locked himself in the closet when he came home from school and stayed there until his mother got home from work at 4:30. Many of these children don’t have the opportunity to play with others their own age because they aren’t permitted to leave the house or to have friends over when Mom or Dad isn’t home. Some have the responsibility of caring for younger brothers or sisters, which may result in resentment. Some engage in antisocial behavior such as vandalism, stealing, or taking drugs because they’re left unsupervised (Figure 6).

Such problems could be avoided by enrolling latchkey children in a before- or after-school program, if one is available. If you like working with school-age children, this might be a phase of child care you should explore.
WHAT IS A HIGH-QUALITY PROGRAM?
Research and experience have shown that a high-quality early childhood program possesses these characteristics:

- Staff is trained in child development and early childhood education.
- Program is well managed and watched over.
- Parents share with caregivers the education of their children.
- Caregivers are respected and respectful.
- Caregivers in a program plan and work together to provide individual attention to children.
- Caregivers interact often with children.
- A specific program of developmentally appropriate activities is planned.
- The physical environment is designed to promote active involvement and constructive interactions.
- Caregivers receive continued on-the-job (in-service) training.
- The program is evaluated regularly to keep quality high.
- The program maintains standards of the National Association for the Education of Young Children.

FIGURE 6—Some children who grow up unsupervised become involved in vandalism, stealing, alcohol, and drugs.
Child Care Then and Now

In child care, as in other fields, the present is shaped by the past. As a child care professional, it will be important for you to know about the history of the child care field. It will help you to understand the child care field as it exists today.

A day care center may have been in your city or town for as long as you can remember. In addition, others may have sprung up in the area around you, a sign of an increasing need for child care. This need wasn’t always present.

What changed the child care picture in our country? Why did we turn from child care within the family to child care outside of the family?

The Nineteenth Century

Between 1815 and 1860, two forces were at work that would change child care dramatically. First, there was a flood of immigrants to the United States, with hundreds of thousands of people fleeing famine in Ireland and revolution in Germany. Second, at the same time, the factory system was developing. This was part of a movement called industrialization. Industrialization is the change from a farming economy to a manufacturing economy.

In the past, weaving and other crafts were performed at home by both parents. The children could sit by or play near their mother as she wove or spun.

Then new machines were invented, brought together, and placed in factories, or mills, near water or steam power. Many women, including large numbers of immigrants, were forced to work in these new factories in order to survive.

What would they do with their children? Many brought their children with them, and they also were put to work. Other mothers had to leave them at home to take care of themselves or to be cared for by relatives or older children. Children of the working class didn’t fare well during this time.

However, other forces were at work, trying to help with the problem of caring for children while their parents were absent. For example, the first day nursery in the United States was opened in Boston in 1838, to provide care for the children of seamen’s working wives and widows. Sixteen
years later, the Nurses and Children’s Hospital in New York City opened a day nursery to care for infants and toddlers of working women who had been patients there.

During the Civil War (1861–1865), day nurseries were opened to care for the children of women working in hospitals and in factories making soldiers’ clothing.

In 1893, a model day nursery, set up at the World’s Fair in Chicago, cared for children of visitors. By 1898, about 175 day nurseries were operating in various parts of the country and the National Federation of Day Nurseries was established.

**The Early Twentieth Century**

Over the next decade day care expansion continued. Generally, day care was set up in a converted home. Most day care homes or nurseries were *custodial*; that is, they merely “minded” the children. A woman usually ran them with one or two assistants who not only cared for the children but also cooked, cleaned, and washed clothes.

Some nurseries taught children cleanliness and manners, and tried to instill obedience and a belief in hard work and being on time.

Some even hired kindergarten teachers to teach reading, spelling, and weaving. Others offered classes for the mothers in child care, cooking, and sewing; access to job opportunities and training; and help with family problems.

**World War I and the Depression**

Child care centers were established to accommodate the children of women who were employed to assist in the war effort. Then an economic crisis in 1929 led to the Great Depression of the 1930s. To combat some of the Depression’s effects, child care centers were established under the Work Projects Administration (WPA) to furnish day care for children of working parents and to provide jobs for unemployed teachers.
**World War II**

Women were recruited to work in factories and offices to replace the men who served in the armed forces. Child care centers were established with federal funds by the Lanham Act of 1940. In addition, industries sometimes provided their own child care services. For example, in 1943 in Portland, Oregon, Kaiser Shipyards opened a child care center at each shipyard. Henry Kaiser built the world’s largest child care centers, which were open 24 hours a day. These centers provided hot meals, a nurse on staff, playrooms, and wading pools. The cost of the care was shared between the parents and Kaiser Shipyards. Most of the child care centers, including the Kaiser centers, opened because of the war and also disappeared after the war when the men returned to work and many women left their jobs.

Even though the Lanham funds were withdrawn in 1946, child care facilities continued to exist. Some were run by charitable organizations emphasizing social work and serving families with financial and other problems. Others were private, paid for by mothers who worked. Still others were set up for the purpose of enriching children’s development.

**The Post-War Twentieth Century**

Jean Piaget, an influential developmental psychologist, spent more than 50 years observing and talking to children. He believed that a child’s mind develops through a series of stages from newborn through adulthood, which he called *cognitive development*. His theories are applied at many child care centers today.

Day care homes, nurseries, child care centers, and preschools began to flourish in the 1960s. There were several reasons, among them a positive change in public attitude toward women who worked; the realization that providing day care would allow more women to get off welfare; and research studies which showed that children learn more rapidly in the early years of life. Federal support for day care became available once more for poor families.
The 1970 White House Conference on Children pointed to the need for quality child care as the most serious problem confronting families and children.

The 1980s brought cutbacks in some government-funded programs related to child care. The topic continued to be debated for the rest of the twentieth century. Perhaps as the long-term benefits of child care are recognized, more funding will become available (Figure 7).

The Preschool Idea

The idea that children can learn before they go to school isn’t a new one. This idea was proposed in 1657 by John Amos Comenius, a Czech educator, in his book *The Great Didactic*. The book was designed for mothers to use in preparing their children for formal school. A year later, he published a picture book for children, which included parts of the body, animals, plants, and colors as well as material on moral and religious training.
About 150 years later, a Swiss educator named Johann H. Pestalozzi created preschools for young children. He stressed children learning through using their senses to discover things about their world. One of Pestalozzi’s students, Frederick Froebel, a German, founded the kindergarten in 1842. The focus was on play rather than formal schooling such as reading or writing.

In the United States the kindergarten movement grew from the work of Elizabeth Peabody, who opened the first private English-speaking kindergarten in Boston in 1860. Peabody felt young children were self-centered. Left at home, they would become selfish, whereas in kindergarten, experiences with others would make them more sociable.

The first kindergartens were expensive and were used primarily by wealthy families. Gradually, they came to be seen, in both Europe and the United States, as a way of helping all children.

For example, Kate Douglas Wiggin started a settlement kindergarten for underprivileged children in San Francisco in the 1870s. (Wiggin was the author of children’s books, such as *Rebecca of Sunnybrook Farm*.)

Then, early in the twentieth century while working on her medical internship in Rome, Maria Montessori developed and applied materials and methods for teaching intellectually and developmentally disabled children. The results were so impressive that she concluded normal children would also benefit from the same approach. So she applied her methods, with success, in the Casa Dei Bambini (Children’s House), a school where children from the slum were taught. The schools she established provided a stimulating, changing environment in which children could move freely and learn.

Montessori’s work influenced the establishment of the first nursery school in New York City in 1915. Montessori schools still exist throughout the United States, as does the Montessori American Society.

Also in 1915, a group of faculty wives at the University of Chicago organized a cooperative preschool. In 1919, in New York City, a nursery school was founded under the direction of the Bureau of Educational Experiments that later became a demonstration center for the Bank Street College of Education.
The Merrill Palmer Institute organized a nursery school in Detroit in 1922 to provide a laboratory for training women in child care.

By 1925 an organization of nursery schools was formed, and it’s now known as the National Association for the Education of Young Children (NAEYC). NAEYC administers a voluntary accreditation system for all types of child care programs. The system is based on an extensive self-study meeting the association’s criteria. The self-study results are verified for accuracy during a site visit. NAEYC is currently the nation’s largest organization of early childhood educators.

### A Closer Look at Child Care

So far, the terms *child care, day care, nursery, preschool, and kindergarten* have been used almost interchangeably. Now let’s look more closely at these terms and at the various types of child care. With this information, you can begin thinking about the type of child care that interests you and for which you seem most suited.

Here are definitions of the terms used.

*Child care, or day care,* refers to care given to a child by someone other than the parents or immediate family. For younger children, this care is given during the hours in which the parent or parents work. For school-age children, this care may be given before or after school hours, while the parents are working or otherwise absent.

A *nursery* is usually a room or place set apart for the care of very young children (Figure 8). A *nursery school* provides an educational program for children younger than kindergarten age (usually half-day).

*FIGURE 8—A nursery is set apart for the care of very young children.*
Preschool is a place where children go to school before they enter kindergarten (Figure 9). This term is also used in a generic sense to refer to all types of programs for prekindergarten-age children, which are typically designed to prepare children for school.

Kindergarten is a division of a school system, below first grade. Curriculum varies from developmental to academic, and programs may be half-day or full-day.

**Types of Child Care**

You’ll find, as you learn more about child care, that there are numerous programs and arrangements for caring for children while their parents are busy. However, each of these arrangements usually falls under one of the following three types: in-home care, family day care, and day care centers.

**In-home care.** In-home care, which may include home visitor care, is care in the child’s home (Figure 10). The caregiver comes to the child’s home daily, part time, occasionally (when a child is ill or when parents are away or busy), or lives in (the caregiver stays full time). In-home care is used for about 5 percent of the children whose parents work.
Family day care. Family day care refers to care a child receives in someone else’s home. The child is in a family setting, but outside of his or her own family. Often the children cared for are of different ages, as they would be in a family. The program centers around the usual activities in a home: cooking and eating, talking, cleaning, doing the laundry, gardening, and so on (Figure 11). Almost 31 percent of the children who have a full-time caregiver receive this care in someone else’s home.

Licensing requirements for family day care vary by state and county. State agencies will be listed later in your program. Local county agencies can be found in the yellow pages of the phone book or through local government offices or chambers of commerce.

The number of children you can care for in your home may range from one to six if you’re the sole caregiver, and six to twelve if you have an assistant. The number of caregivers to the number of children is called the caregiver ratio (or staff ratio). The allowable caregiver ratio differs depending on state regulations. You’ll need to contact your local licensing agency or department of public welfare to find out the caregiver ratio in your state.

State government social service agencies usually require family day care homes to register with the state if care is provided for more than one family of children on a regular basis.
ADVANTAGES AND DISADVANTAGES OF IN-HOME CARE

Advantages

There are several advantages to being an in-home caregiver:

Fees and costs. In-home care may be more expensive than many parents can afford, but those seeking this form of care may be willing to pay your price. Therefore, you may be able to set your own fee. Even if you can’t set your own fees, if you work more than 20 hours a week, you’re covered by the minimum-wage law. Also, parents must pay Social Security tax. You won’t face issues such as zoning, or costs such as for renovation to your home, or start-up and continuing costs for equipment and supplies, as are encountered by providers of family day care and day care centers.

Relations with people. You’ll have the opportunity to work closely with parents and will consider their goals in planning and carrying out the program of activities for the child or children. You can choose the family or families you’ll work with.

A Disadvantage: One-to-One

One aspect of in-home day care that may disturb either the parents or the caregiver is the one-to-one relation of the caregiver and the child (if there’s only one child). Due to the close relation, the child may form a closer bond with the caregiver than with the parents, or the caregiver may become overly possessive of the child. This may lead to the removal of the caregiver, with disturbance to both the caregiver and the child. So, as an in-home caregiver, you must have patience to develop a good working relationship with both the child and the parents.

States including Alabama, Connecticut, Delaware, Kansas, Massachusetts, Maryland Michigan, Oklahoma, and Washington require state registration if even only one child is cared for in a family day care, while Arizona, Idaho, Louisiana, New Jersey, Ohio, South Dakota, and Virginia don’t require any registration with the state for family day cares. All other states require registration of family day cares only if there are more than three or four children receiving care at the home. However, training (such as you’ll receive in this program) and licensing are a real plus for advertising your business. It may be the only way you can get on your community’s Child Care Resource and Referral list.

Let’s take a closer look at what the Child Care Resource and Referral Service does. (In your area, this service may be known by a different name, such as the Community Coordinated Child Care Agency, or Training and Technical Assistance Program.) Parents seeking child care usually turn to a service in their community, if one is available. This service collects information about all forms of care...
that are offered in the community. It also provides help to caregivers, advising them on how to start their service, how to improve its quality, and how to solve problems that arise. Often such services compile data on child care supply and demand in the community. Thus, this service is valuable to the caregiver and to parents.

**Day care centers.** Day care centers are facilities, usually licensed by the state, which house more than 12 children. The average facility contains about 50 children.

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**ADVANTAGES AND DISADVANTAGES OF FAMILY DAY CARE**

**Advantages**

Here are some advantages of family day care:

If you’re a parent, you can care for other children and earn money doing it, while caring for your own children.

You can set your own fees and the hours you want to work.

You can choose the family or families you’ll work with.

You can organize your home as you desire and plan activities that you decide are best.

Your home becomes a business and may be eligible for certain tax advantages. Check with your local Internal Revenue Service office for details.

You can be associated with community agencies or belong to a network of family day care providers (if available), which will give you access to many services:

- Workshops that discuss topics such as developmentally appropriate activities (children’s activities suitable to different ages); nutrition; and laws affecting child care
- Professional advice on children, families, health, safety, and business practices
- Special insurance rates on your business. These are sometimes offered to network members.

**Disadvantages**

The drawbacks of family day care are primarily those involving your own family. Remember, you’re bringing these children into the home of your entire family. You must plan and prepare your family for this event.

You need the support of your spouse, if you have one, and of your own children. If you deal patiently with them and consider their needs, you may win their support.

In addition, you may be required to make modifications to your home to comply with local fire codes, safety regulations, or the Americans with Disabilities Act.
The children are often divided into groups according to age. State and local licensing agencies determine the staff-to-child ratios. Generally, for infants and toddlers, the ratio is 1:3 (1 caregiver to 3 children) or 1:4; for preschoolers, it’s 1:6 to 1:8; and for school-age children it’s 1:10. Most centers are attended by two- to five-year-olds.

About 64 percent of all children who have full-time caregivers attend day care centers.

A ratio is written using a colon to separate the numbers, like this—1:3. You would say “one to three.”
Day care centers can be divided into two types: *profit* and *nonprofit*.

The nonprofit day care center is sponsored by organizations such as churches, community action agencies, hospitals, and schools, or is supported by federal and state government agencies or by corporations (for their employees’ benefit). There are also cooperatives (co-ops) organized and run by parents who participate as volunteers to keep costs down.

The federal- or state-supported center usually offers the widest range of services: child care and education, meals, health care, transportation, and parent education.

Many of the centers for profit are small, private businesses, run by a family or an individual alone or in partnership with another person. The owner is usually the director and a caregiver.

Other centers run for profit are *franchise*, or *chain*, day care centers, such as Kinder-Care or La Petite Academy. Such chains are started by large corporations, an individual, or a group of people.

Before going on to the next section, take some time to complete *Self-Check 1*. 
Self-Check 1

At the end of each section of Contemporary Child Day Care, you’ll be asked to check your understanding of what you’ve just read by completing a “Self-Check.” Writing the answers to these questions will help you review what you’ve studied so far. Please complete Self-Check 1 now.

1. What name is usually given to the care of a child by someone other than the family?
____________________________________________________________________

2. What division of school teaches children before first grade?
____________________________________________________________________

3. What “school” teaches prekindergarten children?
____________________________________________________________________

4. In what type of care is the child cared for in his or her own home?
____________________________________________________________________

5. In what type of care is the child cared for in someone else’s home?
____________________________________________________________________

6. What place cares for 12 or more children?
____________________________________________________________________

Questions 7–10: Before each of the following descriptions, write which type of care it describes: i (in-home care), f (family day care), or d (day care center).

_____ 7. The child is usually cared for on a one-to-one basis (one caregiver to one child).

_____ 8. The caregiver can earn money while caring for other children as well as his or her own.

_____ 9. There are more government regulations and requirements for this kind of child care than for the other types.

_____ 10. You can set your own fees.

Check your answers with those on page 37.
You may have noticed that the term *program* has been used in two senses. In a narrow sense, it means the activities planned for the children. In a broader sense, it includes children’s activities; schedule of day care hours; overseeing of staff, facility, equipment, advertising, enrollment, and so on—the entire day care system. You can usually detect in which sense the word is used by the sentence in which it’s used. For example, you know *program* is used in the narrow sense in this sentence: “The program included both large-muscle and small-muscle activities.”

The term *curriculum* is also sometimes used to indicate the planned activities for the children.

After reading about the various types of child care, you may have decided which type you want to operate or to be associated with. You must also consider and establish your program philosophy and design. Your *program philosophy* consists of your beliefs, ideas, and principles that will guide you in establishing or working in a child care program. *Program design* will be defined in sections that follow.

In the following discussions of program design and child care, we’ll address “you” as the director, or manager, of a day care facility, even though you may not start your day care career in that capacity. From the very beginning, you should try to think like a manager, so that you’ll be ready for that responsibility when it comes.

**Developing Your Program Design**

Your program—all activities related to child care—will include

- The curriculum (all planned activities for the children)
- Your schedule (the hours you and your staff work)
- The hiring, training, and supervising of staff
- The environment (the place or facility where child care takes place) and how it’s organized
- The equipment you purchase
- How you and your staff communicate with children and parents
- Whom you enroll
- Type of advertising
- Policies established by the center
- Evaluation of the entire program

Your child care design isn’t something you’ll decide now and stick to forever. It should change as you gain knowledge and experience. Everything you read or hear, every interaction you see or experience between children or between children and adults—all will modify your thinking about effective child care.

Start thinking about how you’d design your child care program. To guide you in your thinking, refer to the list of questions in the boxed item below. Even though you may not know about some of the areas yet, at least you’ll become more aware of them. From time to time, as you progress in your studies and experience, you should go back to the list and see how your thinking has changed. You’ll find that your ideas about program design do change as you gain experience, as you find out what works and what doesn’t, what you’re comfortable with and not, and what you observe or learn from others. Your program design should be a living, changing one that grows as you do.

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**Child Care Program Design—Food for Thought**

How would you group the children in a day care center? All of one age together? A mixture of ages? By ability?

Would you include children with special needs (handicapped, emotional problems, or non-English-speaking)? How would you provide for children with special needs?

If the program is for preschoolers, should it train for kindergarten?

If the program is for school-age children, should it supervise homework? Emphasize recreation?

How should children be motivated to do something?

What standards do you have for the behavior of children? What behavior wouldn’t be tolerated?

What should be the personal qualities of a caregiver? What professional qualifications should the caregiver have?

Should the parents have input into the program design?
Another way to help learn about child care program design is to call and visit several day care homes and several day care centers (Figure 12). As an observer, you’ll see how knowledge is translated into action in a real-life setting.

To gain an insight into the day-to-day operation of a child care facility, read the information in “A Day in Family Day Care” and “A Day in a Day Care Center.”
A DAY IN FAMILY DAY CARE

Sally operates a family day care facility in her home.

On weekdays, she awakens at 6 A.M. and gets breakfast started for her family. Her husband dresses Joey, their two-year-old son, while five-year-old Angie dresses herself.

By 7:30, when the first child arrives to be cared for, Sally’s husband has left for work, Angie is watching Mister Rogers on TV until it’s time for school, and Joey is involved with some plastic blocks.

Sally cares for three children in addition to her own. One is six months old, one is three (the baby’s sister), and one is a five-year-old who goes to afternoon kindergarten.

Sally juggles meeting the baby’s needs while trying to keep her own two-year-old and the other two children happy and occupied. She does this by being very organized. The baby naps in the morning, so Sally arranges an activity for the other children—maybe Play-Doh, coloring, or cooking.

Lunch is eaten together. The children participate in the food preparation and cleanup. Sally holds the baby and gives her a bottle while she chats with the others and helps Joey.

After lunch, the five-year-old leaves for school and Angie comes home. Joey and the three-year-old take a nap, while Sally has lunch with her daughter.

Angie then goes to her room for an hour to rest or do a quiet activity while Sally plays with the baby. By the time the children are up from their naps, the baby is ready to sleep.

Sally has a sandbox and climbing equipment in her fenced-in yard. The children play together outside for a while and then come inside for a story and snack. Another activity is planned for the afternoon before the children are picked up at five o’clock.

A DAY IN A DAY CARE CENTER

The center is open from 7:30 A.M. to 6:00 P.M. Nancy, the director of the center, arrives at seven o’clock to open it. She and Linda, her assistant and head teacher, take turns opening and closing the center. Whoever closes the center at 6:30 P.M. doesn’t have to arrive until 9:30 A.M. The rest of the staff’s hours vary as well.

The center has 60 children, all three- and four-year-olds. The children are grouped according to age. There are four teachers in addition to Nancy. Also on the staff are a part-time secretary, a part-time cook, and a cleaning person.

The children arrive between 7:30 A.M. and 8:45 A.M., so the first activity of the morning is free play. Various games and puzzles are set up on tables. There’s also a block area and a housekeeping area.

After free play, the children have a snack and then sing some songs. They go outside to ride tricycles or play on the climbing equipment. When they come in, one of the teachers reads a story while lunch is being prepared and set up. The children talk among themselves while eating lunch. Afterwards they take a two-hour nap. Upon awakening, there’s a choice of creative materials—finger painting or collage. The children go outside again, this time for a walk to a nearby park that has a duck pond. The children love to feed the ducks leftover bread (they often bring some from home). Then it’s back to the center for a snack and a puppet story before they’re picked up by 6:00 P.M.
Your Responsibilities as a Caregiver

Later study units in this program will discuss in detail your areas of responsibility as a director and caregiver. However, here you’ll receive an overview of those responsibilities so that you’ll obtain a broad picture of the child care field. Don’t be concerned about details at this point; they’ll be furnished later in your program.

The areas of responsibility include meeting licensing requirements; meeting the children’s needs; providing a safe and healthy learning environment; communicating with parents; managing staff; being a good neighbor; and being financially sound.

Meeting Licensing Requirements

Regulations governing child care centers differ widely from state to state (Figure 13). To learn the laws of your state, later in your program you’ll request a copy of the regulations from your state licensing agency, whose address we’ll furnish.

Licensing regulations in most states cover the following areas: licensing law and procedure for obtaining a license; organization and administration; staffing; facility and equipment; health and safety; and program of activities.

Minimum regulations that are common to all child care programs include fire, safety, sanitation, zoning, transportation, prevention of discrimination, programs, and staff.

FIGURE 13—Each state government has safety regulations that must be met by child caregivers and facilities, such as outlet covers.
Meeting Children’s Needs

You’ll be responsible for planning and supervising the daily children’s program in the facility. Your plan should include the following kinds of activities:

**Indoor/outdoor.** Children should spend some time both inside and outside of the building, weather permitting (Figure 14).

![FIGURE 14—Children should spend some of the day playing outside when weather permits.](image)

**Quiet/active.** Quiet times (such as looking at books) should be planned between periods of physical activities (such as climbing) (Figure 15).

![FIGURE 15—Quiet, individual play should be planned between periods of physical activities and group play.](image)
**Individual/small groups/large groups.** The children should have time to play alone, perhaps painting or looking at books; time to play with a few other children, perhaps with building blocks; and time for large-group activities such as a game of tag, including many children.

**Large muscle/small muscle.** Opportunities should be given to develop and coordinate large muscles in the arms, legs, and so on (such as riding a tricycle). The smaller muscles in the hands should be used in other activities (such as cutting paper), since these muscles will later be used for writing and other tasks.

**Child initiated/staff initiated.** Children should be allowed to choose activities in free play time, as well as to engage in staff-selected activities.

Between play times, there should be rest periods. *Field trips* may also be arranged. A field trip is any group activity that takes place beyond the borders of the day care facility. A field trip may be a walk to the park a block away or a bus trip to the zoo in a nearby city.

The point is this: the caregiver should provide a variety of activities and materials appropriate to the age of the children. The caregiver should also:

*Be available and responsive to children.* Encourage them to share their experiences, ideas, and feelings. Encourage independence, appropriate to the child’s age. Encourage children to clean spills, to obtain and care for materials, and to be responsible for personal care (washing hands, for example) whenever possible.

*Redirect actions.* For example, if a child becomes overexcited in one activity, gently divert him or her to a quieter activity.

*Anticipate and eliminate potential problems.* This could be as simple as covering an electrical outlet or as major as locking up poisons in a cupboard.

*Use positive reinforcement and encouragement.* Praise a child when something is done correctly. Gently correct it when he or she isn’t. Don’t compare one child with another or have children compete with one another.
Have consistent, clear rules that are understood by all the adults and explained to the children. Don’t use physical punishment or other humiliating or frightening discipline techniques. Rather, use the techniques you’ll learn about in a later unit.

**A Safe and Healthy Environment**

Here are some of the responsibilities of a director and requirements for the facility and staff, related to providing quality care in a safe and healthy environment for children.

The director must be sure the facility complies with legal requirements for the protection of the health and safety of children in group settings. The facility must be licensed or accredited by the appropriate state and/or local agencies.

The facility must be cleaned daily. All equipment, furniture, and the building must be maintained in a safe, clean condition and in good repair (Figure 16).
All chemicals and potentially dangerous products such as medicines or cleaning supplies should be stored in their original labeled containers in locked cabinets inaccessible to children. Medication should be given to a child only when the parent and a doctor have submitted a written order.

A record must be kept for each child, including the results of a complete health evaluation of the child by an approved health care facility prior to enrollment. The record should also include pertinent health history (such as immunizations, allergies, and chronic conditions), emergency contact information (whom to call if the child becomes ill), and the names of people authorized to pick up the child: the parents and/or any other persons specified by the parents. Each state may require additional forms to be completed by the parent and/or health care facility, so make sure state regulations are checked.

A written policy must be developed specifying the limitations on attendance of sick children. Also, a separate place should be provided for children who become ill in your facility, to protect the healthy children.

An organized program of developmentally appropriate and culturally sensitive activities should be provided. The program must be conducted in an environment prepared for young children. Such an environment is interesting, stimulating, and nurturing as well as safe and healthy (Figure 17).
Facilities should have all emergency numbers posted, especially near the telephones. The posted numbers should include the local hospital, police, fire emergency, poison control, and a main contact person. An emergency evacuation procedure must be developed in case of a fire or other disaster. Regular fire drills will familiarize the staff and children with the evacuation plan.

Meals and snacks should be planned to meet the child’s nutritional requirements. It’s important to be aware of any food allergies a child may have, as well as to provide nutritionally balanced foods instead of junk foods (Figure 18). Where food is prepared on the premises, the facility must comply with legal requirements for nutrition and food service.

Each adult at the facility must be free of physical and psychological conditions that might adversely affect children’s health. The staff must receive pre-employment physical examinations, tuberculosis tests, and an evaluation of any infection. Some states require fingerprinting, criminal history checks, and abuse and neglect screenings. The director of the facility will need to know the state requirements for child care employees. Hiring practices must include carefully checking business and personal references of all potential new employees. It’s important to remember that every employee working at a day care center is a state-mandated reporter for suspected child abuse and or child neglect. This means the employee has a legal obligation to report any suspicion of child abuse—if a child is often covered with bruises, for example—to the appropriate child welfare agency.

The staff must wash their hands upon arrival at the center, after diapering or helping children toilet themselves, before handling food, after using the bathroom, after handling pets or animals, and after coming in from outside.

Children must be under adult supervision at all times.
A staff member must provide for the safe arrival and departure of all children and ensure that children are released only to authorized people. If you provide transportation for children, check to see if vehicles in your state must be equipped with age-appropriate restraining devices (Figure 19).

![Modern Child-Restraint Seat](image)

**FIGURE 19—Modern Child-Restraint Seat**

**Communicating with Parents and Others**

The staff should keep records of day-to-day happenings in the facility—achievements of each child and changes in a child’s physical or emotional state. These events should be shared often (daily if possible) with the child’s parents through a verbal and/or written system.

If new families have enrolled in the facility or are considering enrolling, give them information about your program, including a written description of the program’s philosophy and operating procedures. Such families should be welcome as observers of your program. You should arrange an orientation.
interview, discussing your program and goals, the parents’ expectations, and your fees and refund policy. Both parents and staff should be aware of whether there’s a refund if the child is absent. Parents enrolling their children should be provided with consent forms to read and sign. Specific consent forms provide additional information about day care activities and ensure that the day care provider has kept parents informed. Consent forms should cover administration of prescription and nonprescription medication, permission for field trips, and so on. Travel away from the center (even short distances on foot) and administration of any kind of medication are issues which parents perceive as affecting the health and safety of their children. You may also require consent forms for a person other than the parent to pick up the child at the end of the day, or for a child to leave early. Other things will occur to you as you gain experience. Put yourself in the place of the most protective parent you know. If you think that parent should know about a specific event, then a consent form is a good idea. You can reevaluate the need for a consent form by judging parent response. You’ll be provided with some sample forms later in the program.

Another area in which you can help parents is to refer them to other community agencies when they require specialized services. For example, if you notice that a child doesn’t seem to have normal hearing, you should inform the parents and refer them to a testing clinic (Figure 20).

**Managing Staff**

The ratio of staff to children will vary depending on the age of the children, the type of facility, the type of program activity, the inclusion of children with special needs, the time of day, and other factors. Licensing requirements vary from place to place. Generally, staffing patterns (work schedule of staff) should provide for adult supervision of children at all times. Also, an additional adult should be available to assume responsibility for the children if one adult takes a break or must respond to an emergency. It’s very important to remember: *Never leave any child alone!*
The director of a facility is responsible for planning and executing orientation sessions (information about the center) for new staff members. Also, the staff must be supervised and evaluated.

A day care director must make the lines of responsibility clear. Who is in charge in the director’s absence? Does the cook report to the director, the assistant, or one of the other caregivers? Who makes the decision to call the parents of a sick child? These and other questions should be anticipated and answered before the situation occurs.

Workloads for caregivers in a facility should be as even as possible. If practical, tasks should be rotated so one person doesn’t end up doing all the diapering!

All staff should be adequately supervised and trained on the job whenever necessary and possible.

Every facility should have written policies and procedures for operating the facility. These should include a schedule of days, hours, holidays, fees, and procedure with an ill child. Written personnel policies should include job descriptions, compensation, resignation and termination procedures, benefits (insurance and so on), and grievance procedures (when an employee has a complaint).

Regular staff meetings should be held to discuss program planning and evaluation of individual children. The director should arrange for qualified substitutes in case a staff member is ill.

**Being a Good Neighbor**

You should be a resource for your community—provide people with information about your program, refer people to community agencies if they need special services, or volunteer to speak at community groups on a child care topic.

Respect your neighbors’ right to peace and privacy. Be aware of children’s noise, especially during outdoor activities (Figure 21).
Notice arrivals and departures. For example, prevent clients or staff from parking across a neighbor’s driveway or in front of the neighbor’s property (if the neighbor objects). Establish a transportation route that minimizes inconvenience to the neighbors during pick-up and drop-off times. Use sound-absorbing materials and fence your outdoor play area. Keep your facility in good repair, well groomed, and attractive.

Being Financially Sound

The director of a day care facility should try to ensure financial success by planning an annual budget (balancing income and expenses). The director should also perform or supervise the following:

- Collecting and recording tuition fees (for the child care) and depositing such fees in the bank
- Purchasing equipment and supplies
- Keeping petty cash records and all other financial records
- Planning menus and marketing
- Keeping inventory records
- Paying bills and salaries
- Developing and implementing an advertising plan

Before taking the examination, take some time to complete Self-Check 2.

*Petty cash* is small amounts of cash kept on hand for small expenses, such as emergency cab fare.
Self-Check 2

1. Who initiates free play activities?

____________________________________________________________________

2. When a child becomes overly excited while playing, what should the caregiver do?

____________________________________________________________________

3. When can a child receive medication?

____________________________________________________________________

4. When can a child in a day care facility be left alone?
   a. When another child becomes ill
   b. When another child is injured
   c. If another caregiver is in the next room
   d. Never leave a child alone.

5. Upon discovering that a child in a day care facility has impaired hearing, the caregiver should
   a. arrange an appointment with a child care clinic.
   b. immediately take the child to be examined at a child care clinic.
   c. tell the parents and refer them to a child care clinic.
   d. ignore the problem, so you won’t offend the parents.

6. Which of the following would be a large-muscle activity (L) and which would be a small-muscle activity (S)?
   _____ stringing beads
   _____ riding a bike
   _____ climbing a ladder
   _____ swinging
   _____ cutting with scissors
   _____ coloring

(Continued)
Self-Check 2

7. What factors will influence you to change your child care design?

____________________________________________________________________
____________________________________________________________________

8. What does an annual budget do?

____________________________________________________________________
____________________________________________________________________

9. Sue, the center director, is absent from the center today. Her assistant, Betty, gives some instructions to staff members. In the interest of professionalism and good example for the children, staff members comply, but some feel resentment about Betty’s actions. What might Sue not have made clear to the staff?

____________________________________________________________________

Check your answers with those on page 37.
**Self-Check 1**

1. Day care or child care
2. Kindergarten
3. Preschool, or nursery school
4. In-home care
5. Family day care
6. Day care center
7. i
8. f
9. d
10. i and f

**Self-Check 2**

1. The child
2. Redirect the child to another activity
3. When the parent has submitted a written order
4. d
5. c
7. Everything you read or hear, every interaction you see or experience between children or between children and adults
8. Balances income and expenses
9. She might not have made the lines of responsibility clear.