

Montana Notes and Additional Notes for FCCERS-R

Note: The Montana Notes that follow supersede the additional notes included in the book and the Notes for Clarification from North Carolina. These are the notes that will be used for assessments from September 1st until the next revision April 1st. It is important to disregard any NC Notes for Clarification that come out until the next April 1st revision.

General Notes

Items to be omitted from MT scoring: #35, #36, #37 and #38

Accessibility

Accessibility pertains to Item 3: Provisions for relaxation and comfort-indicators 3.1 and 3.2; Item 17: Art-indicator 3.1; Item 18: Music and Movement-indicator 3.1; Item 19: Blocks-indicators 3.1 and 3.2; Item 20: Dramatic play-indicators 3.1 and 3.2; Item 21: Math/number-indicator 3.1; Item 22: Nature/science-indicators 3.2 and 3.3; and Item 24: Promoting acceptance of diversity indicator.

Materials should be stored on low, open, uncrowded shelves. Materials should be stored in bins or containers that clearly show what is inside, such as a see-through container or container label with a picture of what is inside. If materials are stored in containers, they should be without lids. If lids are used they should be easy to open and close by all children. Containers must not be too heavy that children cannot remove them independently from shelves. Materials must not be stored in such a way that bins must be tipped over rather than removed from the shelf by children or large heavy items stored above the children heads when playing.

3.1. For materials to be counted as accessible to children, they must be able to reach and use the materials for a period of 1 hour a day in a program of 8 hours or more. The 1 hour can be provided at one time or as a combination of several periods throughout the day. This does not mean that each child must have a full hour to use the materials. However, it is required that children have a reasonable chance to use the materials at some time if they wish. Less time is required for programs operating less than 8 hours a day, with the amount of time calculated proportionally, based on the ratio of 1 hour for programs of 8 hours or more. For example, if a program operated for 6 hours a day, this would be $\frac{3}{4}$ of a full-day program, so the time required would be $\frac{3}{4}$ of the 1 hour. Use this chart to determine the approximate amount of time needed in programs operating less than 8 hours.

Number of hours in operation	2 hours	3 hours	4 hours	5 hours	6 hours	7 hours
Approximate minutes required for accessibility	15	25	30	40	45	50

Materials are considered accessible only if it is observed that children freely access and are permitted to use most of the materials. If programs limit the amount of children in areas they must ensure that all children have a reasonable opportunity to access materials for a substantial portion of the day. A reasonable opportunity requires that materials are accessible throughout the day, both indoors and outdoors. If children request access to materials and are prevented from using them there must be other opportunities to use the same materials in other areas or other times of the day to receive credit. Some materials may not be accessible during the observation. For example; sand and water play may only be available in the afternoon. However the materials must be available for 1 hour to receive credit for "accessible" or 1/3 of the day to receive credit for "substantial portion of the day. Additional questions may be needed to gain information on other times of the day. Keep in mind that non-mobile infants do not have access to the materials if they are not placed within easy reach of the infant. For programs operating more than 5 hours a day, in order to meet much of the day there should be no significant

extended periods of time where structured activities prevent access to materials. Access must be observed throughout the day.

Some

The term “some” occurs most frequently in indicators that represent a minimal (3) level of quality, although occasionally it occurs at higher levels. In determining how much is needed to give credit for “some” in an indicator, consider the requirements in the parallel indicators at the lower and next higher level of quality. For example, if under inadequate “no” materials are required, then “some” would mean “one or more”. In cases where a plural is used with the term “some”, then “more than one” would be required to give credit. When terms such as “very few” or “very little” or “rarely” are used under inadequate, then “some” represents a mid-point between what is required for the 1 and the 5 levels.

“Many” or “Variety”

Terms such as “many” or “variety” are used throughout the scale. We have provided numbers to guide decision making for many of these terms. However, the actual number required will depend on number of children enrolled and the ages and abilities of those children. In cases where there are small groups of children, the numbers provided are likely to be reasonable. However, in large family child care homes, with 10 or more children, more materials will be needed.

Scoring

Levels of quality build expectations from minimal to good to excellent. Consider not only the requirements of the indicator, but the level of quality documented as general practice throughout the observation.

Child Participation

When children are required to participate in an activity or lose interest during the activity, but are not allowed to leave, participation is considered forced. Children may be encouraged to join an activity, but staff should be respectful of their cues and respond appropriately if any child loses interest.

Play: “Play,” or “play activities,” require that children are actively involved, able to use toys or other play materials, and are able to interact with others if they wish. Play activities should not be confused with more passive group times (such as circle times, when children mostly listen to a “teacher” or spend time watching TV or videos), or times when children are required to work on specific non-play tasks, such as coloring alphabet ditto sheets, and did not get to choose to do the activity. Play is characterized by the child being engaged. Routine care times are not counted as play, even if they are done playfully. Play activities can be part of free play, teacher- or child-initiated, either indoors or outdoors, offered with many choices of things to do or with a more limited selection, done individually, in small groups, or in a large group, and can be active or quiet.

Supervision

Regarding supervision, staff must be able to hear the child at all times and must be able to physically respond immediately. Limited times when children are out of sight (2 to 4 minutes lapses) are acceptable as long as children are not engaged in high risk activities. The caregiver’s focus must be on the children, especially during high risk activities, such as eating, sand/water play, art, etc., in order to adequately protect children who are preschool age and younger.

Language and Interactions

Regarding language and interactions, it is expected that many incidences will be observed, and scoring is based on overall impact. When two or more caregivers are in the home and you are trying to determine overall impact of interactions, look for a balance. However, if one caregiver is extremely negative, a balance cannot be achieved and the indicator should be discounted.

Sanitizing

Disinfectant and/or anti-bacterial wipes do not count for sanitization purposes. Products that can be given credit as sanitizing solutions are bleach and water solution or a commercial product that states on the label or manufacturer’s products sheet that it kills 99.9% of germs, kills HIV virus, or is an EPA registered product. All commercial products used for sanitizing must be used according to manufacturer’s

instruction. Play materials that come into contact with bodily fluids must be cleaned and sanitized after each child's use. Toys that do not come into contact with bodily fluids should be weekly or when visibly soiled (page 106 Caring for Our Children).

In order to clarify the different but related functions of cleaning, sanitizing and disinfecting to remove germs, "Caring for Our Children" states that cleaning means physically removing dirt and contamination using soap, water and applying friction, thus exposing any remaining germs on the dry, clean surface. Sanitizing means reducing germs on an inanimate surface or object to a safe level. Disinfecting means destroying germs on an inanimate surface or object. A sanitizer should be used on food contact surfaces or any object that is mouthed. A disinfectant should be used only on diaper changing tables, toilets, counter tops, door and cabinet handles. Only EPA approved products are acceptable, and all sanitizers and disinfectants must be used according to the instructions on the container in order to be safe.

Caring for our Children has issued a new recommendation for use of a diluted bleach solution for sanitizing and disinfecting because many brand name companies have changed their bleach solution and there is no longer a consistent solution across different brands. The new recommendation advises us to: use only EPA registered products for sanitizing and disinfecting; follow the manufacturer's instructions for diluting the bleach solution and for the required contact time. Programs that use a sanitizing and/or disinfecting solution that is not bleach must get approval from their local sanitarian and have proof of approval on site at all times. Approval MUST include use for eating surfaces, diapering/toileting, handwashing surfaces, and sanitizing toys. If approval is not given for all of the above listed instances, then the approval must outline what is approved for use.

Allergies

In all scales where special allergy needs must be considered, the list of food allergies does not have to be publicly displayed; however, directions for finding this information should be publicly displayed in the room where children eat. Examples are for clarification only and are not intended as scoring requirements unless otherwise stated.

Assessment Details

For scoring purposes in the state of Montana, a single observation will be completed regardless of the number of rooms. Fifty percent or more of the children must be present. In addition, both age groups (under 30 months and over 30 months) must be represented. Children attending Kindergarten are considered school-agers.

"Much of the day"

In most items, "much of the day" is associated with the children's access to materials typically used indoors (e.g. books, art materials, and fine motor or dramatic play toys). It means most of the time that any child maybe awake and able to play. If children are prevented from using materials for long periods by overly long routines when the children have to wait with nothing to do, being kept in groups that they are not engaged in, or being kept in areas where access is not possible, then credit cannot be given for "much of the day." If children (or any child) who are ready to play are prevented from reaching and using materials for a total of 20 minutes during a 3-hour observation, then "much of the day" cannot be given credit. The 20 minutes can be calculated as one 20-minute time period or may be calculated as a combination of smaller time periods that equal 20 minutes.

When timing for "much of the day", begin timing when any child has no access to play materials when awake and ready to play. If the time the child does not have access is less than 3 minutes, do not count this in calculating the 20 minute limit. A wait of less than 3 minutes is acceptable. If the time with no access lasts for 3 or more minutes, use the whole time in calculating the 20 minutes time limit. Do not omit the first three minutes of the time without access.

If children are kept outdoors for *extremely long periods* (1/3 of the day or more), thus limiting access to materials typically used indoors, then to give credit for "much of the day", such materials must be provided outdoors as well. Special attention should be paid to individual children who may not have the same

access to materials as do the other children. A cranky baby who needs close physical contact to be soothed may not be “ready to play” and thus not require access to materials during the “cranky” times.

When children are taken for stroller rides, do not count the time spent riding as part of the 20 minutes when children do not have access to materials for “much of the day” as long as children are generally engaged (one child may be less engaged than others for some part of the ride, but most children should show interest, and no child should show distress). Some children may fall asleep in the stroller, but in this case they are not awake and ready to play, so falling asleep should not count in the timing for much of the day. Sometimes there are delays in putting children into strollers, and after the walk, removing them. If children have to wait for long periods (over 3 minutes with no access to play materials) while waiting in the strollers, then the time waiting should be counted towards the 20 minute limit that will disallow crediting “much of the day.”

Specific Notes for FCCERS

1. Indoor space used for child care

Indicator 1.1:

Consider all indoor space that child care children are allowed to use and give more weight to spaces used for more time. Base space needs on the largest number of children allowed to attend the family child care home at one time, including the provider’s own children if they are part of the child care group. Enough indoor space requires that children’s routine care needs can be met, there is space for basic furniture, and some space is provided for children’s play. Even though the indoor space is often shared with the family, the child care space needs must be adequately met. Do not count space that children are not allowed to use.

Indicator 1.3:

These indicators refer to the space used by children, not to furnishings, equipment, or materials that are in the space.

Indicator 3.1:

Consider all indoor space that child care children are allowed to use and give more weight to spaces used for more time. Base space needs on the largest number of children allowed to attend the family child care home at one time, including the provider’s own children if they are part of the child care group. Enough indoor space requires that children’s routine care needs can be met, there is space for basic furniture, and some space is provided for children’s play. Even though the indoor space is often shared with the family, the child care space needs must be adequately met. Do not count space that children are not allowed to use.

Indicator 3.3:

These indicators refer to the space used by children, not to furnishings, equipment, or materials that are in the space.

Indicator 3.4:

It is expected that there will be some messiness from the regular activities of the day. “Reasonably clean” means that there is evidence of daily maintenance, such as floors being vacuumed and mopped, and that big messes, such as food on floor after children have been fed, are cleaned up promptly.

Indicator 5.1:

“Ample space” means that in most areas used for routines and play, children are not crowded. Consider all indoor space used during the whole day and give more weight to spaces used for more time. If 2 or more frequently used spaces do not allow free movement, score “No.” All spaces do not need to be used at the same time.

Indicator 5.2:

The direct lighting must be in the space(s) used for child care for more than 50% of the time children are allowed to attend. Natural light is not required in spaces used for nap, but those spaces must have enough light to allow adequate visual supervision of children.

Montana Note

The natural lighting should enter the areas of the home where children spend much of their day.

Indicator 5.3:

To give credit for accessibility, the home and all spaces used for child care must be accessible to individuals with disabilities. Doorways must be at least 32 inches wide. The door handles must be operated with limited use of hands. The entrance door threshold should be ½ inch high or less and, if over ¼ inch, must be beveled to make it easier to roll over. If there are other obvious impediments to access for individuals with disabilities (such as narrow doorway to toilet, stairs with no ramp or elevator), credit cannot be given. In order for the indoor space used by children to be considered minimally acceptable (5.3), it must be accessible to children and adults with disabilities who are currently a part of the program. For a score of 7, accessibility is required regardless of whether or not individuals with disabilities are involved in the program.

Indicator 7.1:

Doors to outside count as ventilation only if they can be left open without posing a safety threat (for example, if they have a locking screen door or safety gate to keep children from leaving the room unattended).

Ventilation should be able to be controlled in all spaces used for children (e.g., through heating/air conditioning systems, windows, opening doors, ceiling fans, etc).

Indicator 7.3:

To give credit for accessibility, the home and all spaces used for child care must be accessible to individuals with disabilities. Doorways must be at least 32 inches wide. The door handles must be operated with limited use of hands. The entrance door threshold should be ½ inch high or less and, if over ¼ inch, must be beveled to make it easier to roll over. If there are other obvious impediments to access for individuals with disabilities (such as narrow doorway to toilet, stairs with no ramp or elevator), credit cannot be given. In order for the indoor space used by children to be considered minimally acceptable (5.3), it must be accessible to children and adults with disabilities who are currently a part of the program. For a score of 7, accessibility is required regardless of whether or not individuals with disabilities are involved in the program.

2. Furniture for routine care, play, and learning**Indicator 1.1:**

Since children of different ages and abilities have different needs for routine care furniture, each age group in care must have appropriate provisions. For example, infants need cribs for sleeping, while older children need cots, mats, or beds for naps. All children need individual provisions for storing their personal possessions. Preschoolers and older children need easy access to their storage space, while only parents and providers need easy access to storage used for possessions of infants and toddlers. Unless all children are fed at the same time, 1 chair per child is not required. Younger children in diapers need a diapering table or appropriate alternative diapering surface, such as a plastic mat.

To give credit, furniture must be used for routine care, and not simply be present--not used or used for other purposes.

In scoring these indicators, score 1.1 "No" if most of the furniture needed for routine care is observed and used, even though one item may be inadequate to meet the needs of the children or is missing completely. Score 1.1 "Yes" only if many of the furnishings needed are not observed. Generally, the

cubbies must be large enough to hold all the possessions of an individual child, without touching other children's things. If cubbies are large enough to hold possessions, but there is a minor amount of touching of other children's possessions, (such as coat sleeves touching in winter) then give credit, but consider the contamination issues in the Health item. Each child must have his or her own storage space (such as a cubbie, diaper bag or back pack on an individual hook, a laundry basket, or several different personal storage containers that together, hold all his/her things). No shared spaces should be used because of contamination issues. When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is non-porous, and can be cleaned and sanitized. In addition, the surface must be long and wide enough to accommodate the child's whole body, from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas.

Montana Note

Sleeping provisions are for individual use only. Couches and other shared spaces are not acceptable sleeping provisions due to cross-contamination.

Siblings cannot share cubbies.

When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is nonporous, and can be cleaned and sanitized. In addition the surface must be long and wide enough to accommodate the child's whole body from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas.

Indicator 1.2:

Consider the needs of the age and abilities of the children enrolled. Examples of furniture for play and learning are: infant seats, tables and chairs for activities or homework, low open shelves or dishpans/baskets/milk crates for toy storage.

To give credit for shelves, they must be used for storing materials that the children can reach and use. Shelves that are used only to store toys/materials that the provider accesses are given credit in 5.4. There should be enough low, open organized storage—shelves, containers, or crates—as long as the storage allows easy access without excessive crowding or rummaging for toys.

Indicator 3.1:

Since children of different ages and abilities have different needs for routine care furniture, each age group in care must have appropriate provisions. For example, infants need cribs for sleeping, while older children need cots, mats, or beds for naps. All children need individual provisions for storing their personal possessions. Preschoolers and older children need easy access to their storage space, while only parents and providers need easy access to storage used for possessions of infants and toddlers. Unless all children are fed at the same time, 1 chair per child is not required. Younger children in diapers need a diapering table or appropriate alternative diapering surface, such as a plastic mat.

To give credit, furniture must be used for routine care, and not simply be present--not used or used for other purposes.

In scoring these indicators, score 1.1 "No" if most of the furniture needed for routine care is observed and used, even though one item may be inadequate to meet the needs of the children or is missing completely. Score 1.1 "Yes" only if many of the furnishings needed are not observed. Generally, the cubbies must be large enough to hold all the possessions of an individual child, without touching other children's things. If cubbies are large enough to hold possessions, but there is a minor amount of touching of other children's possessions, (such as coat sleeves touching in winter) then give credit, but consider the contamination issues in the Health item. Each child must have his or her own storage space (such as a cubbies, diaper bag or back pack on an individual hook, a laundry basket, or several different personal storage containers that together, hold all his/her things). No shared spaces should be used because of contamination issues. When a diapering table is not used, an alternative diapering surface is

considered adequate if the surface is non-porous, and can be cleaned and sanitized. In addition, the surface must be long and wide enough to accommodate the child's whole body, from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas.

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Sleeping provisions are for individual use only. Couches and other shared spaces are not acceptable sleeping provisions due to cross-contamination.

Siblings cannot share cubbies.

When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is nonporous, and can be cleaned and sanitized. In addition the surface must be long and wide enough to accommodate the child's whole body from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas.

Indicator 3.2:

Sufficient easily accessible storage for play and learning materials is required to get credit for this indicator, without having materials crowded into a small space. Accessible storage that accommodates very few materials does not meet the requirement for this indicator. Non-mobile children do not necessarily require access to storage shelves as long as materials are brought to them.

To give credit for shelves, they must be used for storing materials that the children can reach and use. Shelves that are used only to store toys/materials that the provider accesses are given credit in 5.4. There should be enough low, open organized storage—shelves, containers, or crates—as long as the storage allows easy access without excessive crowding or rummaging for toys.

Montana Note

Enough furniture for play means that the children have the developmentally appropriate seating needed to use play materials and that there are suitable ways of making materials accessible to the children on open storage shelves. Children 12 months and older who can select toys independently should have access to materials on low, open shelves. There should be some seating available to encourage more sustained play with materials such as fine motor and art, for children 12 months and older.

Indicator 3.3:

Sturdiness is a property of the furniture itself (i.e., will not break, fall over, or collapse when used). If sturdy furniture is placed so that it can be easily knocked over, this is a problem with safety, not the sturdiness of the furniture. Don't be overly perfectionistic when scoring this indicator. If there is only a very minor problem that does not create a likely safety hazard, then give credit for this indicator. For example, if a chair or table is slightly wobbly, but will not collapse, or if a vinyl-covered couch is slightly worn, but foam is not exposed, then do not count off for these small things, unless there are a substantial number of small problems.

To give credit for 5.1 when booster seats are used, the seats must allow children to sit safely. However, if booster seats are not steady in the chairs, credit can be given for 3.3 as long as children seem to be able to manage without being in immediate danger. When picnic-tables are used, consider how comfortable they are for the children, and whether children can sit safely. If only one child has difficulty, or if the furniture is used infrequently as compared to the other furnishings being considered for this indicator, do not score "No." If tables and chairs cause safety risks, consider this in item 12. Safety.

Indicator 5.1:

"Most" means that 75% of the table/chairs are made suitable to the children's size, if needed. If all tables and chairs used are child-sized, give credit.

To give credit for 5.1 when booster seats are used, the seats must allow children to sit safely. However, if booster seats are not steady in the chairs, credit can be given for 3.3 as long as children seem to be able to manage without being in immediate danger. When picnic-tables are used, consider how comfortable they are for the children, and whether children can sit safely. If only one child has difficulty, or if the furniture is used infrequently as compared to the other furnishings being considered for this indicator, do not score “No.” If tables and chairs cause safety risks, consider this in item 12. Safety.

Indicator 5.2:

To give credit, **all** furnishings must be well-cared for, including examples provided plus any other care required for other furnishings.

Indicator 5.3:

To give credit, at least two different kinds of provisions must be observed during the observation (Ex. steps at sink, low open storage for toys).

When the two provisions that encourage self-help are observed as required, score “Yes” even if many toys are stored out of children’s reach. Consider the lack of access to specific toys in applicable items.

Indicator 5.4:

To give credit for shelves, they must be used for storing materials that the children can reach and use. Shelves that are used only to store toys/materials that the provider accesses are given credit in 5.4. There should be enough low, open organized storage—shelves, containers, or crates—as long as the storage allows easy access without excessive crowding or rummaging for toys.

Indicator 5.5:

At least one instance of use must be observed. When a family child care home sets space aside only for child care use, some adult seating is needed in that space. Sometimes providers use preschool-sized chairs or other furniture (such as very large blocks or cubes) to sit on while feeding children who are in high chairs or at very low tables. Credit can be given if they seem to work well for the provider. However, credit for such make-shift arrangements cannot be given under 7, where comfortable adult-sized furniture is required.

If age groups are separated (i.e., infants and older children cared for in different spaces) one example of adult furniture is required for each group. If groups are sometimes combined, one example is still required for each group.

Indicator 7.1:

To give credit, 75% of the table/chairs must be child-sized. Child-sized chairs allow children to sit back in the chair with feet touching the floor (not necessarily flat on the floor). Children should not have to perch on edge of the chair for feet to touch floor. A child-sized table allows children’s knees to fit comfortably under the table while elbows rest on table surface. Do not consider high chairs or group feeding tables, that toddlers must be put into by an adult, to be child-sized. Be sure to consider tables/chairs used by school-agers if enrolled.

Indicator 7.2:

Routine care furniture must be easy to access when needed, but not necessarily in the same room. “Convenient” placement means that it is possible to meet children’s routine care needs with minimal lapses in supervision, taking into consideration the age and abilities of the children.

Indicator 7.3:

At least one instance of use must be observed. When a family child care home sets space aside only for child care use, some adult seating is needed in that space. Sometimes providers use preschool-sized chairs or other furniture (such as very large blocks or cubes) to sit on while feeding children who are in high chairs or at very low tables. Credit can be given if they seem to work well for the provider. However, credit for such make-shift arrangements cannot be given under 7, where comfortable adult-sized furniture is required.

Adult seating with back support should be provided next to child-sized furnishings for care and learning (e.g., meals, play activities) so helping adults do not strain their backs while assisting children. Adult-sized furniture must match the task being performed. A rocking chair is appropriate for feeding a baby, but not for supervising children at a child-sized table.

If age groups are separated (i.e., infants and older children cared for in different spaces) one example of adult furniture is required for each group. If groups are sometimes combined, one example is still required for each group.

Montana Note

A rocking chair could be considered for supervising children at a child-sized table if placed near the table.

3. Provisions for relaxation and comfort

Indicator 1.1:

Refers to softness provided other than that found in sleeping arrangements (cribs, cots, mats, beds) or other padded routine-care furnishings.

Indicator 3.1:

Some use must be observed to give credit.

If the home has a soft furnishing accessible during play, and children are obviously free to use it, but no child chooses to do so, give credit for this indicator. If in doubt ask the provider a question about this during the interview.

Montana Note

To give credit, there must be at least one soft furnishing provided that is large enough for at least one child to lounge comfortably.

Indicator 3.2:

Examples of soft toys are: cloth or vinyl covered foam blocks, cloth dolls, stuffed toy animals, cloth puppets, and so forth. Do not count cloth or vinyl books as soft toys.

When counting the numbers of soft toys, individual pieces belonging to a soft toy that has various pieces, such as a soft stacking ring toy, can only count as one example, even though the individual parts might be what a child uses.

Indicator 5.1:

Some use must be observed to give credit.

A thin mat, cushion, or a carpet alone would not meet this requirement. Typically, a substantial amount of softness includes a combination of soft furnishings, but a large single furnishing, such as a couch, mattress, or futon could meet the requirement, if it provides the substantial amount of softness needed by children.

If the home has a soft furnishing accessible during play, and children are obviously free to use it, but no child chooses to do so, give credit for this indicator. If in doubt ask the provider a question about this during the interview.

Montana Note

Softness provided at indicators 3.1, 5.1, and 7.1 are intended to build on the levels of quality; therefore, if credit was given for a soft provision at a lower indicator, the same provision cannot receive credit at a higher indicator.

Indicator 5.2:

Protection from active play can be provided physically by placing soft furnishings out of traffic and/or behind a barrier, or through supervision to ensure that active children do not interfere with the child who is relaxing. If children are observed using soft furnishings without interference, score "Yes." To give credit for 5.2 there must be a substantial amount of softness.

The intent of this indicator is that children should not be interrupted or disturbed when using the soft furnishings credited in 5.1. If children walk, or even run, past without disturbing the child, then this is acceptable.

Indicator 5.3:

To meet the requirement of "many," there should be at least 10 soft toys, and at least 2 per child if there are more than 5 children.

Many soft toys do not have to be accessible all at the same time to meet the requirement for much of the day. However at least half of the required number must be accessible during any short periods when all are not accessible.

When counting the numbers of soft toys, individual pieces belonging to a soft toy that has various pieces, such as a soft stacking ring toy, can only count as one example, even though the individual parts might be what a child uses.

Montana Note

If only school-agers are enrolled, at least 10 soft toys are required regardless of the number of children.

Indicator 7.1:

Softness in this indicator refers to soft furnishings. Soft toys are not considered to meet this requirement.

Indicator 7.2:

Must be available for all ages of children enrolled.

Indicator 7.3:

To give credit, at least 1 instance must be observed during the observation.

The soft furnishings must provide a substantial amount of softness to get credit.

4. Arrangement of indoor space for child care**Indicator 1.1:**

To score this indicator, consider all play and routine care spaces used. The indicator's example represents a many-faceted problem with the space arrangement. Score 1.1 "Yes" only when there are very crowded conditions that make routine care and play needs extremely difficult to meet.

Indicator 1.2:

See "supervision" in "Explanation of Terms Used Throughout the Scale" on page 11. In scoring consider the ages and abilities of children, as well as personal characteristics such as impulsivity. In general, the younger the child, or the more hazards present in the space, the greater the need for easy visual supervision.

Montana Note

It is understandable that some family homes may use multiple rooms. This would be considered acceptable. Staff must be able to hear the child at all times and must be able to physically respond immediately. Limited times when children are out of sight (2 to 4 minutes lapses) are acceptable as long as children are not engaged in high-risk activities.

Indicator 1.3:

For a score of 1, restricting children in the use of space must be severe to score “Yes.” The score will depend on the appropriateness of the activity, how engaged or enthusiastic the children are, and whether a child can leave if he or she wishes after a reasonable time. No specific amount of time is required to make the decision. When a child is carried, by the provider, in a “snuggly” or other type of infant carrier, consider the developmental level and needs of the child. For a very tiny infant, being kept in a snuggly would be acceptable in terms of use of space as long as the baby seemed to require this type of closeness, while for an older infant it would be overly restrictive. Considered this issue related to accessibility of play materials, but remember that a cranky baby who needs close physical contact to be soothed may not be “ready to play” and thus not require access to materials during the “cranky” times.

Since *Caring for Our Children*, 3rd edition, states that children should not be kept in restrictive devices for more than 15 minutes, consider whether children are kept in restrictive devices such as “exer-saucers”, playpens, infant seats, swings, or cribs (when awake) for longer periods, and whether this is a regular practice or observed infrequently. Score Yes, when this is a regular practice, observed for any child several times during the 3 hour observation.

Montana Note

When infants and toddlers are confined and prevented from moving around freely, it prevents them from learning through exploration. If children are unhappy, they should not be confined. If a child is playing happily, the confinement should not exceed 30 minutes at a time. They should spend most of the day unconfined.

Indicator 3.1:**Montana Note**

When infants and toddlers are confined and prevented from moving around freely, it prevents them from learning through exploration. If children are unhappy, they should not be confined. If a child is playing happily, the confinement should not exceed 30 minutes at a time. They should spend most of the day unconfined.

Indicator 3.2:

See “supervision” in “Explanation of Terms Used Throughout the Scale” on page 11. In scoring consider the ages and abilities of children, as well as personal characteristics such as impulsivity. In general, the younger the child, or the more hazards present in the space, the greater the need for easy visual supervision.

Montana Note

It is understandable that some family homes may use multiple rooms. This would be considered acceptable. Staff must be able to hear the child at all times and must be able to physically respond immediately. Limited times when children are out of sight (2 to 4 minutes lapses) are acceptable as long as children are not engaged in high-risk activities.

Indicator 3.3:

In scoring, consider the relative severity of the hazards and the likelihood that serious injury could occur. Score “Yes” if no more than 3 hazards are observed.

Any hazards in the indoor space(s) used for child care should be considered in this indicator as well as in item 12. Safety.

Montana Note

When determining safety hazards, consider the ages and abilities of the children and the placement and severity of the hazard. Since item 12 already addresses safety hazards, this should only consider extreme hazards.

Indicator 7.1:

Space and play surfaces should be suitable for the type of material being used. For example, blocks need a steady surface; scribbling requires a hard surface under the paper and room for children to move their arms freely. Infants require fewer, more flexible play areas, while toddlers and older children need a wider variety of play spaces.

5. Display for children

Item 5:

Labels on shelves indicating where materials are to be stored and center labels or signs do not count as display

Montana Note

Mirrors can be counted as display if they are decorative in nature and their intention is to be used by the children. In order to receive credit the mirror(s) must be at the children's eye level.

Indicator 1.2:

Montana Note

If the display depicts violent scenarios or is scary in nature than credit can't be given; for example skeletons chasing someone, characters with fangs.

Indicator 3.1:

When the only display is wallpaper with colorful pictures designed for children, or a mural painted on the wall, credit can be given for this indicator, but not for 5.1.

Display does not necessarily have to be at the child's eye level to be easily seen. However, the display must be in the children's path of vision and large and clear enough to be easily understood. Observe the display, keeping the children's size, mobility level, and activity patterns in mind. Consider size (large or small) and clarity. For example, a small photograph, or a poster showing many small things would not be considered easily seen if displayed up high, but would if displayed at eye level.

Indicator 3.2:

Montana Note

If the display depicts violent scenarios or is scary in nature than credit can't be given; for example skeletons chasing someone, characters with fangs.

Indicator 3.3:

Score NA when only children under 1 year of age are enrolled. Work by children under 1 year of age is not required. If unsure about who did the items displayed, ask the question provided for this indicator. A total of 2 pieces of work is required, not 2 for each child enrolled.

Score "Yes" to 3.3 if there is a very large piece of work that several children have worked on. However, this would not count to meet the requirements of 5.3 where other displayed work would also have to be observed.

Indicator 5.1:

Do not consider children's artwork in scoring this indicator. Children's work is considered in 5.3.

Indicator 5.2:

Display does not necessarily have to be at the child's eye level to be easily seen. However, the display must be in the children's path of vision and large and clear enough to be easily understood. Observe the display, keeping the children's size, mobility level, and activity patterns in mind. Consider size (large or small) and clarity. For example, a small photograph, or a poster showing many small things would not be considered easily seen if displayed up high, but would if displayed at eye level.

“Many” does not require a specific number. Score based on the overall impact of what is displayed for children in the space(s) they use most frequently. Display is not required in all areas.

Indicator 5.3:

“Much” means at least 2 times the number of children over 12 months of age currently enrolled. For example, if there are 3 children over 12 months of age, then at least 6 pieces of their work is required. Display must include some work done by child care children who are not family members, if they are enrolled.

Score “Yes” to 3.3 if there is a very large piece of work that several children have worked on. However, this would not count to meet the requirements of 5.3 where other displayed work would also have to be observed.

NA is permitted for these two indicators if there are only children under 1 year of age enrolled in the group.

Montana Note

Work done by the children should be displayed in the areas where children spend much of their day.

Indicator 5.4:

To give credit, at least 1 instance must be observed during the observation.

Indicator 7.2:

Individualized work means that each child has selected the subject and/or media and has carried out the work in his or her own creative way. Thus, individualized products look quite different from one another. Projects where children follow a provider’s example and little creativity is allowed are not considered individualized work.

NA is permitted for these two indicators if there are only children under 1 year of age enrolled in the group.

6. Space for privacy

The intent of space for privacy is to give children relief from the pressures of group life. A place where one or two children can play protected from intrusion by other children, yet be supervised by the provider, is considered space for privacy. Private space can be created by using physical barriers such as book shelves; by enforcing the rule that children may not interrupt one another; by limiting the number of children working at a table placed in an out-of-traffic area. Examples of space for privacy are an activity where use is limited to one or two children: a cardboard box with large cut-out windows for easy supervision; a small outdoor play house; a table, easel, or computer limited to one or two children at a time. Score this item based on observation only, not provider report.

Indicator 1.1:

If it is impossible for any child to play alone without intrusion by others, (consider both indoors and outdoors) score “Yes.”

Indicator 1.2:

In order to judge whether the period of isolation is too long, look at the response of the child, for example if the child shows signs of boredom or unhappiness without the provider taking action to improve the situation.

Montana Note

Children should not be isolated without interaction and/or something to do for a period longer than 10 minutes.

Indicator 3.2:

Space for privacy for infants/toddlers and preschoolers must be easy to supervise visually whenever it is being used. Private space for school-agers must be located so provider can check on children frequently.

Consider the developmental level of the child(ren) and their impulsivity when determining a score. Momentary lapses in supervision are allowed when scoring as long as children are in a safe space, the provider checks on them frequently, and the children are not involved in high-risk activities.

Montana Note

The caregivers must be able to supervise the space well enough at all times to ensure that it is possible to use effective, child-appropriate discipline to meet the safety needs of all of the children at all times; no matter where the child(ren) are.

Indicator 5.1:

Provider must enforce the protection rule, if needed, in order to be given credit for this indicator. Space that is used only for punishment, for example time out, is not given credit. To give credit, the space must be observed.

Infants/toddlers do not necessarily need a space “set aside” for them to play alone or with a friend, but to give credit they should be able to play without intrusion from others.

Indicator 5.2:**Montana Note**

If credit is not given for 5.1, then credit cannot be given for 5.2.

7. Greeting/departing

At greeting and departure the responsibility for the child is transferred from one adult to another, therefore greeting requires that the child is acknowledged in some way immediately upon arrival or very shortly thereafter.

Indicator 1.1:

To count as a greeting, the person being greeted must perceive the greeting. Simply saying hello, to a child/parent who does not notice that he or she has been spoken to, does not count as being greeted. There is no specific definition of a “warm” greeting, but the recipient must perceive the interaction as being positive and welcoming. The greeting can be verbal or through welcoming body language, such as a smile that the parent/child responds to, or a hug for a child. Simply taking a child from a parent, without an obvious warm interaction that is perceived by the child, would not count as a greeting, even though the provider might physically hold the child.

Montana Note

The expectation is that the children are greeted before the parent leaves. It is important for the caregiver to acknowledge that the child is in their care and make them feel welcome.

Indicator 1.3:

Interpret “parents” as any adults who are responsible for the care of the child, such as grandparents, foster parents, or nannies. Parents of school-age children are required to enter caregiving area when bringing or picking up their children.

Indicator 3.1:

“Most” means 75% of the children.

To count as a greeting, the person being greeted must perceive the greeting. Simply saying hello, to a child/parent who does not notice that he or she has been spoken to, does not count as being greeted. There is no specific definition of a “warm” greeting, but the recipient must perceive the interaction as being positive and welcoming. The greeting can be verbal or through welcoming body language, such as a smile that the parent/child responds to, or a hug for a child. Simply taking a child from a parent, without an obvious warm interaction that is perceived by the child, would not count as a greeting, even though the provider might physically hold the child.

Montana Note

The expectation is that the children are greeted before the parent leaves. It is important for the caregiver to acknowledge that the child is in their care and make them feel welcome.

Indicator 3.3:

Interpret “parents” as any adults who are responsible for the care of the child, such as grandparents, foster parents, or nannies. Parents of school-age children are required to enter caregiving area when bringing or picking up their children.

Give credit as long as parents come into any part of the home where children spend any part of the day. The space used by the children for any part of the day must, at least, be visible to the parent. Parents cannot be prohibited from going into any of the child care areas.

Montana Note

While all parents of infants and toddlers must enter the area where children are being cared for at the time of their arrival, it should be observed as the general practice for older children.

Indicator 3.4:

The sharing of child related information must happen as the child is being dropped off at the family child care home. To give credit, it is not necessary to observe the sharing of information by every parent, but it must obviously be the usual practice (at least 50% of the time), and be observed at least once unless no greeting is observed. When only one parent is observed being greeted, the sharing of information must be observed. If two parents are greeted, sharing of information must be observed in one of those greetings. If no greeting is observed, be sure to ask how this aspect of care is handled. The provider should elicit information from the parent if parents do not share information spontaneously.

Montana Note

While information should be shared with parents of all infants and toddlers, less is required for preschool and school-agers.

Indicator 5.1:**Montana Note**

Observe greeting very carefully to see if each child is actually greeted, and that the greeting is personal and positive (e.g., caregiver makes eye contact and smiles, uses child's real name or nickname, says something to child or asks something).

Montana Note

The expectation is that the children are greeted before the parent leaves. It is important for the caregiver to acknowledge that the child is in their care and make them feel welcome.

Indicator 5.4:**Montana Note**

Written information is required and should be documented as routines are completed.

Indicator 7.1:**Montana Note**

The expectation is that the children are greeted before the parent leaves. It is important for the caregiver to acknowledge that the child is in their care and make them feel welcome.

8. Nap/rest

All programs, no matter how long or short, should have individual provisions for infants, toddlers, and preschoolers to nap or rest and also for school-agers if they are tired. For programs of less than 4 hours in length, where nap is not a regular part of the day and the children do not seem tired, this item may be marked NA.

Since cribs with sides that drop down are no longer considered safe for children, consider this issue in both the Nap item and the Safety item.

Montana Note

Score this item NA if only school-aged children are enrolled and nap/rest is not used. However, the item must be scored if a child indicates that a rest period is needed or nap/rest is observed.

Indicator 1.1:

North Carolina Note: According to the 2011 edition of *Caring for Our Children* (page 99) swaddling of children in child care settings is associated with the risk of serious health conditions, and is not necessary or recommended. Therefore consider the use of swaddling in this indicator.

Indicator 1.2:

To give credit for appropriate and healthful provisions, sleeping children should use their own crib/cot/mat. Linens, such as sheets, blankets, or sleeping bags, should be washed weekly or more often if needed. Children should not sleep on shared surfaces without the protection of clean linens. Infants should be placed to sleep on their backs, but allowed to assume their favorite sleeping positions independently thereafter. A physician's note is required for exemption from this practice. Sleeping infants should be in a crib or otherwise protected.

In the example for indicator 1.2, "crowded" means that cribs/cots/mats for children under 2 years of age are placed so they are less than 36 inches away from one another. This distance is required for control of airborne infection in very young children who are less able to fight off disease. For children 2 years and older, "crowded" means cots/mats are less than 18 inches apart. Tighter spacing is permissible if rest equipment is separated by a solid barrier, and provider has easy access to all children.

According to the 2011 edition of *Caring for Our Children* (page 99) swaddling of children in child care settings is associated with the risk of serious health conditions, and is not necessary or recommended. Therefore consider the use of swaddling in this indicator.

According to the 2011 edition of *Caring for Our Children* (page 252) the ends of cribs are no longer acceptable as a solid barrier to prevent the spread of disease. Cribs/cots must be separated by three feet of space. When scoring these indicators, consider all aspects of health related to nap. If there are no other health-related problems except for spacing of cribs/cots, score as follows: If more than 50% of cribs/cots are less than 3 feet apart, or if any are less than 18 apart, score 1.2 Yes. If you observe only one or two instances of a crib being less than 36 inches from another crib, and they have solid ends to separate them, score 1.2 No, but 3.2 No.

Based on the new policy statement in *Caring for Our Children* (American Academy of Pediatrics, et al.) on SIDS sleep-related infant deaths, blankets are hazardous for sleeping infants under a year of age. In order for sleep provisions to be considered safe for infants, no blankets or any other soft materials (toys, bumper pads, etc.) should be placed in the crib.

Caring for Our Children, 3rd Edition, now requires 3 feet between cots, mats or cribs. Solid screens or other barriers, such as crib ends or toy shelves, are not acceptable because they would need to extend from floor to ceiling to prevent air borne contamination from one child to another, and would disrupt supervision. For 1.1, score No if at least 75% of the cribs/mats/cots are separated by 3 feet, and no sleeping equipment is closer than 24 inches. For 3.2, do not give credit unless there is 3 feet between each sleeping provision.

Montana Note

For sleeping infants, light receiving blankets or sleep sacks are allowed. Blankets, pillows, stuffed animals or any other items placed near sleeping infants is not allowed. A sheet is not allowed in playpens but two coverings are required with children over 12 months of age napping in cribs.

If a parent requests their child to have a special sleeping arrangement due to a health condition, a dated and signed note from a physician detailing the special condition is required. Car seats are not considered an acceptable sleeping arrangement. A physician's statement is required for placing infants on their stomachs to sleep.

Children must not be allowed to sleep in swings, infant seats, couches or strollers because they are shared spaces and not considered sanitary.

Two coverings are required for children over 12 months of age—one to cover the type of bedding used and one for the child to have access to in order to cover up with. Discount here for cross-contamination of bedding/linens. With the exception of cots, sleeping provisions should be 2 inches thick. Bedding should be washed weekly.

Beginning December 28, 2012, cribs with manufacturer dates prior to June 29th, 2011 must be replaced. Programs must provide a certificate of compliance to the new crib law from the manufacturer for all cribs in their facility. These will be requested at time of assessment.

Indicator 1.3

Montana Note

Sleeping infants should be checked every 15 minutes by touch.

Indicator 3.2:

To give credit for appropriate and healthful provisions, sleeping children should use their own crib/cot/mat. Linens, such as sheets, blankets, or sleeping bags, should be washed weekly or more often if needed. Children should not sleep on shared surfaces without the protection of clean linens. Infants

should be placed to sleep on their backs, but allowed to assume their favorite sleeping positions independently thereafter. A physician's note is required for exemption from this practice. Sleeping infants should be in a crib or otherwise protected.

In the example for indicator 1.2, "crowded" means that cribs/cots/mats for children under 2 years of age are placed so they are less than 36 inches away from one another. This distance is required for control of airborne infection in very young children who are less able to fight off disease. For children 2 years and older, "crowded" means cots/mats are less than 18 inches apart. Tighter spacing is permissible if rest equipment is separated by a solid barrier, and provider has easy access to all children.

According to the 2011 edition of *Caring for Our Children* (page 252) the ends of cribs are no longer acceptable as a solid barrier to prevent the spread of disease. Cribs/cots must be separated by three feet of space. When scoring these indicators, consider all aspects of health related to nap. If there are no other health-related problems except for spacing of cribs/cots, score as follows: If more than 50% of cribs/cots are less than 3 feet apart, or if any are less than 18 apart, score 1.2 Yes. If you observe only one or two instances of a crib being less than 36 inches from another crib, and they have solid ends to separate them, score 1.2 No, but 3.2 No.

Based on the new policy statement in *Caring for Our Children* (American Academy of Pediatrics, et al.) on SIDS sleep-related infant deaths, blankets are hazardous for sleeping infants under a year of age. In order for sleep provisions to be considered safe for infants, no blankets or any other soft materials (toys, bumper pads, etc.) should be placed in the crib.

Caring for Our Children, 3rd Edition, now requires 3 feet between cots, mats or cribs. Solid screens or other barriers, such as crib ends or toy shelves, are not acceptable because they would need to extend from floor to ceiling to prevent air borne contamination from one child to another, and would disrupt supervision. For 1.1, score No if at least 75% of the cribs/mats/cots are separated by 3 feet, and no sleeping equipment is closer than 24 inches. For 3.2, do not give credit unless there is 3 feet between each sleeping provision.

Montana Note

If a parent requests their child to have a special sleeping arrangement due to a health condition, a dated and signed note from a physician detailing the special condition is required. Car seats are not considered an acceptable sleeping arrangement. A physician's statement is required for placing infants on their stomachs to sleep.

Children must not be allowed to sleep in swings, infant seats, couches or strollers because they are shared spaces and not considered sanitary.

Two coverings are required for children over 12 months of age—one to cover the type of bedding used and one for the child to have access to in order to cover up with. Discount here for cross-contamination of bedding/linens. With the exception of cots, sleeping provisions should be 2 inches thick. Bedding should be washed weekly.

Indicator 3.3:

"Sufficient supervision" means that provider is present to protect children's health and safety and to supervise children who are awake. Provider is alert and can visually supervise infants; toddlers and preschoolers can be heard, and are visually checked periodically during nap.

Montana Note

Sleeping infants should be checked every 15 minutes.

Indicator 5.3:

If nap is not observed, judge the quality of the supervision primarily on what was observed throughout the observation as well as information provided on how nap supervision is handled.

9. Meals/snacks

Indicator 1.1:

To determine appropriate schedule and nutritional adequacy, refer to nutrition guidelines for ages of children enrolled in the USDA Child Care and Adult Food Program or comparable guidelines from other countries. Check menu in addition to observing food served. If no menu is available, ask the provider to describe meals/snacks served. If parents provide food, provider must check nutritional adequacy and supplement when needed. An occasional instance of not meeting the guidelines—for example, cupcakes for a birthday party instead of the regular snack—should not affect the rating. Drinking water should be available or offered between meals/snacks to children who eat solid foods.

Foods that are too hot are not considered appropriate, such as food or bottles warmed in a microwave oven or in water warmer than 120 degrees.

Meals/snacks should be served to infants, toddlers, and preschoolers every 2-3 hours unless children are sleeping.

Montana Note

Meals/snacks should be served to infants, toddlers, and preschoolers every 2-3 hours unless children are sleeping.

Indicator 1.1

Montana Note

With regard to drinking water being offered between meals/snacks to children, score “No” if during the observation water is not offered to at least some of the children who cannot access their own water. Also score ‘No’ if water is not available to children who can ask for it or get their own.

Indicator 1.2:

To determine appropriate schedule and nutritional adequacy, refer to nutrition guidelines for ages of children enrolled in the USDA Child Care and Adult Food Program or comparable guidelines from other countries. Check menu in addition to observing food served. If no menu is available, ask the provider to describe meals/snacks served. If parents provide food, provider must check nutritional adequacy and supplement when needed. An occasional instance of not meeting the guidelines—for example, cupcakes for a birthday party instead of the regular snack—should not affect the rating. Drinking water should be available or offered between meals/snacks to children who eat solid foods.

Foods that are too hot are not considered appropriate, such as food or bottles warmed in a microwave oven or in water warmer than 120 degrees.

Montana Note

The intent of this indicator is to determine whether the correct components of a meal or snack are being served to the children. No analysis of the nutritional value of foods served is necessary. Use the Food Guide to determine whether the components are present. The guidelines also require all components to be served together. Personal dietary preferences of the assessor (e.g., whole grain vs. white breads; fresh vs. canned vegetables; high vs. low sugar or fat content, etc.) are not to be used in determining the quality of the foods served. Also, consider perishable foods, which are left out longer than 1 hour.

Regardless of source or ages served, 75% of all children must receive meals and snacks that meet USDA guidelines. Providers may supplement if they choose in order to guarantee 75% compliance. Programs that choose to “offer” rather than “serve” food (i.e., family style serving, school-age multiple choice snacks) carry an additional responsibility to encourage appropriate choices and model good nutritional

habits. Combination foods are foods with multiple components that have been packaged together or combined during the cooking process. Combination foods can be counted to meet up to two different components. Scoring consideration of combination foods should be balanced with other items on the menu. Foods that might be served together, but do not meet the definition of combination foods, can count for up to 3 components (i.e., hamburgers, sandwiches, cereal, and fruit). When vegetable garnishes are served in sufficient quantities, they may be considered to meet the requirement as a vegetable. Breading on meat products may not be counted. Beans can count as either a vegetable or protein as needed. Milk is required at all meals excluding snack where only 2 of the 4 components are required.

Indicator 1.3:

Basic sanitary procedures:

- Provider washes hands, even if gloves are used, before and after both bottle feeding and preparing and serving food to children, or whenever contaminated during feeding or serving food.
- Children who feed themselves have hands washed before and after eating. Re-contamination of hands after being washed should be minimized by having children begin eating as soon as hands have been washed.
- Eating surfaces (such as highchair trays or table top) cleaned and sanitized before and after serving food.
- No contaminated food should be fed to the child (e.g., perishable food brought from home that is not refrigerated; food that has been touched by another child). Utensils, not hands, should be used to cut up food, serve, or feed a child.
- For milk and juice in bottles to be considered sanitary, they can be un-refrigerated for no longer than 1 hour.
- Any leftover food fed from a container may not be used for a later feeding and must be discarded.
- For information on proper storage and serving, consult *Caring for Our Children: The National Health and Safety Performance Standards for Out-of-Home Child Care*, 2nd edition (American Academy of Pediatrics, 2002).

“Usually “ means at least 75% of the time.

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

An alternative EPA approved “sanitizer” may be used in place of the usual bleach and water solution as part of the table washing procedure or for high chair trays, and other food related surfaces. Check the label of the original container and look for the designation as an EPA sanitizer. Be sure all instructions for use are followed such as the time required to be on the surface or whether to rinse after use. If not do not give credit for cleaning the surface. Safety issues regarding the use of the alternative sanitizer, such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Since three important health practices are required (eating surface washing /sanitizing, hand hygiene before and after eating, and serving uncontaminated foods), consider the extent to which each of the required health practices is followed. If there is little effort in 2 of the 3 health practices, (for example, handwashing is completely ignored, there is no attempt to clean tables, and/or foods are served under

conditions that cause extreme contamination), then score 1.3 Yes. There can be minor lapses in following the handwashing procedure (not rubbing for the 20 seconds, but rubbing all hand surfaces thoroughly; not wetting hands first but soap still makes bubbles). However, hands should be cleaned reasonably well. If there is a significant attempt to complete all practices, even if some procedures are not done absolutely correctly, score 3.3, Yes. If there is a minimal attempt to do all procedures, but the practices are completed with many serious errors, score 3.3 No.

Montana Note

Eating surfaces must be cleaned and sanitized prior to, and following, use for food service. Follow the “2-step” process. Eating surfaces should be: 1) washed with a soap and water mixture to remove gross soil and, 2) sanitized with a bleach-water solution before and after being used for meals/snacks. To allow bleach-water solution to do its job, it should be allowed to sit for at least 10 seconds (preferably longer) before wiping dry or allowing to air dry. For other acceptable sanitizing agents, refer to the general notes. If proper sanitary measures are clearly practiced as part of the child care program, but an occasional lapse does occur, credit can be given. If food is served directly on the high chair tray, the food should be dry (e.g., crackers, cheerios, etc.) for credit to be given; otherwise, a plate, bowl, or paper towel, etc., should be used.

Caregivers' hands must be washed before and after feeding a child a bottle. The expectation is for children's hands to be washed before and after eating (including bottle feeding) regardless of whether they feed themselves or are fed by an adult. The use of wipes on very young infants without head/neck control is appropriate. In addition, if an infant falls asleep during the bottle-feeding, it is permissible for their hands to be wiped before laying the child down, or the child's hands can be washed upon awakening. To allow staff to keep their focus on children while they are eating, a separate wipe may be used on a child's hands that have finished eating and may leave the table. However, all children's hands (exception children who have no head control) must be washed after all children are through eating.

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

An alternative EPA approved “sanitizer” cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

Indicator 1.4:

Infants and young toddlers who can sit up independently and hold their bottles may be allowed to feed themselves with close supervision.

Montana Note

The intent for these indicators is for infants to be held for bottle feeding unless the bottle is being served with a meal.

Indicator 3.1:

To determine appropriate schedule and nutritional adequacy, refer to nutrition guidelines for ages of children enrolled in the USDA Child Care and Adult Food Program or comparable guidelines from other countries. Check menu in addition to observing food served. If no menu is available, ask the provider to describe meals/snacks served. If parents provide food, provider must check nutritional adequacy and supplement when needed. An occasional instance of not meeting the guidelines—for example, cupcakes for a birthday party instead of the regular snack—should not affect the rating. Drinking water should be available or offered between meals/snacks to children who eat solid foods.

Foods that are too hot are not considered appropriate, such as food or bottles warmed in a microwave oven or in water warmer than 120 degrees.

Meals/snacks should be served to infants, toddlers, and preschoolers every 2-3 hours unless children are sleeping.

Montana Note

Meals/snacks should be served to infants, toddlers, and preschoolers every 2-3 hours unless children are sleeping.

Indicator 3.1

Montana Note

With regard to drinking water being offered between meals/snacks to children, score “No” if during the observation water is not offered to at least some of the children who cannot access their own water. Also score “No” if water is not available to children who can ask for it or get their own

Indicator 3.2:

To determine appropriate schedule and nutritional adequacy, refer to nutrition guidelines for ages of children enrolled in the USDA Child Care and Adult Food Program or comparable guidelines from other countries. Check menu in addition to observing food served. If no menu is available, ask the provider to describe meals/snacks served. If parents provide food, provider must check nutritional adequacy and supplement when needed. An occasional instance of not meeting the guidelines—for example, cupcakes for a birthday party instead of the regular snack—should not affect the rating. Drinking water should be available or offered between meals/snacks to children who eat solid foods.

Foods that are too hot are not considered appropriate, such as food or bottles warmed in a microwave oven or in water warmer than 120 degrees.

With regard to drinking water being offered between meals/snacks to children consuming solid foods, score “No” if during the observation water is not offered to at least some of the children who cannot access their own water. Also score “No” if water is not available to children who can ask for it or get their own.

Montana Note

The intent of this indicator is to determine whether the correct components of a meal or snack are being served to the children. No analysis of the nutritional value of foods served is necessary. Use the Food Guide to determine whether the components are present. The guidelines also require all components to be served together. Personal dietary preferences of the assessor (e.g., whole grain vs. white breads;

fresh vs. canned vegetables; high vs. low sugar or fat content, etc.) are not to be used in determining the quality of the foods served. Also, consider perishable foods, which are left out longer than 1 hour. Regardless of source or ages served, 75% of all children must receive meals and snacks that meet USDA guidelines. Providers may supplement if they choose in order to guarantee 75% compliance. Programs that choose to “offer” rather than “serve” food (i.e., family style serving, school-age multiple choice snacks) carry an additional responsibility to encourage appropriate choices and model good nutritional habits. Combination foods are foods with multiple components that have been packaged together or combined during the cooking process. Combination foods can be counted to meet up to two different components. Scoring consideration of combination foods should be balanced with other items on the menu. Foods that might be served together, but do not meet the definition of combination foods, can count for up to 3 components (i.e., hamburgers, sandwiches, cereal, and fruit). When vegetable garnishes are served in sufficient quantities, they may be considered to meet the requirement as a vegetable. Breading on meat products may not be counted. Beans can count as either a vegetable or protein as needed. Milk is required at all meals excluding snack where only 2 of the 4 components are required.

With regard to drinking water being offered between meals/snacks to children consuming solid foods, score “No” if during the observation water is not offered to at least some of the children who cannot access their own water. Also score „No” if water is not available to children who can ask for it or get their own.

Indicator 3.3:

Basic sanitary procedures:

- Provider washes hands, even if gloves are used, before and after both bottle feeding and preparing and serving food to children, or whenever contaminated during feeding or serving food.
- Children who feed themselves have hands washed before and after eating. Re-contamination of hands after being washed should be minimized by having children begin eating as soon as hands have been washed.
- Eating surfaces (such as highchair trays or table top) cleaned and sanitized before and after serving food.
- No contaminated food should be fed to the child (e.g., perishable food brought from home that is not refrigerated; food that has been touched by another child). Utensils, not hands, should be used to cut up food, serve, or feed a child.
- For milk and juice in bottles to be considered sanitary, they can be un-refrigerated for no longer than 1 hour.
- Any leftover food fed from a container may not be used for a later feeding and must be discarded.
- For information on proper storage and serving, consult *Caring for Our Children: The National Health and Safety Performance Standards for Out-of-Home Child Care*, 2nd edition (American Academy of Pediatrics, 2002).

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

An alternative EPA approved “sanitizer” may be used in place of the usual bleach and water solution as part of the table washing procedure or for high chair trays, and other food related surfaces. Check the

label of the original container and look for the designation as an EPA sanitizer. Be sure all instructions for use are followed such as the time required to be on the surface or whether to rinse after use. If not do not give credit for cleaning the surface. Safety issues regarding the use of the alternative sanitizer, such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Since three important health practices are required (eating surface washing /sanitizing, hand hygiene before and after eating, and serving uncontaminated foods), consider the extent to which each of the required health practices is followed. If there is little effort in 2 of the 3 health practices, (for example, handwashing is completely ignored, there is no attempt to clean tables, and/or foods are served under conditions that cause extreme contamination), then score 1.3 Yes. There can be minor lapses in following the handwashing procedure (not rubbing for the 20 seconds, but rubbing all hand surfaces thoroughly; not wetting hands first but soap still makes bubbles). However, hands should be cleaned reasonably well. If there is a significant attempt to complete all practices, even if some procedures are not done absolutely correctly, score 3.3, Yes. If there is a minimal attempt to do all procedures, but the practices are completed with many serious errors, score 3.3 No.

Montana Note

Eating surfaces must be cleaned and sanitized prior to, and following, use for food service. Follow the “2-step” process. Eating surfaces should be: 1) washed with a soap and water mixture to remove gross soil and, 2) sanitized with a bleach-water solution before and after being used for meals/snacks. To allow bleach-water solution to do its job, it should be allowed to sit for at least 10 seconds (preferably longer) before wiping dry or allowing to air dry. For other acceptable sanitizing agents, refer to the general notes. If proper sanitary measures are clearly practiced as part of the child care program, but an occasional lapse does occur, credit can be given. If food is served directly on the high chair tray, the food should be dry (e.g., crackers, cheerios, etc.) for credit to be given; otherwise, a plate, bowl, or paper towel, etc., should be used.

Caregivers' hands must be washed before and after feeding a child a bottle. The expectation is for children's hands to be washed before and after eating (including bottle feeding) regardless of whether they feed themselves or are fed by an adult. The use of wipes on very young infants without head/neck control is appropriate. In addition, if an infant falls asleep during the bottle-feeding, it is permissible for their hands to be wiped before laying the child down, or the child's hands can be washed upon awakening. To allow staff to keep their focus on children while they are eating, a separate wipe may be used on a child's hands that have finished eating and may leave the table. However, all children's hands (exception children who have no head control) must be washed after all children are through eating.

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

An alternative EPA approved “sanitizer” cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

If the same sink is used by either children or adults for both diapering/toileting and food-related routines (including toothbrushing) or for other purposes (to wash toys/other classroom equipment; after wiping nose), it must be sanitized by spraying sink and faucets with a bleach solution after diapering/toileting use.

Indicator 3.4:

Montana Note

The intent for these indicators is for infants to be held for bottle feeding unless the bottle is being served with a meal.

Indicator 5.2

Montana Note

Staff and children are required to eat together family style during most meals. Staff and children must participate in the same meal. Some foods must be dished up so that children can serve themselves. Staff must sit at the table and eat with the children to help facilitate conversations, help with the meal service, and supervise children while eating. There must be at least one staff person at each table or an attempt made by staff to include all children in the conversations, make sure they are served and receive foods, and are closely supervised.

Indicator 5.3:

Basic sanitary procedures:

- Provider washes hands, even if gloves are used, before and after both bottle feeding and preparing and serving food to children, or whenever contaminated during feeding or serving food.
- Children who feed themselves have hands washed before and after eating. Re-contamination of hands after being washed should be minimized by having children begin eating as soon as hands have been washed.
- Eating surfaces (such as highchair trays or table top) cleaned and sanitized before and after serving food.
- No contaminated food should be fed to the child (e.g., perishable food brought from home that is not refrigerated; food that has been touched by another child). Utensils, not hands, should be used to cut up food, serve, or feed a child.
- For milk and juice in bottles to be considered sanitary, they can be un-refrigerated for no longer than 1 hour.
- Any leftover food fed from a container may not be used for a later feeding and must be discarded.
- For information on proper storage and serving, consult *Caring for Our Children: The National Health and Safety Performance Standards for Out-of-Home Child Care*, 2nd edition (American Academy of Pediatrics, 2002).

“Usually “ means at least 75% of the time.

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

An alternative EPA approved “sanitizer” may be used in place of the usual bleach and water solution as part of the table washing procedure or for high chair trays, and other food related surfaces. Check the label of the original container and look for the designation as an EPA sanitizer. Be sure all instructions for

use are followed such as the time required to be on the surface or whether to rinse after use. If not do not give credit for cleaning the surface. Safety issues regarding the use of the alternative sanitizer, such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Montana Note

Eating surfaces must be cleaned and sanitized prior to, and following, use for food service. Follow the “2-step” process. Eating surfaces should be: 1) washed with a soap and water mixture to remove gross soil and, 2) sanitized with a bleach-water solution before and after being used for meals/snacks. To allow bleach-water solution to do its job, it should be allowed to sit for at least 10 seconds (preferably longer) before wiping dry or allowing to air dry. For other acceptable sanitizing agents, refer to the general notes. If proper sanitary measures are clearly practiced as part of the child care program, but an occasional lapse does occur, credit can be given. If food is served directly on the high chair tray, the food should be dry (e.g., crackers, cheerios, etc.) for credit to be given; otherwise, a plate, bowl, or paper towel, etc., should be used.

Caregivers' hands must be washed before and after feeding a child a bottle. The expectation is for children's hands to be washed before and after eating (including bottle feeding) regardless of whether they feed themselves or are fed by an adult. The use of wipes on very young infants without head/neck control is appropriate. In addition, if an infant falls asleep during the bottle-feeding, it is permissible for their hands to be wiped before laying the child down, or the child's hands can be washed upon awakening. To allow staff to keep their focus on children while they are eating, a separate wipe may be used on a child's hands that have finished eating and may leave the table. However, all children's hands (exception children who have no head control) must be washed after all children are through eating. With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

An alternative EPA approved “sanitizer” cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

Indicator 5.4:

NA if parents provide all food for their children, and no supplementary food is provided. If provider supplements food to meet requirements of 3.2, parents must be notified.

Montana Note

The menu must be posted where it can be easily seen by parents.

10. Diapering/toileting

Item 10:

In the most recent Caring for Our Children, 3rd edition, pages 106-108, there are changes to the diapering procedure to use when scoring. First, non-absorbent paper is required that extends from the child's shoulders to beyond the feet. The diapering surface must be disinfected, but does not have to be washed first, as long as the paper is used and the surface is not visibly soiled. If paper is not used, then the surface must be cleaned (a wipe is permitted for this) and then disinfected, whether visibly soiled or not to be counted as correct when scoring. Second, a soiled diaper should be left under the child, while the child is cleaned. Then it should be folded over and disposed of properly. For the complete current diapering procedure, see Caring for Our Children, or look for the new handout on www.ersi.info. For information on changing children in "Pull-ups" or other disposable underwear, or with soiled clothing, see the 2011 edition of Caring for Our Children, pages 108-109.

Montana Note

For proper sanitary diaper/pull-up changing procedure, refer to the Montana Diaper Change Procedure. For the purpose of the scales Pull-ups are held to the same standards as diapers.

Indicator 1.1:

The purpose of maintaining sanitary conditions is to prevent the spread of germs in the urine or stool to the provider or child's hands, the diapering surface, containers of supplies, cabinet doors, or any other surface the children and provider might touch. Wearing of gloves for diaper changing is optional, but helpful. A fresh solution of bleach water should be made up daily, 1 tablespoon of household bleach to 1 quart of water (or ¼ cup bleach to 1 gallon of water), or an EPA-registered sanitizer should be used according to the manufacturer's instructions.

The following measures are essential to cut down on the spread of gastro-intestinal illness and should be considered when scoring this item. The provider should:

I. Prepare for diapering/changing soiled clothing

- To minimize contamination outside of the changing area
 - One diaper-changing area should be selected and used consistently.
 - The diaper changing area should be physically separated from the food preparation and serving areas, including separate sinks. If the same sink must be used for more than diapering/toileting, faucet handles and sink should be sanitized with a bleach and water solution after diapering/ toileting use.
 - The diapering surface must be non-porous so it can be sanitized after each diaper change with a bleach/water solution (i.e., no cloth quilted pads or fabric safety straps, no containers stored on the diapering surface).
 - If paper is used to cover the changing surface, it should be long enough to cover from the child's shoulders to heels (in case it becomes soiled and must be folded over to give a clean surface during the change).
- To prepare for a change before bringing the child to area, have ready
 - Enough wipes for the change (including wiping the bottom and hands after removing the soiled diaper/clothing) removed from the box.
 - A clean diaper or underwear, plastic bag for soiled clothes, and clean clothes if soiled clothing is changed.
 - Non-porous gloves if they will be used, and a dab of diaper cream on a disposable piece of paper or tissue if cream is being used.

II. Follow diapering/changing procedure

- Prepare for changing as indicated above.
- Place child on changing surface. Remove clothing to access diaper or soiled clothing. If soiled, place clothes into plastic bag.
- Remove soiled diaper and place into lined, hands-free trash container. Clothing must be sealed in a plastic bag without being rinsed, and sent home.
- Use wipes to clean child's bottom from front to back.
- Use a wipe to remove soil from adult's hands.
- Use another wipe to remove soil from child's hands.
- Throw soiled wipes into lined, hands-free trash container.
- Put on clean diaper or underwear and redress child.
- Move child to sink and wash hands following the "handwashing procedure."
- Spray diapering surface with a soap-water solution to clean. Wipe dry with disposable towel.
- Spray diapering surface with bleach-water solution and wait at least 2 minutes before wiping with disposable towel or allow to air dry. The surface cannot be sprayed and immediately wiped.
- Wash own hands using the "handwashing procedure," without contaminating any other surface.

III. Take additional precautions for diapering/toileting

- Toilets must be flushed after each use.
- Floors/other surfaces that become contaminated must be sanitized.
- Toys that are played with or objects that are touched during diapering/toileting must be put aside to be sanitized.
- Other surfaces should not be contaminated during changing or toileting unless properly sanitized. For example, if child is changed on a pad on the floor, soiled diaper should not be placed on floor unless floor is sanitized afterwards.
- Note: Provider's hands must be washed after the changing procedure is completed, after diaper checks, and after helping children with toileting. Children's hands must be washed after diapering and toileting.

If the same sink is used by either children or adults for both diapering/toileting and food-related routines (including toothbrushing) or for other purposes (to wash toys/other classroom equipment; after wiping nose), it must be sanitized by spraying sink and faucets with a bleach solution after diapering/toileting use. As an exception to this rule, in order to avoid requiring children to wash hands in quick succession between toileting and being fed, the following applies: if children use toilet, wash hands and then immediately sit down for meal/snack, contamination of children's hands at toileting sink must be minimized by having children/adults turn off faucet with paper towel.

An alternative EPA approved "disinfectant" (not sanitizer) may be used in place of the usual bleach and water solution. Check the label of the original container and look for the designation as an EPA disinfectant. Be sure all instructions for use are followed. If not do not give credit for sanitizing the surface. Safety issues regarding the use of the alternative disinfectant, such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Montana Note

Basic sanitary conditions include proper diapering procedures as outlined in the Diaper Change Procedure would adequately minimize the spread of germs and replaces the procedure outlined in the scale. When cleaning or sanitizing surfaces, a disposable towel or fresh cloth must be used for each part of the process. If the same sink is used for all hand washing, it must be properly sanitized following toileting/diapering hand washing routines before it is used for any other purpose. Proper sanitizing includes spraying the sink bowl, rim, and faucets with an appropriate sanitizing agent. If the facility permits sinks to be designated for specific purposes, then this should be done (for example, sinks near toilets should be used for hand washing following toileting/diapering, while sinks in the food prep area are used for food-related and other purposes). The intent is to cut down on fecal-oral contamination (intestinal germs on the hands).

When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is nonporous, and can be cleaned and sanitized. In addition the surface must be long and wide enough to accommodate the child's whole body from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas. When children are changed standing up while wearing a pull-up or diaper the same rules apply.

An alternative EPA approved "sanitizer" cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

Montana Note:

Reusable diapers such as cloth diapers must be placed in a separate covered container with waterproof liner when soiled. The container must be emptied (laundered, given to parent, or other disposal) daily and cleaned and disinfected daily.

Indicator 1.2:

Montana Note

Diapers/pull-ups should be visually checked approximately every 2 hours.

Indicator 1.3:

Handwashing for infants, toddlers, older children, and provider requires that hands be washed with liquid soap and warm running water for at least 10 seconds.

- Thorough handwashing of child's hands with liquid soap and warm running water is required after each diapering/toileting is completed. Using wipes or antiseptic waterless washes cannot be substituted for handwashing. To avoid injury of a child in very unusual circumstances (e.g., a new-born baby with no head control, a very heavy baby with little body control), use of a disposable wipe is an acceptable substitute.
- Thorough adult handwashing with warm running water and soap is required after each diaper check, each diaper change, changing soiled clothing, helping child with toileting, and as the final step after the diapering surface has been sanitized. This must be done before any other surfaces in the home are touched. Handwashing after diapering is usually completed after spraying the diapering surface with a sanitizing solution. If the surface is allowed to dry for 2 or more minutes and then wiped dry, a second washing of hands is not required.

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

Montana Note

Since new research has shown that waterless washes are an inadequate sanitary measure, proper hand washing with soap and running water is required following diapering or toileting.

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

Indicator 1.4:

“Inadequate supervision” means that the provider does not monitor to protect the safety of the children or to ensure that sanitary procedures (such as handwashing) are carried out.

Indicator 3.1:

The purpose of maintaining sanitary conditions is to prevent the spread of germs in the urine or stool to the provider or child’s hands, the diapering surface, containers of supplies, cabinet doors, or any other surface the children and provider might touch. Wearing of gloves for diaper changing is optional, but helpful. A fresh solution of bleach water should be made up daily, 1 tablespoon of household bleach to 1 quart of water (or ¼ cup bleach to 1 gallon of water), or an EPA-registered sanitizer should be used according to the manufacturer’s instructions.

The following measures are essential to cut down on the spread of gastro-intestinal illness and should be considered when scoring this item. The provider should:

I. Prepare for diapering/changing soiled clothing

- To minimize contamination outside of the changing area
- One diaper-changing area should be selected and used consistently.
- The diaper changing area should be physically separated from the food preparation and serving areas, including separate sinks. If the same sink must be used for more than diapering/toileting, faucet handles and sink should be sanitized with a bleach and water solution after diapering/ toileting use.
- The diapering surface must be non-porous so it can be sanitized after each diaper change with a bleach/water solution (i.e., no cloth quilted pads or fabric safety straps, no containers stored on the diapering surface).
- If paper is used to cover the changing surface, it should be long enough to cover from the child’s shoulders to heels (in case it becomes soiled and must be folded over to give a clean surface during the change).

- To prepare for a change before bringing the child to area, have ready
 - Enough wipes for the change (including wiping the bottom and hands after removing the soiled diaper/clothing) removed from the box.
 - A clean diaper or underwear, plastic bag for soiled clothes, and clean clothes if soiled clothing is changed.
 - Non-porous gloves if they will be used, and a dab of diaper cream on a disposable piece of paper or tissue if cream is being used.

II. Follow diapering/changing procedure

- Prepare for changing as indicated above.
- Place child on changing surface. Remove clothing to access diaper or soiled clothing. If soiled, place clothes into plastic bag.
- Remove soiled diaper and place into lined, hands-free trash container. Clothing must be sealed in a plastic bag without being rinsed, and sent home.
- Use wipes to clean child’s bottom from front to back.
- Use a wipe to remove soil from adult’s hands.
- Use another wipe to remove soil from child’s hands.
- Throw soiled wipes into lined, hands-free trash container.
- Put on clean diaper or underwear and redress child.
- Move child to sink and wash hands following the “handwashing procedure.”
- Spray diapering surface with a soap-water solution to clean. Wipe dry with disposable towel.
- Spray diapering surface with bleach-water solution and wait at least 2 minutes before wiping with disposable towel or allow to air dry. The surface cannot be sprayed and immediately wiped.
- Wash own hands using the “handwashing procedure,” without contaminating any other surface.

III. Take additional precautions for diapering/toileting

- Toilets must be flushed after each use.
- Floors/other surfaces that become contaminated must be sanitized.
- Toys that are played with or objects that are touched during diapering/toileting must be put aside to be sanitized.
- Other surfaces should not be contaminated during changing or toileting unless properly sanitized. For example, if child is changed on a pad on the floor, soiled diaper should not be placed on floor unless floor is sanitized afterwards.
- Note: Provider’s hands must be washed after the changing procedure is completed, after diaper checks, and after helping children with toileting. Children’s hands must be washed after diapering and toileting.

If the same sink is used by either children or adults for both diapering/toileting and food-related routines (including toothbrushing) or for other purposes (to wash toys/other classroom equipment; after wiping nose), it must be sanitized by spraying sink and faucets with a bleach solution after diapering/toileting use. As an exception to this rule, in order to avoid requiring children to wash hands in quick succession between toileting and being fed, the following applies: if children use toilet, wash hands and then immediately sit down for meal/snack, contamination of children’s hands at toileting sink must be minimized by having children/adults turn off faucet with paper towel.

Use the chart on the scoresheet to track maintenance of sanitary conditions of diapering/toileting. Any other major problems related to toileting that results in substantial contamination result in a score of “No”

for this indicator. For example, floor contaminated around toilet without being cleaned and sanitized, toilets flushed less than half of the time after use.

An alternative EPA approved “disinfectant” (not sanitizer) may be used in place of the usual bleach and water solution. Check the label of the original container and look for the designation as an EPA disinfectant. Be sure all instructions for use are followed. If not do not give credit for sanitizing the surface. Safety issues regarding the use of the alternative disinfectant , such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Montana Note

Basic sanitary conditions include proper diapering procedures as outlined in the Diaper Change Procedure would adequately minimize the spread of germs and replaces the procedure outlined in the scale. When cleaning or sanitizing surfaces, a disposable towel or fresh cloth must be used for each part of the process. If the same sink is used for all hand washing, it must be properly sanitized following toileting/diapering hand washing routines before it is used for any other purpose. Proper sanitizing includes spraying the sink bowl, rim, and faucets with an appropriate sanitizing agent. If the facility permits sinks to be designated for specific purposes, then this should be done (for example, sinks near toilets should be used for hand washing following toileting/diapering, while sinks in the food prep area are used for food-related and other purposes). The intent is to cut down on fecal-oral contamination (intestinal germs on the hands).

When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is nonporous, and can be cleaned and sanitized. In addition the surface must be long and wide enough to accommodate the child’s whole body from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas. When children are changed standing up while wearing a pull-up or diaper the same rules apply.

An alternative EPA approved “sanitizer” cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

Montana Note:

Reusable diapers such as cloth diapers must be placed in a separate covered container with waterproof liner when soiled. The container must be emptied (laundered, given to parent, or other disposal) daily and cleaned and disinfected daily.

Indicator 3.2:

“Usually” means that procedures are carried out 75% of the time during the observation, and no major problem is observed.

Montana Note

Diapers/pull-ups should be visually checked approximately every 2 hours.

Indicator 3.3:

Handwashing for infants, toddlers, older children, and provider requires that hands be washed with liquid soap and warm running water for at least 10 seconds.

- Thorough handwashing of child’s hands with liquid soap and warm running water is required after each diapering/toileting is completed. Using wipes or antiseptic waterless washes cannot be substituted for handwashing. To avoid injury of a child in very unusual circumstances (e.g., a new-born baby with no head control, a very heavy baby with little body control), use of a disposable wipe is an acceptable substitute.

- Thorough adult handwashing with warm running water and soap is required after each diaper check, each diaper change, changing soiled clothing, helping child with toileting, and as the final step after the diapering surface has been sanitized. This must be done before any other surfaces in the home are touched. Handwashing after diapering is usually completed after spraying the diapering surface with a sanitizing solution. If the surface is allowed to dry for 2 or more minutes and then wiped dry, a second washing of hands is not required.

“Usually” means that procedures are carried out 75% of the time during the observation, and no major problem is observed.

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

Montana Note

Since new research has shown that waterless washes are an inadequate sanitary measure, proper hand washing with soap and running water is required following diapering or toileting.

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

Indicator 5.1:

The purpose of maintaining sanitary conditions is to prevent the spread of germs in the urine or stool to the provider or child’s hands, the diapering surface, containers of supplies, cabinet doors, or any other surface the children and provider might touch. Wearing of gloves for diaper changing is optional, but helpful. A fresh solution of bleach water should be made up daily, 1 tablespoon of household bleach to 1 quart of water (or ¼ cup bleach to 1 gallon of water), or an EPA-registered sanitizer should be used according to the manufacturer’s instructions.

The following measures are essential to cut down on the spread of gastro-intestinal illness and should be considered when scoring this item. The provider should:

I. Prepare for diapering/changing soiled clothing

- To minimize contamination outside of the changing area
- One diaper-changing area should be selected and used consistently.
- The diaper changing area should be physically separated from the food preparation and serving areas, including separate sinks. If the same sink must be used for more than diapering/toileting, faucet handles and sink should be sanitized with a bleach and water solution after diapering/ toileting use.
- The diapering surface must be non-porous so it can be sanitized after each diaper change with a bleach/water solution (i.e., no cloth quilted pads or fabric safety straps, no containers stored on the diapering surface).
- If paper is used to cover the changing surface, it should be long enough to cover from the child’s shoulders to heels (in case it becomes soiled and must be folded over to give a clean surface during the change).
- To prepare for a change before bringing the child to area, have ready

- Enough wipes for the change (including wiping the bottom and hands after removing the soiled diaper/clothing) removed from the box.
- A clean diaper or underwear, plastic bag for soiled clothes, and clean clothes if soiled clothing is changed.
- Non-porous gloves if they will be used, and a dab of diaper cream on a disposable piece of paper or tissue if cream is being used.

II. Follow diapering/changing procedure

- Prepare for changing as indicated above.
- Place child on changing surface. Remove clothing to access diaper or soiled clothing. If soiled, place clothes into plastic bag.
- Remove soiled diaper and place into lined, hands-free trash container. Clothing must be sealed in a plastic bag without being rinsed, and sent home.
- Use wipes to clean child's bottom from front to back.
- Use a wipe to remove soil from adult's hands.
- Use another wipe to remove soil from child's hands.
- Throw soiled wipes into lined, hands-free trash container.
- Put on clean diaper or underwear and redress child.
- Move child to sink and wash hands following the "handwashing procedure."
- Spray diapering surface with a soap-water solution to clean. Wipe dry with disposable towel.
- Spray diapering surface with bleach-water solution and wait at least 2 minutes before wiping with disposable towel or allow to air dry. The surface cannot be sprayed and immediately wiped.
- Wash own hands using the "handwashing procedure," without contaminating any other surface.

III. Take additional precautions for diapering/toileting

- Toilets must be flushed after each use.
- Floors/other surfaces that become contaminated must be sanitized.
- Toys that are played with or objects that are touched during diapering/toileting must be put aside to be sanitized.
- Other surfaces should not be contaminated during changing or toileting unless properly sanitized. For example, if child is changed on a pad on the floor, soiled diaper should not be placed on floor unless floor is sanitized afterwards.
- Note: Provider's hands must be washed after the changing procedure is completed, after diaper checks, and after helping children with toileting. Children's hands must be washed after diapering and toileting.

Use the chart on the scoresheet to track maintenance of sanitary conditions of diapering/toileting. Any other major problems related to toileting that results in substantial contamination result in a score of "No" for this indicator. For example, floor contaminated around toilet without being cleaned and sanitized, toilets flushed less than half of the time after use.

"Usually" means that procedures are carried out 75% of the time during the observation, and no major problem is observed.

An alternative EPA approved "disinfectant" (not sanitizer) may be used in place of the usual bleach and water solution. Check the label of the original container and look for the designation as an EPA disinfectant. Be sure all instructions for use are followed. If not do not give credit for sanitizing the surface. Safety issues regarding the use of the alternative disinfectant, such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Montana Note

Basic sanitary conditions include proper diapering procedures as outlined in the Diaper Change Procedure would adequately minimize the spread of germs and replaces the procedure outlined in the scale. When cleaning or sanitizing surfaces, a disposable towel or fresh cloth must be used for each part of the process. If the same sink is used for all hand washing, it must be properly sanitized following toileting/diapering hand washing routines before it is used for any other purpose. Proper sanitizing

includes spraying the sink bowl, rim, and faucets with an appropriate sanitizing agent. If the facility permits sinks to be designated for specific purposes, then this should be done (for example, sinks near toilets should be used for hand washing following toileting/diapering, while sinks in the food prep area are used for food-related and other purposes). The intent is to cut down on fecal-oral contamination (intestinal germs on the hands).

When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is nonporous, and can be cleaned and sanitized. In addition the surface must be long and wide enough to accommodate the child's whole body from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas. When children are changed standing up while wearing a pull-up or diaper the same rules apply.

An alternative EPA approved "sanitizer" cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

Montana Note:

Reusable diapers such as cloth diapers must be placed in a separate covered container with waterproof liner when soiled. The container must be emptied (laundered, given to parent, or other disposal) daily and cleaned and disinfected daily.

Indicator 7.1:

The purpose of maintaining sanitary conditions is to prevent the spread of germs in the urine or stool to the provider or child's hands, the diapering surface, containers of supplies, cabinet doors, or any other surface the children and provider might touch. Wearing of gloves for diaper changing is optional, but helpful. A fresh solution of bleach water should be made up daily, 1 tablespoon of household bleach to 1 quart of water (or ¼ cup bleach to 1 gallon of water), or an EPA-registered sanitizer should be used according to the manufacturer's instructions.

The following measures are essential to cut down on the spread of gastro-intestinal illness and should be considered when scoring this item. The provider should:

I. Prepare for diapering/changing soiled clothing

- To minimize contamination outside of the changing area
- One diaper-changing area should be selected and used consistently.
- The diaper changing area should be physically separated from the food preparation and serving areas, including separate sinks. If the same sink must be used for more than diapering/toileting, faucet handles and sink should be sanitized with a bleach and water solution after diapering/ toileting use.
- The diapering surface must be non-porous so it can be sanitized after each diaper change with a bleach/water solution (i.e., no cloth quilted pads or fabric safety straps, no containers stored on the diapering surface).
- If paper is used to cover the changing surface, it should be long enough to cover from the child's shoulders to heels (in case it becomes soiled and must be folded over to give a clean surface during the change).
- To prepare for a change before bringing the child to area, have ready
- Enough wipes for the change (including wiping the bottom and hands after removing the soiled diaper/clothing) removed from the box.
- A clean diaper or underwear, plastic bag for soiled clothes, and clean clothes if soiled clothing is changed.
- Non-porous gloves if they will be used, and a dab of diaper cream on a disposable piece of paper or tissue if cream is being used.

II. Follow diapering/changing procedure

- Prepare for changing as indicated above.

- Place child on changing surface. Remove clothing to access diaper or soiled clothing. If soiled, place clothes into plastic bag.
- Remove soiled diaper and place into lined, hands-free trash container. Clothing must be sealed in a plastic bag without being rinsed, and sent home.
- Use wipes to clean child's bottom from front to back.
- Use a wipe to remove soil from adult's hands.
- Use another wipe to remove soil from child's hands.
- Throw soiled wipes into lined, hands-free trash container.
- Put on clean diaper or underwear and redress child.
- Move child to sink and wash hands following the "handwashing procedure."
- Spray diapering surface with a soap-water solution to clean. Wipe dry with disposable towel.
- Spray diapering surface with bleach-water solution and wait at least 2 minutes before wiping with disposable towel or allow to air dry. The surface cannot be sprayed and immediately wiped.
- Wash own hands using the "handwashing procedure," without contaminating any other surface.

III. Take additional precautions for diapering/toileting

- Toilets must be flushed after each use.
- Floors/other surfaces that become contaminated must be sanitized.
- Toys that are played with or objects that are touched during diapering/toileting must be put aside to be sanitized.
- Other surfaces should not be contaminated during changing or toileting unless properly sanitized. For example, if child is changed on a pad on the floor, soiled diaper should not be placed on floor unless floor is sanitized afterwards.
- Note: Provider's hands must be washed after the changing procedure is completed, after diaper checks, and after helping children with toileting. Children's hands must be washed after diapering and toileting.

Use the chart on the scoresheet to track maintenance of sanitary conditions of diapering/toileting. Any other major problems related to toileting that results in substantial contamination result in a score of "No" for this indicator. For example, floor contaminated around toilet without being cleaned and sanitized, toilets flushed less than half of the time after use.

An alternative EPA approved "disinfectant" (not sanitizer) may be used in place of the usual bleach and water solution. Check the label of the original container and look for the designation as an EPA disinfectant. Be sure all instructions for use are followed. If not do not give credit for sanitizing the surface. Safety issues regarding the use of the alternative disinfectant, such as not rinsing the residue if required or not keeping out of the reach of children, should be considered in the supervision-related indicators of this item if applicable, and in the Safety item where applicable.

Montana Note

Basic sanitary conditions include proper diapering procedures as outlined in the Diaper Change Procedure would adequately minimize the spread of germs and replaces the procedure outlined in the scale. When cleaning or sanitizing surfaces, a disposable towel or fresh cloth must be used for each part of the process. If the same sink is used for all hand washing, it must be properly sanitized following toileting/diapering hand washing routines before it is used for any other purpose. Proper sanitizing includes spraying the sink bowl, rim, and faucets with an appropriate sanitizing agent. If the facility permits sinks to be designated for specific purposes, then this should be done (for example, sinks near toilets should be used for hand washing following toileting/diapering, while sinks in the food prep area are used for food-related and other purposes). The intent is to cut down on fecal-oral contamination (intestinal germs on the hands).

When a diapering table is not used, an alternative diapering surface is considered adequate if the surface is nonporous, and can be cleaned and sanitized. In addition the surface must be long and wide enough to accommodate the child's whole body from head to foot. The diapering surface must minimize the chance for contamination of surrounding surfaces. Such a diapering surface is acceptable only if diapering can be completed without contamination of surrounding areas. When children are changed standing up while wearing a pull-up or diaper the same rules apply.

An alternative EPA approved “sanitizer” cannot be used in place of bleach and water solution for the purposes of sanitizing tables, high chairs, or other food related surfaces, unless approval from the local sanitarian has been secured and documentation is on site.

Montana Note:

Reusable diapers such as cloth diapers must be placed in a separate covered container with waterproof liner when soiled. The container must be emptied (laundered, given to parent, or other disposal) daily and cleaned and disinfected daily.

Indicator 7.2:

A diaper changing arrangement that is comfortable for the provider to use prevents back injuries or uncomfortable movements.

11. Health practices

Health practices associated with nap/rest (item 8), meals/snacks (item 9), and diapering/toileting (item 10) are covered in those items. Therefore, these practices should not be considered in scoring this item.

Indicator 1.1:

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

Montana Note

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

Indicator 1.3:

Valid reasons for exclusion include: (1) fever with a behavior change that indicates that a child is unable to participate in the program; (2) a child requires more care than the caregiver can reasonably provide and still care for the other children; (3) a child has a condition, such as diarrhea, that requires exclusion to protect the other children from being exposed to a transmissible infectious disease. Common colds are most transmissible before symptoms appear and during the early watery discharge phase of the illness. Green and yellow nasal mucus are not signs of transmissible infectious disease.

Indicator 1.1, 3.1, 5.1:

Montana Note:

If outdoor sand area is not covered then mark off for exposure to animal feces.

Indicator 3.2:

See definition of handwashing on page 10. This percentage should be calculated separately for the provider and for children. In this item, examples of when handwashing is necessary for provider and children include:

- Upon arrival at the home, when reentering the home after outdoor play
- Before shared water play and after messy, sand, or water play
- After dealing with bodily fluids (Ex. running noses, vomit, blood) or making significant skin contact when open sores exist
- After touching contaminated objects (trashcan lids, the floor) or pets.

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

Montana Note

When combining all categories to determine 75%, priority should be given to hand washing when dealing with bodily fluids (blood and mucous). Consider the impact upon the children. Examples are required.

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

If the same sink is used by either children or adults for both diapering/toileting and food-related routines (including toothbrushing) or for other purposes (to wash toys/other classroom equipment; after wiping nose), it must be sanitized by spraying sink and faucets with a bleach solution after diapering/toileting use.

Indicator 3.4:

Only medications that have been prescribed by a physician for a particular child are to be given by provider. Provider gives medications only from original container with instructions from a health professional. Older school-agers may take their own medication but must be supervised. Score NA if no children are in care who require medications prescribed by a physician.

Over the counter medications, such as pain relief medications, ointments, etc. are included in this indicator, in addition to those available only through prescription from a medical practitioner.

Indicator 5.1:

“Usually” means that there are no major problems with sanitary procedures, only an occasional lapse, such as failing to quickly wipe a child’s nose or disposing of a used tissue improperly.

Indicator 5.2:

See the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used throughout the Scale”.

Montana Note

With regard to the note on handwashing/use of hand sanitizers that has been added to the “Explanation of Terms Used Throughout the Scale,” stating that hand sanitizer can be used unless hands are “visibly soiled.” Visibly soiled hands result from outdoor/indoor play, contact with bodily fluids, messy play, touching pets, arrival into classroom, or anytime hands are otherwise contaminated. See “Examples of categories when proper handwashing is needed,” on page 124 in All About the ECERS-R. Montana does not support the use of hand sanitizer in place of proper handwashing. See also, The 2011 edition of

Caring for Our Children (page 113) “Rationale.” Hand sanitizer has been proven to be effective only after washing properly with soap and water. Hand sanitizer is labeled “keep out of reach of children” due to its high alcohol content and requires careful supervision and child training on proper use in order to be effective. Hand sanitizer is only permitted when running water is unavailable or impractical such as on a picnic or field trip.

Children and adults must wash hands for ten seconds before rinsing. Antibacterial soap cannot be used.

Indicator 5.3:

Children should be dressed so they are neither hot nor cold (e.g., sweatshirts not worn outdoors in hot weather, wet clothes changed on chilly day); children have shade in the play area and/or use sun protection such as sun screen, hats, and sun-protective clothing when they are outside between 10 AM and 2 PM on overcast or sunny days.

Caregivers must have spare clothing for children to use. Sunscreen and sun protection should be provided as needed regardless of time of day. Care should be taken to wash children’s faces and wipe their noses.

Indicator 5.4:

Consider all aspects of how a provider models any issues of health practices that are observed. Do not base score on only one aspect of being a good health model. Consider, for example, whether the provider eats healthful foods, practices good hygiene habits in front of the children, wears appropriate clothing for the weather, washes hands when needed.

Montana Note

If a significant health issue arises mark off at 5.4.

Indicator 7.2:

Score NA for programs open 6 hours or less per day or if only infants are enrolled. If toothpaste is used, a pea-sized amount is put on each child’s brush from some that has been squeezed from the tube onto disposable paper for each child, so that no child’s paste is contaminated with another child’s brush. Water should be provided for rinsing.

Montana Note

Toothbrushes should be allowed to air dry, by leaving them uncovered (out of the danger of contamination) or covered in a way that allows them to breathe.

12. Safety practices

Item 12:

Since cribs with sides that drop down are no longer considered safe for children, consider this issue in both the Nap item and the Safety item.

General Note

If outlet receptacles are tamper resistant they must be labeled TR from the manufacturer in order to be considered tamper-resistant. Otherwise outlet plugs are sufficient.

Indicator 1.1:

Be sure to note all safety problems on score sheet. When determining how serious a hazard is, consider location, characteristics of children, and relative likelihood of a problem. The following lists of hazards are not meant to be complete.

Some indoor safety hazards:

- No safety protection on electrical outlets; electrical cords accessible to very young children
- Strings, cords that might cause strangulation accessible to children
- Heavy objects or furniture child can pull down
- Medicines, cleaning materials, pesticides, aerosols, and substances labeled “keep out of reach of children” not locked away
- Bleach solution used when children can inhale the spray (e.g., while children are sitting at table)
- Walkers that a child can move across the floor or beanbag chairs used for infants
- Water, or any surface accessible to children, too hot (e.g., is too hot for an adult to touch for at least 30 seconds or measures more than 120 degrees F using a meat thermometer)
- Thumbtacks or staples used where very young children can reach

Crib/playpen slats or mesh sides permit entrapment (e.g., slats more than 2 3/8 inches apart; crib sides not locked; a mesh playpen with collapsible sides)

- Tripping hazards such as mats or rugs that have foot-catching edges or that slide
- Unprotected radiator, heater, or fireplace in use
- Open stairwells accessible (including those that have climbable railings or places a child could slip through)
- Small objects that can cause choking accessible to infants/toddlers (e.g., objects less than 1¼ inch diameter and 2½ inches long, or spheres less than 1¼ inches in diameter)
- No 6-inch raised edge as protection from falling off diapering table
- Crib mattress that does not fit snugly (e.g., allows 2 or more fingers to be inserted between it and the crib side)
- Toys hung across crib of a child who can sit up or get to hands and knees and hang him/herself
- Babies put to sleep on stomach or side instead of on their backs
- Provider picks up infants/toddlers by arm or hand, putting child at risk for joint injury
- Cribs that are difficult for adults to raise and lower the side and do not provide at least 20 inches from the top of the mattress to the top of the crib rail
- Styrofoam objects, plastic bags, or latex (rubber) balloons accessible to children
- Possibility of unsupervised access for infants/toddlers to any container of water (e.g., toilets, 5-gallon buckets)
- Guns or ammunition present in space used for child care; or any guns in home not locked away unloaded, with firing pin removed. Ammunition not locked away, separated from gun.

- Since older infants will pull themselves up on anything within reach, all furnishings accessible to them should withstand this without toppling, shaking, or collapsing. If swings and rocking chairs are part of the furnishings accessible to infants, they should be placed so that children are less likely to pull up on them than on more stable furniture. If they are placed so that children frequently use them to pull up, they should be counted as a safety hazard.

- Home has not passed an official fire inspection.

Some outdoor safety hazards:

- Play area not contained by fence or barrier that prevents children from leaving designated safe area

- Unfenced swimming pool; pool accessible without adequate supervision

- Tools not meant for children's use are accessible

- All dangerous substances (e.g., labeled "keep out of reach of children") not locked away

- Sharp or dangerous objects present

- Unsafe walkway or stairs accessible to children

- Children can gain independent access to road or driveways

- Hazardous trash accessible

- Play equipment too high (e.g., more than 1 foot per year of age above fall surface), not well maintained, not stable. Play equipment that poses threat of head entrapment with openings that are between 3½ inches and 9 inches across, or finger entrapment with openings between 3/8 inch and 1 inch. Other dangers include injury from pinch-points, projections, or insufficient cushioned fall zones.

- Children transported in provider's vehicle without appropriate safety precautions (e.g., proper restraints not used, children left in car unsupervised)

- Trampolines used

Indicator 1.1

Montana Note

Lofts and climbing ramps are considered indoor climbing equipment. Scores are based on hazards present such as; height, entrapment issues, fall zones, insufficient cushioning, how it is used, ages of children, and supervision.

Montana Note

For scoring purpose in Montana, we do not consider the measurements listed in the notes for clarification for raised edges on changing tables and choking hazards (follow licensing rule which is "toys and objects with a diameter of less than 1 inch, objects with removable parts that have a diameter of less than 1 inch"). Consider the location of the area and how it is supervised.

The water used by the children should be checked. The temperature should be considered even if the children can't turn the water on themselves as a distracted adult could turn the wrong faucet on.

Spraying bleach water, or other chemicals over the children's heads, such as sanitizing table, is a safety hazard.

Bleach and water solution, used to sanitize surfaces, do not have to be locked, but must be stored out of reach of young children. Safety concerns such as glass, unsteady furniture, sanitizing agents sprayed directly in breathing areas of children, etc. are considered here. Crib slats should measure less than 2 3/8 inches. Discount if bottles or baby food are heated in the microwave and immediately fed to children without first being shaken or stirred to eliminate "hot spots". Bean bag chairs may be used with infants under close supervision. For assessment purposes, the temperature of the water will not be measured.

Indoor space for gross motor play and equipment is not held to the same standards as outside; however, safety as the primary focus should be insured. Consider the placement of equipment as well as the surface under equipment where children might fall. If indoor children's climbing equipment is used, mats or carpet are required to be placed under the equipment if it is over 12 inches in height. This is in reference to equipment specifically for climbing. General home furnishings such as a couch, chair, or bed that children climb on do not require mats or carpet underneath. Temporary padding such as a pillow, cushion, or bean bag placed to protect the child from injury in the event of an accidental fall, are acceptable around furnishings. However, home furnishings should not be used as play climbing equipment and should only be used for its intended purpose.

Beginning December 28, 2012, cribs with manufacturer dates prior to June 29th, 2011 must be replaced. Programs must provide a certificate of compliance to the new crib law from the manufacturer for all cribs in their facility. These will be requested at time of assessment

Indicator 1.2:

Be sure to note all safety problems on score sheet. When determining how serious a hazard is, consider location, characteristics of children, and relative likelihood of a problem. The following lists of hazards are not meant to be complete.

Some indoor safety hazards:

- No safety protection on electrical outlets; electrical cords accessible to very young children
- Strings, cords that might cause strangulation accessible to children
- Heavy objects or furniture child can pull down
- Medicines, cleaning materials, pesticides, aerosols, and substances labeled "keep out of reach of children" not locked away
- Bleach solution used when children can inhale the spray (e.g., while children are sitting at table)
- Walkers that a child can move across the floor or beanbag chairs used for infants
- Water, or any surface accessible to children, too hot (e.g., is too hot for an adult to touch for at least 30 seconds or measures more than 120 degrees F using a meat thermometer)
- Thumbtacks or staples used where very young children can reach

Crib/playpen slats or mesh sides permit entrapment (e.g., slats more than 2 3/8 inches apart; crib sides not locked; a mesh playpen with collapsible sides)

- Tripping hazards such as mats or rugs that have foot-catching edges or that slide
- Unprotected radiator, heater, or fireplace in use
- Open stairwells accessible (including those that have climbable railings or places a child could slip through)
- Small objects that can cause choking accessible to infants/toddlers (e.g., objects less than 1¼ inch diameter and 2½ inches long, or spheres less than 1¾ inches in diameter)
- No 6-inch raised edge as protection from falling off diapering table
- Crib mattress that does not fit snugly (e.g., allows 2 or more fingers to be inserted between it and the crib side)
- Toys hung across crib of a child who can sit up or get to hands and knees and hang him/herself
- Babies put to sleep on stomach or side instead of on their backs
- Provider picks up infants/toddlers by arm or hand, putting child at risk for joint injury
- Cribs that are difficult for adults to raise and lower the side and do not provide at least 20 inches from the top of the mattress to the top of the crib rail
- Styrofoam objects, plastic bags, or latex (rubber) balloons accessible to children
- Possibility of unsupervised access for infants/toddlers to any container of water (e.g., toilets, 5-gallon buckets)
- Guns or ammunition present in space used for child care; or any guns in home not locked away unloaded, with firing pin removed. Ammunition not locked away, separated from gun.
- Since older infants will pull themselves up on anything within reach, all furnishings accessible to them should withstand this without toppling, shaking, or collapsing. If swings and rocking chairs are part of the furnishings accessible to infants, they should be placed so that children are less likely to pull up on them than on more stable furniture. If they are placed so that children frequently use them to pull up, they should be counted as a safety hazard.
- Home has not passed an official fire inspection.

Some outdoor safety hazards:

- Play area not contained by fence or barrier that prevents children from leaving designated safe area
- Unfenced swimming pool; pool accessible without adequate supervision
- Tools not meant for children's use are accessible
- All dangerous substances (e.g., labeled "keep out of reach of children") not locked away
- Sharp or dangerous objects present
- Unsafe walkway or stairs accessible to children

- Children can gain independent access to road or driveways
- Hazardous trash accessible
- Play equipment too high (e.g., more than 1 foot per year of age above fall surface), not well maintained, not stable. Play equipment that poses threat of head entrapment with openings that are between 3½ inches and 9 inches across, or finger entrapment with openings between 3/8 inch and 1 inch. Other dangers include injury from pinch-points, projections, or insufficient cushioned fall zones.
- Children transported in provider's vehicle without appropriate safety precautions (e.g., proper restraints not used, children left in car unsupervised)
- Trampolines used

Montana Note

For scoring purpose in Montana, we do not consider the measurements listed in the notes for clarification for raised edges on changing tables and choking hazards (follow licensing rule which is “toys and objects with a diameter of less than 1 inch, objects with removable parts that have a diameter of less than 1 inch”). Consider the location of the area and how it is supervised.

Indicator 1.3:

Montana Note

Sleeping infants should be checked every 15 minutes by touch.

Indicator 3.1:

Be sure to note all safety problems on score sheet. When determining how serious a hazard is, consider location, characteristics of children, and relative likelihood of a problem. The following lists of hazards are not meant to be complete.

Some indoor safety hazards:

- No safety protection on electrical outlets; electrical cords accessible to very young children
 - Strings, cords that might cause strangulation accessible to children
 - Heavy objects or furniture child can pull down
 - Medicines, cleaning materials, pesticides, aerosols, and substances labeled “keep out of reach of children” not locked away
 - Bleach solution used when children can inhale the spray (e.g., while children are sitting at table)
 - Walkers that a child can move across the floor or beanbag chairs used for infants
 - Water, or any surface accessible to children, too hot (e.g., is too hot for an adult to touch for at least 30 seconds or measures more than 120 degrees F using a meat thermometer)
 - Thumbtacks or staples used where very young children can reach
- Crib/playpen slats or mesh sides permit entrapment (e.g., slats more than 2 3/8 inches apart; crib sides not locked; a mesh playpen with collapsible sides)
- Tripping hazards such as mats or rugs that have foot-catching edges or that slide

- Unprotected radiator, heater, or fireplace in use
- Open stairwells accessible (including those that have climbable railings or places a child could slip through)
- Small objects that can cause choking accessible to infants/toddlers (e.g., objects less than 1¼ inch diameter and 2½ inches long, or spheres less than 1¾ inches in diameter)
- No 6-inch raised edge as protection from falling off diapering table
- Crib mattress that does not fit snugly (e.g., allows 2 or more fingers to be inserted between it and the crib side)
- Toys hung across crib of a child who can sit up or get to hands and knees and hang him/herself
- Babies put to sleep on stomach or side instead of on their backs
- Provider picks up infants/toddlers by arm or hand, putting child at risk for joint injury
- Cribs that are difficult for adults to raise and lower the side and do not provide at least 20 inches from the top of the mattress to the top of the crib rail
- Styrofoam objects, plastic bags, or latex (rubber) balloons accessible to children
- Possibility of unsupervised access for infants/toddlers to any container of water (e.g., toilets, 5-gallon buckets)
- Guns or ammunition present in space used for child care; or any guns in home not locked away unloaded, with firing pin removed. Ammunition not locked away, separated from gun.
- Since older infants will pull themselves up on anything within reach, all furnishings accessible to them should withstand this without toppling, shaking, or collapsing. If swings and rocking chairs are part of the furnishings accessible to infants, they should be placed so that children are less likely to pull up on them than on more stable furniture. If they are placed so that children frequently use them to pull up, they should be counted as a safety hazard.

•Home has not passed an official fire inspection.

Some outdoor safety hazards:

- Play area not contained by fence or barrier that prevents children from leaving designated safe area
- Unfenced swimming pool; pool accessible without adequate supervision
- Tools not meant for children's use are accessible
- All dangerous substances (e.g., labeled "keep out of reach of children") not locked away
- Sharp or dangerous objects present
- Unsafe walkway or stairs accessible to children
- Children can gain independent access to road or driveways

- Hazardous trash accessible

- Play equipment too high (e.g., more than 1 foot per year of age above fall surface), not well maintained, not stable. Play equipment that poses threat of head entrapment with openings that are between 3½ inches and 9 inches across, or finger entrapment with openings between 3/8 inch and 1 inch. Other dangers include injury from pinch-points, projections, or insufficient cushioned fall zones.

- Children transported in provider's vehicle without appropriate safety precautions (e.g., proper restraints not used, children left in car unsupervised)

- Trampolines used

Indicator 3.1
Montana Note

Lofts and climbing ramps considered indoor climbing equipment. Scores are based on hazards present such as; height, entrapment issues, fall zones, insufficient cushioning, how it is used, ages of children, and supervision.

Montana Note

For scoring purpose in Montana, we do not consider the measurements listed in the notes for clarification for raised edges on changing tables and choking hazards (follow licensing rule which is "toys and objects with a diameter of less than 1 inch, objects with removable parts that have a diameter of less than 1 inch"). Consider the location of the area and how it is supervised.

The water used by the children should be checked. The temperature should be considered even if the children can't turn the water on themselves as a distracted adult could turn the wrong faucet on.

Spraying bleach water, or other chemicals over the children's heads, such as sanitizing table, is a safety hazard.

Bleach and water solution, used to sanitize surfaces, do not have to be locked, but must be stored out of reach of young children. Safety concerns such as glass, unsteady furniture, sanitizing agents sprayed directly in breathing areas of children, etc. are considered here. Crib slats should measure less than 2 3/8 inches. Discount if bottles or baby food are heated in the microwave and immediately fed to children without first being shaken or stirred to eliminate "hot spots". Bean bag chairs may be used with infants under close supervision. For assessment purposes, the temperature of the water will not be measured.

Indoor space for gross motor play and equipment is not held to the same standards as outside; however, safety as the primary focus should be insured. Consider the placement of equipment as well as the surface under equipment where children might fall. If indoor children's climbing equipment is used, mats or carpet are required to be placed under the equipment if it is over 12 inches in height. This is in reference to equipment specifically for climbing. General home furnishings such as a couch, chair, or bed that children climb on do not require mats or carpet underneath. Temporary padding such as a pillow, cushion, or bean bag placed to protect the child from injury in the event of an accidental fall, are acceptable around furnishings. However, home furnishings should not be used as play climbing equipment and should only be used for its intended purpose.

Indicator 3.2:
Montana Note

Sleeping infants should be checked every 15 minutes by touch.

Indicator 7.1

To give credit, observe at least once

Indicator 7.2

To give credit, observe at least once

13. Helping children understand language

Indicator 3.1

To score “Yes” there can be no child obviously ignored with little or no talking from the provider at all. Some children may receive less verbal interaction, but all must get some.

Indicator 5.1

Although the provider may talk more to one child than another, to give credit there can be no obvious ignoring of any child.

If no play time is observed, score this indicator “No.” See definition of “play” in Explanation of Terms Used Throughout the Scale.

Indicator 5.4

In determining whether the language is descriptive, ask yourself if you could tell what the provider is talking about to children just by listening and not looking. Exact, descriptive words are used in “James, bring the red truck to me” rather than “Bring that to me.”

“Descriptive words for objects and actions” requires that the specific words are usually used rather than the less specific words such as “it” “this”, “that”, him,” “her, etc.” In other words, the nouns and verbs should be used rather than the pronouns. The words that describe the characteristics of objects and actions (adjectives and adverbs) are not required in 5.4, but they should be heard frequently during the observation to give credit for 7.1

Indicator 7.1

In determining whether the language is descriptive, ask yourself if you could tell what the provider is talking about to children just by listening and not looking. Exact, descriptive words are used in “James, bring the red truck to me” rather than “Bring that to me.”

“Descriptive words for objects and actions” requires that the specific words are usually used rather than the less specific words such as “it” “this”, “that”, him,” “her, etc.” In other words, the nouns and verbs should be used rather than the pronouns. The words that describe the characteristics of objects and actions (adjectives and adverbs) are not required in 5.4, but they should be heard frequently during the observation to give credit for 7.1

14. Helping children use language

Indicator 3.1

“Moderate amount” requires a positive response by the provider at least half of the time children attempt to communicate, no negative responses to children, and little or no ignoring of children’s attempts to communicate.

To score “Yes” there can be no child obviously ignored with little or no positive response from the provider at all. Some children may receive less positive response, but all must get some.

Indicator 3.2

At least half the time throughout the observation, the provider must be observed attempting to correctly interpret what children try to communicate

Indicator 5.3

Score NA if only one child is present during the observation. To give credit, 2 examples must be observed. Provider can “encourage” communication among children by modeling conversation, by setting up activities that require communication such as games for 2 children, by having a relaxed social atmosphere, and by helping children communicate their thoughts and intentions to one another.

Indicator 5.4

Although turn taking in conversations (listening and responding) is always required, the roles of provider and child change as the child becomes more competent in communication. For example, a conversation with a baby or toddler is usually shorter and requires more input from the provider. As children become more verbal, the balance between listening and talking should become more equal, because the provider is encouraging children to use language.

Indicator 7.1

Score NA when all children present during the observation are non-verbal.

Indicator 7.4

NA is permitted if only infants and toddlers are enrolled. A score of “Yes” can be given if there is evidence in observed interaction or display of linking written with spoken language, while preschool and school-age children are present in the family child care home. Credit is not given if only the child’s name or date of work is recorded.

15. Using books**Indicator 1.1:**

Age groups include infant/toddler, preschool/kindergarten, and school-age. Examples of appropriate children’s books: infant/toddler—sturdy vinyl, cloth, or hard-page picture books; preschool/kindergarten—books with easy to understand content and attractive pictures; school-age—longer books, some with chapters, content and difficulty matches abilities of children enrolled. Books may be home-made or commercially produced.

To give credit for much of the day, the numbers of books required in these indicators must be met.

Indicator 1.3:

Score NA if all children enrolled are fluent readers.

Indicator 3.1:

Age groups include infant/toddler, preschool/kindergarten, and school-age. Examples of appropriate children’s books: infant/toddler—sturdy vinyl, cloth, or hard-page picture books; preschool/kindergarten—books with easy to understand content and attractive pictures; school-age—longer books, some with chapters, content and difficulty matches abilities of children enrolled. Books may be home-made or commercially produced.

Count only complete books with covers and all pages to give credit for the indicator. Books that are not appropriate for the children in the age group (e.g., too difficult, too easy, frightening, violent) cannot be counted as any of the required books.

To give credit for much of the day, the numbers of books required in these indicators must be met.

Indicator 3.2:

“Good repair” means that the book has an intact cover, and the pages are not torn, scribbled on, or missing. Minor problems (small tears, slight scribble, chew marks) that do not interfere with the use of the books are acceptable. “Almost all” means no more than 3 books may be in poor repair.

Montana Note

For scoring purposes in Montana, when determining if almost all of the books are in good repair consider the total number of books.

Indicator 3.3:

Score NA if all children enrolled are fluent readers.

Montana Note

If credit is not given at 3.3 then credit cannot be given at 3.4.

Indicator 3.4:**Montana Note**

If children are required to participate, but they quickly become engaged in the activity, obviously enjoying it, then score "Yes." Score "No" only if the children are not engaged or enjoying the activity and there is no alternative of leaving and doing something else.

Montana Note

If credit was not given at 3.3, then do not give credit at 3.4.

Indicator 5.1:

Age groups include infant/toddler, preschool/kindergarten, and school-age. Examples of appropriate children's books: infant/toddler—sturdy vinyl, cloth, or hard-page picture books; preschool/kindergarten—books with easy to understand content and attractive pictures; school-age—longer books, some with chapters, content and difficulty matches abilities of children enrolled. Books may be home-made or commercially produced.

To give credit, none of the books accessible to kindergarten age or younger may be violent or frightening.

To give credit for much of the day, the numbers of books required in these indicators must be met.

Indicator 5.2:

A wide selection includes books about people of varying races, ages, and abilities; animals; familiar experiences and includes both fiction and factual information. A wide selection is required for each age group. Some books may be suitable for more than one age group.

Indicator 5.3:

Score NA if all children enrolled are fluent readers.

At least 1 instance must be observed to give credit for this indicator.

Indicator 5.4:

This indicator refers to book times with the provider and any child, and must be observed to give credit.

Indicator 7.1:**Montana Note**

Since young children cannot read, the book area should be designed for children to view books by seeing the fronts of the books. If only the spines of the books are showing credit cannot be given. To give credit for this indicator, you must observe that 75% of the required number of books organized with the fronts of the books visible.

Indicator 7.2:

At least 2 instances must be observed to give credit. For example, reading to a small group or an individual, pointing out pictures in book for baby, using book to help school-ager with homework.

Indicator 7.3:

Must be observed with at least one age group to give credit.

16. Fine Motor

Indicator 1.1:

Appropriate fine motor materials are safe, challenging but not frustrating, and may include household items.

Examples are:

- Infant: rattles, grasping toys, busy boxes, nested cups, containers to fill and dump, textured toys, cradle gyms, household items such as graduated measuring cups, pots with lids.
- Toddler: shape sorting games, large stringing beads, big pegs with peg boards, simple puzzles, pop beads, stacking rings, nesting toys, medium or large interlocking blocks, crayons.
- Preschool–K: interlocking building toys with pieces of any size; manipulatives such as stringing beads, lacing cards, pegs with peg boards, links and gears, small table blocks; art materials such as crayons and scissors; and puzzles.
- School-Age: appropriately challenging materials in the types listed above for Preschool–K: building toys such as Lincoln Logs, small interlocking block building sets; manipulatives such as pick-up sticks, jacks, marbles, small computer games, art and craft materials such as markers, watercolors, jewelry making, weaving, sewing; and puzzles which are more complex (with many and/or small pieces).

Indicator 3.1:

Appropriate fine motor materials are safe, challenging but not frustrating, and may include household items.

Examples are:

- Infant: rattles, grasping toys, busy boxes, nested cups, containers to fill and dump, textured toys, cradle gyms, household items such as graduated measuring cups, pots with lids.
- Toddler: shape sorting games, large stringing beads, big pegs with peg boards, simple puzzles, pop beads, stacking rings, nesting toys, medium or large interlocking blocks, crayons.
- Preschool–K: interlocking building toys with pieces of any size; manipulatives such as stringing beads, lacing cards, pegs with peg boards, links and gears, small table blocks; art materials such as crayons and scissors; and puzzles.
- School-Age: appropriately challenging materials in the types listed above for Preschool–K: building toys such as Lincoln Logs, small interlocking block building sets; manipulatives such as pick-up sticks, jacks, marbles, small computer games, art and craft materials such as markers, watercolors, jewelry making, weaving, sewing; and puzzles which are more complex (with many and/or small pieces).

“Some” for infants and toddlers requires at least 5 different appropriate materials. For preschool and school-age children, “some” means at least 2 different materials from each of the 4 types of materials for each age group enrolled.

When deciding how many fine motor toys to count as accessible to the children, consider the developmental level of all the children in the classroom, and whether each toy presented is complete enough to be used to add to the children’s fine motor development. The developmental expectations for how children will be able to use specific toys will also have an effect on scoring. For example, for the youngest infants who are limited to grasping or batting at things, individual objects (rattles, small soft animals, etc.) can each count as one example. However, as an exception to this rule, individual pieces belonging to a set of objects that make up one toy can only count as one example, even though the individual parts might be what a child uses. Thus, all the individual rings of a stacking ring toy or links from a set of linking toys will count as only one example, even if the various rings are included in a bin of grasping toys for infants.

When determining the number of pieces required for a functional set (stacking rings, links, interlocking blocks, pop beads, peg boards with pegs), developmental expectations for productive use must also be considered. Obviously, any puzzle must have all its pieces to be a functional set because there is one right way to complete the puzzle and all pieces are needed. However, even for the more open-ended

materials such as those listed above, developmental expectations must be considered in determining what a functional set must include. For example, for a 9-12 month old to use pop beads, only three or four beads would be required as the minimum number of beads in a set. However, to count as a set for older children more pop beads would be required because older children are more likely to connect larger numbers of beads.

Indicator 5.1:

Appropriate fine motor materials are safe, challenging but not frustrating, and may include household items.

Examples are:

- Infant: rattles, grasping toys, busy boxes, nested cups, containers to fill and dump, textured toys, cradle gyms, household items such as graduated measuring cups, pots with lids.
- Toddler: shape sorting games, large stringing beads, big pegs with peg boards, simple puzzles, pop beads, stacking rings, nesting toys, medium or large interlocking blocks, crayons.
- Preschool–K: interlocking building toys with pieces of any size; manipulatives such as stringing beads, lacing cards, pegs with peg boards, links and gears, small table blocks; art materials such as crayons and scissors; and puzzles.
- School-Age: appropriately challenging materials in the types listed above for Preschool–K: building toys such as Lincoln Logs, small interlocking block building sets; manipulatives such as pick-up sticks, jacks, marbles, small computer games, art and craft materials such as markers, watercolors, jewelry making, weaving, sewing; and puzzles which are more complex (with many and/or small pieces).

“Many and varied” for infants and toddlers means at least 10 different appropriate materials. For preschool and school-age children, “many and varied” means at least 3 different appropriate materials from each of the 4 types. Some materials may be appropriate for more than one age group.

Because the intent of this indicator is to give children many fine motor toys and within the many toys, a variety of experiences, a set of materials (such as interlocking blocks or links) that has been divided into smaller individual sets with fewer pieces, each in its own container, can count as no more than two sets, even though the one large set might have been divided into more than two sets. Each smaller set must function in keeping with the purpose of the toy and be suited to the developmental abilities of the children in the group.

When deciding how many fine motor toys to count as accessible to the children, consider the developmental level of all the children in the classroom, and whether each toy presented is complete enough to be used to add to the children’s fine motor development, The developmental expectations for how children will be able to use specific toys will also have an effect on scoring. For example, for the youngest infants who are limited to grasping or batting at things, individual objects (rattles, small soft animals, etc.) can each count as one example. However, as an exception to this rule, individual pieces belonging to a set of objects that make up one toy can only count as one example, even though the individual parts might be what a child uses. Thus, all the individual rings of a stacking ring toy or links from a set of linking toys will count as only one example, even if the various rings are included in a bin of grasping toys for infants.

When determining the number of pieces required for a functional set (stacking rings, links, interlocking blocks, pop beads, peg boards with pegs), developmental expectations for productive use must also be considered. Obviously, any puzzle must have all its pieces to be a functional set because there is one right way to complete the puzzle and all pieces are needed. However, even for the more open-ended materials such as those listed above, developmental expectations must be considered in determining what a functional set must include. For example, for a 9-12 month old to use pop beads, only three or four beads would be required as the minimum number of beads in a set. However, to count as a set for older children more pop beads would be required because older children are more likely to connect larger numbers of beads.

Many fine motor materials do not have to be accessible all at the same time to meet the requirement for much of the day. During any short period when all are not accessible, at least half of the required number must be accessible for infants/toddlers, and half of the required number, (with at least one material of each of the four types), must be accessible for preschoolers and older children.

Indicator 5.3:

To give credit at least two instances must be observed.

17. Art

Mark this item NA if all children in group are younger than 12 months of age. However, if art activities are used with infants, the possible health, safety, and supervision problems should be considered in the appropriate items.

Dot markers (also called Bingo markers, or dot paints) are counted in the “tools” category of art materials. They do not allow the control provided by the materials in the drawing category, nor do they fit the paint category, in terms of how they can be used.

Art materials such as crayons, chalk or play dough may have the warning "not recommended for use by children under 3 years of age." Unless such materials are labeled "Toxic" they may be used with younger children but only under the most stringent supervision (the teacher is within an arm's reach of the child and watches closely). The materials should not be freely accessible to the children. Materials that are less likely to cause safety problems, such as thicker crayons rather than thin ones should be used and the caps to markers should not be accessible. Art materials that smell like food should not be used. Art materials should be offered to children 12 months and older, but if a child only mouths the material, and shows no interest in using it for art, he should be redirected to a more appropriate activity.

Montana Note

Toxic substances or materials labeled “Keep out of Reach of Children; such as shaving cream cannot be offered to the children for use in Art activities.

Indicator 1.1:

Types of art materials include: drawing materials such as paper with crayons, nontoxic markers, pencils; paints; three-dimensional materials such as play dough, clay, wood gluing, or carpentry; collage materials; tools such as safe scissors, staplers, hole punches, tape dispensers. Only the simplest materials should be used with toddlers and twos. Other materials should be added as children gain skills and ability to use materials appropriately. Coloring books and photocopied pages are not given credit for art, but are considered in Item 16. Fine motor. Edible materials (such as chocolate pudding, dried pasta, popcorn, and so forth) cannot be counted as art materials because they give a misleading message about the proper use of food. The possible health (sanitary issues), safety (e.g., choking hazards), and supervision consequences of using food in art should be considered in Items 11, 12, and/or 27.

If any appropriate art materials are provided for use by any child (for an hour daily), in any age group, score 1.1 “No.”

Crayons or other drawing materials (e.g., pencils, markers, chalk) are considered art materials in this item if used with plain paper or another plain surface, such as a chalk board. They are not counted as art materials when used with coloring book pages or other pre-determined projects. When used with coloring books, etc, they are considered in item 16. Fine motor but not to meet the requirements for the Art item.

In addition to the recognizable edible materials in the existing note, materials that emit food related odors are also not given credit for being art materials (including scented play dough, felt pens and crayons, etc.) because they give children confusing messages.

Montana Note

Any appropriate art material can be credited for this indicator. Score this item “Yes” only if there are no art materials provided.

Indicator 1.2:

All art materials must be non-toxic and safe.

Family child care homes often have mixed age groups, up through school-aged children. Consider the developmental appropriateness of the materials, and the way in which they are used, for the age group using them. Be aware that infants and toddlers should have no access to any materials that pose dangers for them, while older children use the materials. Glitter is considered a safe, appropriate material for preschool- and school-aged children but not for infants/toddlers. Styrofoam packing pieces are not appropriate for use by younger children under 3 years of age, while they are appropriate for older children.

Indicator 3.1:

Types of art materials include: drawing materials such as paper with crayons, nontoxic markers, pencils; paints; three-dimensional materials such as play dough, clay, wood gluing, or carpentry; collage materials; tools such as safe scissors, staplers, hole punches, tape dispensers. Only the simplest materials should be used with toddlers and twos. Other materials should be added as children gain skills and ability to use materials appropriately. Coloring books and photocopied pages are not given credit for art, but are considered in Item 16. Fine motor. Edible materials (such as chocolate pudding, dried pasta, popcorn, and so forth) cannot be counted as art materials because they give a misleading message about the proper use of food. The possible health (sanitary issues), safety (e.g., choking hazards), and supervision consequences of using food in art should be considered in Items 11, 12, and/or 27.

In groups with children under 3 years of age or with some developmental delays, the provider may bring out materials to make them accessible daily with close supervision for as long as there is interest. Some adaptations may be needed to make art materials accessible and usable for children with disabilities. To give credit, the materials must be accessible daily for at least 1 hour in an 8 hour program, prorated appropriately for shorter programs (see chart in “Explanation of Terms Used Throughout the Scale” on page 9).

Crayons or other drawing materials (e.g., pencils, markers, chalk) are considered art materials in this item if used with plain paper or another plain surface, such as a chalk board. They are not counted as art materials when used with coloring book pages or other pre-determined projects. When used with coloring books, etc, they are considered in item 16. Fine motor but not to meet the requirements for the Art item.

In addition to the recognizable edible materials in the existing note, materials that emit food related odors are also not given credit for being art materials (including scented play dough, felt pens and crayons, etc.) because they give children confusing messages.

Indicator 3.2:

All art materials must be non-toxic and safe.

Family child care homes often have mixed age groups, up through school-aged children. Consider the developmental appropriateness of the materials, and the way in which they are used, for the age group using them. Be aware that infants and toddlers should have no access to any materials that pose dangers for them, while older children use the materials. Glitter is considered a safe, appropriate material for preschool- and school-aged children but not for infants/toddlers. Styrofoam packing pieces are not appropriate for use by younger children under 3 years of age, while they are appropriate for older children.

Indicator 3.3:

If children are required to participate, but they quickly become engaged in the activity, obviously enjoying it, then score “Yes.” Score “No” only if the children are not engaged or enjoying the activity and there is no alternative of leaving and doing something else.

Indicator 3.4:

“Individual expression” means that each child may select the subject matter and/or art medium, and carry out the work in his or her own way. A number of paintings, each of which is different because the children have not been asked to copy a model, is considered “individual expression.”

Indicator 5.1:

Types of art materials include: drawing materials such as paper with crayons, nontoxic markers, pencils; paints; three-dimensional materials such as play dough, clay, wood gluing, or carpentry; collage materials; tools such as safe scissors, staplers, hole punches, tape dispensers. Only the simplest materials should be used with toddlers and twos. Other materials should be added as children gain skills and ability to use materials appropriately. Coloring books and photocopied pages are not given credit for art, but are considered in Item 16. Fine motor. Edible materials (such as chocolate pudding, dried pasta, popcorn, and so forth) cannot be counted as art materials because they give a misleading message about the proper use of food. The possible health (sanitary issues), safety (e.g., choking hazards), and supervision consequences of using food in art should be considered in Items 11, 12, and/or 27.

Crayons or other drawing materials (e.g., pencils, markers, chalk) are considered art materials in this item if used with plain paper or another plain surface, such as a chalk board. They are not counted as art materials when used with coloring book pages or other pre-determined projects. When used with coloring books, etc, they are considered in item 16. Fine motor but not to meet the requirements for the Art item.

In addition to the recognizable edible materials in the existing note, materials that emit food related odors are also not given credit for being art materials (including scented play dough, felt pens and crayons, etc.) because they give children confusing messages.

Indicator 5.2:

Types of art materials include: drawing materials such as paper with crayons, nontoxic markers, pencils; paints; three-dimensional materials such as play dough, clay, wood gluing, or carpentry; collage materials; tools such as safe scissors, staplers, hole punches, tape dispensers. Only the simplest materials should be used with toddlers and twos. Other materials should be added as children gain skills and ability to use materials appropriately. Coloring books and photocopied pages are not given credit for art, but are considered in Item 16. Fine motor. Edible materials (such as chocolate pudding, dried pasta, popcorn, and so forth) cannot be counted as art materials because they give a misleading message about the proper use of food. The possible health (sanitary issues), safety (e.g., choking hazards), and supervision consequences of using food in art should be considered in Items 11, 12, and/or 27.

Montana Note

These materials are required to be accessible throughout the day.

Indicator 5.3:

Individual expression encouraged means that 85% of the time when art materials are used, children can do “free art” and are not required to follow an example. Observe to see whether children have access to the art materials and if they actually use them in their own creative way. You may also look at the artwork displayed in the home. If you see many provider-directed projects displayed, and little individual work being done by the children during the observation, do not give credit for this indicator. If you are not sure, ask the provider how often projects are done that require following an example. If such projects are used no more than once or twice a week, and you observe many instances of children using art materials in their own creative way, you may give credit for 5.3.

18. Music and movement**Indicator 1.1:**

If any child of any age experiences music/movement, score 1.1 “No.”

Indicator 1.3:

Montana Note

Some traditional children's songs such as Three Blind Mice contain frightening or offensive lyrics. If songs with such lyrics are used with the children, score this indicator "Yes." Music with religious content is considered appropriate as long as it does not contain frightening, violent, or negative content. Be sure to listen to the lyrics in order to judge the appropriateness.

For assessment purposes, evaluate the severity of the lyrics and the impact on the children.

Indicator 3.1:

"Music materials" are anything that children can use to create or listen to rhythm, tones, or other types of music, including instruments, noise-making toys, or players for recorded music. Some instruments may be suitable for several age groups. Materials may be homemade or commercially produced. Music heard on TV, video, radio, or computer may be counted. Do not give credit for very short musical sound patterns that are part of computer software. For a tape/CD player to be considered accessible to children 4 years and older, children should be able to use tapes/CDs independently, but younger children may require help from provider.

"Some" means at least 2 materials for use with each age group enrolled.

Music played on the radio, CD player, wind-up swing that plays music, etc. that is managed by the provider counts as only 1 music material. There must be at least one other material that children can reach and use to give credit for 3.1.

Montana Note

For Montana scoring purposes, some means at least two materials for each age group enrolled.

Indicator 3.2:**Montana Note**

Songs initiated by the provider, such as a clean-up song, or a prayer sung at meals, count to meet the requirement of this indicator.

Indicator 3.3:

If children are required to participate, but they quickly become engaged in the activity, obviously enjoying it, then score "Yes." Score "No" only if the children are not engaged or enjoying the activity and there is no alternative of leaving and doing something else.

Indicator 5.1:

"Music materials" are anything that children can use to create or listen to rhythm, tones, or other types of music, including instruments, noise-making toys, or players for recorded music. Some instruments may be suitable for several age groups. Materials may be homemade or commercially produced. Music heard on TV, video, radio, or computer may be counted. Do not give credit for very short musical sound patterns that are part of computer software. For a tape/CD player to be considered accessible to children 4 years and older, children should be able to use tapes/CDs independently, but younger children may require help from provider.

"Many" means at least 10 music materials with no fewer than 3 for each age group enrolled.

Music played on the radio, CD player, wind-up swing that plays music, etc. that is managed by the provider counts as only 1 music material. There must be at least one other material that children can reach and use to give credit for 3.1.

Indicator 5.2:

"Some" means at least 2 materials for use with each age group enrolled.

Music played on the radio, CD player, wind-up swing that plays music, etc. that is managed by the provider counts as only 1 music material. There must be at least one other material that children can reach and use to give credit for 3.1.

To give credit for much of the day, the numbers of music materials required in this indicator must be met.

Montana Note

Some appropriate music materials refers to the “many” music materials as defined at 5.1.

Indicator 5.3:

To give credit, this indicator must be observed at least once during the observation.

Indicator 7.2:

If not observed, ask the provider to explain whether this is done, as she answers the question for 1.1, 3.2, 5.4.

19. Blocks

Mark this item NA if all children in care are younger than 12 months or older than 7 years of age.

Montana Note

When determining if very small blocks should be considered under item 16 as fine motor materials or under item 19 as blocks, consider the intent and placement.

There has been some inconsistency about the dimensions of blocks to be considered for this item, with some requiring that the blocks are “at least” 2 inches from the majority of sides, and others requiring “more than” 2 inches. To ensure reliability across assessors, blocks are now interpreted as having to be at least 2 inches for the majority of sides, rather than more than 2 inches.

Note: Interlocking blocks; such as Duplo’s are not considered here. They are considered under Fine Motor.

Indicator 1.1:

Examples of appropriate blocks of various sizes, shapes, colors:

Toddlers: soft vinyl or cloth covered blocks, large cardboard blocks, sensory blocks such as those that make noises, and any lightweight blocks from the preschool/kindergarten list (such as small wooden unit blocks).

Preschool/kindergarten: unit blocks (wooden, plastic, or hard foam including shapes such as rectangles, squares, triangles, and cylinders); large hollow blocks (wooden, plastic, or cardboard); homemade blocks (materials such as food boxes and plastic containers). Sensory blocks are not considered appropriate for preschool/kindergarten block play. Note that interlocking blocks (whether large or small) and very small blocks are considered under Item 16. Fine motor, and are not counted here.

If any blocks are accessible for an hour daily, for any child in any age group enrolled, score 1.1 “No.”

Because the intent of this item is to allow children to build sizable block structures, an acceptable set must have enough large blocks to make this possible. Only consider block sets in which the majority of blocks are at least 2 inches in length/width. Consider smaller block sets to meet requirements in item.

Indicator 3.1

Examples of appropriate blocks of various sizes, shapes, colors:

Toddlers: soft vinyl or cloth covered blocks, large cardboard blocks, sensory blocks such as those that make noises, and any lightweight blocks from the preschool/kindergarten list (such as small wooden unit blocks).

Preschool/kindergarten: unit blocks (wooden, plastic, or hard foam including shapes such as rectangles, squares, triangles, and cylinders); large hollow blocks (wooden, plastic, or cardboard); homemade blocks (materials such as food boxes and plastic containers). Sensory blocks are not considered appropriate for preschool/kindergarten block play. Note that interlocking blocks (whether large or small) and very small blocks are considered under Item 16. Fine motor, and are not counted here.

“Some” for toddlers means at least 1 set of 6 blocks of the same type that are stored together; for preschool/early school-age, at least 15 blocks of a specific type that are stored together and can be used by one child to build a modest structure.

Because the intent of this item is to allow children to build sizable block structures, an acceptable set must have enough large blocks to make this possible. Only consider block sets in which the majority of blocks are at least 2 inches in length/width. Consider smaller block sets to meet requirements in item 16. Fine motor. Although the definition of blocks in All About the ITERS-R states that blocks must have smooth sides, alphabet blocks or blocks with minor raised edges on the sides can be accepted as blocks as long as they meet the size requirement, are not interlocking and can easily be stacked.

Since this item is scored NA for groups where all children are under 12 months of age, when mixed groups of children under and over 12 months of age are observed, do not consider the access infants have to the blocks/accessories. Consider only the toddler aged children when scoring.

Indicator 3.2

Accessories include appropriately-sized toys that can be used with blocks to extend block play, such as small vehicles, people, and animals. Containers to fill and dump may be given credit as accessories for toddlers. Accessories must be placed near the blocks so that children know they are meant to be used with the blocks.

At least 5 examples of accessories are required, and not all of the same type (people, vehicles, animals).

Since this item is scored NA for groups where all children are under 12 months of age, when mixed groups of children under and over 12 months of age are observed, do not consider the access infants have to the blocks/accessories. Consider only the toddler aged children when scoring.

Montana Note

"Some" for this item is defined as at least five accessories of two different types.

Indicator 3.3

Any clear space on the floor, a table, etc. meets this requirement.

Since this item is scored NA for groups where all children are under 12 months of age, when mixed groups of children under and over 12 months of age are observed, do not consider the access infants have to the blocks/accessories. Consider only the toddler aged children when scoring.

Indicator 5.1

Examples of appropriate blocks of various sizes, shapes, colors:

Toddlers: soft vinyl or cloth covered blocks, large cardboard blocks, sensory blocks such as those that make noises, and any lightweight blocks from the preschool/kindergarten list (such as small wooden unit blocks).

Preschool/kindergarten: unit blocks (wooden, plastic, or hard foam including shapes such as rectangles, squares, triangles, and cylinders); large hollow blocks (wooden, plastic, or cardboard); homemade blocks (materials such as food boxes and plastic containers). Sensory blocks are not considered appropriate for preschool/kindergarten block play. Note that interlocking blocks (whether large or small) and very small blocks are considered under Item 16. Fine motor, and are not counted here.

“Many” means enough blocks and accessories for each age group to use the materials without undue competition. The actual number needed depends on the age, ability, and number of children enrolled. Toddlers and young twos tend to need fewer blocks than preschool/early school-age children, who can build complex, sizeable structures.

Because the intent of this item is to allow children to build sizable block structures, an acceptable set must have enough large blocks to make this possible. Only consider block sets in which the majority of blocks are at least 2 inches in length/width. Consider smaller block sets to meet requirements in item 16. Fine motor. Although the definition of blocks in All About the ITERS-R states that blocks must have smooth sides, alphabet blocks or blocks with minor raised edges on the sides can be accepted as blocks as long as they meet the size requirement, are not interlocking and can easily be stacked.

To determine whether the requirement for “many” blocks is met, double the number of blocks required for “some” in indicator 3.1. “Many accessories” requires enough for each age group to play without undue competition. Consider ages and abilities of children when determining whether there are many. Many blocks do not have to be accessible all at the same time to meet the requirement for much of the day. During any short period when all are not accessible, at least half of the required number must be accessible.

Since this item is scored NA for groups where all children are under 12 months of age, when mixed groups of children under and over 12 months of age are observed, do not consider the access infants have to the blocks/accessories. Consider only the toddler aged children when scoring.

Indicator 5.2

Accessories include appropriately-sized toys that can be used with blocks to extend block play, such as small vehicles, people, and animals. Containers to fill and dump may be given credit as accessories for toddlers. Accessories must be placed near the blocks so that children know they are meant to be used with the blocks.

Perfection is not expected in the sorting of materials. Give credit if materials are clearly organized. Accessories are not mixed up with blocks.

Indicator 5.3

“Enough space” means that appropriate and satisfying building can take place without interfering with other surrounding activities and without competition for space from children engaged in other play.

The requirement for enough space depends on number of children, ages, what you would expect them to be able to build. Obviously, preschoolers need enough space to build substantial independent

structures, while toddlers, who tend to stack blocks, would need less space. Watch to see if conflict arises due to space limitations.

Indicator 7.1

Examples of appropriate blocks of various sizes, shapes, colors:

Toddlers: soft vinyl or cloth covered blocks, large cardboard blocks, sensory blocks such as those that make noises, and any lightweight blocks from the preschool/kindergarten list (such as small wooden unit blocks).

Preschool/kindergarten: unit blocks (wooden, plastic, or hard foam including shapes such as rectangles, squares, triangles, and cylinders); large hollow blocks (wooden, plastic, or cardboard); homemade blocks (materials such as food boxes and plastic containers). Sensory blocks are not considered appropriate for preschool/kindergarten block play. Note that interlocking blocks (whether large or small) and very small blocks are considered under Item 16. Fine motor, and are not counted here.

Because the intent of this item is to allow children to build sizable block structures, an acceptable set must have enough large blocks to make this possible. Only consider block sets in which the majority of blocks are at least 2 inches in length/width. Consider smaller block sets to meet requirements in item 16. Fine motor. Although the definition of blocks in All About the ITERS-R states that blocks must have smooth sides, alphabet blocks or blocks with minor raised edges on the sides can be accepted as blocks as long as they meet the size requirement, are not interlocking and can easily be stacked.

Since this item is scored NA for groups where all children are under 12 months of age, when mixed groups of children under and over 12 months of age are observed, do not consider the access infants have to the blocks/accessories. Consider only the toddler aged children when scoring.

Indicator 7.2

Montana Note

There should be at least five examples of each type listed in the indicator accessible.

Indicator 7.3

To give credit, this indicator must be observed at least once during the observation.

20. Dramatic play

Dramatic play is pretending or making believe. This type of play occurs when children act out roles themselves and when they manipulate figures such as small toy people in a dollhouse or small figures with interlocking blocks. Thus, activities used to teach children to follow specific sequences to properly complete household chores, such as table washing or silver polishing activities, are not counted to meet the requirements of this item. Children must be free to use the materials in their own way, as part of their own make-believe play, to get credit for this item. Dramatic play for infants and toddlers requires very simple props representing familiar experiences. Preschoolers, kindergartners, and school-agers require a wider range of props that they can use to act out their more complex understanding of the world. School-agers often extend their dramatic play into theatrical performances.

Dramatic play is enhanced by props that encourage a variety of themes including housekeeping (Ex. dolls, child-sized furniture, dress-up, kitchen utensils); different kinds of work (Ex. office, construction, farm, store, fire fighting, transportation); fantasy (Ex. animals, dinosaurs, storybook characters); and leisure (Ex. camping, sports).

Indicator 1.1:

If any dramatic play materials are accessible to any age group for an hour daily, score 1.1 “No.”

Indicator 3.1:

This indicator does not require materials for all age groups.

Indicator 3.2:

Materials listed below for one age group may or may not be appropriate for other age groups. For example, baby dolls are appropriate for children in all of the age groups. However, action figures which often display aggression are only appropriate for older school-agers who are able to distinguish between fantasy and reality (3rd to 6th graders).

- Infants: dolls, soft animals, pots and pans, toy telephones
- Toddlers: dress-up clothes, child-sized house furniture, cooking/eating props, baby dolls and doll furnishings, soft animals, small play buildings with accessories, toy telephones
- Preschoolers/kindergartners: in addition to materials listed above for younger children, dress-up clothes representing traditional male and female roles and props to act out work, leisure, or fantasy themes
- School-agers: preschool/kindergarten materials plus interlocking blocks with figures and other accessories for fantasy constructions (e.g., pirate ship, castle); dolls representing adult figures; action figures; props for theater play

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- Toddlers: dress-up clothes, child-sized house furniture, cooking/eating props, baby dolls and doll furnishings, soft animals, small play buildings with accessories, toy telephones
- Preschoolers/kindergartners: in addition to materials listed above for younger children, dress-up clothes representing traditional male and female roles and props to act out work, leisure, or fantasy themes
- School-agers: preschool/kindergarten materials plus interlocking blocks with figures and other accessories for fantasy constructions (e.g., pirate ship, castle); dolls representing adult figures; action figures; props for theater play

Many materials means that children can play without undue competition and that materials are plentiful enough to encourage complex play for older children. For preschoolers and older children, materials for at least 2 themes are required. Variety of materials means that there are many choices for carrying out dramatic play.

To meet the requirements of “many and varied”, some dress-up clothes, such as hats, dresses, handbags, jackets, or skirts are required when toddlers and/or preschool-aged children are enrolled in the group. For a small group of younger children (toddlers and two year olds), 5 items would be considered “some”, while for a larger group of younger children, or any group of preschoolers, 10 items are required.

Indicator 5.2:

“Materials” refers to the “many and varied” materials required in 5.1.

Many dramatic play materials do not have to be accessible all at the same time to meet the requirement for much of the day. During any short period when all materials are not accessible, materials for at least one theme must be accessible, and the materials should be sufficient to allow children to carry out play in a meaningful way.

Indicator 5.4:

Score NA if only infants or school-aged children are enrolled.

Indicator 7.1:

At least two examples are required to give credit.

The term "provided" is interpreted as "accessible".

Montana Note

To meet the requirements for this indicator, there must be at least two different types of props that represent two different elements of diversity (e.g., clothing, skin tone, food, abilities, eating utensils, and dishes, etc.) accessible for use in dramatic play.

Indicator 7.2:

Materials provided must be complete enough to permit meaningful pretend play (i.e., stroller has a doll; play house has table, chairs, dishes).

The term "provided" is interpreted as "accessible".

Indicator 7.3:

To give credit, this indicator must be observed at least once.

21. Math/number

Examples of math/number materials are small objects used in counting activities, balance scales, rulers, number puzzles, magnetic numbers, number games such as dominoes or number lotto, and geometric shapes such as parquetry blocks, books on counting or shapes, math/number computer software.

Indicator 1.1:

Appropriate math/number materials allow children to use concrete objects to experiment with quantity, size, and shape as they develop the concepts they need for the more abstract tasks required in later school, such as adding, subtracting, and completing paper and pencil math problems. Whether a material or activity is appropriate is based on the abilities and interests of the children.

Examples of appropriate materials include:

- Infants and toddlers: rattles of various shapes, cradle gyms with hanging shapes, numbers and shape board books, simple shape puzzles, shape sorters, toy telephones and cash registers with numbers, nested cups, stacking rings
- Preschoolers: small objects used in counting activities, balance scales, rulers, number puzzles, magnetic numbers, number games such as dominoes or number lotto, and geometric shapes such as parquetry blocks, books on counting or shapes, math/number computer software
- School-agers: rulers, tape measures, number lines, unit rods and cubes, parquetry blocks, geo boards, math card and board games, calculators, math computer software

If any math/number materials are accessible for an hour daily, for any child in any age group enrolled, score 1.1 "No."

Indicator 1.2:

"Primarily taught through rote counting or worksheets" means that such experiences make up the vast majority of children's math/number learning opportunities. Even if rote counting or worksheet use is observed, when scoring this indicator, be sure to consider all math/number experiences throughout the observation.

Indicator 3.1:

Appropriate math/number materials allow children to use concrete objects to experiment with quantity, size, and shape as they develop the concepts they need for the more abstract tasks required in later

school, such as adding, subtracting, and completing paper and pencil math problems. Whether a material or activity is appropriate is based on the abilities and interests of the children.

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- Infants and toddlers: rattles of various shapes, cradle gyms with hanging shapes, numbers and shape board books, simple shape puzzles, shape sorters, toy telephones and cash registers with numbers, nested cups, stacking rings
- Preschoolers: small objects used in counting activities, balance scales, rulers, number puzzles, magnetic numbers, number games such as dominoes or number lotto, and geometric shapes such as parquetry blocks, books on counting or shapes, math/number computer software
- School-agers: rulers, tape measures, number lines, unit rods and cubes, parquetry blocks, geo boards, math card and board games, calculators, math computer software

“Some” means at least 2 different materials related to number and 2 related to shape. One material may be appropriate for more than one age group. Look around the areas used for child care carefully to find math materials because they might not be gathered together. To give credit, materials must be accessible for 1 hour in programs of 8 hours or more, prorated for programs operating fewer hours. See “Explanation of Terms Used Throughout the Scale” on page 9.

Indicator 3.2:

One instance must be observed during 3-hour observation. Do not count instances of math discussed during formal teaching times (e.g., group time, math work time).

Indicator 5.1:

Appropriate math/number materials allow children to use concrete objects to experiment with quantity, size, and shape as they develop the concepts they need for the more abstract tasks required in later school, such as adding, subtracting, and completing paper and pencil math problems. Whether a material or activity is appropriate is based on the abilities and interests of the children.

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- Preschoolers: small objects used in counting activities, balance scales, rulers, number puzzles, magnetic numbers, number games such as dominoes or number lotto, and geometric shapes such as parquetry blocks, books on counting or shapes, math/number computer software
- School-agers: rulers, tape measures, number lines, unit rods and cubes, parquetry blocks, geo boards, math card and board games, calculators, math computer software

“Many” means 5 different materials for each age group. Credit should be given only for materials obviously designed for math learning.

Indicator 5.2:

No credit can be given for 5.2 unless 5.1 is scored “Yes.”

“Materials” refers to the “many and varied” materials required in 5.1.

The many and varied materials credited in 5.1 do not all have to be accessible at the same time to meet the requirement for much of the day. During any short period when all are not accessible, at least half of the required number must be accessible for each age group of children.

Indicator 5.3:

In order to give credit for “well organized and in good condition,” about 75% of the materials that are accessible should meet this standard.

Indicator 5.4:

One instance must be observed during free play, and one must be observed during a routine.

Indicator 7.2:

Score NA if only infant and toddlers are enrolled or if both preschoolers and school-agers attend only part day.

22. Nature/science

Nature/science materials include 4 categories: collections of natural objects (e.g., rocks, insects, seed pods), living things to care for and observe (e.g., house plants, gardens, pets, butterfly garden, ant farm), nature/science books, pictures, games, or toys (e.g., nature matching cards, nature sequence cards), and nature/science tools (e.g., magnets, magnifying glasses, thermometers, prisms; for school-agers, test tubes with eye droppers, rain gauge, microscope).

Montana Note

In Montana, for all pertinent indicators, natural live elements are okay; such as farm and ranch animals if it is part of their regular routine.

Indicator 1.1:

If any nature/science materials are accessible to any age group, for one hour daily, score 1.1 “No.”

Displayed pictures/photographs are considered only if easily seen and reached by the children.

Indicator 1.2:

If any children, in any age group, get to experience the natural world, score 1.2 “No.”

Indicator 3.1:

One example may be appropriate for more than one age group.

Displayed pictures/photographs are considered only if easily seen and reached by the children.

Indicator 3.2:

Displayed pictures/photographs are considered only if easily seen and reached by the children.

Montana Note

If credit cannot be given for 3.1, then credit cannot be given for 3.2.

Indicator 3.3:

The intent of this indicator is that children are given opportunities to interact with nature. This can occur either by taking children outside to see or experience natural things such as trees, grass, and birds, or by providing experiences with nature indoors, such as through living plants, an aquarium, pets, and watching birds at a window feeder.

Indicator 5.1:

One example may be appropriate for more than one age group.

NA permitted when only infants and toddlers enrolled.

Displayed pictures/photographs are considered only if easily seen and reached by the children.

Many nature/science materials do not all have to be accessible at the same time to meet the requirement for much of the day. During any short period when all are not accessible, at least half of the required number (with at least two of the four categories) must be accessible.

Indicator 5.2:

To give credit for this indicator, the outdoor experiences children have must include living plants and/or animals.

Indicator 5.3:

Montana Note

“Some” means that children have daily experience with either living plants or animals located in the room where the children play the majority of the day or in an indoor area that children visit daily. In order to receive credit, living things (plants, animals, etc.) must be easily seen by the children. If these items are stored out of the view of children (on top of a shelf, behind a cabinet, etc.) the teacher must make these accessible by bringing them down to the children’s eye level. There must be clear evidence that this occurs on a daily basis and that the intent is for children to have meaningful experiences with living things.

Indicator 5.4:

To give credit, at least 1 instance must be observed during the observation.

Indicator 7.3:

NA permitted when only infants and toddlers enrolled.

23. Sand and water play

Mark this item NA if all children in care are younger than 18 months of age, and/or over 6 years of age.

Do not score NA if mixed age groups include children under 18 months of age, in addition to older children who are not over 6 years of age.

Sand and water play require action on the part of the provider to supply appropriate materials for such activity. Allowing children to play in puddles or dig in dirt outdoors does not meet the requirements for this item. In addition to sand, other fine-grained materials that can easily be used for digging and pouring, such as bird seed, may be counted. Materials that pose a danger to children under 6 years of age, such as dried beans, small pebbles, styrofoam chips, corn meal, and flour, cannot be counted as a substitute for sand.

To give credit for sand/water, there should be a sufficient quantity of the material so children can dig, scoop, pour, and fill and empty containers.

Water play can be provided by using equipment such as a running hose, sprinkler, dishpans, or a water table. Swimming pools may also be used to provide water play. However, since pools pose serious health and safety risks, particular attention should be given to these issues in scoring Items 11. Health practices, 12. Safety practices, 27. Supervision of play and learning. Note that portable wading pools, hot tubs, saunas, and spas may not be used and cannot be counted as water play due to extreme health and safety risks. The health, safety, and supervision consequences of using sand or water with children of any age should be considered in Items 11, 12, and 27.

Consider the potential implications under Health, Safety and Supervision Items if children under 18 months participate in Sand and Water play activities.

Indicator 1.1, 3.1, 5.1, 7.1

Montana Note:

If outside sand is not covered in the winter time, then not considered accessible due to accumulation of snow and ice on the sand. If sand is not covered all year round then also take off in Item 11: Health for exposure to animal feces.

Indicator 3.1, 3.3

Montana Note

If 3.1 is scored “No” because there are no provisions for sand/water, then 3.3 must also be scored “No.”

Indicator 3.2:

Infant/toddler sand and water play must always be closely supervised. If any eating or drinking of the play material is observed, score this indicator “No.” If sand/water play is not observed, base score on supervision that is observed during other activities.

The note for clarification given for this indicator applies to mixed age groups that include infants or toddlers.

Indicator 3.3:

Examples of toys for use with sand and water are kitchen utensils, shovel and bucket, small cars and trucks, floating toys, plastic containers.

“Some” means at least two toys.

Montana Note

If 3.1 is scored “No” because there are no provisions for sand/water, then 3.3 must also be scored “No.”

Indicator 5.2:

Examples of toys for use with sand and water are kitchen utensils, shovel and bucket, small cars and trucks, floating toys, plastic containers.

For “variety,” consider the differences among the toys that children can use. Variety is represented in toy characteristics, such as use, size, transparency level, shape, color, and these types of properties should be considered, but use of the toys is of prime importance in making a scoring decision. If only duplicates of one toy are accessible (e.g., many spoons), then the requirements for variety are not met. Variety in toys does not have to be provided all at one time—variety can be provided through regular rotation of toys. If the provider reports that toys are rotated, ask to see the other toys, and find out how often they are rotated. If both sand and water are accessible, variety in toys must be provided for both, but the same toys can be used to meet the requirement. Number of toys accessible for play is also considered when determining “variety.” For example, when fewer children use the toys at one time, fewer toys are required for variety, as long as the toys can be used for different purposes. When more children must share, more toys of different types are needed.

Montana Note

If both sand and water are used, at least three types of toys should be accessible for each. Consider the number of children allowed to use the provision in determining if more toys are needed.

Indicator 7.1:

Montana Note

For children 18 months and older, both sand and water must be included as a regular part of the program, but both are not required daily.

24. Promoting acceptance of diversity

When assessing diversity in materials, consider all areas and materials used by children, including pictures and photos displayed, books, puzzles, games, dolls, play people in the block area, puppets, music tapes, videos, and computer software.

Indicator 1.1:

To score “No,” there must be at least 2 examples of materials that show racial or cultural diversity, that are obvious to the children, in the room used most of the time by them. 1 poster showing children of many races is counted as 1 example; 2 baby dolls of different races also count as 1 example, because they represent 1 contrast.

Indicator 1.3:

Score “Yes” only if there is obvious, deliberate, and repeated prejudice shown. Do not score “Yes” if one isolated example of “politically incorrect” or “culturally insensitive behavior” is observed (i.e., provider asks children to “sit Indian style”). However, in order to sensitize the provider, any such instance should be mentioned, for example in technical assistance associated with the scale.

Indicator 3.1:

If materials are difficult to find or observe, do not give credit for 3.1 and 5.1. Count only materials that can be easily experienced by the children. Materials displayed do not have to be at the child’s eye level to be easily experienced, as long as they are large and clear enough for children to see and understand.

Indicator 3.2:

If stereotyping or violence is shown with regard to any group, such as some toys that show “Cowboys and Indians” fighting, then this indicator should be scored No. Gender equity should also be considered here. When historical cultural traditions are represented, the images must be balanced with non-traditional modern representations. For example, if traditional African tribal cultures are represented in materials, then current representations must also be included. Look for problems that would be easily obvious to the children. It is not necessary to search avidly for negative examples.

Indicator 5.1:

If materials are difficult to find or observe, do not give credit for 3.1 and 5.1. Count only materials that can be easily experienced by the children. Materials displayed do not have to be at the child’s eye level to be easily experienced, as long as they are large and clear enough for children to see and understand.

For this indicator, at least 3 books, 3 pictures, and 3 other materials are required, and all categories of diversity listed need to be included to some degree. Materials must be located in spaces children use for much of the day. Materials located in spaces used only for relatively short periods (e.g., hallways, entry way, spaces used only early AM or late PM) are not counted to meet the requirements of this indicator. Do not count dolls because they are credited in 5.2.

Photographs of the children in the group and their families are given credit in Item 5. Display for children, indicator 7.1 and not as “pictures showing diversity” in this item, even if the children and their families in the class photos show diversity of race, culture, abilities or gender roles. In order to be given credit for this indicator, many (at least 3-5) pictures that have been selected intentionally by staff to clearly show diversity, are displayed so they are easy for children to see in the space used by the children most of the time.

Montana Note

All of the materials, including books, pictures and other materials, must be located in the major spaces used by the children for much of the day. This does not require that all the materials are present at the same time. Some may be in one place, while others are in another space. Flannel board pieces, showing diversity, are given credit as materials if children can reach and use them. Flannel board pieces that children can only look at, as part of the display, are given credit as pictures.

No credit can be given twice for any materials considered in 5.1 and 5.2.

Required materials should be accessible for much of the day. Credit cannot be given twice for any materials counted in 5.1 and 5.2.

Indicator 5.2:

To give credit, at least 4 examples must be accessible. At least 1 example must be appropriate for each age group. Examples include different kinds of dolls, puppets and block/dramatic play people, dress-up clothes, foods, eating and cooking utensils from different cultures.

Montana Note

No credit can be given twice for any materials considered in 5.1 and 5.2.

An example of diversity requires that there is a contrast between two props. For example, one white doll, contrasted with one African American doll represents one example, as does one play food item of a taco contrasted with a play food item of beans with rice. Four examples must be observed (each consisting of two props). Once an item is counted in one example, it cannot be counted in contrast with another prop to form a second example. Dolls are required as at least one of the examples. Small toy people used with doll house or blocks can be used to meet the doll requirement.

Required materials should be accessible for much of the day. Credit cannot be given twice for any materials counted in 5.1 and 5.2.

To give credit, examples representing four different elements of diversity (examples: clothing, skin tone, food, abilities, eating utensils and dishes, etc.) found in more than one type of prop must be accessible for use in dramatic play indoors or outdoors.

Indicator 7.1:

Montana Note

We will accept family and classroom pictures but we want to see that whatever is being displayed is meaningful to Montana children and that the display is well thought out and intentional.

25. Use of TV, video, and/or computer

Since infants and toddlers learn primarily through interactions and hands-on experiences with the real world, use of TV, video, and computer is not required. If TV, video, and computers are never used when children are present, score the item NA. If not observed, ask about the use of audiovisual materials. Since new audiovisual media products are constantly being developed, consider all audiovisual materials or equipment used with the children, even if not named explicitly. For example, DVD materials and electronic games would be considered in scoring. Use of radio programs is also considered here, but not music.

Montana Note

If the assessor observes movies/videos being used that have violent or otherwise inappropriate material, discount the appropriate indicator. Otherwise, ask about the program's/provider's policy concerning use of TV and videos. No longer base your determination on what you see stored in the room. Do not reference movie/program names or ratings on summary reports. If audio/visual materials are used less than once a month while children are interested, mark this item NA.

Indicator 1.1:

Many of the audiovisual materials traditionally used with children and to which children are exposed in homes may not be appropriate for children. For example, many cartoons contain violence and anti-social behavior, and TV programs often have frightening content, encourage a desire for commercial products such as sweet cereals that are not good for children, and contain material that is beyond their understanding. To judge whether the content is appropriate and good for children, the observer should examine all audiovisual materials that the provider indicates are used with the children. In addition, when

scoring these indicators include any exposure to audiovisual materials experienced by the children, even if not put on for them, such as news on the radio or on TV.

Indicator 1.3:

Suggested time limits for media use vary with age of child. In a full-day program, TV/video is limited to 30 minutes a day for toddlers, 60 minutes a day for older children. Computer use is limited to 10 minutes for toddlers, 20 minutes for preschoolers, and 60 minutes for school-agers. Shorter amounts of time should be allowed if children are not present for the full day.

Indicator 1.4:

Since the American Academy of Pediatrics states that children under the age of two should not be allowed to view television, due to persuasive research indicating negative effects for these youngest of children, change the age listed in these indicators from 12 to 24 months. In addition, media screen time is limited for children 2 years and older to not more than 30 minutes total, once a week. Computer use time should be limited to no more than 15 minutes per day with the exception of school-aged children completing homework assignments, or children with disabilities who require assistive computer technology. No media screen time should be allowed during meals/snacks.

Indicator 3.1:

Many of the audiovisual materials traditionally used with children and to which children are exposed in homes may not be appropriate for children. For example, many cartoons contain violence and anti-social behavior, and TV programs often have frightening content, encourage a desire for commercial products such as sweet cereals that are not good for children, and contain material that is beyond their understanding. To judge whether the content is appropriate and good for children, the observer should examine all audiovisual materials that the provider indicates are used with the children. In addition, when scoring these indicators include any exposure to audiovisual materials experienced by the children, even if not put on for them, such as news on the radio or on TV.

Indicator 3.3:

Suggested time limits for media use vary with age of child. In a full-day program, TV/video is limited to 30 minutes a day for toddlers, 60 minutes a day for older children. Computer use is limited to 10 minutes for toddlers, 20 minutes for preschoolers, and 60 minutes for school-agers. Shorter amounts of time should be allowed if children are not present for the full day.

Since the American Academy of Pediatrics states that children under the age of two should not be allowed to view television, due to persuasive research indicating negative effects for these youngest of children, change the age listed in these indicators from 12 to 24 months. In addition, media screen time is limited for children 2 years and older to not more than 30 minutes total, once a week. Computer use time should be limited to no more than 15 minutes per day with the exception of school-aged children completing homework assignments, or children with disabilities who require assistive computer technology. No media screen time should be allowed during meals/snacks.

Montana Note

The time children “use” the computer includes the time that the children watch other children use the computer.

Indicator 5.1:

Many of the audiovisual materials traditionally used with children and to which children are exposed in homes may not be appropriate for children. For example, many cartoons contain violence and anti-social behavior, and TV programs often have frightening content, encourage a desire for commercial products such as sweet cereals that are not good for children, and contain material that is beyond their understanding. To judge whether the content is appropriate and good for children, the observer should examine all audiovisual materials that the provider indicates are used with the children. In addition, when scoring these indicators include any exposure to audiovisual materials experienced by the children, even if not put on for them, such as news on the radio or on TV.

Montana Note

To be considered “good for children,” materials for computer and TV viewing must be appropriate and educational.

26. Active physical play

Active physical play requires that the children be active in order to develop their gross motor skills. Taking children for rides in strollers, swinging them in swings, or having them play in the sandbox should not be counted as active physical play. Non-mobile babies should be allowed to move freely to the extent that they are able, for example, on a blanket or other safe surface. Older children should be given developmentally appropriate opportunities to practice gross motor skills.

Indicator 1.1:

If several spaces are used, the area used most frequently should be given greater consideration in scoring.

Montana Note

When outdoor space is not used (for example because of bad weather) score 1.1 “No” if any space is used indoors, such as for dancing, exercising, or marching.

Indicator 1.2:

If several spaces are used, the area used most frequently should be given greater consideration in scoring.

Indicator 1.2**Montana Note**

Lofts and climbing ramps are considered indoor climbing equipment. Scores are based on hazards present such as; height, entrapment issues, fall zones, insufficient cushioning, how it is used, ages of children, and supervision.

Montana Note

Score 1.2 “Yes” only when the complete space is very dangerous, with little room for children to move freely without facing major hazards. Generally safe means that no major safety hazard is observed or only a few minor safety hazards are observed. If there are specific hazards in a space that also has a large amount of safe space for children to participate in active physical play, score 1.2 “No”, and 3.2 “No.”

Indoor space for gross motor play and equipment is not held to the same standards as outside; however, safety as the primary focus should be insured. Consider the placement of equipment as well as the surface under equipment where children might fall. If indoor children’s climbing equipment is used, mats or carpet are required to be placed under the equipment if it is over 12 inches in height. This is in reference to equipment specifically for climbing. General home furnishings such as a couch, chair, or bed that children climb on do not require mats or carpet underneath. Temporary padding such as a pillow, cushion, or bean bag placed to protect the child from injury is acceptable in these situations.

When there are more than five minor hazards or if there are two serious hazards outdoors, credit cannot be given at the one level. If there are no serious hazards and no more than five minor hazards, credit can be given in the three level. Lack of resilient surfacing, equipment spacing, etc., may be considered as major hazards depending on the measurements and whether or not serious injury could result.

Indicator 1.3:

Appropriate equipment/materials must be safe for all children allowed to use them. For example, equipment/materials should not allow falls from high places, and have no sharp edges, splinters, protrusions, or entrapment hazards.

Examples of appropriate materials and equipment:

- Infants—outdoor pad or blanket, crib gym for younger infants, small push toys, balls, sturdy things to pull up on, ramps for crawling
- Toddlers—riding toys without pedals, large push-pull wheel toys, balls and bean bags, age-appropriate climbing equipment, slide, cushions or rugs for tumbling, tunnels, large cardboard boxes
- Preschoolers—climbing equipment, riding toys, wagons, balls, low basketball hoop
- School-agers—bicycles and other riding equipment, jump ropes, hula-hoops, equipment for ball games

Indicator 3.1:

If several spaces are used, the area used most frequently should be given greater consideration in scoring.

Less time is required for programs operating less than 8 hours a day. See “Explanation of Terms Used Throughout the Scale” on page 9 for time required for shorter programs.

When outdoor space is not used (for example because of bad weather) score 1.1 “No” if any space is used indoors, such as for dancing, exercising, or marching.

Indicator 3.2:

If several spaces are used, the area used most frequently should be given greater consideration in scoring.

**Indicator 3.2
Montana Note**

Lofts and climbing ramps are considered indoor climbing equipment. Scores are based on hazards present such as; height, entrapment issues, fall zones, insufficient cushioning, how it is used, ages of children, and supervision.

Score 1.2 “Yes” only when the complete space is very dangerous, with little room for children to move freely without facing major hazards. Generally safe means that no major safety hazard is observed or only a few minor safety hazards are observed. If there are specific hazards in a space that also has a large amount of safe space for children to participate in active physical play, score 1.2 “No”, and 3.2 “No.”

Indoor space for gross motor play and equipment is not held to the same standards as outside; however, safety as the primary focus should be insured. Consider the placement of equipment as well as the surface under equipment where children might fall. If indoor children’s climbing equipment is used, mats or carpet are required to be placed under the equipment if it is over 12 inches in height. This is in reference to equipment specifically for climbing. General home furnishings such as a couch, chair, or bed that children climb on do not require mats or carpet underneath. Temporary padding such as a pillow, cushion, or bean bag placed to protect the child from injury is acceptable in these situations.

When there are more than five minor hazards or if there are two serious hazards outdoors, credit cannot be given at the one level. If there are no serious hazards and no more than five minor hazards, credit can be given in the three level. Lack of resilient surfacing, equipment spacing, etc., may be considered as major hazards depending on the measurements and whether or not serious injury could result.

Indicator 3.3:

Appropriate equipment/materials must be safe for all children allowed to use them. For example, equipment/materials should not allow falls from high places, and have no sharp edges, splinters, protrusions, or entrapment hazards.

Examples of appropriate materials and equipment:

- Infants—outdoor pad or blanket, crib gym for younger infants, small push toys, balls, sturdy things to pull up on, ramps for crawling

- Toddlers—riding toys without pedals, large push-pull wheel toys, balls and bean bags, age-appropriate climbing equipment, slide, cushions or rugs for tumbling, tunnels, large cardboard boxes
- Preschoolers—climbing equipment, riding toys, wagons, balls, low basketball hoop
- School-agers—bicycles and other riding equipment, jump ropes, hula-hoops, equipment for ball games

Montana Note

“Some” means that the children can use the material/equipment without having to wait with no other gross motor material or equipment option.

Indicator 5.1:

Less time is required for programs operating less than 8 hours a day. See “Explanation of Terms Used Throughout the Scale” on page 9 for time required for shorter programs.

For definitions of “daily” and “weather permitting” see “Explanations of Terms Used Throughout the Scale” on pages 10 and 11.

Montana Note

“Except in very bad weather”: Health experts are unanimous on the importance of fresh air and the negative health consequences of children spending too much time in closed, indoor settings. If a child is well enough to be at the center, the child is generally assumed to be well enough to go outside. Except in extreme weather, children are expected to go outside every day. Very young children have difficulty regulating their core temperature making them more susceptible to heat stroke in the summer and cold in the winter. Therefore Montana guidelines for infants are more restrictive than they are for older children but the importance of fresh air remains the same so infants need to go outside to get some fresh air for brief periods.

Classes of older children will go outdoors to play every day the temperature plus wind-chill factor is 15 degrees or above as long as conditions are safe, e.g. if ice is not a danger. When it is very cold outdoor play times can be shortened. The basic rule of thumb is one minute for each degree. If the temperature permits, the children can go outside in snow but not in freezing rain or sleet. The importance of appropriate clothing and outerwear should be considered rather than restricting outdoor play.

“Weather-permitting” or “Inclement weather” Policy Taken from Caring for our children national Health and safety performance standards –

Children shall play outdoors daily when weather and air quality conditions do not pose a significant health risk. Outdoor play for infants may include riding in a carriage or stroller; however, infants shall be offered opportunities for gross motor play outdoors, as well.

Weather that poses a significant health risk shall include wind chill at or below 15 degrees F and heat index at or above 90 degrees F, as identified by the National Weather Service.

Air quality conditions that pose a significant health risk shall be identified by announcements from local health authorities or through ozone alerts. Such air quality conditions shall require that children remain indoors where air conditioners ventilate indoor air to the outdoors. Children with respiratory health problems such as asthma shall not play outdoors when local health authorities announce that the air quality is approaching unhealthy levels.

Indicator 5.2:

If several spaces are used, the area used most frequently should be given greater consideration in scoring.

The outdoor space must be easily accessible to the adults and children who are currently a part of the program. Access should be considered for both typically developing children and those with disabilities, if enrolled. If there are 2 or more active play areas used with the children, score this indicator based on the average of what children experience.

Indicator 5.3:

Montana Note

Ample implies that children have choices.

Indicator 5.4:

Montana Note

If a physical barrier limiting access to equipment is not observed, then the space and equipment is considered accessible to all children.

Indicator 7.1:

Each type of surface (hard and soft) must be large enough to permit appropriate play.

Indicator 7.2:

Only one example of protection from the elements must be observed, but the protection must match the most prevalent adverse conditions caused by the elements in the local area.

Indicator 7.4:

Score NA if only non-mobile infants are enrolled. List 7–9 skills stimulated by the gross motor equipment.

27. Supervision of play and learning

This item applies to both indoor and outdoor supervision. See “supervision” in “Explanation of Terms Used Throughout the Scale” on page 11. Since supervision of the various personal care routines is handled in the individual items, it is not considered here (see Items 8. Nap/rest, 9. Meals/snacks, and 10. Diapering/toileting).

To score this item, consider the number of children, their ages and abilities, and whether the provider is supervising the most hazardous areas/activities adequately.

Indicator 1.2:

“Most supervision” means the majority (over 50%) of supervision that has been observed.

Indicator 3.2:

“Most supervision” means the majority (over 50%) of supervision that has been observed.

28. Provider-child Interactions

While the indicators for quality in this item generally hold true across a diversity of cultures and individuals, the ways in which they are expressed may differ. For example, direct eye contact in some cultures is a sign of respect; in others, a sign of disrespect. Similarly, some individuals are more likely to smile and be demonstrative than others. However, the requirements of the indicators must be met by the provider, although there can be some variation in the way this is done.

Indicator 1.2:

If only one or two brief instances are observed, and most interactions are neutral or positive, score “No.”

Indicator 3.1:

“Usually responsive” means most of the time for each child who initiates an interaction or requires something. “Involved with them” means that the caregiver is not detached, seems interested in the

children, and does not spend large amounts of time in tasks that are unrelated to child care and education.

Indicator 5.3:

“Responds sympathetically” means that the provider notices and validates a child’s feelings, even if the child is showing emotions that are often considered unacceptable, such as anger or impatience. The feelings should be accepted, although inappropriate behaviors, such as hitting or throwing things, should not be allowed.

A sympathetic response should be provided in most, but not necessarily all, cases. If children are able to solve minor problems themselves, then a response from the provider is not needed. The observer needs to get an overall impression of the response of the provider. If minor problems persist and are ignored or if the provider responds in an unsympathetic manner, give no credit for this indicator.

29. Discipline

Indicator 3.3:

If the basic play needs of children in any age group are rarely met, resulting in children spending long periods with nothing interesting to do or to learn, score 3.3 “no.” If 20 minutes or more of wait time, score 3.3 “no.” A wait of less than 3 minutes is acceptable. If the time with no access lasts for 3 or more minutes, use the whole time in calculating the 20 minutes time limit. Do not omit the first three minutes of the time without access.

Indicator 5.2:

Since “time out” or threats of “time out” are not considered positive methods of discipline, these should rarely be used with any child, and a more positive problem solving method should be used, such as talking through the problem with older children to find an acceptable solution, or pleasant redirection with short explanations for younger children. No “time out” should be used for children under the age of two years.

Indicator 5.4:

There needs to be general consistency in the way the provider handles different situations and children. This does not mean that there can be no flexibility. Basic rules for positive social interaction in a group, such as no hitting or hurting, respect for others and for materials, should always be followed. A specialized program may be needed to help a child with a disability follow basic classroom rules.

Indicator 7.2:

Score NA if only infants are enrolled.

30. Interaction among Children

Score this item NA if no more than one child is enrolled to attend at any one time, or if two children are enrolled and one is absent.

Indicator 1.1:

“Interaction among children not encouraged” means that there is little support provided, either by the provider, schedule, or the environment itself, to help children play and communicate with one another. In some cases this is because the provider actively discourages interactions, for example, by:

- Requiring children to do their work or play alone, with no interruptions from others
- Requiring children to do the same thing at the same time, but with little communicating or playing together
- Maintaining very strict control, or a punitive atmosphere, that makes children too uncomfortable to interact with one another

Score 1.1 “Yes” when interaction among children is actively discouraged.

When age groups are separated and never mix, (e.g., infants cared for in one room with one provider and older children cared for in another space with a second provider) consider this indicator NA if there is only one child in a space. Ideally, two separate observations would be done when there are two separate groups. See page 7, Instructions for using the FCCERS-R, under 1.

Indicator 3.1:

No specific amount of time is required for the interactions to be encouraged. Observe to see whether encouragement is a regular practice, depending on the ages of the children, their moods, etc. Some encouragement should be seen for at least part of the observation, with more time required for children who are older.

Indicator 7.1:

At least 1 instance must be observed.

Indicator 7.2:

At least 1 instance must be observed. NA is permitted if only infants are enrolled.

31. Schedule

“Schedule” means the sequence of daily events experienced by the children. Base score primarily on the actual sequence of events observed.

Indicator 1.1:

Daily events refers to time for indoor and outdoor play activities as well as routines, including meals/snacks, nap/rest, diapering/toileting, and greeting/departing.

Indicator 3.3:

Both the indoor and outdoor play periods must each equal at least 1 hour in length for programs operating 8 hours or more. See “Explanation of Terms Used Throughout the Scale” on page 9 for programs operating less than 8 hours a day.

Indicator 5.3:

Daily events refers to time for indoor and outdoor play activities as well as routines, including meals/snacks, nap/rest, diapering/toileting, and greeting/departing.

“Long period of waiting” means waiting without any activity for 3 minutes or more between daily events (e.g., running around aimlessly, whole group sitting at tables waiting for lunch, waiting in line to go out or to use the bathroom). Note that this indicator refers to waiting between transitions from one activity to another, rather than waiting within any activity.

32. Free Play

“Free play” means that a child is permitted to select materials and companions and, as far as possible, to manage play independently. Adult interaction is in response to the child’s needs. Non-mobile children will have to be offered materials for their free choice and moved to different areas to facilitate access.

Indicator 3.1:

To give credit, children must be able to participate in free play for at least 1 hour daily in full-day programs of 8 hours or more. The 1 hour may take place at one time, or be a combination of times throughout the day. See “Explanation of Terms Used Throughout the Scale” on page 9 for time required for programs operating less than 8 hours a day.

Free play or free choice does not require that all materials are accessible for children’s choice. The number of activities may be limited as long as the children may choose where, with what, and with whom

they play. For definition of “weather permitting” see “Explanations of Terms Used Throughout the Scale” on page 11.

Indicator 3.1:

“Except in very bad weather”: Health experts are unanimous on the importance of fresh air and the negative health consequences of children spending too much time in closed, indoor settings. If a child is well enough to be at the center, the child is generally assumed to be well enough to go outside. Except in extreme weather, children are expected to go outside every day. Very young children have difficulty regulating their core temperature making them more susceptible to heat stroke in the summer and cold in the winter. Therefore Montana guidelines for infants are more restrictive than they are for older children but the importance of fresh air remains the same so infants need to go outside to get some fresh air for brief periods.

Classes of older children will go outdoors to play every day the temperature plus wind-chill factor is 15 degrees or above as long as conditions are safe, e.g. if ice is not a danger. When it is very cold outdoor play times can be shortened. The basic rule of thumb is one minute for each degree. If the temperature permits, the children can go outside in snow but not in freezing rain or sleet. The importance of appropriate clothing and outerwear should be considered rather than restricting outdoor play.

“Weather-permitting” or “Inclement weather” policy taken from Caring for our Children national health and safety performance standards.

Children shall play outdoors daily when weather and air quality conditions do not pose a significant health risk.

Weather that poses a significant health risk shall include wind chill at or below 15 degrees F and heat index at or above 90 degrees F, as identified by the National Weather Service.

Air quality conditions that pose a significant health risk shall be identified by announcements from local health authorities or through ozone alerts. Such air quality conditions shall require that children remain indoors where air conditioners ventilate indoor air to the outdoors. Children with respiratory health problems such as asthma shall not play outdoors when local health authorities announce that the air quality is approaching unhealthy levels.

Indicator 3.2:

Score “No” only when supervision is extremely lax.

Consider relative dangers, developmental level of the child, and ease of quick access to the child when deciding whether supervision is extremely lax. For example, allowing a toddler to play outdoors, unsupervised would be considered extremely lax supervision of free play, even if other parts of free play were supervised well.

Indicator 3.3:

Materials must be made accessible to non-mobile children to be given credit.

Indicator 5.1:

Free play or free choice does not require that all materials are accessible for children’s choice. The number of activities may be limited as long as the children may choose where, with what, and with whom they play. For definition of “weather permitting” see “Explanations of Terms Used Throughout the Scale” on page 11.

Indicator 5.1:

“Except in very bad weather”: Health experts are unanimous on the importance of fresh air and the negative health consequences of children spending too much time in closed, indoor settings. If a child is well enough to be at the center, the child is generally assumed to be well enough to go outside. Except in extreme weather, children are expected to go outside every day. Very young children have difficulty regulating their core temperature making them more susceptible to heat stroke in the summer and cold in the winter. Therefore Montana guidelines for infants are more restrictive than they are for older children but the importance of fresh air remains the same so infants need to go outside to get some fresh air for brief periods.

Classes of older children will go outdoors to play every day the temperature plus wind-chill factor is 15 degrees or above as long as conditions are safe, e.g. if ice is not a danger. When it is very cold outdoor play times can be shortened. The basic rule of thumb is one minute for each degree. If the temperature permits, the children can go outside in snow but not in freezing rain or sleet. The importance of appropriate clothing and outerwear should be considered rather than restricting outdoor play.

“Weather-permitting” or “Inclement weather” policy taken from Caring for our Children national health and safety performance standards.

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Indicator 5.3:

Materials must be made accessible to non-mobile children to be given credit.

“Ample and varied” means that children have many choices of appropriately challenging and interesting toys, materials, and equipment to use during free play so that each child can find a satisfying challenge.

Indicator 7.1:

At least 2 instances must be observed.

33. Group Time

This item refers to play and learning activities, not to routines. If children are never required to do the same activity as a whole group during play or learning, score this item NA. If no group activity is observed, but there is evidence that such activities are used with the children (Ex. circle time is listed on posted schedule; a group activity is shown on lesson plan), score the item based on information obtained by questions asked during the interview with the provider.

Indicator 1.1:

Whole group means all the children who are cared for together, doing the same activity.

Montana Note

“Whole group” refers to all the children who are required to do the same activity. The term “whole group” applies even when some children, such as a baby or school-aged child” are exempt from participating in the required activity.

Indicator 1.4:**Montana Note**

“Whole group” refers to all the children who are required to do the same activity. The term “whole group” applies even when some children, such as a baby or school-aged child” are exempt from participating in the required activity.

Indicator 3.3:**Montana Note**

“Whole group” refers to all the children who are required to do the same activity. The term “whole group” applies even when some children, such as a baby or school-aged child” are exempt from participating in the required activity.

Indicator 5.1:

One way to determine whether the whole-group gathering is suitable for the age and needs of the children is to observe whether the children remain generally interested and involved and no punitive methods are used to maintain the group.

Indicator 5.2:

To give credit for “many,” at least half of the play activities observed should be completed in self-selected small groups or individually. Play activities do not include passive experiences such as sitting in circle, watching TV, or being required to complete specific assigned tasks such as worksheets.

Indicator 5.3:**Montana Note**

Alternate activities must be accessible for any child who does not wish to participate.

Indicator 7.2:

At least 2 examples must be observed.

34. Provisions for children with disabilities

Note that this item is scored only if there is a child in the group with an identified and diagnosed disability, with a completed assessment. If the diagnosis and assessment have not been completed on the child (or if there is no child with a disability enrolled), score this item NA. If a child is receiving services, this can be accepted as evidence that a diagnosis and assessment exist. Existence of an IEP/IFSP is not required to score this item. To ensure privacy for families, the provider need not point out the child or tell the observer about the particulars of the disability. As you question the provider about how the identified child’s special needs are handled, you do not need to know which child is being discussed.

Montana Note

ECERS 37, ITERS-R 32, FCCERS 34, and SACERS 44 should be scored NA unless a child with a disability who has been diagnosed through a formal assessment procedure and receives (or is eligible for) early intervention services is enrolled in the program. Across all four scales, the following aspects should be considered when scoring: modifications, parent involvement, inclusion, and use of assessment information. Look for the extent of modifications needed to the schedule or classroom to include the child in daily activities, parent and staff communication regarding the child’s assessment information and ongoing therapy, and the use of assessment information in planning throughout the day. Some parents may not share all information with staff for various reasons. Consider the levels of quality when determining if staff and parents have shared enough information to meet the child’s needs. Even if staff

put significant effort into asking about a child's needs, if parents share no information, the child's development is compromised.

Indicator 3.2:

Minor modifications may include limited changes in the environment (such as a ramp) to allow the children to attend, or a therapist who visits the program to work with the children periodically.