Family Child Care Home Licensing Orientation Training

Orientation II—Preparation for Licensure

Thank you for opening your heart and home to the children of Indiana!

Created By:
The Indiana Association for Child Care Resource & Referral

Delivered By:

Date:

Topics:
Steps to licensing, application packet, licensing rules & regulations, maintaining files for family, staff, and children.

Reporting child abuse and neglect, the American with Disabilities Act, helpful resources and activities are also contained in this manual.
# Orientation II Preparation for Home Licensure Training

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Family Child Care Home
Orientation Training

Purpose: The purpose of this training is to provide the necessary forms, documentation and information to help you prepare yourself and your home for the pre-licensure inspection.

Agenda of Orientation Training

Introductions
The Indiana Association for Child Care Resource and Referral
Your local Resource & Referral agency
How to use this manual
Important Licensing Information
Resources to assist with compliance of regulations
Licensed Homes defined
Steps to Licensing your home
Rules & Regulations video
Sample Forms
Reporting Child Abuse & Neglect
The Americans with Disabilities Act
Additional information helpful to you and your business
Evaluation and questions
This manual was developed by the Indiana Association for Child Care Resource and Referral Staff, with many contributions from the early childhood community.

This project is made possible by funding through the Bureau of Child Care Family & Social Services Administration. *This manual was updated in 2009 by IACCRR with input, editing and assistance from many local child care resource and referral personnel and home child care licensing personnel.*

*Any questions or concerns regarding this manual should be directed to IACCRR*

1-800-299-1627

*A special thank you to all who contributed*
NOTES
Indiana Association for Child Care Resource & Referral (IACCRR)

The Indiana Association for Child Care Resource and Referral, hereinafter IACCRR, is a statewide organization. IACCRR’s mission is to ensure comprehensive delivery of child care resource and referral activities as mandated by the national affiliate, the National Association of Child Care Resource and Referral Agencies - NACCRA.

Independent agencies and/or organizations are under contract with IACCRR to provide child care resource and referral services in their communities. IACCRR provides leadership, training, support services and resources to ensure the delivery of standards of services to families, providers and the community. Please contact the agency in your community for a comprehensive explanation of services.

**Supporting Families**

Provide referrals to child care and other early childhood programs via computerized database. Referrals are generated that match parents basic child care needs such as location, hours of care needed, and specific type of care.

Distribute consumer education materials that serve to educate the parent on various child care options available. Additionally, the agency provides parents with information about indicators of quality child care.

**Supporting Providers**

Identify, recruit and support individuals who wish to pursue family home child care licensure as well as provide information on other types of licensure and registration.

Provide a number of trainings as well as technical support for child care providers based upon the needs of the local child care community. Training opportunities are diverse and are delivered in a variety of settings (formal and informal).

Collect and maintain general data related to the state of Indiana’s child care supply and demand which can assist providers with information for their business.

**Supporting the Community**

Helping employers identify and meet the child care needs of their employees, including enhanced referrals and establishing other work family related programs for the employer.

Collect and maintain general data related to the state of the communities child care supply and demand.

IACCRR
3901 N. Meridian Street, Suite 200, Indianapolis, Indiana 46208
800-299-1627
As a licensed child care provider, registered with your local Resource & Referral, you may be eligible for many free benefits.

These benefits could include:

- Free referrals to help fill your child care openings
- Information about free or low cost educational training
- Updates on State and local early childhood information
- Access to resources including a lending library to enhance your program
- Recognition as a professional business owner – which allows you to claim additional business related tax deductions
- Information about opportunities to access scholarships for training and grant opportunities.

**Please remember to call your local Resource & Referral agency after you are licensed**.

Local Resource & Referral Agency Information

Agency name: _______________________________________________

Phone: ____________________________________________________

Address: ___________________________________________________

_________________________________________________________

Contacts :

Education Coordinator Inclusion Specialist

Infant and Toddler Specialist Referral Specialist

Paths to “QUALITY“ Additional

*Those who open their hearts to others...are the wonderful, warmhearted people who make a difference in our lives.” D. Manning*
Paths to QUALITY is a voluntary system created to:

- Improve the quality of child care and Early education for children
- Give parents a tool to find the best quality program for their family’s needs
- Support and recognize providers on a four level rating system.

The program has been studied and validated by the Child Development and Family Studies experts at Purdue University.

Paths to QUALITY:

- Offers programs marketing tools and a competitive edge
- Provides tools families can use to identify quality child care
- Offers support and resources to participating programs
- Increases the chances that children will be receiving the warm, nurturing, stimulating care they need for the best development
- Identifies the four levels of quality for family child care home providers, child care centers, and unlicensed registered ministries

The standards for Paths to QUALITY are tailored for family child care homes and for licensed centers and unlicensed registered ministries. Each level builds on the previous level, resulting in significant improvements at each stage.

History of Paths to QUALITY

Indiana has chosen to implement a voluntary Quality Rating System that builds on a home grown model.
In 2000, PTQ was implemented in Allen County in Northeast Indiana by the Early Childhood Alliance (ECA) Child Care Resource and Referral agency.

In 2001, PTQ was implemented in the surrounding 5 counties of DeKalb, Whitley, Steuben, Noble, and LaGrange.

In 2005, 4C’s of Southern Indiana implemented the PTQ program in the 11 county service area of Vanderburgh, Posey, Pike, Dubois, Warrick, Knox, Martin, Daviess, Spencer, Gibson, and Perry Counties.

Statewide implementation began in January 2008. Completion of roll-out was January 2009.

Understanding the Levels

**Level 1**  
Health and safety needs of children are met

**Level 2**  
Environment supports children’s learning

**Level 3**  
Planned curriculum guides child development and school readiness

**Level 4**  
National Accreditation (the highest level of quality) is achieved

The main components of **Paths to QUALITY** are:

1. A set of quality standards that apply to home-based, center based and ministry child care;
2. A process for objectively assessing child care quality and maintaining accountability;
3. A system of training and technical assistance to help child care providers improve quality;
4. Incentives to encourage providers to reach higher levels of quality;
5. Public information to inform parents about what the QRS is and how to use it when they make child care decisions.
How to use this manual:

This manual was meant to support and guide you through the home licensing process. Any specific questions regarding rules and laws as they are interpreted or applied to your home setting should be directed to your licensing consultant.

Please keep this manual in an accessible location as you will refer to it periodically throughout your child care career.

• If you have questions about your next steps, resources or how to fill out forms, please call your resource and referral agency whom conducted this training for technical assistance.

• Utilize the “Application Packet” in the front of this manual to work through the licensing process. Please be sure to note that Drug Testing is Time sensitive and is only valid 60 days prior to receipt of your application. Plan on completing other steps (such as TB testing, CPR and First Aid and obtaining a general physical prior to Drug Testing).

• Utilize the “Sample Forms” to complete the other documentation requirements. You should plan on having an organized filing system to hold your documentation as well as a place (cork board, wipe board) to post information that parents and staff need to view.

• The Inspection Checklist and Child Care Rules and Laws booklet should be used to prepare your home for inspection.

• This manual contains additional information beyond the requirements for licensure from the Relationships section to the end of the manual. This section is based on National Association for Family Child Care (nafcc.org) best practices for accreditation and is encouraged to be utilized.

This training is valid one year from the date on the training certificate prior to licensure.
Helpful Resources

To assist in obtaining and maintaining your license
Emergencies:
Ambulance, Fire Dept, police
________
Poison Control
________
Hospital
________
Local Resource & Referral Agency
Licensing Consultant
Childcarefinder website
www.childcarefinder.in.gov
To Report Suspected Child Abuse
call your local CPS
1-800-800-5556

Other Important Numbers
Department of Education
Food Program
1-800-537-1142
Local Health Department
Health Consultant Program
1-317-232-4469
T.E.A.C.H- Scholarships
1-800-657-7577
IAEYC - membership, advocacy, conferences, resources
Indiana Association for the Education of Young Children
1-800-657-7577
First Steps
Local School System:
FOR 911 operator if needed
Your name:
Address:
T.E.A.C.H. Early Childhood® INDIANA Project

The T.E.A.C.H. Early Childhood® INDIANA project serves as an umbrella for educational scholarship opportunities for people working in licensed, registered or legally exempt child care centers and homes in Indiana.

The T.E.A.C.H. project design is a partnership model, which requires the sharing of expenses between the T.E.A.C.H. Early Childhood® INDIANA project, the sponsoring child care program and the scholarship recipient.

**Scholarships $**

- T.E.A.C.H. Early Childhood® INDIANA covers partial costs to help with the costs of college tuition, books and travel. With some scholarship models, recipients also receive paid release time.

- Scholarships are based on the principle of partnership between the scholarship recipient, the sponsoring child care program and the T.E.A.C.H. Early Childhood® INDIANA project, all sharing the cost.

For more information: 1-800-857-7577 or www.iaeyc.org

The following institutions offer early childhood related educational opportunities in Indiana:

- Ancilla College
- Ball State University
- Bethel College
- Indiana State University
- Indiana University (most campuses)
- Ivy Tech State College (most campuses)
- Jefferson Community College
- Marian College
- Purdue University (most campuses)
- Saint Mary of the Woods College
- University of Southern Indiana
- Vincennes University
- Purdue North Central
What do you do if you suspect a child may have a developmental delay?

For example: A 2 year old is saying only a few words—other 2 year olds typically have a larger vocabulary and some are using 2-3 word sentences. What should you do?

1. Become familiar with typical development of the children birth through age twelve.
2. Observe children at play and make notes of what you observe.
3. Gather some information and share it with the parent as soon as you suspect there might be a problem.
4. Have the parent call First Steps for a free or low cost evaluation for children under the age of three (3).

You can request a Directory of Services for Young Children with Special Needs by calling:

The Indiana Parent Information Center 800-964-4746

The Child Find Program 317-232-0570

Depending upon the age of the child, parents can access:

1. Children Birth through age 3 years
   First Steps
   A confidential program which assists in the screening and coordinating of services for children in the first three years of life.
   Call: 800-441-7837

2. Children 3 years to 21 years of age
   Child Find
   Child Find is available in all school districts. Can assist in the evaluation and delivery of service for children up to age 21.
   Call: 317-232-0570

Each resource and referral agency has an Inclusion Specialist on staff to provide valuable resources and training around atypical development and inclusive environments.

The local school system should be contacted for children age 3 on up for developmental screening/services.
<table>
<thead>
<tr>
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<td>877-511-1144</td>
<td>800-800-5556</td>
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<td>Automotive Safety for Children Program</td>
<td>Missing Children</td>
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<tr>
<td>800-543-6227</td>
<td>800-831-8953 (State Police)</td>
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<td>IRS Tax Forms Only</td>
<td>Healthy Child Care America</td>
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<tr>
<td>800-829-3676</td>
<td>888-227-5409</td>
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<tr>
<td>“Back to Sleep” (info. on sleep position and SIDS)</td>
<td>Depression After Delivery</td>
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<td>800-505-CRIB</td>
<td>800-944-4773</td>
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<td>Consumer Product Safety</td>
<td>Child Support Hotline</td>
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<td>800-638-2772</td>
<td>800-840-8757</td>
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<td>Indiana Consumer Protection Division</td>
<td>Indiana Maternal and Child Health Care Hotline</td>
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<tr>
<td>800-382-5516</td>
<td>800-227-6334</td>
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<tr>
<td>USDA Meat &amp; Poultry Hotline</td>
<td>Health Insurance Plan (HIP)</td>
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<td>800-535-4555</td>
<td>877-GET-HIP-9</td>
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<tr>
<td>TANF Temporary Assistance For Needy Families</td>
<td>Hoosier Healthwise for Children</td>
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<tr>
<td>800-622-4932</td>
<td>800-889-9949</td>
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<tr>
<td>The American Speech-Language Association</td>
<td>CCDF Help Desk</td>
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<tr>
<td>800-638-8255</td>
<td>1-866-258-8808</td>
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<tr>
<td>First Steps</td>
<td>The Consultants Consortium Provider Eligibility Standards</td>
</tr>
<tr>
<td>800-441-STEP</td>
<td>1-866-921-6623</td>
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<tr>
<td>Indiana State Information Center</td>
<td>Indiana 211</td>
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<td>800-457-8283</td>
<td>2-1-1 (social service info)</td>
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<td></td>
<td>*Remember normal cell phone usage fees apply</td>
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IACCRR staff has found this list helpful in their work with children. It is not exclusive, nor should it be construed as an endorsement.
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Notes:
Early Childhood and Small Business Resources and Websites for Child Care Providers

www.aap.org – American Academy of Pediatrics, brochures, books
www.cdc.gov/ncidod/hip/abc/abc.htm - The Centers for Disease Control and Prevention (CDC) online handbook for caregivers
www.doe.in.gov— Indiana Department of Education
www.ecewebguide.com— early childhood information
www.childcarefinder.in.gov - Licensed homes, centers and unlicensed registred ministry locator supported by the Family and Social Services Administration
www.gokids.com— Activities
www.iaccrr.org—Indiana Association for Child Care Resource and Referral
www.icomm.ca/daycare- Each States', Child Care Licensure Regulations Preschool Resources - theme based activities
www.immunizationinfo.org— Immunization schedules, tip sheets and facts
www.naeye.org—Resources, brochures, advocacy, membership
www.nccic.org— The National Child Care Information Center (NCCIC) provides information and resources.
www.nncc.org— NNCC unites the expertise of many of the nation's leading universities
www.pcain.org—Prevent Child Abuse Indiana
www.playgroundsafety.org— National Program for Playground Safety
www.preventinjury.org— Riley Hospital Automotive Program and Safe Kids Coalition
www.redleafinstitute.org—Resources for caregivers and early childhood professionals. Many publications for home based caregivers
www.sba.gov—Small Business Administration, technical support for small business owners
www.sba.com— Senior Core of Retired Executives
www.store.parentsactionstore.org- Organizations supporting early childhood, brochures DVD’s and videos
www.wwork.com—Women’s Work, helpful to female small business owner’s
www.zerotothree.org— National center for infants, toddlers and families

These resources have been compiled to assist you, this list is not all inclusive and should not be construed as an endorsement
Resources

The following resources you may find helpful in beginning your work with young children. This list is not exclusive, there are many, many resources available.

It is suggested you check the library, internet and ask your resource & referral agency to learn about other available resources.


Copple, Carol and Bredekamp, Sue, *Developmentally Appropriate Practice in Early Childhood Programs Serving Children Birth through Age 8*, NAEYC, 3rd Edition.

Dischler, Patricia, *From Babysitter to Business Owner: Getting the Most out of your Home Child Care Business*, Redleaf Press.


Harms, Cryer and Borland, *Active Learning* (Addison Wesley Active Learning Series), Dale Seymour publications.


*These are provided for your information and are not an exclusive or all-inclusive list.* Check the lending library at your child care resource and referral agency for these and many more titles.

Many titles available at : Redleaf Press  800-423-8309
www.redleafpress.org
Indiana Family Helpline can help your families

- Pregnancy health care
- Child health care
- Women’s health care
- Family planning services
- Substance abuse services
- Immunizations
- Lead screening sites
- Emergency shelters
- Food pantries
- Support groups
- Sudden Infant Death Syndrome (SIDS) prevention, support
- Genetic counseling
- Newborn screening follow-up
- GED
- Job training sites
- Programs to stop drinking or smoking
- Medicaid transportation providers
- Respite care (for a break from the stress of looking after a child or other dependent)

The phone number is: 1-800-433-0746

Phone is answered live
Monday through Friday, 7:30 a.m.-5:00 p.m.
Answering machine is available other times
Licensing:
Preparring for Your Initial Inspection
Important Information

County of Residence: ____________________________

Home Licensing Consultants Name:___________________

Licensing Consultants Phone #:______________________

Licensing Consultants Base Office Address: _____________

_________________________________________________________________

What can you expect while becoming licensed and once you are licensed?

❖ Your licensing consultant will make the first inspection visit after your completed paperwork has been received. You need to notify your consultant that you are ready for inspection.

❖ Every year your licensing consultant will visit your home and complete an inspection. Every other year is an unannounced inspection.

❖ Your licensing consultant will make an unannounced visit if a complaint is received on your home. (Note: complaint information is available at childcarefinder.in.gov)

❖ You can expect to receive your license or notification of denial within sixty days of receipt of completed application.

❖ Once licensed, you must reapply for your license every two years.

❖ Each year, there is certain paperwork and requirements which must be updated. Remember to review your Rules and Regulations booklet for more specific information.

❖ It is both the home and the provider that are licensed. If you move, you must reapply for a license. Your license would not “transfer” to another individual or to another location.
Types of Child Care Homes in Indiana

IC 12-7-2-28.6 “Child care home”
Sec 28.6 (a) “Child care home” means a residential structure in which at least six (6) children (not including the children for whom the provider is a parent, stepparent, guardian, custodian, or other relative or any child who is at least fourteen (14) years of age and does not require child care) at any time receive child care from a provider:

(1) while unattended by a parent, legal guardian, or custodian;
(2) for regular compensation;
(3) for more than four (4) hours but less than twenty four (24) hours in each of ten (10) consecutive days per year, excluding intervening Saturdays, Sundays and holidays.

IC 12-7-2-33.7 “Class I child care home”
Sec. 33.7. (a) As used in this chapter, “Class I child care home” means a child care home that serves any combination of full time and part time children, not to exceed at any one (1) time twelve (12) children plus three (3) children during the school year only who are enrolled in at least grade one (1). Except as provided in IC 12-17.2-5-6.3(b), the addition of three (3) school aged children may not occur during a break in the school year that exceeds four (4) weeks.

(b) A child:

(1) for whom a provider of care in the child care home is a parent, stepparent, guardian, custodian, or other relative and who is at least seven (7) years of age; or
(2) who is at least fourteen (14) years of age and does not require child care;
shall not be counted in determining whether the child care home is within the limit set forth in subsection (a).

IC 12-7-2-33.8 “Class II child care home”
Sec. 33.8 (a) As used in this chapter, “class II child care home” means a child care home that serves more than twelve (12) children but not more than any combination of sixteen (16) full-time and part-time children at any one (1) time.

(b) A child

(1) for whom a provider of care in the child care home is a parent, stepparent, guardian, custodian, or other relative and who is at least seven (7) years of age; or
(2) who is at least fourteen (14) years of age and does not require child care;
shall not be counted in determining whether the child care home is within the limit set forth in subsection (a).
Class I plus Three (3) Certification
For School Age Children

Special rules apply to caring for three additional school age children during breaks in the school year exceeding four (4) weeks. A Plus Three Certification may be added to an existing Regular Class I license if certain additional requirements are met. You must plan on obtaining the certification by completing the approval form available from your licensing consultant. This must be renewed each year.

Additional requirements:

- Maintain a Regular Class I license for 12 children for at least the 12 months prior to application
- School age children must have attended this home the four months preceding or have a sibling currently attending this child care home
- Have 35 square feet of usable play space per child
- Maintain child staff ratio at all times
- Have age appropriate toys for each age group
- Licensee must reside in home
  - or Have 2 exits that comply with E3 Occupancy Code
  - Have illuminated exit sign (s) over each required exit
    - or- emergency lighting required for each required exit

PENALTIES FOR OPERATING WITHOUT A LICENSE

Operating a child care home that is required to be licensed by Indiana Code, without a license, is a Class B misdemeanor. (IC 12-3-2-15) Unlicensed child care homes may be investigated and the Attorney General may seek one or more of the following remedies:
1. The issuance of a search warrant from the circuit or superior court in order to assist the department in its investigation.
2. An injunction in circuit or superior court.
3. In a civil action brought in the circuit or superior court, a monetary penalty not to exceed one hundred ($100.00) dollars each day the child care home operates without a license. (IC12-3-2-17)
Supplemental Ratio Information

Your licensing consultant will help you determine your capacity.

Your license capacity includes any children who are present on a full time or part time basis at any one given point in time (with the exception of three additional school age children during the school year).

Special Ratio notes:

**Infants (birth through 12 months):** 4:1
1, 2, 3, and 4 infants must be cared for by at least one caregiver.
5, 6, 7 and 8 infants must be cared for by at least two caregivers.
9, 10, 11 and 12 infants must be cared for by at least three caregivers.

**Infant/Toddler Mixed (Birth through 24 months):** 6:1
At least two of the six must be at least 16 months of age and walking, otherwise ratio is 4:1.

**Mixed Age Group (Birth-6 years):**
10:1
Only three children can be less than 16 months of age. Seven of the children must be at least 16 months of age and walking (unassisted).

If all children are three years and older, the ratio is 12:1

- Relative children under 7 years of age, count in this ratio.
- Relative children over 7 years of age, do not count in this ratio.
- All unrelated children up to the age of 14 are included.

School-aged children, who are enrolled in at least Grade one, may be cared for on a part time basis. For example, this would include emergency snow days or Spring Break. This would not include summer vacation. You must maintain ratio at all times.

For example: if you are licensed for 10 children and working alone, an additional trained caregiver must be on site in order to
Class I and II Licensed Family Child Care Home
Child/Staff Ratios in a mixed age group home

The numbers in the grid are the number of adults required for the number of children.
For example: If you have 3 infants under 16 months of age and 5 children 16 months of age and older, you would be required to have 1 caregiver.

*Exception to the chart—Infant/Toddler Mixed Age Group (Birth-24 months) 6:1
Two (2) of the six (6) children must be at least sixteen (16) months of age and walking.
Otherwise the ratio for Infant/Toddler Mixed Age Group is 4:1.
Supplemental Ratio Considerations

Consider the following groups of children. Use the information on the proceeding pages to help you determine the amount of help the family child care provider caring for these children would require. These children are present at any one given point in time, including full and part time children.

1. Will the Provider need help caring for these 9 children? If so, how many caregivers are needed?
   14 month old (2) 12 month olds (2) 6 month olds
   Child care provider’s own 10 month old and 2 1/2 yr old
   9 month old 3 month old

2. Will the Provider need help caring for these 12 children? If so, how many caregivers are needed?
   7 year old 13 year old 3 year old 5 year old
   5 1/2 year old 6 year old 4 1/2 year old 1 year old
   3 1/2 year old 8 month old
   Child care provider’s own 13 month old twins

3. Will the Provider need help caring for these 11 children? If so, how many caregivers are needed?
   12 month old 6 year old 19 month old 2 year old
   6 month old 3 month old 5 year old 7 yr old
   12 yr old niece 3 yr old nephew 12 yr old friend of niece

Determine your ratio

Total # of children

# of relatives over 7 years of age:

# of children under 16 months of age:

# of children 16 months or older:

The only time one (1) caregiver can care for twelve (12) children is when all children are three (3) years of age.
Steps to Licensing Your Home

1. Schedule and attend licensing orientation I and II training.

2. Check with local zoning and obtain permits if needed.

3. Review the information in this manual. In the front pocket you will find the rules & regulations and a checklist to help you prepare for the inspection. You will also find the Application Packet that needs to be completed and submitted to your licensing consultant. The manual contains other information, documentation and sample forms to help you get ready for your licensing visit.

4. Use the inspection checklist and rules and regulations to prepare your home for your inspection. You will need to have a general physical and TB test. You will need to provide negative results on the drug screening, documentation of Safe Sleeping Practices and Reducing the Risk of SIDS in Child Care, First Aid, Pediatric CPR and Universal Precautions training and complete the national criminal history background check process.

5. You will need to return the **completed Application and accompanying documents listed on the Application.** Once these are sent, contact your licensing consultant and tell them you are ready for inspection. Ask any final questions you may have about rules and regulations.

6. Your licensing consultant will schedule your **home inspection.** You must **notify your local fire department** that you will be operating a child care program (see sample forms section of manual).

7. Once ready, your licensing consultant will complete your initial home inspection. At that time, a recommendation for approval or denial will be made to the Central office of the Bureau of Child Care.

8. You will be informed within sixty days of your approval or denial of licensure. Your license (if approved) will arrive by mail.

*Note: The entire process is driven by the licensee—The State takes up to 60 days to process your license once you have sent in your completed paperwork, prepped your home and have met all the requirements.*
Licensing Video
This video is meant as a guide to help you better understand the licensing rules and regulations for family child care providers.

Periodically the video will be stopped to allow opportunity for discussion and questions.

The pages marked with the video symbol, Follow the script of the video. Some supplemental information has also been added. Use the pages to make notes, write questions, and highlight points in the video you would like to remember.

Questions for my licensing consultant:

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People decide to care for the children of others for a variety of reasons.

Whatever the reason, in order to ensure that all children receive appropriate attention in a safe and healthy environment, the State of Indiana licenses individuals who care for more than 5 unrelated children in their home.

In this video, we will discuss the requirements for a Class I child care home.

This is a Family Child Care home which serves twelve children or fewer. This can be any combination of full or part time, plus three children during the school year who are enrolled in at least grade one. The school aged child must be included in your ratio.

Your licensing specialist (consultant) will help you determine your capacity and is also available to help you better understand the process of obtaining a child care license.

This video is part of an orientation training that is one of the licensing requirements.

You will receive additional paperwork which must be turned into your licensing specialist (consultant) prior to your initial inspection.
The following forms must be submitted:

An Application

An Attestation Statement
Your licensing specialist (consultant) will conduct criminal history checks on all applicants and their spouses.

It is the child care provider’s responsibility to obtain annual criminal history checks from the state police on all employees and any household members who are over the age of eighteen.

(licensing consultants will run check if you turn in completed consent)

Your licensing consultant will conduct all background checks for the applicant, all employees, volunteers and household members over the age of 18.

(The fingerprint check done on the applicant is the applicants responsibility).

Your licensing specialist (consultant) will also check the sex offender registry for the names of all applicants, household members and employees.
According to state regulations, you will either be granted or denied your license within sixty days of receipt of (completed) application.

Questions for my licensing consultant:

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REQUIREMENTS

☑ Applicants must have a physical exam completed by a physician or nurse practitioner, including

☑ Mantoux (TB) tuberculin test

☑ You should also complete First Aid and

☑ Universal Precautions training

☑ At least one caregiver from your home will need to be certified in Pediatric CPR (Cardio Pulmonary Resuscitation) training

☑ Contact your local fire department and notify them you will be caring for children

(in addition drug testing results on applicant and any household members or other caregivers and volunteers over the age of 18)

Assistants and volunteers also must have a physical exam and show proof of a negative TB test. As well as, First aid, CPR (if left alone with children) and Universal Precautions training.
Training Employees

You will need to train any assistant caregivers or volunteers who will work with the children. Assistants and volunteers are expected to work under the direct supervision of the primary caregiver.

Student assistants between the ages of 14 and 17 may help, but must be supervised. (Note: student assistants must never be left alone with the children.)

If an assistant caregiver under the age of 21 is left in charge of the child care home, the parents must be notified in writing of the caregiver’s age.

For your information:

Ages of Providers

- **Primary Caregiver**  At least 18 years of age or older
- **Assistant Caregiver**  At least 18 years of age or older
- **Student Assistant**  14-17 years of age, with constant supervision

Hiring, Enrollment, Discrimination Standards

Everyone should be aware that there should be no discrimination on the basis of:

- Race
- Color
- Religion
- Gender
- National origin
- Ancestry
- Handicap

...in either hiring or enrollment policies.
Assistants must also have a **physical exam** and show proof of a **negative TB test**.

**Within One Week of Beginning Work:**

- Employees must receive training in **fire prevention** and **safety procedures**.
- Show employees where **emergency telephone numbers** and the **evacuation plan** are posted.
- As well as the location of all **gas, electric and water shut off valves, fire extinguishers and smoke alarms**.
- Demonstrate the **use of fire extinguishers** and practice the **evacuation procedures** you will follow in case of fire.
- Communicate all **health related issues** and **special concerns** for individual children.
Within the first Thirty Days of employment:

- Child abuse and neglect reporting procedures must be reviewed
- Volunteers and employees should also receive training in *Universal Precautions, the inspection checklist, and the confidentiality of personal information* about children and their families.
- Unscheduled visits by custodial parents or guardians are permitted at any time the child care home is in operation.

Within Ninety Days of Beginning Work:

- All staff should have completed *First Aid training*

The staff person certified in pediatric CPR should be scheduled to be on the premises at all times when children are present!
Your licensing specialist (consultant) will let you know the requirements you must meet and will visit your home unannounced each year.

Once you are licensed, you must **reapply** for a new license **every two years**.

Your licensing specialist (consultant) will supply all necessary information

Now let’s listen to Keith Carver from the Division of Family & Children Licensing Unit discusses the types of licenses you are eligible to receive.

**Indiana can grant three kinds of licenses to family child care home providers.**

**Types of Licenses**

A Regular License which can be issued for up to two years *(means provider is in full compliance with the Rules and Regulations)*

A Provisional License which can be issued for temporary non-compliances with the rules & regulations *(Usually given to first time licensees who still need to complete some part of their initial application/requirements, typically given in 3 month increments not to exceed 12 months)*.

A Probationary License for more serious non-compliance issues. *(Usually given to Providers who have already held a license, up to 6 months with an additional 6 months given if necessary for the Provider to come to compliance with license regulations.)*

Once you have applied for a license, a licensing specialist (consultant) will visit your home and make a recommendation to the local Office of Family & Children regarding your application.

“I would like to thank you for your interest in providing services for Indiana’s children and providing safe, secure environments.”
EDUCATION REQUIREMENTS

As of July of 2001, all new licensees must possess a high school diploma (or transcript) or high school equivalency certificate (GED) upon licensure.

In addition, you have three years from date of licensure to obtain:

A CHILD DEVELOPMENT ASSOCIATE (CDA) Credential

NOTE: If you possess a degree in early childhood or a related field, or a degree in any field with 12 hrs in early childhood—you must make your transcripts available for licensing consultant review.

A Child Development Associate (CDA) is an individual who has successfully completed a CDA assessment and has been awarded the CDA Credential.

S/he is able to meet the specific needs of children and works with parents and other adults to nurture children’s growth and development. Many universities, colleges, child care resource and referral agencies as well as continuing education programs offer the course work required in order to prepare for the assessment. The process involves: course work, field experience, portfolio development and assessment.

Check your local resources for course offerings. Project T.E.A.C.H offers scholarships (for those eligible) to assist with paying for CDA’s as well as some associate degree level early childhood courses.

The Credential is awarded from:

Council for Professional Recognition
2460 16th Street, NW
Washington, DC 20009-3575
(800) 424-4310 visit www.cda.org

The Indiana Non Formal CDA training is provided throughout the state by local agencies with experience in training for the CDA credential. The project provides participants with training courses and books (for four courses), advising, and direct eligibility for the CDA Assessment.

For more information visit www.iaeyc.org
CPR and FIRST AID

Indiana’s licensing regulations require Child Care Providers obtain:

CPR training

First Aid training

and

Training in Universal Precautions

( Universal Precautions is also known as: Handling Blood Borne Pathogens or Prevention of Disease Transmission )

CPR must be renewed annually

Pediatric CPR is for children birth through age 8. Adult CPR is for children 8 and over (If you are caring for school-aged children, it is recommended, though not required, that you also take adult CPR.)

All employees of a child care home must annually renew their Universal Precautions

First Aid must be renewed every three years or prior to the expiration of the card.
Environment

Licensure means there are certain minimum standards for the home itself.

In general terms, there must be nothing about the home or grounds that will endanger the health, safety or welfare of the children.

The house must have a working phone and a current phone number must be on file with the Bureau of Child Care.

Emergency phone numbers for the police, fire department, poison control center, nearest hospital and ambulance must be posted by the telephone.

If your home uses well water, a water quality test must be performed annually. This process may take some time, so be sure and request the test kit as soon as possible.

Child care areas in your home, should contain adequate space for play and rest for the number of children in your care.

There should be a protected outdoor play area that is safely enclosed, either by a fence or natural boundaries. (If you are unsure whether you need a fence, contact your licensing consultant immediately.)
Your home should be equipped with **adequate heat, light and ventilation**.

**Protective coverings** must be used on all exposed electrical outlets.

All **windows and exterior doors** that are kept open for ventilation, must have **screens**. *(They must have screens in good repair—no tears or rips)*.

If **fans or heaters** are used, they should be protected by **safety devices** that will not allow a child’s fingers to come in contact with blades or heating elements.

If **firearms or ammunition** are on the premises, they must be **securely locked away**, out of the reach of all children at all times.

The same is true for any **poisonous or hazardous materials**.

**Tools** and **implements**, including **flammable materials, lighters** and **matches**, keep all such material in areas **away from children**.
It is important to observe other healthy practices when it comes to caring for children.

Children’s hands should be washed at a sink with soap and warm running water before meals, snacks and after using the toilet.

Pets must present no danger to the children. They should be kept away from the areas where food is prepared and served.

Food must be stored properly and the refrigerator and oven/stove or microwave must be in good working order.

Hot and cold running water is a must (temperature must be between 100 and 120°, never to exceed 120°).

Food preparation and serving area is washed and sanitized daily.

Garbage cans must have tight fitting lids and should be emptied frequently.

At least one toilet and sink must be available to children on each floor of the home where care is provided.
A first aid kit should be maintained in the child care home and a Red Cross First Aid Manual or its equivalent should be kept on hand.

In the event the child becomes ill, the parent or guardian should be notified immediately.

The child should remain with the provider, but separated from the other children, until the parent arrives.
Fire

Certain requirements exist in the area of fire prevention:

Extension cords should not be overloaded or longer than six feet.

There should be no exposed or non-insulated wiring.

Fire drills should be conducted every three months and documented.

Gas, electric and water shut off valves should be accessible and their location must be identified. (Remember to show all those working or volunteering in the home the location of these.)

Your house must have at least two exits and the exit doors must open with one motion and lead directly outside (without the use of a key).

If care is provided in a basement, there must be a direct exit at ground level without stairs or ramps. The interior staircase leading to the first floor qualifies as one of the two exits.

Each room in the house where care is provided, must have two means of escape. (Windows can be used only if they can be opened.) A garage or any other area where hazardous materials are stored, will not be considered an approved exit.

Flammable liquids are stored in tightly sealed, marked containers appropriate to the type of liquid being stored. No more than five gallons of flammable liquids are stored.
Minimum Fire Safety Required By Licensure

Hazardous materials include cars, lawnmowers and gasoline.

Special regulations apply to the use of **unvented oil burning appliances**. Familiarize yourself with these regulations.

**Electric or gas heaters** and **solid fuel burning appliances** must not block escape in care of the fire arising from a malfunctioning heater.

Any **fireplaces** in the home that are used, must have glass doors, a noncombustible hearth, grate and fireplace tools. If a fireplace is used at any time, the chimney must be inspected each year and cleaned if so recommended by a professional chimney cleaner. Documentation must be maintained.

**Ashes must be disposed** of in a covered, noncombustible container that is placed on the ground away from any buildings or combustible material.

**Trash and flammable materials** should not be allowed to accumulate around your property.
There should be one **fire extinguisher** on each floor where care is provided, with an additional extinguisher in the kitchen.

These must be **ABC multiple purpose fire extinguishers**, and they must weigh **2 1/2 pounds** or more.

**Smoke detectors** should be correctly installed, with at least one detector at the top of each stairway, and others adjacent to all sleeping areas.

*(Know how to discharge your fire extinguisher and teach all those in your home their operation).*

*(It is strongly recommended that fire extinguishers are mounted to the wall and unobstructed).*
Swimming Pool

If a swimming pool is part of the child care home’s property, a locked gate and a fence must be around the pool.

*(Please note: wading pools (non-filtered pools) cannot be used—this is a Health Department regulation enforced by your licensing consultant).*

Someone should always supervise swimmers and another person should supervise non swimmers.

Transportation

The driver of any vehicle used to transport children, must be 18 years of age or older and must possess a valid driver’s license.

All passengers in the vehicle must use a seat belt or car seat.

Children should never be left unattended.

The vehicle must be properly licensed, insured and in safe condition. Check with your insurance agent to make sure your policy covers transporting children as part of a business.
**Water Quality Testing**

If your home uses well water, a water quality test must be performed.

This may take some time, so be sure and request the test kit as soon as possible.

*(Water from a source other than a regular municipal water supply shall be tested annually for compliance with water quality requirements).*

(The results of the coliform bacteria testing must indicate your water is safe for drinking, cooking and use for washing).

*A note about pets*

You must keep on file annual vaccination records for animals subject to rabies.

*Note: Even the gentlest animal may bite or scratch when provoked. It is suggested that you keep pets safely from the children’s areas.*
A NOTE ABOUT BASEMENTS:

If care is provided in the basement, there must be a direct exit at ground level without stairs or ramps. The exit must lead to a landing that is at least 32 square feet. The interior stair case leading to the first floor of the home qualifies as one of the two exits.

If you have a question about the use of your basement, contact your licensing consultant.

Duplexes are not mentioned in the video, but it is important to note: Two or more homes in the same residential structure must be separated by two hour fire resistive wall between each licensee. A signed statement from a design professional must be on file.

Multiple licenses in the same structure must meet requirements of licensure as independent homes.

The regulation about basements is found in Indiana’s family child care rules & regulations

Section 49. 470 IAC 3-1.1-46 Fire prevention
Section 46 (b) A basement area in which child care services are provided shall have a direct exit at ground level not involving stairs or ramps. The interior stair case serving the first floor is acceptable as the second exit for a basement in which child care services are provided. An example of an allowable exit is a level area directly outside the exterior door that is at least thirty-two (32) square feet. This area may be a porch, deck, or stairway landing.
Electrical or battery-operated smoke detectors are installed to manufacturer’s specifications and located and adjusted to operate reliably in case of smoke in any part of the home. Not less than one smoke detector needs to be at the top of each stairway and adjacent to all sleeping areas.

**You must have 2 1/2 pound or greater ABC fire extinguishers**

The types of fire an “ABC” fire extinguisher may extinguish are:

- **Class A** fires involve such materials as cloth, paper, rubber or wood.
- **Class B** fires involve flammable gases or such flammable liquids as cooking grease, gasoline or oil.
- **Class C** fires involve motors, switches or other electrical equipment through which electric current is flowing.

*Fire extinguishers should be mounted to the wall and be unobstructed*
WADING POOLS

The Indiana Health Department has prohibited the use of non-filtered pools for public use. A family child care home is considered in the public domain. Wading pools are no longer permitted.

Please note: this is a Health Department regulation enforced by your licensing consultant.

Some alternatives to wading pools can include:

- Water /sand table play
- Sprinklers
- Shallow plastic containers with water and toys (children should not be able to get in/immerse in container)
- Washing toys outside with soap and water in shallow containers

The US Consumer product safety Commission has received over 175 reports of children drowning in buckets. The CPSC recommends that you do not use 5 gallon buckets with /around young children. Children can drown in buckets in the time it takes to answer the phone.
HEALTH AND SAFETY

🚨 When a child becomes ill:

- Separate the child (while maintaining direct supervision)
- Notify the child’s parents or legal guardian
- Continue to monitor the condition of the child

**Notify parents of your emergency procedures.**

Suggested procedures are:

- Quickly assess the child’s health
- Call 911 or the appropriate emergency help if needed
- Administer first aid and CPR, if necessary
- Then contact the parents

In the event you are unable to reach the parent, the person they have listed to call in an emergency should be contacted.

**Check your water temperature**

Licensing Consultants will test hot water temperature to assure it is between 100° and 120° degrees.
Activities and materials are very important parts of the children’s day.

It is important that they be age appropriate.

They should match the children’s skill and developmental levels.

Activities should be varied, interesting and challenging.

With a balance between those that require high levels of energy and those of more of a quiet nature.

Weather permitting, outdoor play should be offered daily.
Discipline

Discipline should never be **cruel, harsh or unusual**.

There should not be **any threats** involving the withdrawal of meals, snacks, or use of the restroom.

A **written statement of your discipline policy** should be given to parents to read and sign. A copy should be kept by the parents and a signed copy should be placed in each child’s file.

Your discipline policy should **vary according to the ages** of the children.

**Proactive behavior management and using strategies such as redirection will assist you in the positive guidance of children in your care.**

*See the Sample Forms section for a sample copy of a discipline statement.*
Meal time!

Proper nutrition is very important for children.
Meals and snacks should be nutritious.
Drinking water is available to children at all times.

Rest time!

A period of rest should be provided during the day for children under five years of age.
Each child who does nap, should have a separate bed, mat, washable cot or sleeping bag.
Special Regulations Governing the Care of Infants

For ratio purposes, an infant is considered a child who is 15 months old or younger.

Infants have special requirements and their care should be discussed with their parents or legal guardians and include flexible routines.

Periodically change the position of infants who are unable to move by themselves, and offer all infants a regular change of toys with which to play.

A separate, safe sleeping area should be provided for each infant or toddler.

Washable cots, sleeping bags or mats may be used for toddlers over 24 months of age.

When caring for infants, stairways should be guarded by a gate or closed door.
Diaper changing

- The diaper changing area should have a washable surface and be sanitized whenever it is used. *(make sure supplies are easily accessible and never leave a child unattended, even for a second)*
  (*You must use waterproof material between the changing surface and the infant).*
- A covered container must be available for wet and soiled diapers.
- Providers must wash their hands with soap and water after each diaper change.
- Any toilet training chairs that are used, must be emptied and sanitized after each use.

Feeding Infants

- Infants and toddlers should be fed according to their dietary needs.
- Infants should be held while being fed.
- Never prop the bottle and leave the infant unattended.
- All bottles should be labeled with the child’s name and stored appropriately.
Documentation

Documentation in a child care home is critical for you, your staff and the children in your care.

You must design a system to organize the information and provide a place to store the records so that confidentiality is ensured.

Records on all individuals directly involved in the care of the children must include:

- Physical examination, documenting that each individual is free of communicable diseases
- Annual TB test, which is available at most county health departments
- Criminal History check, on employees, volunteers and all household members who are 18 years of age or older (Remember, a check of you and your spouse will be completed by your licensing specialist.)
- Current certification in First Aid, Universal Precautions and annual CPR certification.

Assistant Caregivers Need:

- Physical/TB test
- Criminal History Check (to be completed by the Provider)
- First Aid, CPR, Universal Precautions
- Training on: Fire safety, the inspection checklist, and confidentiality

Additional records which your licensing specialist will check annually include:

- Attendance records should be maintained for two years.
- A record of annual required vaccination for pets.
Children’s records should include:

Children’s records are critical to the health and safety of the children and provide direction for the child care provider.

Each child should have a file of his or her own that includes the following:

- Name of the child, birthday, name of parent or guardian and phone numbers of emergency contacts.
- The names of adults authorized to pick the child up from the home. Providers cannot deny parents legal access to their children.
- Emergency medical release form signed by the child’s parent or guardian.
- Written statement of your Discipline Policy, signed and dated.

**Within 30 days** of a child coming under your care, the following forms must be added:

- A medical statement regarding the child’s general health and the status of any chronic conditions.
- A record of all immunizations.
- Written permission for field trips. Permission for field trips and other activities can be added on an ongoing basis.
Additional forms will be added on an ongoing basis:

These include:

- **Written permission for field trips** and other activities

Medication information:

- Medication may be given with written **prior permission** from the parent or legal guardian.

- Only with **clear written instructions** as to time, dosage and reason to be given.

- The **medication should be labeled** with the child’s name, physician’s name and the name of the pharmacy.

- **Over-the-counter medication** should also be labeled with the child’s name.

- A **record of medications**, of date, time and dosage should be kept in the provider’s files.
General records which will be checked annually should be kept:
- **Attendance records** should be maintained for two years.
- A record of annual **required vaccinations** for pets should be kept.

Last but not least, make sure your child care license and your plan of evacuation in case of emergency are prominently posted.

A great deal of information has been shared in this video, one of the most important pieces of information has been saved for last. It is the number for IACCRR:

1-800-299-1627

See the Sample Forms section for examples of documents designed to make recording easier. Forms that are “samples” meet or exceed the regulatory requirement associated with them.
Supervision

According to Indiana’s Family Child Care rules & regulations, the following is stated about supervision:

470 IAC 3-1.1-36.5 Child to staff ratio
(b) Children shall not be left unattended and shall be supervised at all times.

When planning your child care environment, make sure you plan where children will eat, sleep and play. You are responsible for supervising at all these times during the day.

See Supervision Letter
In Home Licensing Rules and Laws bound booklet
SANITATION

470 IAC 3-1.1-44 (c): Children’s hands are washed at a sink with soap and warm running water before meals and snacks and after toilet use. Direct child care providers shall not permit children to use a common washcloth or towel.

You can use:

- Paper towels
- Individual cloth towels (labeled)
- One use (one child) washcloth (toss into laundry to do later)

According to Indiana Child Care Home Rules:

The definition of sanitation is to destroy disease causing organisms by chemical or mechanical means. This includes, but is not limited to using one teaspoon of bleach added to one gallon of water.

Best Practice Note: Please use your bathroom sink for handwashing.
PREPARING FOR MY LICENSING VISIT

Use the licensing checklist on the next several pages to prepare for your home prior to the initial inspection. Your licensing consultant will use this at the time of his/her visit to assess your home for licensure.

Walk around your home and “inspect” the environment. Use this page to list the things you need to do to become prepared for your initial visit.

Things I still need to do:

Plans for getting items done:

Questions for my licensing consultant:

Notes:
Familiarize yourself with Indiana’s Rules & Regulations for Family Child Care Providers. You will notice many of these forms include information which exceeds the requirement by the Indiana code. Keep on file all required documentation as listed on the following pages.

Your licensing consultant will ask to view this documentation at the time of his/her visit.

*Forms marked “sample” may be substituted.*

*Forms listed with an ”*” asterisk should not be substituted.*
Primary Provider
(Applicant for Licensure)
Required Forms

These forms are located in your Application Packet
(Located in the front pocket of this manual)

*Application
(Send to licensing consultant)

*Attestation Statement
(Send to licensing consultant)

*FSSA Fingerprinting in Indiana
(complete process, results will be sent to licensing consultant)

*Consent for Release – Crim Hist for homes centers and ministries
(Send to licensing consultant)

*Taxpayer Identification Request
(Send to licensing consultant)

You must send in copies of birth certificates, driver’s license’s, or state I.D.’s for you, your spouse, workers or volunteers and other household members. You must also send in proof (copy of certificates) of Orientation II and Safe Sleeping Practices and Reducing the Risk of SIDS in Child Care.

You must also send in a copy of your High School Diploma or GED or College transcripts.

*Denotes that you must use the state form provided
Primary Provider
(Applicant for Licensure)
Required Forms Continued

Form A  Provider Medical Report  _______
(Send to licensing consultant)

Form B  Universal Precautions  _______
(Form not needed if you have a certification card)

*Five Panel Drug Screening  _______
(Send Results to licensing consultant)

*Education Requirements  - Sign and date at your first inspection visit

*Denotes that you must use the state form provided
Family Child Care Home
Provider Medical Report

A. To be completed by provider:
Name of provider:______________________________
Birth date:___________________________________
Address:_____________________________________

I, ______________________, hereby authorize the physician or
certified nurse practitioner named below to release information to the
Division of Family Resources, which is necessary
for the child care provider’s evaluation.

Name of Physician/Nurse Practitioner   Address
____________________________________________

B. To be completed by physician or certified
nurse practitioner:
I.  Intradermal Tuberculin Test or Chest X-ray
   Results________________________ Date____________________

II. Does this person have any apparent disease or physical
    condition that would restrict them from caring for young
    children as a profession?
    Yes_________ No_________
    If yes, please explain____________________________________
    ______________________________________________________
    ______________________________________________________

III. Weight_____________ Height_____________
     Blood Pressure________________________

C. Comments:

Signature of nurse practitioner or physician:
______________________________________
Verification and Documentation of Universal Precautions Training

Date:

I, ________________________________,

Acknowledge that I have received training in UNIVERSAL PRECAUTIONS on the above date. I understand how to protect myself using the procedures of Universal Precautions taught to me. The teaching methods used were discussion plus demonstration and/or a video or film.

Signature of Training Recipient:

________________________________

Date of Training:____________________

Trainer:__________________________

Source of Trainer’s Universal Precautions Training:

____________________________________

____________________________________
See Licensed Home Substance Abuse Screening Test in Application Packet
Sample Forms to help
Document Requirements
For Assistants, Employees, and Volunteers.

Form C  **Orientation Checklist**

_________
(not required but helpful)

Form D  **Medical Report**

_________

Form E  **Universal Precautions**

_________
(Only if you do not have a card)

* **Consent for Release**

_________
Criminal history check

* **Five Panel Drug Screening**

_________
(Send Results to licensing consultant)

* Contains in Application Packet
Orientation for Staff or Volunteers

Name of Volunteer or Staff Person: _____________________________

1. Complete Consent for Release Of Information for Criminal History
  Check prior to start of work for anyone over 18 years of age.
  Date sent to Licensing Consultant: _____________

2. Start date: _____________

3. Training before or within the first week of employment or volunteer work by the licensed provider on fire prevention and safety procedures:
   ________ Show and explain evacuation plan
   ________ Show location of all smoke alarms and how they are tested during drills
   ________ Show location of gas, electric, and water shut-off and how they work
   ________ Show location of emergency phone numbers
   ________ Show location of all fire extinguishers and how to use

4. Training before or within the first month of employment or volunteer work on the following:
   ________ Review the home inspection checklist
   ________ Review procedures about confidential treatment of personal information about children in their care and their families
   ________ Procedures for preventing and detecting child abuse and neglect
   ________ Universal Precautions training

5. First aid training before or within ninety (90) days of starting employment or volunteer work. Date of First Aid _____________

6. Training in Pediatric Cardiopulmonary Resuscitation (CPR) MUST BE COMPLETE BEFORE staff or volunteer are allowed to be left alone with children. Date of CPR _____________
Family Child Care Home
Assistant/Volunteer Medical Report

A. To be completed by Assistant Provider/Volunteer:
   Name of Assistant/Volunteer:
   Birth date:_____________
   Address:___________________________________________

   I, _____________________, hereby authorize the physician or
certified nurse practitioner named below to release information to the
Division of Family and Children, which is necessary for the child care
provider's evaluation.

   Name of Physician/Nurse Practitioner
   Address

B. To be completed by physician or certified nurse practitioner:
   I. Intradermal Tuberculin Test or Chest X-Ray
      Results____________ Date_________________

   II. Does this person have any apparent disease or physical
       condition that would restrict them from caring for young
       children as a profession?
       Yes ______________ No_____________
       If yes, please explain_______________________________

       ________________________________________________
       ________________________________________________
       ________________________________________________

   III. Weight____________ Height____________
       Blood Pressure__________________________________

C. Comments:

Signature of nurse practitioner or physician:

__________________________________________________
Address:___________________________________________
Verification and Documentation of Universal Precautions Training

Date:

I, ________________________________,

Acknowledge that I have received training in UNIVERSAL PRECAUTIONS on the above date. I understand how to protect myself using the procedures of Universal Precautions taught to me. The teaching methods used were discussion plus demonstration and/or a video or film.

Signature of Training Recipient:

____________________________________

Date of Training:________________________

Trainer:______________________________

Source of Trainer’s Universal Precautions Training:

____________________________________
Sample Forms to Help

Document Requirements for

Household Members

Over

Eighteen Years of Age

Form F  Medical Report

*Consent for Release

Criminal history check

*Five Panel Drug Screening

(Send Results to licensing consultant)

* Contained in Application Packet in front pocket of manual
Family Child Care Home
Household Member Medical Report

A. To be completed by household member:
Name of provider:__________________________________________
Birth date:________________________________________________
Address:__________________________________________________

I, ______________________, hereby authorize the physician or certified nurse practitioner named below to release information to the Division of Family Resources, which is necessary for the child care provider’s evaluation.

Name of Physician/Nurse Practitioner  Address

B. To be completed by physician or certified nurse practitioner:
I. Intradermal Tuberculin Test or Chest X-ray
   Results________________ Date________________

II. Does this person have any apparent disease or physical condition that would restrict them from caring for young children as a profession?
   Yes_________ No_________
   If yes, please explain________________________________________
   __________________________________________________________
   __________________________________________________________

III. Weight_________ Height_________
     Blood Pressure__________________________

C. Comments:

Signature of nurse practitioner or physician:

________________________________________________________________

Address:_____________________________________________________
Date:_____________
Many sample forms are available through:

http://www.iu.edu/~ccchealth/resources/policyTemplates/policies.php

_Health and Safety Policy Templates, Procedures, and Forms_
Compiled and Created by the Indiana Child Care Health Consultant

Program
**Version 1.2**

The materials are designed for use in all types of early care and education settings. Recommended policies and procedures reflect recommendations from nationally recognized health and safety professional organizations.

It is always important to make sure that your policy:

• Fits the purpose for which it was intended;
• Makes sense to everyone that it affects, including parents and staff;
• Can be put into practice;
• Is accurate and contains current practices and;
• Meets or exceeds state regulations for your type of early care and education setting.

Policy templates are organized by topic with supporting materials included in each section. Alterations of any type require the document be downloaded and edited by the user.
<table>
<thead>
<tr>
<th></th>
<th>Column 1</th>
<th>Column 2</th>
<th>Column 3</th>
<th>Column 4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provider's initials after administering medication</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Parent's Signature</td>
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<tr>
<td>Requires refrigeration Yes or No</td>
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<tr>
<td>Amount to be given</td>
<td></td>
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<tr>
<td>Time(s) to be administered</td>
<td></td>
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<tr>
<td>Name of medication</td>
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<tr>
<td>Child's Name</td>
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<tr>
<td>Date</td>
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</tr>
</tbody>
</table>
# Medication Permission

## Individual Child

**Child’s Name:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of medication</th>
<th>Dosage</th>
<th>Parent’s signature</th>
<th>Possible reactions</th>
<th>Requires Refrigeration Yes or No</th>
<th>Provider's initials after administering medication</th>
</tr>
</thead>
<tbody>
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</table>

*Family Child Care Orientation Training & Resource Manual*  
Prepared By: The Indiana Association for Child Care Resource & Referral
# Sample Forms To Help Document Requirements For Children’s Files

## Upon Enrollment

<table>
<thead>
<tr>
<th>Form</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Form G</td>
<td>File Checklist</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Home Consent (Birth record)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>* Provider Monthly Report</td>
<td></td>
</tr>
<tr>
<td>Form H</td>
<td>Enrollment Application</td>
<td></td>
</tr>
<tr>
<td>Form I</td>
<td>Discipline Statement</td>
<td></td>
</tr>
<tr>
<td>Form J</td>
<td>Emergency Contact &amp; Consent</td>
<td></td>
</tr>
<tr>
<td>Form K</td>
<td>Emergency Cards</td>
<td></td>
</tr>
</tbody>
</table>

## Within the First Thirty Days

<table>
<thead>
<tr>
<th>Form</th>
<th>Description</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>*Child’s Physical Examination</td>
<td></td>
</tr>
<tr>
<td></td>
<td>*Immunization Record</td>
<td></td>
</tr>
<tr>
<td>Form L</td>
<td>Field Trip Permission Form-to be completed upon enrollment</td>
<td></td>
</tr>
<tr>
<td>Form M</td>
<td>Field Trip Permission Form-to be completed before each trip</td>
<td></td>
</tr>
<tr>
<td>Form N</td>
<td>Childhood History (ages 2+)</td>
<td></td>
</tr>
<tr>
<td>Form O</td>
<td>Personal Info. for Infants &amp; Toddlers</td>
<td></td>
</tr>
</tbody>
</table>
This form can be used to organize children's files. Use it to record names, birth dates, enrollment date and check off as forms are returned.

<table>
<thead>
<tr>
<th>Field Trip Permission</th>
<th>Immunization Statement</th>
<th>Enrollment Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Consent</td>
<td>General Physical</td>
<td>Enrollment Date</td>
</tr>
<tr>
<td>Certificate Verification</td>
<td></td>
<td></td>
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<tr>
<td>Child’s Name</td>
<td></td>
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</tbody>
</table>

Family Child Care Orientation Training & Resource Manual
Prepared By: The Indiana Association for Child Care Resource & Referral
Enrollment Application

(NAME OF FAMILY CHILD CARE HOME)

(Licensee Name)    (Enrollment Date)

Full Name of Child:___________________ Nickname:_________
Child’s Birth date:_____________ Date care begins: __________

Parents/Legal Guardians

Mother’s Name:__________________________________________________________
Home Address:__________________________________________________________
Home Phone:___________________________________________________________
Place of Employment & Address_______________________________________
Work Phone:_________________ Work Hours
Cell Phone/beeper:_______________E Mail Address:________________________

Father’s Name:__________________________________________________________
Home Address:__________________________________________________________
Home Phone:___________________________________________________________
Place of Employment & Address_______________________________________
Work Phone:_________________ Work Hours
Cell Phone/beeper:_______________E Mail Address:________________________

TRANSPORTATION

If child attends elementary school, preschool or another program during the day, name of school/ program:______________________________________  phone:____________________

If a transportation plan (bus, kindercab etc..) is needed please provide details including time of pick up/drop off:
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

To ensure the safety of your child, please list other adults to whom you child may be released .
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

(Parent/Guardian Signature)                  (Date)
NOTES
Sample Discipline/Guidance Statement

Dear Parent:

I work with parents/guardians of children in my care to determine the cause of misbehavior and deal with behavior positively.

I use strategies that allow the child to take responsibility for his/her actions. In addition, I focus on teaching children appropriate behavior. I do not use threats or bribes. I use natural and logical consequences and reinforce the limits in my home. I prioritize respect for one another and our environment as well as personal responsibility.

Important note: Physical punishment will not be used, even if requested by the parent.

Hitting, kicking, spitting, hostile verbal behavior and other behaviors which will hurt another child are not permitted.

Each child will have individual plans for guidance and discipline dependant on what is age appropriate. Consequences will occur immediately after the behavior. As a parent, I ask you not to punish your child at home for misbehavior shown while in my care. Please trust that I will handle the matter at my home. I will keep you posted on any behavior issues.

If your child continually misbehaves, I will call you and discuss the difficulty by phone or make an appointment to discuss the difficulty with you. I will not discuss problems in front of your child or other children.

In those instances when a behavior is very disruptive or harmful to the child or other children, I will discuss the issue with you. If an intervention can be made and will warrant success, the child can remain enrolled. If you will not seek appropriate assistance or we cannot effectively meet the needs of your child, you will be asked to make other child care arrangements.

______________________________            ___________________
Child’s name                                     Age

Specific guidance and discipline techniques to be used with this child:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

______________________________            _________________
Parent/Guardian signature             Date
This is a sample emergency information form, which includes a statement allowing you to Administer first aid and get emergency services for the children in your care. It is recommended that this form update it every six months and as changes occur. Some physicians and emergency rooms require the form to be notarized.

Child Care Emergency Contact Information and Consent Form

Child’s Name:________________________ Date of Birth:________________________

Parent/Guardian (1st Contact) Name:__________________________________________
Telephone: Home:_________________________________________________________
Work:________________________                                    Cell:_____________________

Parent/Guardian (2nd Contact) Name:________________________________________
Telephone: Home:_________________________________________________________
Work:________________________                                    Cell:_____________________

**EMERGENCY CONTACTS**

Persons whom child may be released or called to pick up child if parent/guardian is unavailable:
Contact Name:________________________ Relationship:________________________
Telephone: Home:________________________ Work:________________________
Cell:________________________

Contact Name:________________________ Relationship:________________________
Telephone: Home:________________________ Work:________________________
Cell:________________________

**CHILD’S PREFERRED SOURCES OF MEDICAL CARE**

Physician’s Name:_________________________________________________________
Address:______________________________________________________________
Telephone:_____________________________________________________________

Dentist’s Name:__________________________________________________________
Address:______________________________________________________________
Telephone:_____________________________________________________________

Preferred Hospital Name:___________________________________________________
Address:______________________________________________________________
Telephone:_____________________________________________________________

Ambulance Service:________________________________________________________
Telephone:_____________________________________________________________

*Special conditions, medications or allergies that emergency medical personnel should know:*
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

As parent/guardian, I give consent to have my child receive first aid treatment as well as consent for emergency transport should it be necessary. I also give consent for emergency medical treatment by medical personnel in my absence. I understand I will be responsible for charges not covered by insurance.
Create emergency cards for each child in your care. Use large index cards (available at office supply stores) or card stock. Write emergency information on cards and if possible staple a recent photo of the child to the back of the card. (In case of an accident, the police can identify the children by the photos on the cards.) You can store the cards in a plastic zip-lock bag or small purse sized photo album and carry them with you whenever you and the children are outside or away from the home. Create emergencies cards for yourself, assistants and volunteers too!

**In case of emergency, BE PREPARED!!!!!!**

**MEDICAL EMERGENCY CARD (front)**
Child’s Name: _______________________
Address: __________________________ 
Phone: ___________________ Age ______
Primary Contact: ____________________
Employer: _______________ Phone: ______
Emergency Contact: __________ Phone: ______
Child’s Physician: ____________________
Phone: ______________________________

**MEDICAL EMERGENCY CARD (back)**
Persons authorized to pick up child from day care home:
Name: _______________ Phone: ______
Name: _______________ Phone: ______
Special medical health need(s): ____________
________________________________________________________________________
________________________________________________________________________
Parent’s Signature: ________________________

*The information on this page, while useful, exceeds Indiana’s family child care regulations.*
Children’s Records Requirements—
Within 30 days of enrollment

As indicated in Indiana’s family child care rules & regulations.

470 IAC 3-1.1-37 Requirements for admission to the home

   (b) Within thirty (30) days of a child’s admission the licensee shall receive a written statement from the child’s parent or legal guardian signed by a physician or a certified nurse practitioner which states the following:
   (1) That the child can participate in the child care home’s activities.
   (2) That the child has had immunizations which are up to date for the child’s age.
   (3) Whether the child has allergies or any chronic health conditions.
Daily Activity Consent

Date:_________

I/We hereby give permission to_________________________ to take my/our child,__________________________, to participate in the following activities and on excursions that will take place during regular child care hours. I understand I will be notified of any such trips beforehand, that trips will be supervised and all precautions will be made for the safety and well-being of all the children.

I also understand _____________________ will not be liable for any accident or injury. Consent is for normal activities unless indicated below. The following activities may occur during the course of the day at_______________________________.

Please initial those activities your child has permission to participate in.

______Ride in provider’s car
______Go to park
______Go for walks
______Visit neighbors
______Play in water
______Ride bike in fenced area
______Go to library
*_____Other

*Explain:

Are there any other activities in which you child should not participate?

________________________________________________________________________
________________________________________________________________________

Parent’s Signature:__________________________________

Parent’s Signature:__________________________________
Indiana’s family child care rules & regulations state the following about field trips:

470 IAC3-1.1-40 Transportation and activities away from the child care home.
Section 40. (a) Caregiver shall obtain written permission before taking a child away from the child care home for field trips or any other activities.

The form below may be used when taking a field trip. Distribute at least one week before the field trip to ensure they are all returned. Keep extras on hand in case parents forget or lose theirs.

---

**Important Notice!!**
**Field Trip Announcement**

Dear Parents:

On __________________, ______________________,
we will be taking a field trip to ______________________,
_________________________________________.

We will leave at ___________ and return at ____________.
Your child needs to bring___________________________.

Please sign and return

Child’s name:

I give my child permission to participate on the field trip on
____________________________ to __________________________

Date

Place

☐ I volunteer to accompany the children on the field trip.

Signature:__________________________________________
Childhood History

Child’s Name: ____________________________________________
Child’s Birth date: ____________________________________________
Please list siblings and ages:
_________________________________________________________
_________________________________________________________
_________________________________________________________

How would you describe your child?

Experiences with Others

What other child care experiences has your child had?
What are some of the ways in which you child plays at home?
Does your child play with children from other families?
Is the play friendly or are there disagreements?
Does your child usually get his own way with other children?
If not, how does your child react?

Family Time

Is the entire family together for any time during the day?
What are meal times like with your family?

Routines

How long does your child nap during the day?
What time does your child go to sleep at night?
What time does your child usually wake up?
Are routines followed on the weekend?
What does your child typically eat for breakfast, lunch and dinner?
What are your child’s favorite foods?
What are your child’s favorite snacks?
Is your child potty trained?
**All About Me!**  
Personal Information for Infants and Young Toddlers

Name: ____________________________________________  
Birth date: ___________________  Siblings: ________________

**When I sleep**

Morning wake up time:  
Daily nap times:  
Evening bed time:

To help me relax and go to sleep, I really like: ______________________________
_________________________________________________________________________
_________________________________________________________________________

**When I eat**

Morning meal time:  
Morning snack time:  
Lunch time:  
Afternoon snack time:  
Dinner time:  
Evening snack time:

**What I like to eat**

Circle one:
- I am breast fed
- I am bottle fed
- I drink from a sippy cup

Type of formula: ____________________________

Special instructions for preparing formula: ________________________________
_________________________________________________________________________

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<thead>
<tr>
<th>Vegetables</th>
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<tbody>
<tr>
<td>Fruits</td>
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<tr>
<td>Meats</td>
</tr>
<tr>
<td>Juices</td>
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<tr>
<td>Breads</td>
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</tbody>
</table>

**Types of baby food I can eat**

**Table foods I can eat**

<table>
<thead>
<tr>
<th>I like to:</th>
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</thead>
<tbody>
<tr>
<td>Swing</td>
</tr>
<tr>
<td>Listen to stories</td>
</tr>
<tr>
<td>Listen to Music</td>
</tr>
<tr>
<td>Eat</td>
</tr>
<tr>
<td>Crawl / toddle</td>
</tr>
<tr>
<td>Be with other babies</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I play:</th>
</tr>
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<tbody>
<tr>
<td>Peek a boo</td>
</tr>
<tr>
<td>Babies</td>
</tr>
</tbody>
</table>
Sample Forms to Help Document Additional Requirements

**Fire**

Form P  Shut off labels

Form Q  Graph for evacuation plan

Form R  Fire Drill Log

Form S  Fire Department Notification

**Medication**

Form T  Medication-all children

Form U  Medication-single child

**Attendance**

Form V  Daily Attendance

Form W  Sign In/Out
(choose one of the two above)
Gas
Shut off
Please keep this area clear!

Electric
Shut off
Please keep this area clear!

Water
Shut off
Please keep this area clear!
Use this graph to map out your home. Draw the evacuation Routes to be used in case of an emergency. Make sure to include all exits.

Key
Gas shut off: mark with a G
Electric shut off: mark with an E
Water shut off: mark with a W
Exits: mark in
# Fire Drill Log

**Year:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Time</th>
<th>Number of adults</th>
<th>Number of children</th>
<th>Length of time to evacuate</th>
<th>Smoke detector batteries: Okay or replaced</th>
<th>Check fire extinguishers</th>
<th>initials person conducting test</th>
<th>Special notes/problems</th>
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Record of Local Fire Department Notification

Spoke to:_________________________________________________
(name of fire department staff with whom you shared the information.)

Station #__________ Station Name:______________________________
Station Address: _____________________________________________

Check one:  _____ Spoke by phone  _____ Visited the Station  _____ Sent by mail

Information shared:
Address of child care home:____________________________________
Home Owner:_______________________________________________
Primary Provider:____________________________________________
Telephone Number:___________________________________________
Beep-er Number:____________Cell Phone Number_______________

Neighbor's Name and Number:___________________________________
(obtain permission from the neighbor before supplying this information.)

Care is provided on the following days (check all that apply):

_____Monday       _____Tuesday       _____Wednesday
_____Thursday   _____Friday       _____Saturday       _____Sunday

Hours child care is in operation:______________________________

Maximum capacity of children and their age range:________________

List below the number of children you have with medical conditions, which require special
considerations for moving the child or essential medical equipment necessary for the child’s
positioning/health needs. List the number of children you may have with special communication needs.
(Important confidentiality notice: Do not put name of child on this form, only number of children).

# of children
Special considerations (i.e. uses wheel chair)
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________
_______________________________________________________________________

Primary provider's signature:__________________________Date of contract:__________
# CHILDREN’S DAILY ATTENDANCE RECORD

**Month and Year:**

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**Note:**
- Fill in the dates and reasons for absence as needed.
- Use the table to track attendance on a weekly basis.

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**FORM V**
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<tr>
<th>Child's Name</th>
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Family Child Care Orientation Training & Resource Manual
Prepared By: The Indiana Association for Child Care Resource & Referral
Sample Forms

for

CLASS II Homes

(A Class II license can be applied for after a provider has held a class I license or after working at least one year in a licensed child care home or center)

Design Professional Information
A design professional in accordance with 470 IAC 3-1.1-7.4 is a:

51476 (R 1/07) BCC 0100

A class II home must comply with the rules and regulations of a Class I home and then must meet the additional requirements found in IC 12-17.2-5-6.5. This includes attending Licensing Orientation Training.
See Front Pocket Application Packet Materials
For Class II information
Rules & Regulations at a Glance
Family Child Care Providers

The provider/Applicant will:

- Attend orientation training 1 & 2
- Provide proof of a High School diploma or GED
- Be at least 18 year of age
- Have a Child Development Associate Credential (CDA) or,
  - An Associate degree in Early Childhood or,
  - Show proof of completion of at least 12 hours in early childhood education, child development, or related field in conjunction with a Bachelor’s degree or;
  - Provider must agree to complete the CDA within 3 years.
- Must provide proof of a negative TB test.
- Must provide written proof of a medical statement signed by a doctor or nurse practitioner.
- Complete Safe Sleeping Practices and Reducing the Risk of SIDS training
- Complete Universal Precautions (Prevention of Disease Transmission) training
- Have valid First Aid & Pediatric CPR training
- Complete FSSA Fingerprinting in Indiana
- Submit Consent for Release of Information for a criminal history check on other persons in the household who are 18 years of age or older, staff and volunteers
- Submit a signed Attestation statement to the Licensing Consultant
- Train any assistants and volunteers
  - CPS procedure, inspection checklist, fire safety and confidentiality
- Be in compliance with local zoning
- Submit negative results of Substance Abuse Screening for provider, household members over 18, staff and volunteers
- Submit an application (complete packet) to the Licensing Consultant
- Call Licensing Consultant when ready for inspection

Bureau of Child Care will:

- Conduct a State criminal history check, CPS and SOR on provider & his/her spouse, household members over the age of 18, staff and volunteers.
- Give approval or denial of license within 60 days
- Perform an annual licensing visit
- May visit the home unannounced upon receipt of a complaint
- Issue approval or denial of your license
Assistant Caregivers need (Keep documentation on file):

- Physical/TB test
- Criminal History Checks, CPS and SOR completed by BCC
- First Aid (within 30 days & before caring for children alone)
- Universal Precautions training
- Pediatric CPR training if left in charge of the children in provider's absence
- Training (by the provider) on:
  - fire prevention & safety procedures
  - the inspection checklist
  - confidential treatment of personal information about the children and their families
  - procedures for detecting and preventing child abuse & neglect

Types of Licenses
- **Regular**
  - provider is in full compliance of the rules and regulations
  - visited annually
  - renewed every two years
- **Provisional**
  - Usually given to first time licensees who are not in full operation and compliance with the rules cannot fully be demonstrated.
  - Typically given in 3 month increments, not to exceed 12 months
- **Probationary**
  - Usually issued to providers who temporarily unable to meet regulations.
  - Up to 6 months, with an additional 6 months if necessary for the provider to come into full compliance with the license regulation

Considerations:
- **Variance**:
  - permission given by the Bureau of Child Care to comply with the rule in a different way
- **Waiver**:
  - Provider can't comply with the rule, Bureau of Child Care grants a waiver to a regulation
- **Exempt**:
  - Provider is caring for 5 or fewer children not related to them, and is not required to be licensed by the State of Indiana

*This is meant as a quick reference for Indiana's rules and regulation for family child care*
The Home Must:

- Be defined as a residential structure
- Have a working phone
- Have annual water quality test and treatment as needed, if not on city water.
- Have the license displayed in a visible spot, so it can be easily seen by parents
- Have adequate space for rest & play
- Have emergency numbers posted by the phone:
  - (police, ambulance, fire department, hospital, licensing consultant, Carefinder website and poison control)
- Protective coverings on all exposed electrical outlets
- Have a stove & oven or microwave and refrigerator
- Have hot & cold running water
- Have stair guards as needed to protect children (cannot block exits)
- Have screens on windows & doors used for ventilation
- Have firearms and ammunition safely locked away
- Have a least two exits
- Have a first aid kit
- Have proper food storage
- Have a diaper changing area that can be sanitized after each use
- Have an evacuation plan visibly posted (fire and natural disaster)
- Have the gas, electric, and water shut offs labeled and locations identified & posted
- Have poisonous or hazardous materials inaccessible to children
- Have a fenced in outdoor play area (suitable natural boundaries would need approval by licensing consultant)

Fire Safety

- Extension cords must be used safely (and under 6 feet long)
- Home must be properly wired and no exposed wiring
- Have a least two exits from any room which is used for childcare
- Follow all safety requirements for oil burning appliances
- Doors must be easily opened (children must be able to open)
- Quarterly fire drills will be conducted and documented
- Notification must be given to the fire department that the home is operated as a childcare annually

This is meant as a quick reference for Indiana's rules and regulation for family childcare homes. Please familiarize yourself with the regulations in their entirety
Fireplace must have glass door as applicable
Fireplace & chimney must be inspected annually by a professional
Fireplace and chimney must be cleaned annually if recommended
Smoke detectors by stairways and all sleeping areas and able to detect fire throughout home
A 2 1/2 pound or greater ABC multiple purpose fire extinguisher is located on each floor, and an additional one will be placed in the kitchen (mounted)
Store flammable liquids in tightly sealed labeled containers in appropriate containers for the type of liquid being stored (no more than 5 gallons)
Licensee shall permit inspections by the Division of Homeland Security if requested by the Division of Family Resources

Health and Safety
- First Aid kit
- Hot & cold running water
- No common washcloths or towels (use paper towels or individually label)
- Written permission for medications
- Medication labeled with:
  - the directions, child's name, physician's name, & name of the pharmacy
  - over the counter medicines should be labeled with the child's name
    - follow parent's directions
- Record times medication is given
- Sanitary food prep & serving areas
- Garbage has tight fitting lids
- Trash containers with lids
- Covered container for diaper disposal
- Empty & sanitize (bleach water solution) potty chairs after each use
- Diaper changing area must be a washable/waterproof surface
- area is sanitized after each use

Sick Children
- Separate the child (Still under provider's direct supervision)
- Notify the parents
- Monitor the child's condition

This is meant as a quick reference for Indiana's rules and regulation for family child care homes. Please familiarize yourself with the regulations in their entirety
Record keeping on the Children

- Maintain attendance records for at least two years
- Each child must have completed information for the provider's records that contain:
  - An enrollment form on the child
  - Consent for Release (for monthly report of birth record) form
  - Monthly Report form
  - A signed medical release form for the child
  - A signed copy of the provider's discipline policy (parent gets a copy also)
  - Emergency information, including emergency contacts
  - Important medical information about the child
  - Names of people authorized to pick up the child
  - Written statement from the child's physician or certified nurse practitioner which states the following: (must be received within 30 days of enrollment)
    - That the child can participate in child care home's activities
    - That the child has current immunizations up-to-date for the child's age
    - Whether the child has any allergies or chronic health conditions
  - Signed field trip permission as needed
  - Medication administration as needed

Activities should be:

- Age appropriate
- Developmentally appropriate
- Interesting
- Provide for a balance of quiet and active play
- Provide for inside and outdoor play daily (except in severe weather)
- Toys, materials and equipment should be in good repair

Swimming:

- Swimming is permitted in pools with proper filtration systems
- Pools must be surrounded by a fence with a locked gate
- A person must be on staff to supervise the swimmers different person for those not swimming

This is meant as a quick reference for Indiana's rules and regulation for family child care homes. Please familiarize yourself with the regulations in their entirety.
Field Trips:
- Written permission must be granted by the parent or legal guardian
- Driver must be at least 18 years of age with a valid driver's license
- Everyone must wear a seatbelt or be in a car seat or booster seat according to the State's requirements
- Never leave the child/children unattended
- Vehicle must be properly insured

Discipline:
- Provider must provide the parent with a written copy of the discipline policy. Parent must sign the policy.
- Must never be cruel, harsh or unusual
- Should not be a threat of loss of meals, force of nap, or connected to potty training
- A copy of the discipline policy signed by the parent or guardian must be kept in the child's record

Infants:
- Hold infants while bottle feeding, never prop a bottle
- Label each child's bottle and store properly
- Each child under 24 months must have his/her own crib, port-a-crib, or playpen to sleep in
- Diaper changing areas must be washable/waterproof materials & sanitized after each use (change waterproof material between children)
- Children must be supervised at all times in accordance with Supervision Policy Letter

Nutrition
- Meals and snacks should be nutritious and appropriately timed
- Drinking water should always be provided

Sleep
- A rest period should be provided for children under the age of 5 years
- Each child should have his/her own cot, mat, bed or sleeping bag
- Covers, mats, and sleeping bags should be properly stored

_This is meant as a quick reference for Indiana's rules and regulation for family child care homes. Please familiarize yourself with the regulations in their entirety._
Child Care Home Procedures Checklist

- Review self-assessment tool (located in ABC packet to explore if family child care is the right business for you) (Optional)
  
  **Date Complete:**
  **Changes to be made:**

- Attend a Family Child Care Orientation training I and II
  
  **Date Orientation I Complete:**
  **Date Orientation II Complete:**

- Attend Safe Sleeping Practices Training
  
  **Date Competed:**

- Review regulations found in the application packet and the licensing checklist, covered in Orientation Training. Make any necessary changes to your home
  
  **Date Complete:**
  **Changes to be made:**

- Call local zoning board and comply with local zoning issues

- Call *Licensing Consultant* to clarify any questions regarding regulations before you make any major changes to your home (if needed)

  **Licensing Consultants Name:**

  **Contact Number:**

  **Questions:**
☐ Obtain the required training (CPR, First Aid, Universal Precautions) and documentation for yourself (general physical and TB test), household members and any helpers you may have (see licensing inspection checklist).

**Date checklist review complete:**

☐ Obtain confirmation that acceptable results of criminal history checks of household members, helpers or volunteers over 18 years of age were obtained by your Licensing Consultant

☐ Complete Drug Testing

☐ Complete FSSA Fingerprinting for National Criminal History Check

☐ Submit completed Application and Attestation forms to the Licensing Consultant
  (It is suggested to make copies of everything you send in)

**Date sent:**

You should call your Licensing Consultant to schedule your inspection

**Date inspection scheduled:**

**Date completed:**

**Follow up if needed:**

☐ Notification (to you) of approval or denial of license will occur within 60 days of submission. Your recommendation will go to The Bureau of Child Care in Indianapolis.
In Summary....

If you have questions about the rules and regulations, the licensing process or licensing requirements, call:

Your Licensing Consultant

If you have questions about educational opportunities, marketing your home, working with employers in the area or if you need support and technical assistance, call:

Your local Resource & Referral agency

If you need more information on Child Care Food Program, call:

The Department of Education
800-537-1142

The Indiana Association for Child Care Resource & Referral
800-299-1627
Federal & State
Laws Governing
Family Child Care Homes
Indiana’s Law on child abuse and neglect states:

31-6-11-3  Reporting
Any individual who has the reason to believe a child is a victim of abuse or neglect must make as report...anonymous reports are accepted.

3-6-11-7  Immunity from liability
Any person, other than the accused, who reports child abuse or neglect or is involved in the investigation or disposition of child abuse or neglect reports is immune from criminal or civil liability, unless the person acted maliciously or in bad faith.

In other words, you are required by law to report suspected abuse or neglect of a child. If you make an error, make it on the side of caution—the side of a child (if you are not sure...make the call and report).

Who should you call?
Your local Child Protective Services
OR
Statewide reporting number:  1-800-800-5556

For additional resources:
Clearinghouse on Child Abuse and Neglect  800-394-3366
National Child Abuse hotline  800-422-4453

Websites:  www..calib.com

www.childabuse.org
Do you need more information on identifying the signs of maltreatment, identification of accidental and non-accidental injuries of young children, or how to report suspected abuse or neglect?

**Free Training Opportunities**

*Please call for locations throughout Indiana*

Child Abuse 101, Indicators of Abuse and Neglect

Child Abuse 102, Teach by Example...Because Prevention Works

Shaken Infant Syndrome Prevention Education

**Call: 317-634-9282**
Steps To Reporting Child Abuse and Neglect

**Remember:** You are legally required to report even a suspected case of abuse or neglect. The report does not need proof, just suspicion, based on observation, and first hand knowledge, not on hearsay.

- Contact the local reporting agency, typically Child Protective Services, in your community or call 1-800-800-5556.
- You may report anonymously or give your name.
- Stick specifically to the facts. Relay only what you directly observed and/or heard.
- Document what you observed/heard, time of the call, person you spoke with, and other important information.
- Document call. Be specific, write down time of call, nature of call and name of the person you spoke with.

**What should you do if you are unsure?**
- Do not put the child in danger!
- If you suspect it, report it!
- If you have doubts, call your local Department of Child Services and ask for Child Protective Services. They will be able to help you.

**What should your program policies include?**
- Requirements for reporting suspected child abuse/neglect.
- Clear policies about staff behavior with children.
- Procedures for investigating staff prior to working with children for child care abuse and neglect.
- Procedures for investigating allegations of child abuse and neglect concerning staff.

**If a staff member is suspected** of abuse, parents or legal guardians of suspected abused children will be notified immediately after contact with Child Protective Services is made. Parents or legal guardians of other children in the program will be contacted within 24 hours of contact with Child Protective Services, so that they may share any concerns they have.

**Communication plan for staff and parents:**
Staff and volunteers will receive a written copy of your policy and Indiana’s law before beginning work. All parents will receive a written copy of your policy and Indiana’s law upon their child’s enrollment.
This is a sample form created for documentation when a report of suspected child abuse or neglect is made. Due to the sensitivity of this information, any form containing children’s information should be kept confidential.

**Record of Reporting Suspected Abuse or Neglect**

Date of observation:___________  Child’s Name:___________________________

Child’s age _______  Date of birth:_______  Child’s gender:______________  

Mother’s/Guardian’s name:__________________________________________

Home phone: _______________  Cell: _______________  Work: ______________

Father’s/Guardian’s name:__________________________________________

Home phone: _______________  Cell: _______________  Work: ______________

Name of the person with whom the child resides:______________________

Address where child resides:________________________________________

Home phone #:______________  Cell or Other phone______________________

What was observed or heard first hand (State specific and objective facts):

(Include verbal reports made by the child, behavior of the child which may indicate abuse or neglect, any evidence of problems between provider and child which have been observed. Also, describe very objectively the child’s mental status, including distress such as anxiety or fear, as well as behavior disturbances, such as agitation, disorganization, tearfulness or hostility.

(Use additional space as needed)

Names of all directly involved in allegation

__________________________  ____________________________  ________________

Signature of person making the report:_______________________________

Other persons notified (if any):______________________________________

Time & Date of Report:____________________________________________

Name & agency of person receiving report:_____________________________
What is the Americans with Disability Act and how will it effect my home business?

**Highlights of the Americans with Disabilities Act (ADA):**
- Federal civil rights law
- Went into effect in 1992
- Specifically bars discrimination in the following areas:
  - Employment
  - State and Local Governments-employees, awarding contracts or providing services
  - Public Accommodations and Commercial Facilities
  - Telecommunications

**The ADA protects the rights of the following individuals:**
- An individual with a mental or physical disability
- An individual with a history of disability
- An individual regarded as having a disability
- An individual who has friends, family members, caretakers or other associates with a disability

**Helpful ADA Language**
- **Public Accommodations:** Under the ADA this term covers a wide variety of private businesses that are open to the public, this would include family child care homes. Family child care homes provide the service of child care to the public.
- **Reasonable Accommodations:** An accommodation that does not fundamentally alter the nature of the program or service you offer.
- **Undue Burden:** An accommodation that would result in a significant difficulty or expense.
- **Readily Achievable:** An accommodation that can be done without much difficulty or expense.
- **Direct Threat:** A child’s condition poses a direct threat to the health and safety of the other staff or children.

Each child’s needs must be evaluated on an individual basis to determine whether a program can reasonably accommodate the child’s needs.
Commonly Asked Questions about the Americans with Disabilities Act and Child Care Providers
By Deborah Leuchovius, PACER ADA Specialist

Q. Are family child care providers required to comply with the ADA?

A. Yes. Family child care providers may not discriminate against children with disabilities. The portion of the home that is used for child care would be covered under the ADA. However many child care providers express concern that they will be required to make major architectural alterations to their home such as ramps or altering bathrooms. This is probably not the case. Alterations should be “readily achievable”, this means without much difficulty or expense. This will always be judged by the overall financial resources of a business.

What may be a hardship for a family child care home may not be considered a hardship for a facility. Family child care providers are required to make modifications to policies, activities and procedures that would not be a financial hardship.

Q. Can a family child care provider refuse to accept a child with a disability because they are concerned that their liability insurance rates will increase?

A. No. Department of Justice guidelines make it clear that under ADA a child care home cannot refuse to accept a child with a disability, or employ a staff person with a disability, because it fears its insurance company will raise its rates
Q. Do child care homes have to accept all children with disabilities, no matter what type or level of disability?

A. No. There are situations where child care providers can legally refuse to accept a child with a disability if the child poses a direct threat to others, or if providing an accommodation would pose an undue hardship on the provider, or fundamentally alter the nature of the program. But each person must be considered on an individual basis. Children with disabilities cannot be excluded merely because they have a disability, or based on myths and stereotypes about that disability. Providers must make good faith efforts to consider each child individually. The most important step is that providers and parents sit down together to discuss what the specific needs of the child are, and then see if they are able to meet those needs. If there are costs involved in making accommodations, providers must analyze whether they would pose an undue burden (significant difficulty or expense). Family Child Care providers should remember that there are tax credits or deductions available to help them make these accommodations, and should investigate outside funding in addition to their own resources before they make a final decision on whether or not an accommodation would be an undue burden.

Q. Can a child care provider refuse to accept a child with a disability because he/she can’t afford to make the necessary accommodations to meet the child’s needs?

A. If a parent is not satisfied that their child was given a fair consideration, or that it would not, in fact, be an undue burden for the child care provider, the family may file a complaint with the Department of Justice. It will investigate the case and can impose fines of up to $50,000 for a first violation. A private suit can also be filed. Private plaintiffs cannot receive money damages, but can receive injunctive relief such as a court order requiring the day care to make necessary accommodations and pay attorney fees.
Q. Can a child care provider refuse to accept children with disabilities who are not toilet trained?

A. In the past, many children with disabilities have been excluded from child care programs because of eligibility requirements. That children be toilet trained by a specific age. The ADA, however, states that eligibility requirements must not have the effect of screening out people with disabilities. Toilet training requirements have this effect because many children with disabilities will never have bowel or bladder control as a result of their disability.

Another part of the law states that service of a personal nature including eating, dressing and toileting do not have to be provide unless they are services normally provided by a program. Child care programs, however, usually do provide some degree of assistance in these areas to young children. They should therefore be prepared to modify these policies and accommodate children with disabilities who need toileting assistance.
For more material on the Americans with Disabilities Act and its implications for Family Child Care, contact:

Child Care Law Center  
973 Market Street, Suite 550  
San Francisco, CA 94103  
(415) 495-5498

The Arc National Headquarters  
500 E. Border St., S-300  
Arlington, TX 76010  
(817)261-6003 Voice (817)277-0553 TTY

Department of Justice  
Civil Rights Division  
(800) 514-0301 Voice (800) 5140381 TTY

Sarah Mulligan  
Child Care Plus  
Rural Institute on Disabilities  
52 Corbin Hall  
University of Montana  
Missoula, MT 59812  
ruralinstitute.umt.edu/childcareplus/

Department of Justice paper on Child Care Centers and the Americans with Disabilities Act  
www.usdoj.gov/crt/ada/chcinfo.pdf

Project PRIDE’s Center of Expertise activities are conducted with support from the Technical Assistance About Training on the Rehabilitation Act (TATRA) Project. TATRA is funded by a grant from the Rehabilitation Services Administration, Offices of Special Education and Rehabilitation Services. Copy right 1994. PACER Center, Inc. For permission to reprint, please email Kathy Kaltved specifying the article.
# Sample Home Child Care Schedule

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<tr>
<td>6:30 – 7:30</td>
<td>Arrival</td>
<td>*Talk with parents</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Children put away belongings</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Quiet area set up for school-agers to finish homework</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Variety of table activities including puzzles</td>
</tr>
<tr>
<td>7:30-8:00</td>
<td>Breakfast</td>
<td>*Prepare and Serve breakfast – older children getting their own</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Eating and cleaning up</td>
</tr>
<tr>
<td>8:00-8:45</td>
<td>Free play</td>
<td>*Children choose activities that include: dramatic play, manipulatives, blocks</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Time for provider to give babies one on one time</td>
</tr>
<tr>
<td>8:45-9:00</td>
<td>Lg. Group Time</td>
<td>*Discussing plans for the day, talk about what the weather is like and sharing time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Songs, fingerplays and stories</td>
</tr>
<tr>
<td>9:00-9:30</td>
<td>Small Group Time</td>
<td>*Special activities including art, listening to music, books on tape, cooking, playdough</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Time for provider to interact with each child individually or in small groups</td>
</tr>
<tr>
<td>9:30-9:50</td>
<td>Lg. Motor / Outdoor</td>
<td>*Outdoor activities, swing, walks, slide</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*If indoors, dancing, push/pull toys, mini basketball, “Simon Says”</td>
</tr>
<tr>
<td>9:50-10:15</td>
<td>Snack</td>
<td>*Have older children wash up and assist</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Everyone should help clean up (their own)</td>
</tr>
<tr>
<td>Time</td>
<td>Activity</td>
<td>Description</td>
</tr>
<tr>
<td>------------</td>
<td>----------------------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>11:30-11:45</td>
<td>Small Group/Individual</td>
<td>*Puzzles, books, crayons, markers, paper</td>
</tr>
<tr>
<td></td>
<td>Activity</td>
<td></td>
</tr>
<tr>
<td>11:45-12:45</td>
<td>Lunch</td>
<td>*Wash up, serve and eat lunch, older children should assist</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Everyone should help clean up</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Atmosphere should be family style and relaxed</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Brush teeth</td>
</tr>
<tr>
<td>12:45-2:45</td>
<td>Rest Time</td>
<td>*Infants and some toddlers may have already napped and may need individual</td>
</tr>
<tr>
<td></td>
<td></td>
<td>time during older children’s rest time</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*If some children do not sleep, quiet independent activities may substitute</td>
</tr>
<tr>
<td>2:45-3:30</td>
<td>Lg. Motor/Outdoor</td>
<td>See above description</td>
</tr>
<tr>
<td>3:30-3:50</td>
<td>Snack</td>
<td>See above description – school-agers arrive</td>
</tr>
<tr>
<td>3:50-4:15</td>
<td>Free Play or outdoors</td>
<td>See above descriptions</td>
</tr>
<tr>
<td>4:15-4:30</td>
<td>Lg. Group</td>
<td>*Group sharing and recap of day, story</td>
</tr>
<tr>
<td>4:30-5:45</td>
<td>Small group or individual choices</td>
<td>*Art activities, table games, puzzles, homework for school-agers or</td>
</tr>
<tr>
<td></td>
<td></td>
<td>independent projects</td>
</tr>
<tr>
<td></td>
<td></td>
<td>*Gradual departure of children and parent communication</td>
</tr>
</tbody>
</table>
RELATIONSHIPS
Parents like to know what occurs during the day while they are at work. Use forms like the one on this page and the adjacent page, to keep parents informed about their child’s day.

Baby’s Day

Date: ________________

Meal Times

Breakfast: ____________________________________________

A.M. Snack: __________________________________________

Lunch: ______________________________________________

P.M. Snack: __________________________________________

Nap Times

_______________________________________

_______________________________________

Diaper Changes

Time Wet/ Dry/ B.M.

____________
## My week at Child Care

### Week of: _________________________

<table>
<thead>
<tr>
<th></th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eating</td>
<td></td>
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</tr>
<tr>
<td>Sleeping</td>
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<tr>
<td>Toileting</td>
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<tr>
<td>Mood</td>
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<tr>
<td>Special Projects</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

### NOTES:

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
The following are characteristics of positive, healthy interactions as indicated by the National Association for Family Child Care.

 ♥ Provider cares about and respects all the children and is committed to helping them develop to their full potential.

 ♥ The provider shows affection to children through a gentle touch, kind words, and/or a special look.

 ♥ The provider holds babies frequently.

 ♥ The provider is sincere and comfortable with children.

 ♥ The provider seems to like children and enjoys being with them.

 ♥ The provider observes children’s behavior, verbal and body language, and abilities. The provider uses this information to respond to each child. For example, the provider responds to a baby’s crying as promptly and effectively as possible.

 ♥ The provider seeks information about each family’s cultural traditions. The provider uses this information in responding to the children and planning activities.

 ♥ The provider shows positive attitudes toward bottle weaning, diapering, toilet learning, discipline, and special needs of children.

 ♥ The provider recognizes signs of stress in children’s behavior. The provider responds with appropriate stress reducing activities.

 Parents and children appreciate these things in a provider!
The Juggling Act:
Balancing Work and Family

You have probably chosen family child care, because it will allow you time to spend with your own family and enhance the family income.

Working from your home has many advantages:

- You are your own boss
- You get to set policies/rules
- No commuting time
- Comfortable atmosphere

However, with children of your own, special considerations should be made to make the care a positive experience for all.

Try these ideas:

- Arrange space to balance the needs of your family and your business.
- Have some areas off limits to child care children and on limits only to your children
- Store your child’s special toys in a safe place, accessible only to your family
- As children get old enough to understand, help them see the advantages of being at home
- Encourage your children to be involved in the business. They can help you at mealtime, read to smaller children and help in the creation of art activities. Older children can create a home newsletter for you to share with your customers.
- Include your child completely in all child care activities.
- Most of all, respond to your child with love, patience, attention and guidance.
- Know that you are the most important person in your child’s life. When you are little, it is hard to share—especially someone as special as you!!
- Inviting your child’s friends over may not be an option, because of the number of children in your care (all children on the premises are counted in the ratio, as age and relation to caregiver dictate). Plan special times, like dinner time or Saturday
Take Good Care of Yourself!!

Relax Creatively!
Take time to do something you really enjoy, or learn the art of loafing. If you set aside time to relax, don’t let ANYTHING interfere; even worrying about what you’re not doing.

Accept what you can’t change!
Some circumstances are beyond our control. Accept realistic expectations and go about achieving them, with assistance if needed. Recognize your own limitations of others.

Learn to say “no”!
”No” is such a small word but so hard to say. Set priorities for yourself and for your family day care business. What is most important to you? Setting priorities makes it easier to say “No” to the unimportant things in life.

Work off tension!
Try a physical activity like walking, gardening or exercising with the children.

Like yourself!
You are a unique individual. Respect your abilities. Recognize your needs; forgive your errors.

Get enough sleep!
Know how many hours you need. Is it 6, 8, or even 10? Having enough sleep regularly will help to give you a refreshed energetic outlook on life.

Organize!!
Organize all areas of your home. Know where things are, so you can easily find them.

“Every survival kit should include
A SENSE OF HUMOR” 😊
Fostering Parent involvement

1 Invite parents with special talents to help you.

2 Post weekly menus and plans for special activities, such as field trips. These are good conversation topics for parents and children.

3 Set aside a specific time for coffee with parents to discuss their child’s progress or mutual concerns. Consider formal, six-month, parent/provider conferences.

4 Relate what happens during the day, noting new friends, different snacks, and special music. Parents need to feel a part of their child’s day.

5 Plan a picnic or invite parents to lunch. A potluck, spaghetti supper, or cook out could help extend a sense of family.

6 Host a “get acquainted” evening for child care parents to talk with each other.

7 Newsletters are effective, but take time and energy. A parent volunteer would be ideal.

8 Surprise the parents with a scrapbook entitled “All About Me,” which could include drawings, cute expressions and a photograph or two of the child. Patents love to hear how special their child is.

9 Post a parent information board.
Celebrating Diversity!

To live joyful, interesting lives and to be at peace with each other, people must appreciate each other’s differences, as well as their similarities. Children are learning to do this today in family child care, their own homes and everywhere they go.

Communities are more multicultural. Many family child care providers care for children with diverse backgrounds. As a result, we are getting to know more about other ethnic groups and cultures.

In some family child care programs, all of the children are from the same ethnic or racial group. If your community is not very diverse, you have an additional responsibility to the children in your care. They will soon be going to school with people from other backgrounds. Right from the start, it is important for you to make opportunities for them to celebrate diversity.

A multicultural approach to working with young children is based on appreciating many human differences. The obvious ones include culture, race, occupation, income level, age, gender, religion and physical ability and disability.

When choosing materials for your program, choose those that have cultural relevance for the children in your care. Also choose toys that will allow the children the opportunity to learn about different cultures.

As you display pictures, bulletin boards and add other decorations to your home, choose decorations which are reflective of diversity.

Invite grandparents and other relatives of children in your care to come and share some cultural history with the children in your care.

Recommended reading on the topic of diversity:
Louise Derman-Sparks, Anti-Bias Curriculum: Tools for Empowering Young Children, National Association for the Education of Young Children, Washington D.C.
The child care space is well organized.

Materials are stored in consistent places.

Shelves are labeled with pictures and words. Labeling shelves and other storage areas encourages easy clean up by the children.

Separate containers are provided for different kinds of materials.

Set up areas for the children, full of materials and fun, safe toys for the children to play with and explore.

Everything in the primary play space is easily in reach of children.

Remember to have areas for babies and toddlers that are free from materials and toys which could cause choking or poses other safety hazards.

Lots of reading materials are available for the children. Books are in good repair. (You can protect the pages of favorite books, by covering with clear plastic covering, such as contact paper).

The environment offers a variety of materials. It is a good idea to have enough materials on display to allow for conflict free play, yet to rotate materials offered children periodically to maintain interest and enthusiasm.

There are enough toys and materials, home-made or purchased, to engage all the children in developmentally appropriate ways.

If there is a toy chest, it has safety hinges and air holes, or there is no lid. Toy chests are not recommended practice for the storage of toys, because of the safety issues.

Materials are reflective of the children’s culture.

Materials are free from cultural, gender, race, age or ethnicity bias.

All art materials are non-toxic.
Criteria for Equipment Selection

☆ **Durability**
How long will it hold up? Family child care home use is harder than home use.

☆ **Safety**
Does it have sharp edges or corners? Toxic surface? Will it be pulled or tipped over? How will it wear or break?

☆ **Size/Scale**
Is it the right size and scale for projected and unanticipated use by children and adults?

☆ **Quality of play experiences**
Variety of uses: Can it be used by different children (age, size) for different activities?

☆ **Interest: How long will it hold a child’s interest?**
Challenge: How long will it challenge a child?
Developmental/Educational value: What developmental needs or educational skill does the use of equipment engender?

☆ **Quality of caring experience**
Is it consistent with the child/parent experience?
Does it help the provider’s task?
Does it add to the child/parent’s sense of security?

☆ **Accessibility/Independent use**
Does the equipment require adult assistance in display, preparation or use?

☆ **Aesthetics**
Is the design attractive? Does the color, size and shape add or detract from the overall aesthetic of the home (for example, will there be too much primary colored plastic equipment?)

☆ **Appeal to a variety of senses**
A mobile with sounds appeals to sight and hearing.

☆ **Authenticity**
Real items used for activities, for instance kitchen utensils like pots and pans.

☆ **Cost/Value**
The value of the item depends on the significance and length of its use relative to the price.
BUSINESS PRACTICES
The Power of Goal Setting

“The world makes way for a man who knows where he is going.”

Ralph Waldo Emerson

Goals provide the motivation to do what must be done and a basis for making decisions.

Setting goals will assist you in writing your business plan. You may be asked for a business plan when applying for loans, grants, or other sources of funding.

Individuals who are dedicated to achieving pre-determined goals do become confident, well organized, creative, and successful.

**Answering the following questions, can allow you to more easily set your goals:**

1. What do you really want to do?
2. Why do you want to achieve this goal?
3. Is it within your abilities?
4. Does it represent a challenge?
5. What specific steps must you take and in what length of time?
6. What specific problems could arise?
7. Can you accept the problems that might arise or overcome them if that is possible?

**Once you have determined what is necessary to achieve your goal, you will be successful if you take the action suggested:**

1. Visualize yourself having successfully achieved your goal.
2. Break it down into steps.
3. Set a timetable.
4. Take the first step immediately.
5. Don’t give up! Be patient!
6. Celebrate along the way! Reward yourself for accomplishing your goal!!!
Use this page to help you think about and set professional and personal goals. You may use any or all of these ideas as a start. It is important to be realistic. You can change or amend your goals as you progress. Most of these are short term goals. The last is a long term goal which could take years to attain. You should try to make progress toward a long term goal.

I plan to make the following improvements in my family child care home:
(This could include record keeping, room arrangement, update/create a contract or parent agreement, make a parent policies handbook, make business cards, etc.)

I plan on purchasing the following toys/equipment to improve my home learning environment for children:

<table>
<thead>
<tr>
<th>Toy/Equipment:</th>
<th>Cost:</th>
<th>Date of Planned Purchase:</th>
</tr>
</thead>
</table>

I plan to seek training opportunities in the following areas this year:

I plan to subscribe to the following magazines or purchase the following resource books this year:

(Resource books are available for loan by most Resource...
I plan to implement the following procedures to ensure the health and safety of children in my care:

I plan on learning ______ (number) of new activities to do with children. (Write them down and keep them in a notebook as you go. Keep examples and procedures.)

Resources I will use:

I will find out ______ (number) new resources and how they will help my families:
(For example: WIC, health department, fire department, etc.)

My long term career goal in the profession of early childhood is:
Exploring Your Idea!

Putting your thoughts in writing is the first step toward operation a successful family child care home. The question below are just a few of those for you to think about when opening your child care home.

After answering these questions and summarizing your business idea, the next step is writing a more formal business plan. A business plan is requested with many grant and loan applications. Contact your local Resource and Referral agency to obtain information about S.C.O.R.E. and other resources available to help you with the business aspects of family child care.

1. Where did your idea originate?
2. How do you expect to let parents know about your service?
3. How will you establish a good name in the community?
4. Why will parents choose you program?
5. Who will you market to?
6. What qualifications do you possess that will enable you to be successful?
7. What are your two most important goals for the next five years?
8. Is your family supportive of the idea?
9. What do you anticipate as barriers to opening a child care?
10. What do you anticipate as barriers to filling the program to capacity?
11. What strategies will you use to overcome these barriers?

Summarize your business plan in 50 words or less:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Questions to Consider When Investigating Insurance

Note: Liability insurance for your home is not required by Indiana's family child care regulations. This information is being provided as a resource, should you choose to obtain insurance.

What is liability insurance?

- If one of the children in your care gets hurt in your home or on a field trip, you may have to pay a lot of money.
- Liability insurance is an agreement in which a company promises to pay the medical expense and damages of someone who gets hurt in your home.
- Liability insurance can protect you and your possessions, up to the limits of the policy, if a judge decides that a child and his or her family should be paid.

Does my homeowner's or renter's insurance cover liability?

No, unless there is a special form on your policy, your homeowner's, renter's or personal umbrella policy will not cover liability for your child care business.

What injuries are not covered?

- Most liability insurance policies will not cover injuries caused by:
  - Dog or cat bites
  - Using your car to take a child somewhere
  - Giving a child pills or medicine
  - Hurting a child (for example, spanking)
  - Other things

Always read your insurance policy and look for EXCLUSIONS, or what the company will not cover.

Cost of Liability insurance:

- Each year the cost of liability insurance increases.
- You should get an estimate from several insurance agents.
Talk to several agents about what kind of coverage you should have.

**Some suggested questions to ask when investigating your homeowner’s policy:**

1. Is an endorsement or rider available to extend my home owner’s insurance coverage to my child care business?
2. If the company offers child care endorsements, do I qualify?
3. What is and is not covered by the endorsement?
4. Are there deductibles?
5. What are the premiums?
6. Is there a multiple policy discount?

**Some suggested question to ask when investigating commercial liability insurance:**

1. Do I qualify for the coverage?
2. What is and is not covered by the policy?
3. Must I purchase a separate accident insurance policy?
4. What are the premiums? Are there deductibles?
5. How do I file a claim?
6. Where do I buy a commercial liability policy?
7. Is professional liability included?

**Some other important Questions:**

1. What are the liability and medical payments limits?
2. What is the company’s financial reputation?
3. How knowledgeable is the insurance agent?
4. Does my personal auto insurance policy provide coverage while I am transporting child care children?

*This list is not exclusive! When interviewing agents, measure your own needs and add questions applicable to your situation.*

Resource used: Liability Insurance, Brenda Cude & Carol Volker, National network for Child Care
Liability insurance is expensive, but there are several precautions you can take to reduce the chance of accidents occurring:

- Learn to keep an eye on all the children, at all times, even when children are resting
- Child proof every room where the children will be; imagine any possible accident, and prevent it
- Take 1st aid and CPR classes
- Keep walkways, stairs and sidewalks cleaned
- Keep play areas free of clutter
- Avoid fire hazards
- Choose responsible and capable assistants, volunteers and substitutes
- Know what to do in case of medical emergencies
- Have emergency plans in case of fire or natural disaster
- Encourage parents to visit any time
- Supply and inform the parents of all policies
- If you are caring for more than for more than five unrelated children, obtain a license
- Know each child’s medical history and health concerns
- Have a policy for administering prescription and over the counter medication

To sum up these are your insurance options:

1. Self insure for some or all of the risks you face as a provider. However, if you plan to self insure for all of the risks you will need a minimum fund of $300,000.

2. Extend the coverage of your home owner’s insurance to your child care business.

3. Purchase commercial liability policy and an accident insurance policy.
To be successful, you should have a competitive advantage. The table below is a guide to give you a quick comparison of your child care program to other program in your area. While some of the items listed are not regulation, they are items parents want when searching for child care.

<table>
<thead>
<tr>
<th>Parents look for:</th>
<th>Competition Offers:</th>
<th>You Offer:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Operating hours</td>
<td></td>
<td></td>
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<tr>
<td>Group size and Child to Staff Ratio</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reliability-availability of substitute/ back up</td>
<td></td>
<td></td>
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<tr>
<td>Indoor Safety Precautions Evident</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Large Outdoor Play Space, Safely Enclosed</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clean, organized, Clutter Free Home</td>
<td></td>
<td></td>
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<tr>
<td>Age Appropriate Toys and Materials</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Warm , Loving Home</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Qualifications, Experience and Education of Provider</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nutritious Meals and The Amounts Served</td>
<td></td>
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<tr>
<td>Nurturing Atmosphere</td>
<td></td>
<td></td>
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<tr>
<td>Adequate Indoor Space for Children’s Equipment</td>
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<td></td>
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<tr>
<td>Home is Free From Environmental Threats</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Type of Discipline used and Written Policy</td>
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</tbody>
</table>
Meeting Parents for the First Time: The Initial Interview

Three main goals of the first interview should be:
1. Decide if the child fits in your program.
2. Find out if you can work with the parents.
3. Convince the parents they can feel secure and confident with their child in your care.

Remember to schedule the interview at a time when you can focus your attention on the child and parent or guardian. Use this first interview as attention on the child and parent or guardian. Use this first interview as a time to get to know the child and his/her family.

You should schedule a follow up interview, to give you a chance to see the child interacting with the other children in your care.

Here is a checklist of information to give parents at the initial interview:

☐ Your qualifications and experience
☐ Number of children in your care currently and your maximum capacity
☐ Your days/hours of operation
☐ Your philosophy of child rearing and policy on discipline
☐ Your program or planned schedules; including use of T.V., videos and computers
☐ Meals you serve
☐ Other adults who will be present during child care, including substitutes, their roles and qualifications
☐ How you will handle emergencies.

Show parents all around your home. Show them where children nap, eat and play indoors and outdoors.

Give them a resume and letter of introduction detailing your qualifications and your philosophy. List the training courses you have taken. Offer to provide references.

The initial interview is meant as a get acquainted time. Do not overwhelm the family with too much information. Give them enough to get a good idea of your home and it’s operation. Upon enrollment, you can spend more time detailing policies and procedures.

Policy Setting

A solid relationship with parents is built by clearly communicating expectations. Many providers utilized contracts with their parents to help articulate the expectations. Before authoring a contract, there are several policy setting questions it is recommended you consider.

① Your Standards
What services will you provide that you feel warrant a certain rate?
Is your program of such high quality that it is comparable or better than others?
Do you have an excellent background of education and experiences that will help you provide outstanding services?

② Ages of Children you will care for
Will you provide diapers, wipes, formula, etc., or will the parents?
Are you prepared to work with parents around issues such as toilet training?

③ Fees
Will you charge by the hour, day, week or month?
Will you charge if the parent is late picking up the child?
Will you give credit for absences and vacations?

④ Termination
What time frame do parents need to give you when terminating the relationship?
Will any refunds be given upon termination?
How would you like the parents to notify you in case of withdraw?
Under what circumstances will you exclude a child?

⑤ Other considerations
What will you hours an days of operation be?
Will you provide any extra service and how will you charge?
When will you go on vacation?
What holidays will you be closed?
What will your policy be if you are ill?
Will you provide transportation?
Will you charge a registration fee?
Will you have a trial period for you and the child?
Setting Fees

A common question asked by many child care providers is, “How much should I charge?”
The answer to this question varies from provider to provider.

The following factors will influence what you charge:

- The “going rate” in your area is one place to start as you determine your fees. Your local Resource and referral Agency can help you with this information.

- Region of Indiana
  Are you in an urban or rural area?
  What is the availability of child care in your area?

- Ages of children
  Consider charging more for infants because they take more care.

- Hours of care
  Consider charging more for early arrival or late departure.
  If you will provide evening or 24 hour care, you may consider charging more.

- Special services
  If you will be providing diapers, wipes, taking field trips, offering extra meals, consider additional fees.

Determine your estimated income by using the following formula:

\[
\text{Income} = \text{# of children} \times \text{charge} \times \text{# of weeks}
\]
Parent/Provider Contract

This contract is entered into by and between:

Provider's name:
Parent's name:
For the provision of child care for:
Child's name;

Child care will begin on: ____________________________ (date)

Children of new clients will be placed in my care on a two week trial basis. This allows all parties to get acquainted and should difficulties arise, each party has the opportunity to terminate care in the early stages and seek alternative arrangements.

1. Registration
A deposit of $ __________ equal to the charges for one week is required. This deposit secures your child’s space and is credited toward your child’s last date of attendance.

The following forms must be completed and returned prior to your child’s first day:

Application
Emergency Form/Emergency Cards
Medical Authorization Form
Signed Contract
Signed Discipline Statement
Physical Form/immunization Record

The information on these forms must be kept current. If there is any change, the parents do hereby agree that they shall notify the provider immediately. The health Status Form must be updated and signed by your child’s physician on a yearly basis.

2. Hours
Opening time is 6:30 A.M. and pickup time is not later than 6:00 P.M. unless prior arrangements have been made. Normal full time care is ten hours per day.

Care will typically begin and end as follows:

        Monday     Tuesday     Wednesday     Thursday
Begin:     _______     _______     _______     _______
3. Meals
Meals will be served at the following times:

<table>
<thead>
<tr>
<th>Meal</th>
<th>Begin Serving Time</th>
<th>End Serving Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breakfast</td>
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<tr>
<td>A.M. Snack</td>
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<tr>
<td>Lunch</td>
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<tr>
<td>P.M. Snack</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Dinner</td>
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</tbody>
</table>

I will provide all meals for your child. I ask that no candy, sweets or fast food be brought into the home. If you would like to bring treats for a special occasion, please contact me first.

All infant formula and baby food is supplied by the parent.

4. Payment Policy
The charge for your child is $_____ per _____.

It is agreed that payment shall be made in full on Monday, or the first working day of each week, prior to care given, with no deduction for absence. Payments not made by the end of the first day of attendance each week, will incur a $5.00 late fee per each day payment is late. Failure to have payments current by Friday, will require payment to be brought up to date before your child may continue attendance.

The parents understand and agree to pay a late pick up fee of $5.00 per child for each 15 minutes period the child is not picked up after closing time.

If a check is returned from the bank, the parent will be charged an additional service fee of $15.00. After two returned checks, no personal checks will be accepted. Cash, certified check or money order will be the only forms of payment allowed.

Overtime is offered only on a prearranged basis or in emergency situations. The charge will be $_______ per hour.

You will be notified in advance of any extra charges to be incurred for field trips or additional activities. The parents agree to make payment for these activities by the day of the activity.

The provider will take two weeks unpaid vacation each year. The parents will be notified 30-60 days prior to the vacation and the parent is responsible for securing alternated care.
You will receive one week of vacation time for which your child is not in attendance. An additional week of vacation can be taken at one half of the regular charge. Two weeks notice must be given prior to this time to avoid a charge for regular attendance. Additional time will require continued payment to hold the child’s position.

Rate increase will be made not more than once per calendar year. There will be an annual rate review to address cost of living and operating cost changes.

5. Illness

I will care for your child while ill, only if the illness is minor and non contagious. If your child becomes severely ill, begins to run a fever during the day, or if in sole judgment of the provider, your child is too ill to remain, you will be notified and asked to pick up your child. Please pick your child up promptly. A sick child needs their own parent and their own bed.

“Sick child policy”, if in the event the child/ren are sick for an extended period of one week, the fee will be reduced to 50% until the child is well. This fee is due in advance each week.

Parents must keep emergency contact information up to date.

6. Discipline

You will receive a written statement of our discipline statement which must be read and returned prior to your child’s first day in care.

7. Termination

The provider reserves the right to terminate this contract at any time for sufficient reason including, but not limited to late payemtn, consistent misbehavior of the child, or unforeseen problems which may occur with the parents of the child.

Parents may terminate this contract by providing the provide written notice of such termination a minimum of two weeks before the effective date of termination. Parents not providing the minimum of two weeks notification shall be liable for termination charges of $ __________.
8. Provider Responsibilities

I will provide a licensed, safe child care home. The environment, interaction and activities will support the physical and emotional needs of the children in my care. Completely supervised indoor and outdoor play is provided. Toys are furnished for children. I will not be responsible for lost or broken toys from home.

Children will rest daily.

In the event of my absence, _____________ will be supervising the children.

9. Parents’ responsibilities

Parents agree to notify provider of any changes in the child’s routine. Parents will supply a clean, seasonally appropriate change of clothes. If needed, parent will supply diapers, wipes and lotion. When the child is toilet training, parents will supply training pants and several changes of clothing.

Report any changes in address phone numbers, employment, work hours, or persons designated to pick up your child, immediately so that I may contact you in the event of an emergency.

Signatures

Mother (or guardian)  
________________________ (Signature)  
________________________ (Printed name)  
________________________ (Date)  

Child Care Provider  
________________________ (Signature)  
________________________ (Date)  

Father (or guardian)  
________________________ (Signature)  
________________________ (Printed name)  
________________________ (Date)
Child Care Agreement

I, ____________________________

(Parent’s name)

Agree to the following:

______ Pay fee of _____ per _________ (mo./wk./day/hr.)

______ Make child care payment on _________ (day of the week)

______ late payment fee _________________

______ Services to be provided as part of the child care fee (transportation, meals, etc.) are:

____________________________________

____________________________________

______ Child's typical arrival time : ________________

______ Child’s typical departure time: ______________

______ Follow the procedures, as outlined in the contract

______ Supply necessary medical and development information

______ Obtain health assessments as requested by the provider

______ Notify provider when my child is scheduled for routine visits and obtain a form to complete and return

______ Cooperate with provider in the follow up of any medical, dental, or developmental needs of my child

______ Complete a medication consent form when requesting medication administration

______ Agree to discuss my concerns with the provider

______ Notify provider in advance if I plan a birthday celebration for my child, or intend to bring in special treats to be served to all children.

______ No, food other than pre-approved celebration treats will be brought
Child Care Agreement Continued

_____ I have read and understand the provider’s philosophy on discipline

_____ provide the provider with the following items, such as wipes, diapers, sunscreen, etc., necessary for my child’s care:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

_____ provide information on how to contact me in an emergency situation, which I will update when changes occur and every 6 months

_____ Notify provider when my child is ill or any family member has a contagious disease

_____ Notify provider and sign my child in and out every time my child arrives and departs with me or a person I authorize

_____ Designated persons to whom the child may be released are:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Legal Guardian Signature: ____________________

Provider Signature: _________________________

This is a sample Child Care Agreement. It can be used to reinforce policies covered in the contract. You may wish to use this form after the child has been in your care for a week. Complete the agreement with the information appropriate to your program. Sit down with the parent and once again explain each policy. As you go over each item with the parent, the parent can initial the blank in front of the item, demonstrating understanding. Answer question the parent may have.
Record Keeping

Keeping good records is important in operating a successful childcare business.

Here are seven tips as recommended by Redleaf National Institute, St. Paul, MN, to help with record keeping:

1. **Track income for each parent, any subsidy payment and the Child and Adult Care Food Program.**

2. **Save the receipts from all business purchases.**
   Purchase a small receipt booklet to carry with you.

3. **Mark your receipts.**
   When possible make business and personal purchases separate. Mark each receipt, so you will know what each purchase was.

4. **Organize receipts by category, not by month.**
   Create a system to organize receipts in a fashion that makes them easily accessible. Maintain a monthly expenditure sheet. Expenditures should be noted by categories, i.e., food, toys, cleaning supplies, etc.

5. **Keep track of how much time each week you use your home for business.**
   This is important, you will be able to deduct a portion of your rent or mortgage from your income tax, based on usage of your home for child care. These records must be accurate, so do so on a weekly basis.

6. **Conduct a regular review of your records.**
   At the end of each month, determine expenditures and income. Ensure all records are organized and nothing is missing. Doing this at regular intervals will save a lot of time when filling taxes.

7. **After filing your tax return, keep your records in a safe place.**
Use this sample form to track a family’s payment record.

Family name: ____________________________________

Child (ren): ____________________________________

<table>
<thead>
<tr>
<th>Previous Balance</th>
<th>Amount of Payment</th>
<th>Date of Payment</th>
<th>Types of Payment</th>
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</thead>
<tbody>
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<td>Cash or check</td>
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</table>

Balance after Payment
Parents and guardians who use child care, are eligible for a tax credit when filing their income tax. It is helpful to provide parents with an end of the year statement indicating the total amount of child care tuition they paid you.

<table>
<thead>
<tr>
<th>End of Year Financial Statement</th>
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<tbody>
<tr>
<td>Child care provider name or logo here</td>
</tr>
<tr>
<td>Year: ____________</td>
</tr>
<tr>
<td>Child Care Provider EIN: ______________</td>
</tr>
<tr>
<td>Parent Name(s) ____________________________</td>
</tr>
<tr>
<td>Children: ________________________________</td>
</tr>
<tr>
<td>Total Amount Paid this year $ _______________</td>
</tr>
</tbody>
</table>

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</tr>
<tr>
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</tr>
<tr>
<td>Children: ________________________________</td>
</tr>
<tr>
<td>Total Amount Paid this year $ _______________</td>
</tr>
</tbody>
</table>
DEVELOPMENTAL LEARNING GOALS
Important Milestones
By The End Of 3 Months

Babies develop at their own pace, so it’s impossible to
tell exactly when your child will learn a given skill.
The developmental milestones listed below will give you
generally a general idea of the changes you can expect, but don’t
be alarmed if your own baby’s development takes a
slightly different course.

Social and Emotional
- Begins to develop a social smile
- Enjoys playing with other people and may cry when
  playing stops
- Becomes more expressive and communicates more with
  face and body
- Initiates some movements and facial expressions

Movement
- Raises head and chest when lying on stomach
- Supports upper body with arms when lying on stomach
- Stretches legs out and kicks when lying on stomach
  or back
- Opens and shuts hands
- Pushes down on legs when feet are placed on a firm
  surface
- Brings hand to mouth
- Takes swipe at dangling objects with hands
- Grasps and shakes hand toys

Vision
- Watches faces intently
- Follows moving objects
- Recognizes familiar objects and people at a distance
- Starts using hands and eyes in coordination

Hearing and Speech
- Smiles at the sound of your voice
- Begins to babble
- Begins to imitate some sounds
- Turns head toward direction of sound

Developmental Health Watch
Alert your child’s doctor or nurse if your child displays any
of the following signs of possible developmental delay for
this age range.

- Does not seem to respond to loud noises
- Does not notice hands by 2 months
- Does not follow moving objects with eyes by 2 to 3 months
- Does not grasp and hold objects by 3 months
- Does not smile at people by 3 months
- Cannot support head well by 3 months
- Does not reach for and grasp toys by 3 to 4 months
- Does not babble by 3 to 4 months
- Does not bring objects to mouth by 4 months
- Begins babbling, but does not try to imitate any of your
  sounds by 4 months
- Does not push down with legs when feet are placed on
  a firm surface by 4 months
- Has trouble moving one or both eyes in all directions
- Crosses eyes most of the time (occasional crossing of the
  eyes is normal in these first months)
- Does not pay attention to new faces, or seems very
  frightened by new faces or surroundings
- Experiences a dramatic loss of skills he or she once had

From TALKING FOR YOUR BABY AND YOUNG CHILD: BIRTH TO AGE 5 by Steven
of Audiology. Used by permission of Random House, Inc.

Learn the Signs. Act Early.

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Important Milestones
By The End Of 7 Months

Babies develop at their own pace, so it’s impossible to
tell exactly when your child will learn a given skill.
The developmental milestones listed below will give you
a general idea of the changes you can expect, but don’t
be alarmed if your own baby’s development takes a
slightly different course.

Social and Emotional
- Enjoys social play
- Interested in mirror images
- Responds to other people’s expressions of emotion
  and appears joyful often

Cognitive
- Finds partially hidden object
- Explores with hands and mouth
- Struggles to get objects that are out of reach

Language
- Responds to own name
- Begins to respond to “no”
- Can tell emotions by tone of voice
- Responds to sound by making sounds
- Uses voice to express joy and displeasure
- Babbles chains of sounds

Movement
- Rolls both ways (front to back, back to front)
- Sits with, and then without, support on hands
- Supports whole weight on legs
- Reaches with one hand
- Transfers object from hand to hand
- Uses hand to rake objects

Vision
- Develops full color vision
- Distance vision matures
- Ability to track moving objects improves

Developmental Health Watch
Alert your child’s doctor or nurse if your child displays any
of the following signs of possible developmental delay for
this age range.

- Seeks very stiff, with tight muscles
- Seeks very floppy, like a rag doll
- Head still flops back when body is pulled to a
  sitting position
- Reaches with one hand only
- Refuses to cuddle
- Shows no affection for the person who cares for him or her
- Doesn’t seem to enjoy being around people
- One or both eyes consistently turn in or out
- Persistent tearing, eye drainage, or sensitivity to light
- Does not respond to sounds around him or her
- Has difficulty getting objects to mouth
- Does not turn head to locate sounds by 4 months
- Does not roll over in either direction (front to back or
  back to front) by 5 months
- Seems impossible to comfort at night after 5 months
- Does not smile on his or her own by 5 months
- Cannot sit with help by 6 months
- Does not laugh or make squealing sounds by 6 months
- Does not actively reach for objects by 6 to 7 months
- Does not follow objects with both eyes at near (1 foot)
  and far (6 feet) ranges by 7 months
- Does not bear weight on legs by 7 months
- Does not try to attract attention through actions by
  7 months
- Does not babble by 8 months
- Shows no interest in games of peek-a-boo by 8 months
- Experiences a dramatic loss of skills he or she once had

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Learn the Signs. Act Early.
Important Milestones
By The End Of 1 Year (12 Months)

Babies develop at their own pace, so it's impossible to
tell exactly when your child will learn a given skill.
The developmental milestones listed below will give you
a general idea of the changes you can expect, but don't
be alarmed if your own baby's development takes a
slightly different course.

Social and Emotional
- Shy or anxious with strangers
- Cries when mother or father leaves
- Enjoys imitating people in his play
- Shows specific preferences for certain people and toys
- Tests parental responses to his actions during feedings
- Tests parental responses to his behavior
- May be fearful in some situations
- Prefers mother and/or regular caregiver over all others
- Repeats sounds or gestures for attention
- Finger-feeds himself
- Extends arm or leg to help when being dressed

Cognitive
- Explores objects in many different ways (shaking, banging, throwing, dropping)
- Finds hidden objects easily
- Looks at correct picture when the image is named
- Initiates gestures
- Begins to use objects correctly (drinking from cup, brushing hair, dialing phone, listening to receiver)

Language
- Pays increasing attention to speech
- Responds to simple verbal requests
- Responds to "no"
- Uses simple gestures, such as shaking head for "no"
- Babbles with inflection (changes in tone)
- Says "dada" and "mama"
- Uses exclamations, such as "Oh-oh!"
- Tries to imitate words

Movement
- Reaches sitting position without assistance
- Crawls forward on belly
- Assumes hands-and-knees position
- Creeps on hands and knees
- Gets from sitting to crawling or prone (lying on stomach) position
- Pulls self up to stand
- Walks holding on to furniture
- Stands momentarily without support
- May walk two or three steps without support

Hand and Finger Skills
- Uses pincer grasp
- Bangs two objects together
- Puts objects into container
- Takes objects out of container
- Lets objects go voluntarily
- Pokes with index finger
- Tries to imitate scribbling

Developmental Health Watch
Alert your child's doctor or nurse if your child displays any
of the following signs of possible developmental delay for
this age range.

- Does not crawl
- Drags one side of body while crawling (for over
  one month)
- Cannot stand when supported
- Does not search for objects that are hidden while he
  or she watches
- Says no single words ("mama" or "dada")
- Does not learn to use gestures, such as waving or
  shaking head
- Does not point to objects or pictures
- Experiences a dramatic loss of skills he or she once had

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Learn the Signs. Act Early.
Important Milestones
By The End Of 2 Years (24 Months)

Children develop at their own pace, so it's impossible to tell exactly when yours will learn a given skill. The developmental milestones below will give you a general idea of the changes you can expect as your child gets older, but don't be alarmed if your child takes a slightly different course.

Social
- Imitates behavior of others, especially adults and older children
- More aware of herself as separate from others
- More excited about company of other children

Emotional
- Demonstrates increasing independence
- Begins to show defiant behavior
- Separation anxiety increases toward midyear then fades

Cognitive
- Finds objects even when hidden under two or three covers
- Begins to sort by shapes and colors
- Begins make-believe play

Language
- Points to object or picture when it's named for him
- Recognizes names of familiar people, objects, and body parts
- Says several single words (by 15 to 18 months)
- Uses simple phrases (by 18 to 24 months)
- Uses 2- to 4-word sentences
- Follows simple instructions
- Repeats words overheard in conversation

Movement
- Walks alone
- Pulls toys behind her while walking
- Carries large toy or several toys while walking
- Begins to run
- Stands on tiptoe
- Kicks a ball
- Climbs onto and down from furniture unassisted
- Walks up and down stairs holding on to support

Hand and Finger Skills
- Scribbles on his or her own
- Turns over container to pour out contents
- Builds tower of four blocks or more
- Might use one hand more often than the other

Developmental Health Watch
Alert your child’s doctor or nurse if your child displays any of the following signs of possible developmental delay for this age range.

- Cannot walk by 18 months
- Fails to develop a mature heel-toe walking pattern after several months of walking, or walks only on his toes
- Does not speak at least 15 words
- Does not use two-word sentences by age 2
- By 15 months, does not seem to know the function of common household objects (brush, telephone, bell, fork, spoon)
- Does not imitate actions or words by the end of this period
- Does not follow simple instructions by age 2
- Cannot push a wheeled toy by age 2
- Experiences a dramatic loss of skills he or she once had


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Learn the Signs. Act Early.
Important Milestones
By The End Of 3 Years (36 Months)

Children develop at their own pace, so it's impossible to tell exactly when yours will learn a given skill. The developmental milestones below will give you a general idea of the changes you can expect as your child gets older, but don't be alarmed if your child takes a slightly different course.

Social
- Imitates adults and playmates
- Spontaneously shows affection for familiar playmates
- Can take turns in games
- Understands concept of “mine” and “his/hers”

Emotional
- Expresses affection openly
- Expresses a wide range of emotions
- By 3, separates easily from parents
- Objects to major changes in routine

Cognitive
- Makes mechanical toys work
- Matches an object in her hand or room to a picture in a book
- Plays make-believe with dolls, animals, and people
- Sorts objects by shape and color
- Completes puzzles with three or four pieces
- Understands concept of “two”

Language
- Follows a two- or three-part command
- Recognizes and identifies almost all common objects and pictures
- Understands most sentences
- Understands placement in space ("on," "in," "under")
- Uses 4- to 5-word sentences
- Can say name, age, and sex
- Uses pronouns (I, you, me, we, they) and some plurals (cars, dogs, cats)
- Strangers can understand most of her words

Movement
- Climbs well
- Walks up and down stairs, alternating feet (one foot per stair step)
- Kicks ball
- Runs easily
- Pedals tricycle
- Bends over easily without falling

Hand and Finger Skills
- Makes up-and-down, side-to-side, and circular lines with pencil or crayon
- Turns book pages one at a time
- Builds a tower of more than six blocks
- Holds a pencil in writing position
- Screws and unscrews jar lids, nuts, and bolts
- Turns rotating handles

Developmental Health Watch
Alert your child's doctor or nurse if your child displays any of the following signs of possible developmental delay for this age range.
- Frequent falling and difficulty with stairs
- Persistent drooling or very unsteady speech
- Cannot build a tower of more than four blocks
- Difficulty manipulating small objects
- Cannot copy a circle by age 3
- Cannot communicate in short phrases
- No involvement in "pretend" play
- Does not understand simple instructions
- Little interest in other children
- Extreme difficulty separating from mother or primary caregiver
- Poor eye contact
- Limited interest in toys
- Experiences a dramatic loss of skills he or she once had

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Learn the Signs. Act Early.
Important Milestones
By The End Of 4 Years (48 Months)

Children develop at their own pace, so it’s impossible to tell exactly when yours will learn a given skill. The developmental milestones below will give you a general idea of the changes you can expect as your child gets older, but don’t be alarmed if your child takes a slightly different course.

Social
- Interested in new experiences
- Cooperates with other children
- Plays “Mom” or “Dad”
- Increasingly inventive in fantasy play
- Dresses and undresses
- Negotiates solutions to conflicts
- More independent

Movement
- Hops and stands on one foot up to five seconds
- Goes upstairs and downstairs without support
- Kicks ball forward
- Throws ball overhead
- Catches bounced ball most of the time
- Moves forward and backward with agility

Hand and Finger Skills
- Copies square shapes
- Draws a person with two to four body parts
- Uses scissors
- Draws circles and squares
- Begins to copy some capital letters

Emotional
- Imagines that many unfamiliar images may be “monsters”
- Views self as a whole person involving body, mind, and feelings
- Often cannot tell the difference between fantasy and reality

Cognitive
- Correctly names some colors
- Understands the concept of counting and may know a few numbers
- Tries to solve problems from a single point of view
- Begins to have a clearer sense of time
- Follows three-part commands
- Recalls parts of a story
- Understands the concepts of “same” and “different”
- Engages in fantasy play

Language
- Has mastered some basic rules of grammar
- Speaks in sentences of five to six words
- Speaks clearly enough for strangers to understand
- Tells stories

Developmental Health Watch
Alert your child’s doctor or nurse if your child displays any of the following signs of possible developmental delay for this age range.

- Cannot throw a ball overhand
- Cannot jump in place
- Cannot ride a tricycle
- Cannot grasp a crayon between thumb and fingers
- Has difficulty scribbling
- Cannot stack four blocks
- Still clings or cries whenever parents leave
- Shows no interest in interactive games
- Ignores other children
- Doesn’t respond to people outside the family
- Doesn’t engage in fantasy play
- Resists dressing, sleeping, using the toilet
- Lashes out without any self-control when angry or upset
- Cannot copy a circle
- Doesn’t use sentences of more than three words
- Doesn’t use “me” and “you” correctly
- Experiences a dramatic loss of skills he or she once had

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Learn the Signs. Act Early.
Important Milestones
By The End Of 5 Years (60 Months)

Children develop at their own pace, so it's impossible to tell exactly when yours will learn a given skill. The developmental milestones below will give you a general idea of the changes you can expect as your child gets older, but don't be alarmed if your child takes a slightly different course.

Social
- Wants to please friends
- Wants to be like her friends
- More likely to agree to rules
- Likes to sing, dance, and act
- Shows more independence and may even visit a next-door neighbor by herself

Emotional
- Aware of gender
- Able to distinguish fantasy from reality
- Sometimes demanding, sometimes eagerly cooperative

Cognitive
- Can count 10 or more objects
- Correctly names at least four colors
- Better understands the concept of time
- Knows about things used every day in the home (money, food, appliances)

Language
- Recalls part of a story
- Speaks sentences of more than five words
- Uses future tense
- Tells longer stories
- Says name and address

Movement
- Stands on one foot for 10 seconds or longer
- Hops, somersaults
- Swings, climbs
- May be able to skip

Hand and Finger Skills
- Copies triangle and other shapes
- Draws person with body

- Prints some letters
- Dresses and undresses without help
- Uses fork, spoon, and (sometimes) a table knife
- Usually cares for own toilet needs

Developmental Health Watch
Alert your child's doctor or nurse if your child displays any of the following signs of possible developmental delay for this age range.

- Acts extremely fearful or timid
- Acts extremely aggressively
- Is unable to separate from parents without major protest
- Is easily distracted and unable to concentrate on any single activity for more than five minutes
- Shows little interest in playing with other children
- Refuses to respond to people in general, or responds only superficially
- Rarely uses fantasy or imitation in play
- Seems unhappy or sad much of the time
- Doesn't engage in a variety of activities
- Averts or seems aloof with other children and adults
- Doesn't express a wide range of emotions
- Has trouble eating, sleeping, or using the toilet
- Can't tell the difference between fantasy and reality
- Seems unusually passive
- Cannot understand two-part commands using prepositions ("Put the doll on the bed, and get the ball under the couch.")
- Can't correctly give her first and last name
- Doesn't use plurals or past tense properly when speaking
- Doesn't talk about her daily activities and experiences
- Cannot build a tower of six to eight blocks
- Seems uncomfortable holding a crayon
- Has trouble taking off clothing
- Cannot brush her teeth efficiently
- Cannot wash and dry her hands
- Experiences a dramatic loss of skills he or she once had


Learn the Signs. Act Early.