

Child Care Experience™ Curriculum



Every effort has been made to trace the ownership of copyrighted material and to make full acknowledgement of its use. If errors or omissions have occurred, they will be corrected in subsequent editions, provided that notification is submitted in writing to the publisher.

Realityworks® ...an employee-owned company
Live it. Learn it.™

© 2023, Realityworks, Inc. All rights reserved.

2709 Mondovi Road
Eau Claire, WI 54701 USA
800.830.1416
+1.715.830.2040
www.realityworks.com
1069954-02A

Table of Contents

Table of Contents	3
Author	5
Curriculum Structure	5
Lesson Structure	6
Lesson One – Infant Feeding and Nutrition	7
FOCUS: Infant Feeding and Nutrition.....	8
LEARN: Infant Feeding and Nutrition	13
REVIEW PART 1: Food Allergy Awareness in Childcare Settings	24
Additional Instructor Notes: Food Allergy Awareness in Childcare Settings	28
REVIEW PART 2: Infant Feeding and Nutrition.....	29
Lesson Two – The Developmental Domains of Infancy (PIES)	34
FOCUS: The Developmental Domains of Infancy (PIES)	35
LEARN: The Developmental Domains of Infancy (PIES).....	40
REVIEW: The Developmental Domains of Infancy (PIES) Case Studies	51
Lesson Three – Lesson and Daily Schedule Planning	56
FOCUS: Planning Brainstorm Activity	57
LEARN: Lesson and Daily Schedule Planning Presentation.....	60
REVIEW: Lesson and Daily Schedule Planning for Infants	67
Lesson Four – Communication with Parents	75
FOCUS: The 7 Be’s of Effective Communication with Parents	76
LEARN: Communication Skills for Childcare Professionals.....	82
REVIEW: Communication Skills for Childcare Professionals.....	87
Lesson Five – Entrepreneurship: Opening a Childcare Center	93
FOCUS: Dreaming of a Childcare Center	94
LEARN: Opening a Childcare Center	97
REVIEW: Creating Your Childcare Center Plan.....	105
Lesson Six – Introduction to Emergency Infant CPR	111
FOCUS: What Do I Do Next?	112
LEARN: Infant CPR	115
REVIEW: Check Your Understanding	119

Child Care Experience Curriculum

Additional Resources	122
Lesson Seven – Infant Airway Obstruction Emergency Procedures	123
FOCUS: Identifying Choking Hazards	124
LEARN: Handling an Infant Airway Obstruction Emergency	127
REVIEW: Check Your Understanding	131
Lesson 8 – Child Care Experience™	134
Child Care Experience™ (CCE) Purpose.....	135
How It Works	136
Infant Health Training Modules.....	136
FOCUS: Introduction to Child Care Experience Babies and Care Events	137
LEARN: Demo and Child Care Experience™	151
REVIEW: Debrief.....	159
Sources	164

Child Care Experience Curriculum

The Child Care Experience is a set of lessons and activities that teach the foundations of caring for infants in a childcare setting.

Author



Trude Sowada is a family and consumer sciences teacher at Sauk Rapids-Rice High School in St. Cloud, Minnesota. Trude earned her family and consumer sciences/home economics teacher education degree from the College of St. Benedict.

As a long-time customer and user of the RealCare® Program, Mrs. Sowada has been featured in a RealCare Baby case study, blog, and has been a webinar presenter for Realityworks.

Curriculum Structure

The *Child Care Experience Curriculum* is composed of the following lessons. Approximate lesson times are included.

Lesson	Title	Approximate Time
One	Infant Feeding and Nutrition	110-135 minutes
Two	The Developmental Domains in Infancy (PIES)	50-60 minutes
Three	Lesson and Daily Schedule Planning	95-120 minutes
Four	Communication with Parents	70-80 minutes
Five	Entrepreneurship – Opening a Child Care Center	85-105 minutes
Six	Introduction to Emergency Infant CPR	45-60 minutes
Seven	Infant Airway Obstruction	45 minutes
Eight	Child Care Simulation Experience	60-130 minutes
	Total	9-13 hours

Lesson Structure

Each lesson begins with a Lesson Overview, Lesson Objectives and a Lesson at a Glance table that lists the lesson activities, materials required, suggested preparation steps, and approximate class time.

Lesson Sections

The actual lesson follows the overview, which will contain some of the sections described below.

FOCUS

Every lesson begins with a FOCUS activity intended to capture participants' attention. This may be in the form of a small or large class discussion, a game, a review of previous lesson information, or a demonstration. During this activity, participants are introduced to the topic of the lesson.

LEARN

The LEARN activity in each lesson varies in its presentation mode. It may be a slide presentation, group activity, or demonstration.

REVIEW

The majority of lessons end with a REVIEW activity intended to briefly review the lesson's key messages or main points.

Lesson One – Infant Feeding and Nutrition

Lesson Overview

In this lesson, participants will learn about the importance of good nutrition for infants, safe feeding practices, and how feeding infants is important to their physical development as well as their social and emotional development.

Lesson Objectives

After completing this lesson, participants will be able to:

- Understand the importance of feeding infants the appropriate foods to meet their nutritional needs
- Identify the appropriate feeding methods for infants' physical development
- Understand the opportunities for social and emotional development during infant feeding events
- Plan safe and healthy meals and snacks for infants of different developmental stages
- Explain why food allergy information must be collected before a child begins care
- Identify common allergy risks in childcare routines such as snack time, birthdays, art projects, sensory play, and handwashing
- Describe ways to reduce exposure and cross-contact
- Recognize possible signs of an allergic reaction and explain why staff must follow the child's written emergency plan

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Infant Feeding and Nutrition Pre-Test</i> • <i>Infant Feeding and Nutrition Pre-Test – Answer Key</i>	1. Print/photocopy the <i>Infant Feeding and Nutrition Pre-Test</i> (one per participant).	15 minutes
LEARN	• Computer and projector • <i>Infant Feeding and Nutrition</i> presentation slides • <i>Infant Feeding and Nutrition Notes</i> • <i>Infant Feeding and Nutrition Notes – Answer Key</i> • <i>Bottle Feeding Basics</i> presentation slides • <i>Bottle Feeding Basics Notes</i> • <i>Bottle Feeding Basics Notes – Answer Key</i>	1. Print/photocopy the <i>Infant Feeding and Nutrition Notes</i> (one per participant). 2. Prepare the <i>Infant Feeding and Nutrition</i> slide presentation for viewing. 3. Print/photocopy the <i>Bottle Feeding Basics Notes</i> (one per participant). 4. Prepare <i>Bottle Feeding Basics</i> presentation for viewing.	30 minutes
REVIEW PART 1	• <i>Scenarios</i> worksheet • <i>Group Safety Plan Template</i> • <i>Individual Reflection</i> worksheet • Blank paper or shared classroom document • Optional: Sample childcare menu, snack list, daily schedule, and classroom cleaning checklist	1. Print/photocopy the <i>Scenarios</i> worksheet and template (one scenario per student group). 2. Print/photocopy the <i>Group Safety Plan Template</i> and template (one per student group). 3. Print/photocopy the <i>Individual Reflection</i> worksheet (one per participant).	45-60 minutes
REVIEW PART 2	• <i>Infant Feeding and Nutrition Activity</i> • <i>Infant Feeding and Nutrition Activity – Answer Key</i>	1. Print/photocopy the <i>Infant Feeding and Nutrition Activity</i> (one per participant).	20-30 minutes

Lesson One – Infant Feeding and Nutrition

FOCUS: Infant Feeding and Nutrition

10 minutes

Purpose:

Participants will work individually on the pre-test to test their knowledge of the principles of infant feeding and nutrition.

Materials:

- *Infant Feeding and Nutrition Pre-Assessment*
- *Infant Feeding and Nutrition Pre-Assessment – Answer Key*

Facilitation Steps:

1. Distribute *Infant Feeding and Nutrition Pre-Test* to participants and encourage them to challenge themselves to see what they already know.
2. Allow participants approximately 10 minutes to complete the pre-test.
3. Correct and discuss with participants. Support participants by introducing the opportunity for growth and new knowledge.

Name: _____ Class: _____

Infant Feeding and Nutrition Pre-Test

Directions: The following questions will ask you about your knowledge of infant nutritional needs and feeding. Please answer the questions by circling the best answer.

1. Because infants are in a stage of rapid growth, it is important that they have _____.
 - a. Daily sun light
 - b. Proper nutrition
 - c. A variety of foods
2. Breast milk and formula provide all necessary nutrients for the first ____ months.
 - a. 4
 - b. 8
 - c. 12
3. Introducing new foods to infants depends on _____.
 - a. Parents' preferences
 - b. Baby's sleep patterns
 - c. Doctor's recommendations
4. Healthy eating patterns during infancy may lead to _____.
 - a. Food allergies
 - b. Limited preferences for foods
 - c. Healthy attitudes about foods
5. The initial introduction of "solid foods" means adding _____ to a baby's diet.
 - a. Semi-liquid or pureed foods
 - b. Partially frozen breast milk or formula
 - c. Crackers and dry cereal
6. Circle the correct answer for each of the following:

True	False	Calm, unrushed feeding times help infants feel secure.
True	False	Parents should only offer the foods that they like.
True	False	Propping a baby's bottle is recommended to save time.
True	False	Fruit juice is a healthy substitute if you run out of formula.
True	False	Learning to eat finger foods is good motor skill practice for baby.

Child Care Experience Curriculum

7. Circle the foods that would be safe and healthy choices for an infant who is 7 to 12 months old.

Honey	Banana	Grapes
Small pasta	Raisins	Cheese
Apple slices	Nuts	Bread
Sliced hot dog	Popcorn	Avocado
Cooked carrot	Candy	Ripe peach
Soft vegetables	Yogurt	Cow's milk

Infant Feeding and Nutrition Pre-Test

– Answer Key

Directions: The following questions will ask you about your knowledge of infant nutritional needs and feeding. Please answer the questions by circling the best answer.

1. Because infants are in a stage of rapid growth, it is important that they have _____.
 - a. Daily sun light
 - b. Proper nutrition**
 - c. A variety of foods
2. Breast milk and formula provide all necessary nutrients for the first ____ months.
 - a. 4**
 - b. 8
 - c. 12
3. Introducing new foods to infants depends on _____.
 - a. Parents' preferences
 - b. Baby's sleep patterns
 - c. Doctor's recommendations**
4. Healthy eating patterns during infancy may lead to _____.
 - a. Food allergies
 - b. Limited preferences for foods
 - c. Healthy attitudes about foods**
5. The initial introduction of "solid foods" means adding _____ to a baby's diet.
 - a. Semi-liquid or pureed foods**
 - b. Partially frozen breast milk or formula
 - c. Crackers and dry cereal
6. Circle the correct answer for each of the following:

True	False	Calm, unrushed feeding times help infants feel secure.
True	False	Parents should only offer the foods that they like.
True	False	Propping a baby's bottle is recommended to save time.
True	False	Fruit juice is a healthy substitute if you run out of formula.
True	False	Learning to eat finger foods is good motor skill practice for baby.

Child Care Experience Curriculum

7. Circle the foods that would be safe and healthy choices for an infant who is 7 to 12 months old.

Honey	Banana	Grapes
Small pasta	Raisins	Cheese
Apple slices	Nuts	Bread
Sliced hot dog	Popcorn	Avocado
Cooked carrot	Candy	Ripe peach
Soft vegetables	Yogurt	Cow's milk

Lesson One – Infant Feeding and Nutrition

LEARN: Infant Feeding and Nutrition

20-30 minutes

Purpose:

Participants will receive information about infant feeding and nutrition through a slide presentation of information accompanied by a student note sheet.

Materials:

- *Infant Feeding and Nutrition* slide presentation
- *Infant Feeding and Nutrition Notes*
- *Infant Feeding and Nutrition Notes – Answer Key*
- *Bottle Feeding Basics* slide presentation
- *Bottle Feeding Basics Notes*
- *Bottle Feeding Basics Notes – Answer Key*

Facilitation Steps:

1. Prepare *Infant Feeding and Nutrition* slide presentation.
2. Distribute the *Infant Feeding and Nutrition Notes* handout
3. Show presentation and have participants complete the note handout.

Slide 7: Months 4-8

AAP: American Association of Pediatrics

Slide 10: Recommendations for Feeding

Botulism: A rare but serious illness caused by a toxin that attacks the body's nerves.

4. Prepare *Bottle Feeding Basics* slide presentation.
5. Distribute *Bottle Feeding Basics Notes* handout.
6. Show presentation and have participants complete the note handout.

Name: _____ Class: _____

Infant Feeding and Nutrition Notes

Directions: Fill in the blanks with information from the slide presentation.

Feeding in the 1st Year

- Because of rapid growth, it is critical that infants have the _____

- Adding _____ at the proper time is important for proper growth and for establishing healthy eating for life

Months 1-4

- Infant feeding should *always* follow the recommendations of their _____
_____ provider to ensure their individual needs are met
- Breast milk or infant formula provide all necessary _____
- Why solid foods are not started yet:
 - Baby does not have the _____ to eat from a spoon
 - Starting solids too early can lead to _____
 - Adding solid foods usually does not improve _____

How Much Should a Baby Eat?

- Formula feeding for months 1-5

Age	Amount of formula per feeding	Number of feedings per 24 hours
1 month	__ - __ ounces	__ - __
2 months	__ - __ ounces	__ - __
3-5 months	__ - __ ounces	__ - __

Breast Feeding

- Because it is hard to know how much a baby is getting at each feeding, counting _____ is a good way to know if a baby is getting enough
 - At least _____ wet diapers indicate that the baby is getting enough
- _____ breast milk is easily measured

Months 4-8

- When baby is ready for solid foods, the AAP offers many recommendations:
 - *Solid foods* for infants are _____ - _____ or _____ foods
 - Infant cereal, mixed as directed on the package, followed by vegetables, fruits, and proteins
 - Start with _____ and slowly increase the amount

Recommendations for Feeding

- Offer 1 _____ - _____ food for 3-5 days, observing for possible allergic reactions
- When making homemade baby foods, do not add _____ or _____
- Avoid _____ fruits and vegetables because of the high sugar and salt content
- _____ and _____ all fruits and vegetables and remove seeds and pits
- You can give a baby 100% fruit juice that is pasteurized when they are able to drink from a cup
 - After _____ months of age
 - No more than _____ - _____ ounces per day
- DO NOT
 - Use any form of _____ during the 1st year
 - It can carry a strain of botulism
 - Offer cow's milk during the _____ year
 - Let adult food preferences _____ the foods offered to babies

Months 7-12

- Continue breast milk or infant formula for _____ year
- Offer a cup for drinks with meals
- When a baby has mastered soft, spoon-fed foods (usually at about _____ months), they can begin finger foods
- Again, single-ingredient foods for _____ - _____ days

Finger Foods

- It is important to avoid foods that could cause _____
 - Raw vegetables and fruits
 - Round foods, like grapes or hot dogs
 - Raisins
 - Popcorn
 - Seeds and nuts
 - Meat
 - Finger foods
- Good choices:
 - Foods that do not require much chewing

- Soft cheese in ½ inch or smaller cubes
- Small pieces of bread or cooked pasta
- Small pieces of cooked vegetables
- Soft fruits, banana, ripe peaches, avocado...

Soft Foods

- When baby can eat soft foods, you can add:
 - Dry, unsweetened cereal
 - Crackers
 - Small cubes of toast
- After _____ months, you can add nutritious snacks 2-3 times a day

Infant Feeding is More Than Nutrition Facts

- Infant feeding is an important care event that helps infants feel _____ in their environment
- Feeding times should be _____, not rushed
- Holding a baby, _____ propping bottles, and holding or sitting close for spoon feeding creates _____ for the baby

Feeding Tips

- Healthy attitudes about food and eating patterns in infancy establish _____ habits
- Foods offered to baby should not be restricted by adult _____
- Offering a _____ of healthy foods during infancy can lead to good eating habits later in life

Developmental Factors

- Early in life, the infant _____ is important
- Parents and caregivers will learn to recognize signs of hunger
- As babies can sit up and develop _____ of their fingers, feeding times are important for _____ development
- Letting a baby hold a spoon and practice drinking from a cup provides motor skill development
- Talking about foods, colors, flavors, and other topics provide important social-emotional and intellectual developmental opportunities for babies

Infant Feeding and Nutrition Notes– Answer Key

Feeding in the 1st Year

- Because of rapid growth, it is critical that infants have the **proper nutrition**
- Adding **healthy foods** at the proper time is important for proper growth and for establishing healthy eating for life

Months 1-4

- Infant feeding should *always* follow the recommendations of their **health care** provider to ensure their individual needs are met
- Breast milk or infant formula provide all necessary **nutrients**
- Why solid foods are not started yet:
 - Baby does not have the **physical development** to eat from a spoon
 - Starting solids too early can lead to **over feeding**
 - Adding solid foods usually does not improve **sleeping**

How Much Should a Baby Eat?

- Formula feeding for months 1-5

Age	Amount of formula per feeding	Number of feedings per 24 hours
1 month	2 - 4 ounces	6 - 8
2 months	5 – 6 ounces	5 - 6
3-5 months	6 – 7 ounces	5 - 6

Breast Feeding

- Because it is hard to know how much a baby is getting at each feeding, counting **wet diapers** is a good way to know if a baby is getting enough
 - At least **5** wet diapers indicate that a baby is getting enough
- **Expressed** breast milk is easily measured

Months 4-8

- When a baby is ready for solid foods the AAP offers many recommendations:
 - *Solid foods* for infants are **semi-liquid** or **pureed** foods
 - Infant cereal, mixed as directed on the package, followed by vegetables, fruits, and proteins
 - Start with **1 teaspoon** and slowly increase the amount

Recommendations for Feeding

- Offer 1 **single-ingredient** food for 3-5 days, observing for possible allergic reactions
- When making homemade baby foods, do not add **salt** or **sweeteners**
- Avoid **canned** fruits and vegetables because of the high sugar and salt content
- **Wash** and **peel** all fruits and vegetables and remove seeds and pits
- You can give a baby 100% fruit juice that is pasteurized when they are able to drink from a cup
 - After **6** months of age
 - No more than **4-6** ounces per day
- DO NOT
 - Use any form of **honey** during the 1st year
 - It can carry a strain of botulism
 - Offer cow's milk during the **1st** year
 - Let adult food preferences **limit** the foods offered to babies

Months 7-12

- Continue breast milk or infant formula for **1** year
- Offer a cup for drinks with meals
- When a baby has mastered soft, spoon-fed foods (usually about **8** months), they can begin finger foods
- Again, single-ingredient foods for **3-5** days

Finger Foods

- It is important to avoid foods that could cause **choking**
 - Raw vegetables and fruits
 - Round foods like grapes or hot dogs
 - Raisins
 - Popcorn
 - Seeds and nuts
 - Meat
 - Finger foods
- Good choices:
 - Foods that do not require much chewing
 - Soft cheese in ½ inch or smaller cubes
 - Small pieces of bread or cooked pasta
 - Small pieces of cooked vegetables
 - Soft fruits, banana, ripe peaches, avocado

Soft Foods

- When baby can eat soft foods, you can add:
 - Dry, unsweetened cereal
 - Crackers
 - Small cubes of toast
- After **9** months, you can add nutritious snacks 2-3 times a day

Infant Feeding Is More Than Nutrition Facts

- Infant feeding is an important care event that helps infants feel **secure** in their environment
- Feeding times should be **calm**, not rushed
- Holding baby, never **propping** bottles, and holding or sitting close for spoon feeding creates **security** for the baby

Feeding Tips

- Healthy attitudes about food and eating patterns in infancy establish **lifelong** habits
- Foods offered to baby should not be restricted by adult **preferences**
- Offering a **variety** of healthy foods during infancy can lead to good eating habits later in life

Developmental Factors

- Early in life, the infant **sucking reflex** is important
- Parents and caregivers will learn to recognize signs of hunger
- As babies can sit up and develop **dexterity** of their fingers, feeding times are important for **motor skill** development
- Letting a baby hold a spoon and practice drinking from a cup provides motor skill development
- Talking about foods, colors, flavors, and other topics provide important social-emotional and intellectual developmental opportunities for babies

Name: _____ Class: _____

Bottle Feeding Basics Notes

Directions: Fill in the blanks with information from the slide presentation.

Baby Formula

- Most come in _____ different forms:
 - Ready to feed: _____
 - Concentrate: _____
 - Powdered: _____
 - Use tap water if safe, or bottled, filtered, or boiled and cooled water
 - Always use the recommended ratio of water to concentrate or water to scoops of powder

Recommendations

- Babies may react differently to different formulas, so it is important to _____
- Change formulas based on the recommendations of baby's _____

Keeping Baby Safe

- _____ your _____ well before preparing bottles
- Premade bottles are good for _____ hours if refrigerated
- After the bottle has touched the baby's lips, it is good for _____ hour
- Wash bottles in hot, soapy water after each use

Bottles of Breast Milk

- Breast milk can be stored in the _____ for _____ months or refrigerated for _____ days
- Freshly pumped milk is good for _____ hours out of the refrigerator
- An unfinished bottle can be offered again within _____ hours

Warming Bottles

- Warming formula is not necessary, but warming is preferred for breast milk
- Warm the bottle in a cup of warm water, or in a bottle warmer
- Do not use a microwave as it can cause overheating and hot spots

Positions

- Cradle the baby in your arms
 - The baby's head should be at a _____
- Hold the baby upright
 - The baby is supported, but nearly _____
- Use a pillow
 - Keeps the baby at an angle and adds _____
- Switch sides

During Feeding

- Make sure that the nipple is filled with milk so baby doesn't swallow _____
- Paced Feeding: Take the bottle away to allow for breaks
 - Time for burping
 - Allows the baby to regulate hunger
 - Helps regulate digestion

Other Tips for Feeding

- Feeding can take _____ - _____ minutes
- This is a good time for the baby to be held close and to feel secure
- When the baby shows interest in holding their bottle, it's fine, but they should _____ be _____ with a bottle
 - Continue holding them close and remain attentive

Bottle Feeding Basics Note Handout – Answer Key

Baby Formula

- Most come in **3** different forms:
 - Ready to feed: **Pour into a bottle and feed**
 - Concentrate: **Add water and feed**
 - Powdered: **Add water, shake well, and feed**
 - Use tap water if safe, or bottled, filtered, or boiled and cooled water
 - Always use the recommended ratio of water to concentrate or water to scoops of powder

Recommendations

- Babies may react differently to different formulas, so it is important to **stay with a brand that baby tolerates well**
- Change formulas based on the recommendations of the baby's **physician**

Keeping Baby Safe

- **Wash** your **hands** well before preparing bottles
- Premade bottles are good for **24** hours if refrigerated
- After the bottle has touched baby's lips, it is good for **1** hour
- Wash bottles in hot soapy water after each use

Bottles of Breast Milk

- Breast milk can be stored in the **freezer** for **12** months or refrigerated for **4** days
- Freshly pumped milk is good for **4** hours out of the refrigerator
- An unfinished bottle can be offered again within **2** hours

Warming Bottles

- Warming formula is not necessary, but warming is preferred for breast milk.
- Warm the bottle in a cup of warm water, or in a bottle warmer.
- Do not use a microwave. It can cause overheating and hot spots.

Positions

- Cradle the baby in your arms
 - The baby's head should be at a **slight incline**
- Hold the baby upright
 - The baby is supported, but nearly **sitting up**
- Use a pillow
 - Keeps the baby at an angle and adds **comfort**
- Switch sides

During feeding

- Make sure that the nipple is filled with milk, so baby doesn't swallow **extra air**
- Paced Feeding: Take the bottle away to allow for breaks
 - Time for burping
 - Allows baby to regulate hunger
 - Helps regulate digestion

Other Tips for Feeding

- Feeding can take **15-20** minutes
- This is a good time for baby to be held close and to feel secure
- When baby shows interest in holding their bottle, it's fine, but they should **never** be **left alone** with a bottle
 - Continue holding close and remain attentive

Lesson One – Infant Feeding and Nutrition

REVIEW PART 1: Food Allergy Awareness in Childcare Settings

45-60 minutes

Purpose:

Participants will practice identifying food allergy risks in a childcare setting and creating safe, appropriate response steps that protect children during meals, snacks, play, and emergencies.

Student Objectives:

- Explain why food allergy information must be collected before a child begins care
- Identify common allergy risks in childcare routines such as snack time, birthdays, art projects, sensory play, and handwashing
- Describe ways to reduce exposure and cross-contact
- Recognize possible signs of an allergic reaction and explain why staff must follow the child's written emergency plan
- Communicate professionally with families and coworkers about allergy safety

Materials:

- *Scenario* worksheet
- *Group Safety Plan Template*
- *Individual Reflection* worksheet
- Blank paper or shared classroom document
- Optional: Sample childcare menu, snack list, daily schedule, and classroom cleaning checklist

Facilitation Steps:

1. Divide students into pairs or small groups and give each group a scenario.

2. Distribute the *Group Safety Plan Template*. Students must list all possible allergy risks in the scenario. Ask them to think about food ingredients, shared surfaces, handwashing, utensils, sensory materials, classroom celebrations, and supervision.
3. Students must create a short safety plan that includes prevention, communication, and emergency response steps.
4. Each group should prepare a two-minute explanation for the class, describing what their group would do before, during, and after the scenario.
5. Here is an Assessment Checklist to use with each group explanation:
 - Identifies realistic food allergy risks in the scenario
 - Includes prevention steps such as checking labels, avoiding cross-contact, cleaning surfaces, and supervising meals
 - Explains how staff should communicate with families and coworkers
 - References the importance of following the child's written allergy or emergency care plan
 - Uses professional, child-centered language
6. After all groups present, distribute the reflection worksheet and allow students time to complete it.

7. Class Discussion Questions:

- Why is “I think it is safe” not enough information when serving food to children?
- How can childcare workers protect a child’s privacy while still keeping staff informed?
- What routines should be in place for substitutes, volunteers, and field trips?
- How can staff prevent children with allergies from feeling excluded during celebrations or snacks?
- Why should staff never send a child with possible allergy symptoms to get help alone?

Group Safety Plan Template

Planning Question	Group Response
What allergy risks are present?	
What information should staff confirm before the activity or meal?	
What steps should staff take to prevent exposure or cross-contact?	
How should staff communicate with families, coworkers, or substitutes?	
What signs or a possible allergic reaction should staff watch for?	
What should staff do if an allergic reaction is suspected?	

Individual Reflection

1. What is one food allergy risk in childcare that you had not considered before this activity?
2. What is one question you would ask a family when enrolling a child with a food allergy?
3. What is one action you could take as a future childcare worker to help make meals and snacks safer?
4. How would you respond if another staff member wanted to serve food without checking the ingredient label?

Additional Instructor Notes: Food Allergy Awareness in Childcare Settings

Why childcare workers need accurate allergy information, how centers can collect it, and how students can practice safe decision-making

Overview

Food allergies are a serious health and safety concern in childcare settings because young children may not be able to clearly explain what they ate, describe symptoms, or advocate for themselves during an emergency. Childcare workers need accurate, current information about each child's allergies so they can prevent exposure, recognize warning signs, respond quickly, and communicate effectively with families and emergency responders.

The Centers for Disease Control and Prevention describe food allergies as immune system reactions that can be severe and life threatening. They recommend that early care and education programs have plans for preventing allergic reactions and responding to emergencies. The American Academy of Pediatrics also emphasizes a team approach involving families, healthcare providers, school or childcare staff, and trained responders.

Effective management of food allergies in childcare involves staff training, individualized care plans, safe food handling, and clear communication to prevent allergic reactions and anaphylaxis.

Staff Training and Awareness

Regular refresher training ensures all staff, including casual or temporary workers, are aware of children's specific allergies and emergency procedures

- Menu planning: Avoid non-essential allergens, like peanuts or tree nuts, in meals provided by the service, while staple foods such as wheat, dairy, and eggs cannot be removed.
- Labeling and serving: Allergy-safe meals should be clearly labeled with the child's name, and children with allergies should be served first. Staff should use distinct plates, cups, or bowls to prevent mix-ups.
- Supervision: Children with allergies should eat with peers but be seated with tidy eaters and supervised to prevent accidental exposure. Infants may require separate highchairs.
- Hand hygiene: Staff and children must wash hands before and after meals. Baby wipes can be used if soap and water are unavailable, but hand sanitizers do not remove allergens.
- Cleaning protocols: Tables, highchairs, and meal areas should be cleaned with warm, soapy water after meals, and spills or vomit should be promptly addressed.

Childcare workers help protect children by knowing which foods must be avoided, preventing cross-contact during meals and activities, recognizing possible symptoms of an allergic reaction, and following the center's emergency plan. The CDC recommends that schools and early care and education programs have plans for daily management, emergency response, staff training, family education, and safe environments for children with food allergies.

Lesson One – Infant Feeding and Nutrition

REVIEW PART 2: Infant Feeding and Nutrition

15-20 minutes

Purpose:

Participants will apply knowledge of infant feeding and nutrition by completing the worksheet individually or cooperatively.

Materials:

- *Infant Feeding and Nutrition Activity*
- *Infant Feeding and Nutrition Activity – Answer Key*

Facilitation Steps:

1. Distribute worksheets to participants and direct them to complete them individually or cooperatively based on the time allowed and group dynamics.
2. Allow about 10 minutes of work time.
3. Correct and discuss.

Name: _____ Class: _____

Infant Feeding and Nutrition Activity

Directions: Write in your answers to the following questions.

1. What are the recommendations for feeding infants from ages 1-4 months?
2. Why are solid foods not introduced at this stage of development?
3. At what age does the American Academy of Pediatrics (AAP) recommend introducing solid foods for typically developing infants? What is meant by “solid foods”?
4. What are 5 recommendations for feeding infants at 4-6 months of age?
5. What are 4 things that are NOT recommended when feeding infants at 4-6 months of age?
6. When should “finger foods” be introduced to infants?

7. At what age is it recommended that cow's milk be introduced into an infant's diet?
8. What can caregivers do to recognize possible reactions or allergies to food?
9. Create a list of nutritious and safe foods for infants after the age of 7 months.
10. In what ways is proper infant feeding and nutrition necessary for the physical development of infants?
11. Why are feeding times important developmental opportunities for infants in the areas of intellectual, emotional, and social development?

Infant Feeding and Nutrition Activity – Answer Key

Directions: Write in your answers to the following questions.

Participants responses may vary but should be similar to the following responses.

1. What are the recommendations for feeding infants from ages 1-4 months?
 - Proper nutrition is critical because of rapid growth
 - Breast milk or infant formula provide all necessary nutrients
 - Feeding should always follow the recommendations of the baby's physician
 - Early feeding habits may establish lifelong eating habits

2. Why are solid foods not introduced at this stage of development?
 - Very young infants do not have the physical development that is needed to eat from a spoon
 - Starting solids too early can lead to overfeeding

3. At what age does the American Academy of Pediatrics (AAP) recommend introducing solid foods for typically developing infants? What is meant by "solid foods"?

The AAP recommends adding solid foods between 4 and 8 months of age based on the growth and development of the individual infant.

"Solid foods" for infants are semi-liquid or pureed foods.

4. What are 5 recommendations for feeding infants at 4-6 months of age?
 - All fruits and vegetables should be washed and peeled
 - Fruit juice may be offered when baby is able to drink from a cup
 - No more than 4-6 ounces per day of pasteurized 100% fruit juices
 - Single-ingredient foods for 3-5 days before adding new foods
 - Be aware of choking dangers

5. What are 4 things that are NOT recommended for feeding infants at 4-6 months of age?
 - No honey because of possible botulism contamination
 - No cow's milk
 - Avoid canned fruits and vegetables to avoid added salt and sugar
 - Do not add salt or sugar

6. When should “finger foods” be introduced to infants?

- **After baby has mastered being spoon fed**

7. At what age is it recommended that cow’s milk be introduced into the infant’s diet?

- **After 1 year of age**

8. What can caregivers do to recognize possible reactions or allergies to food?

- **Introduce new foods one at a time and do not add other foods for 3-5 days to allow time to observe for possible reactions.**

9. Create a list of nutritious and safe foods for infants after the age of 7 months.

Answers will vary, but should include nutritious, low-allergen foods that do not pose the risk of choking.

Soft fruits and vegetables, soft cheese, cubed bread or toast, cooked pasta...

10. In what ways is proper infant feeding and nutrition necessary for infant physical development?

- **Proper nutrition at the proper time promotes the healthy growth and development of an infant’s physical health**
- **Infants holding a spoon and picking up finger foods are opportunities for fine motor skill development**

11. Why are feeding times important developmental opportunities for infants in the areas of intellectual, emotional, and social development?

- **Calm, unrushed feedings promote a feeling of security for infants**
- **Infants who have their physical needs met develop trusting relationships with caregivers**
- **Talking to babies during feedings about food names, colors, flavors, textures, etc. develop concepts and promotes language development**

Lesson Two – The Developmental Domains of Infancy (PIES)

Lesson Overview

In this lesson, participants will review the physical, intellectual, emotional, and social developmental domains of infancy. Knowledge of infant development helps child care professionals plan developmentally appropriate activities that will enhance the experiences of the infants that they care for.

Lesson Objectives:

After completing this lesson, participants will be able to:

- Understand the physical growth and motor development of typically developing infants
- Understand the intellectual, emotional, and social development of typically developing infants
- Identify ways to promote growth in each of the developmental domains

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>The Developmental Domains of Infancy (PIES) Pre-Test</i> • <i>The Developmental Domains of Infancy (PIES) Pre-Test – Answer Key</i>	1. Print/photocopy <i>The Developmental Domains of Infants (PIES) Pre-Test</i> (one per participant).	15-20 minutes
LEARN	• Computer and projector • <i>The Developmental Domains of Infants</i> slide presentation • <i>PIES: The Developmental Domains of Infants Notes</i>	1. Print/photocopy <i>PIES: The Developmental Domains of Infants Notes</i> (one per participant). 2. Prepare <i>The Developmental Domains of Infants</i> slide presentation for viewing.	20 minutes
REVIEW	• <i>PIES Case Studies Worksheet</i> • <i>PIES Case Studies Worksheet – Answer Key</i>	1. Print/photocopy <i>PIES Case Studies Worksheet</i> (one per participant).	30-45 minutes

Lesson Two – The Developmental Domains of Infancy (PIES)

FOCUS: The Developmental Domains of Infancy (PIES)

15-20 minutes

Purpose:

To assess participants' understanding of the developmental domains of infancy.

Materials:

- *The Developmental Domains of Infants (PIES) Pre-Test*
- *The Developmental Domains of Infants (PIES) Pre-Test – Answer Key*

Facilitation Steps:

1. Distribute *The Developmental Domains of Infants (PIES) Pre-Test* to participants and direct them to complete individually.
2. Allow work time.
3. Correct and discuss. Support participants by reinforcing the strength of their knowledge base and encouraging continued learning about infants.

Name: _____ Class: _____

The Developmental Domains of Infancy (PIES) Pre-Assessment

Directions: Circle the correct answer for each statement.

1. True False Heredity influences the potential growth and development of infants.
2. True False An infant's diet is not important.
3. True False A baby born with a health condition may develop at a different rate than a baby without a health condition.
4. True False A healthy environment for a baby includes opportunities for all the senses.
5. True False Infant development is unpredictable; it is unknown what the pattern of development will be.
6. True False It is critical that babies achieve milestones at specific ages.
7. True False A baby might learn to walk alone before learning to sit without support.
8. True False Gross motor development involves the large muscles of the body.
9. True False Fine motor skills are practiced by babies before gross motor skills.
10. True False Infant reflexes should be practiced with babies.
11. True False Infant physical development does not include the way they gain weight or height.
12. True False Because infants can not talk, social development does not occur until after they learn to speak.

Child Care Experience™ Curriculum

- | | | |
|----------|-------|---|
| 13. True | False | Intellectual development for infants begins by observing their environment. |
| 14. True | False | Talking, singing, and reading to infants is valuable because these activities promote language development. |
| 15. True | False | Infants should spend time each day in a formal learning experience. |
| 16. True | False | Babies with strong attachment to parents are better prepared for learning. |
| 17. True | False | Infants do not respond with emotions because they do not know the words to identify emotions. |
| 18. True | False | Disposition and temperament can be affected by the reactions of parents and caregivers. |
| 19. True | False | Parents' and caregivers' expressions of emotions teach infants about emotions. |
| 20. True | False | Limited experiences for infants can limit their development. |

The Developmental Domains of Infancy (PIES) Pre-Assessment – Answer Key

Directions: Circle the correct answer for each statement.

1. **True** False Heredity influences the potential growth and development of infants.
2. True **False** The diet of an infant is not important.
3. **True** False A baby born with a health condition may develop at a different rate than a baby without a health condition.
4. **True** False A healthy environment for a baby includes opportunities for all of the senses.
5. True **False** Infant development is unpredictable; it is unknown what the pattern of development will be.
6. True **False** It is critical that babies achieve milestones at specific ages.
7. True **False** A baby might learn to walk alone before learning to sit without support.
8. **True** False Gross motor development involves the large muscles of the body.
9. True **False** Fine motor skills are learned by babies before gross motor skills.
10. True **False** Infant reflexes should be practiced with babies.
11. True **False** Physical development of infants does not include the way they gain weight or height.
12. True **False** Because infants cannot talk, social development does not occur until after they learn to speak.

- | | | | |
|-----|-------------|--------------|---|
| 13. | True | False | Intellectual development for infants begins by observing their environment. |
| 14. | True | False | Talking, singing, and reading to infants is valuable because these activities promote language development. |
| 15. | True | False | Infants should spend time each day in a formal learning experience. |
| 16. | True | False | Babies with strong attachment to parents are better prepared for learning. |
| 17. | True | False | Infants do not respond with emotions because they do not know the words to identify emotions. |
| 18. | True | False | Disposition and temperament can be affected by the reactions of parents and caregivers. |
| 19. | True | False | Parents' and caregivers' expressions of emotions teach infants about emotions. |
| 20. | True | False | Limited experiences for infants can limit their development. |

Lesson Two – The Developmental Domains of Infancy (PIES)

LEARN: The Developmental Domains of Infancy (PIES)

20 minutes

Purpose:

The purpose of this activity is to have participants learn about and understand the 4 developmental domains and how infants develop in each as well as understand ways of promoting development in each.

Materials:

- *The Developmental Domains of Infancy* slide presentation
- *PIES: The Developmental Domains of Infancy Notes*

Facilitation Steps:

1. Distribute the *PIES: The Developmental Domains of Infancy Notes*.
2. Set up the projector and slide presentation.
3. Show slides and have participants complete the note sheet.

Slide 12: Motor Skills

Reflexes: Sucking, rooting, grasping

Slides 14-15: Promoting Motor Skills

Ask participants for other ideas

4. Asking for examples and answering questions will create an interactive opportunity for participants.

Name: _____ Class: _____

PIES: The Developmental Domains of Infants Notes

Instructions: Fill in the blanks with information from the slide presentation.

Influences on Growth and Development

- Heredity
 - Genetics influence an individual's _____
- Nutrition
 - A healthy diet provides the _____ that a child needs for growth and development
- Health
 - If babies are born with or develop health problems, they may develop more _____
- Experiences
 - Interaction with parents and caregivers _____ the way a child develops
- Environment
 - Providing babies with a rich and stimulating environment enhances _____ development
 - A rich and stimulating environment is one that safely provides a variety of things to see, taste, smell, hear, and touch

The Developmental Domains

- PIES
 - Physical
 - Intellectual
 - Emotional
 - Social
- All areas of development are related

Patterns of Physical Development

- Babies develop in a _____ pattern, but not always at the same rate
 - Some babies may achieve milestones earlier or later than others
 - Each month brings new developments
 - It is important to watch for progress rather than watching the time of achievements
- _____ to _____ (cephalocaudal)
 - Lifts up head first, then shoulders, then knees to eventually standing
 - Starts long before birth when the head takes the lead in development
- _____ to _____ (proximodistal)
 - They move their arms and legs before their fingers and toes
- _____ to _____
 - They learn to use their large muscles first then their fine muscles

Physical Development

- Development related to the body's physical _____ and _____
 - Weight and height
 - Gross motor skills
 - The use of large muscles
 - Fine motor skills
 - The use of small muscles

Growth in the First Year

- Weight and height
- Months 1-6
 - Babies add _____ ounces per week and ½-1 inch per month
 - Babies typically double their birth weight by about _____ months
- Months 6-12
 - Babies grow about 3/8 inch per month and gain _____ ounces per week
 - Babies typically triple their birth weight by about _____ months

Motor Skills

- Reflexes control early movements followed by
- Gross motor developments (_____)
 - Babies learn to control these first: Legs, arms, body, and shoulders
- Fine motor developments (_____)
 - Babies learn to control these later: Fingers, toes, and activities requiring precise movements

Hand-Eye Coordination

- This is an essential skill for many tasks in life
- Newborns hand-eye coordination develops as their motor skills improve
- By the end of the first year, they can move items from place to place with their hands

Promoting Motor Skills

- Activities and experiences are important for developing _____
- What activities are useful for infants to practice gross motor skills?
 - Blanket time/tummy time to allow movement
 - Plush toys, walking toys, riding toys
 - Balls, dolls, stuffed animals
- What activities are useful for infants to practice fine motor skills?
 - Grasping
 - Toys to practice _____
 - Toys with push buttons, sliders, and dials
 - Holding a bottle or cup
 - Age-appropriate finger foods

Development in the 1st Year

- Vision
 - At first, their vision is blurry and doesn't reach the clarity of an adult's vision till around _____ months
- Hearing
 - Babies' hearing develops long before they are _____
 - At birth, they can recognize voices that are heard while in the womb
- Smell and taste
 - From a few days after birth, a newborn can distinguish its mother's smell from others
- Touch
 - Newborns usually lack sufficient brain development and _____ skills to explore their world through touch but soon begin exploring their environment

Intellectual Development in the 1st Year

- Cognitive Development: Mental processes through which we think, learn, and communicate
- Babies learn by
 - _____ at and watching people
 - Copying the _____ of others
 - Communicating: Smiles, coos, and babbles that become words

Promoting Intellectual Development

- A secure and predictable environment helps babies learn
- Experience is essential to learning because babies use stimuli to learn
- Babies are naturally curious
- Follow the baby's lead to expand activities based on their interest
- What activities promote intellectual development?
 - Talking to the baby
 - Daily activities, like adding _____ and games to routines
 - Sensory stimulation
 - Safely engage all ____ senses
 - Motor activities to improve coordination
- Memory activities
 - Consistent routines
 - Repeat songs, rhymes, books
 - Use the baby's name
 - "Conversations" with the baby
 - Associate words and objects or actions
 - Introduce appropriate toys
- Provide a rich _____ with a variety of _____, but always follow the baby's reactions of interest and disinterest
 - Disinterest or frustration is not productive at this stage

Emotional and Social Development in the 1st year

- Emotional and social development relate to responding to _____, environment, and the _____ in the environment
- 3 components of social and emotional development
 - Disposition or temperament

- Social relations
- Examples of expressing emotions (modeling)

Disposition or Temperament

- Definition: The general mood or way of _____ to situations
- Sometimes infants are identified as high or low reactive
- Consistent care, adequate soothing, and calm reactions are _____ to high reactive infants and their reactions

Social Relations

- Babies have the tools for social relationships at birth and progress from there
 - Turning in the direction of human voices
 - Eye contact that evolves into smiles
 - Serve and return with engaged caregivers
 - Recognizing familiar people
 - When they gain arm control, they may imitate or initiate social contact by reaching to people

Promoting Emotional and Social Development

- Attachment and bonding are both important for healthy _____ development
 - Attachment is the _____ between people that lasts over time
 - Bonding is the development of feelings of _____
- Healthy brain and intellectual development are dependent on attachment
- Expressing emotions and feelings
 - Early expressions by infants are distress, expressed by crying and tenseness and excitement expressed by smiles, coos, and wiggles
 - Later, by 12 months, infants can express a range of emotions
 - Love, fear, anxiety, anger, jealousy, joy, and sadness

Emotional Development

- Infants learn these emotions from the _____ of others
- Before they can express them, their brains are processing them
- It takes up to _____ years for children to complete development of these emotions

Emotions in Infants

- Love
 - As parents meet basic needs, babies become attached and begin to feel and show love
 - Babies can become attached to objects too, like _____

- Fear
 - Initial reactions are reflexes
 - Followed by stranger fear at _____ months
 - Around 6 months fear as a reaction occurs
 - Fear of the unknown: Strangers, sudden movement, sounds
 - Fear learned from experience: Soap in their eyes, doctor's office

- Fear learned from adult influence: Adult reactions cause children to be fearful, storms
- Anxiety: Fear of a possible event
 - Separation anxiety
 - Around _____ months to about 10-18 months
 - Related to limited intellectual development
 - Limited memory
 - As children get older, they are better at expressing their needs, which reduces separation anxiety
- Anger
 - Infant rage happens before true anger
 - Infant rage is the reaction to _____
 - True anger is caused by frustration and expressed physically
 - Lack of language skills can lead to physical reactions
 - Disposition can predict intense or mild reactions

Promoting Emotional and Social Development

- Caregivers can _____ appropriate interaction and reactions to children as a way of promoting development
- Talking about emotions and _____ infant reactions with emotions is also a way to promote development

Infant Development

- Every activity, experience, and interaction is a developmental opportunity for a child
- Parents and Caregivers must plan and create appropriate experiences to help children reach their full potential

PIES: The Developmental Domains of Infancy Notes – Answer Key

Influences on Growth and Development

- Heredity
 - Genetics influence an individual's **potential and abilities**
- Nutrition
 - A healthy diet provides the **nutrients** that a child needs for growth and development
- Health
 - If babies are born with or develop health problems, they may develop more **slowly**
- Experiences
 - Interaction with parents and caregivers **influences** the way a child develops
- Environment
 - Providing babies with a rich and stimulating environment enhances **brain** development
 - A rich and stimulating environment is one that safely provides a variety of things to see, taste, smell, hear, and touch

The Developmental Domains

- PIES
 - Physical
 - Intellectual
 - Emotional
 - Social
- All areas of development are related

Patterns of Physical Development

- Babies develop in a **predictable** pattern, but not always at the same rate
 - Some babies may achieve milestones earlier or later than others
 - Each month brings new developments
 - It is important to watch for progress rather than watching the time of achievements
- **Head to foot** (cephalocaudal)
 - Lifts up head first, then shoulders, then knees to eventually standing
 - Starts long before birth when the head takes the lead in development
- **Near to far** (proximodistal)
 - They move their arms and legs before their fingers and toes
- **Simple to complex**
 - They learn to use their large muscles first then their fine muscles

Physical Development

- Development related to the body's physical **growth** and **movements**
 - Weight and height
 - Gross motor skills
 - The use of large muscles
 - Fine motor skills
 - The use of small muscles

Growth in the First Year

- Weight and height
- Months 1-6
 - Babies add **5-7** ounces per week and ½-1 inch per month
 - Babies typically double their birth weight by about **5** months
- Months 6-12
 - Babies grow about 3/8 inch per month and gain **3-5** ounces per week
 - Babies typically triple their birth weight by about **12** months

Motor Skills

- Reflexes control early movements followed by gross motor developments (**large muscles**)
 - Babies learn to control these first: Legs, arms, body, and shoulders
- Fine motor developments (**small muscles**)
 - Babies learn to control these later: Fingers, toes, and activities requiring precise movements

Hand-Eye Coordination

- This is an essential skill for many tasks in life
- Newborns' hand-eye coordination develops as their motor skills improve
- By the end of the first year, they can move items from place to place with their hands

Promoting Motor Skills

- Activities and experiences are important for developing **skills**
- What activities are useful for infants to practice gross motor skills?
 - Blanket time/tummy time to allow movement
 - Push toys, walking toys, riding toys
 - Balls, dolls, stuffed animals
- What activities are useful for infants to practice fine motor skills?
 - Grasping
 - Toys to practice **grasping**
 - Toys with push buttons, sliders, and dials
 - Holding a bottle or cup
 - Age-appropriate finger foods

Development in the 1st Year

- Vision
 - At first, their vision is blurry and doesn't reach the clarity of an adult's vision until around **6** months
- Hearing
 - Babies' hearing develops long before they are **born**
 - At birth, they can recognize voices that they heard while in the womb
- Smell and taste
 - From a few days after birth, a newborn can distinguish its mother's smell from another person's
- Touch
 - Newborns usually lack sufficient brain development and **movement** skills to explore their world through touch but soon begin exploring their environment

Intellectual Development in the 1st Year

- Cognitive Development: Mental processes through which we think, learn, and communicate
- Babies learn by
 - **Looking** at and watching people
 - Copying the **actions** of others
 - Communicating: Smiles, coos, and babbles that become words

Promoting Intellectual Development

- A secure and predictable environment helps babies learn
- Experience is essential to learning because babies use stimuli to learn
- Babies are naturally curious
- Follow the baby's lead to expand activities based on their interest
- What activities promote intellectual development?
 - Talking to the baby
 - Daily activities, like adding **songs** and games to routines
 - Sensory stimulation
 - Safely engage all **5** senses
 - Motor activities to improve coordination
- Memory activities
 - Consistent routines
 - Repeat songs, rhymes, books
 - Use the baby's name
 - "Conversations" with the baby
 - Associate words and objects or actions
 - Introduce appropriate toys
- Provide a rich **environment** with a variety of **experiences** but always follow the baby's reactions of interest and disinterest
 - Disinterest or frustration is not productive at this stage

Emotional and Social Development in the 1st Year

- Emotional and social development relate to responding to **self**, environment, and the **people** in the environment
- 3 components of social and emotional development
 - Disposition or temperament
 - Social relations
 - Examples of expressing emotions (modeling)

Disposition or Temperament

- Definition: The general mood or way of **reacting** to situations
- Sometimes infants are identified as high reactive or low reactive
- Consistent care, adequate soothing, and calm reactions are **beneficial** to high reactive infants and their reactions

Social Relations

- Babies have the tools for social relationships at birth and progress from there
 - Turning in the direction of human voices
 - Eye contact that evolves into smiles
 - Serve and return with engaged caregivers
 - Recognizing familiar people
 - When they gain arm control, they may imitate or initiate social contact by reaching to people

Promoting Emotional and Social Development

- Attachment and bonding are both important for healthy **emotional and social** development
 - Attachment is the **closeness** between people that lasts over time
 - Bonding is the development of feelings of **affection**
- Healthy brain and intellectual development are dependent on attachment
- Expressing emotions and feelings
 - Early expressions by infants are distress, expressed by crying and tenseness and excitement expressed by smiles, coos, and wiggles
 - Later, by 12 months, infants can express a range of emotions
 - Love, fear, anxiety, anger, jealousy, joy, and sadness

Emotional Development

- Infants learn these emotions from the **visual cues** of others
- Before they can express them, their brains are processing them
- It takes up to **4** years for children to have the complete development of these emotions

Emotions in Infants

- Love
 - As parents meet basic needs, babies become attached and begin to feel and show love
 - Babies can become attached to objects too, like **pacifiers, stuffed toys, and blankets**
- Fear
 - Initial reactions are reflexes
 - Followed by stranger fear at **4-5** months
 - Around 6 months fear as a reaction occurs
 - Fear of the unknown: Strangers, sudden movement, sounds
 - Fear learned from experience: Soap in their eyes, doctor's office
 - Fear learned from adult influence: Adult reactions cause children to be fearful, storms
- Anxiety: Fear of a possible event
 - Separation anxiety
 - Around **8** months to about 10-18 months
 - Related to limited intellectual development
 - Limited memory
 - As children get older, they are better at expressing their needs which reduces separation anxiety
- Anger
 - Infant rage happens before true anger
 - Infant rage is the reaction to **distress**
 - True anger is caused by frustration and expressed physically
 - Lack of language skills can lead to physical reactions
 - Disposition can predict intense or mild reactions

Promoting Emotional and Social Development

- Caregivers can **model** appropriate interaction and reactions to children as a way of promoting development
- Talking about emotions and **labeling** infant reactions with emotions is also a way to promote development

Infant Development

- Every activity, experience, and interaction is a developmental opportunity for a child
- Parents and caregivers must plan and create appropriate experiences to help children reach their full potential

Lesson Two – The Developmental Domains of Infancy (PIES)

REVIEW: The Developmental Domains of Infancy (PIES) Case Studies

30-45 minutes

Purpose:

Participants will demonstrate their knowledge of infant development by identifying how the developmental domains are exemplified in the children described in the case study examples.

Materials:

- *PIES Case Studies Worksheet*
- *PIES Case Studies Worksheet – Answer Key*

Facilitation Steps:

1. Distribute the worksheet participants.
2. Allow work time for participants to read the case studies and complete the chart for each.
3. Allow participants to choose a partner or assign partners. Allow time for partners to compare and discuss their responses.
4. Discuss by asking for volunteers or calling on participants to share their responses.

Name: _____ Class: _____

PIES Case Studies Worksheet

Directions: Each case study describes an infant. Read the information and complete the chart by identifying examples of how the child is demonstrating the areas of development.

Case Study 1: Ben

Ben is 11 months old. He is social and enjoys making eye contact with others. Ben is trusting, but he shows nervousness when his mother is out of his sight. He like to say “da da da” when he sees his father walk into the room. He is a happy baby who laughs easily. His family’s pet, Oreo, really makes him laugh.

Ben likes to sit on the floor to watch Oreo. Sometimes he stands while holding the furniture for support. His favorite playtime activities are knocking down block towers and playing peek-a-boo. At nap time or bedtime, he wants his pacifier and favorite blanket.

Physical	Intellectual	Emotional	Social
1.	1.	1.	1.
2.	2.	2.	2.
3.	3.	3.	3.

Case Study 2: George

George is 5 months old. He uses his eyes, hands, and mouth to explore his world. He tries to put toys in his mouth. George likes to be held and will go to anyone who smiles at him. George naps several times each day. He smiles and giggles when mommy comes home after work. He tries to imitate her waving as she come in.

George loves tummy time and playing in the bathtub. He has a short attention span. He fusses when left alone but smiles when a new toy is shown to him.

Physical	Intellectual	Emotional	Social
1.	1.	1.	1.
2.	2.	2.	2.
3.	3.	3.	3.

Case Study 3: Winnie

Winnie is 9 months old. She had a calm and quiet temperament. She enjoys watching what is going on around her but appears shy when she is around people outside of her family. She becomes very vocal around her father and brother, especially when they play with brightly colored toys and help her walk.

Winnie likes music and responds by moving and clapping. Her favorite foods are cooked carrots, pears, and peas. She is very good at picking up these foods with her fingers.

Physical	Intellectual	Emotional	Social
1.	1.	1.	1.
2.	2.	2.	2.
3.	3.	3.	3.

PIES Case Studies Worksheet – Answer Key

Directions: Each case study describes an infant. Read the information and complete the chart by identifying examples of how the child is demonstrating the areas of development.

Student responses may vary

Case Study 1: Ben

Ben is 11 months old. He is social and enjoys making eye contact with others. Ben is trusting, but he shows nervousness when his mother is out of his sight. He like to say “da da da” when he sees his father walk into the room. He is a happy baby who laughs easily. His family’s pet, Oreo, really makes him laugh.

Ben likes to sit on the floor to watch Oreo. Sometimes he stands while holding the furniture for support. His favorite playtime activities are knocking down block towers and playing peek-a-boo. At nap time or bedtime, he wants his pacifier and favorite blanket.

Physical	Intellectual	Emotional	Social
1. Sits on the floor	1. Says “da da da”	1. Connection with mom and dad	1. Eye contact
2. Stands while holding furniture	2. Plays peek-a-boo	2. Nervous when mother is out of sight	2. Peek-a-boo
3. Drinks from a cup	3. Knocks down block towers	3. Has a favorite blanket	3. Laughs at pet (Oreo)

Case Study 2: George

George is 5 months old. He uses his eyes, hands, and mouth to explore his world. He tries to put toys in his mouth. George likes to be held and will go to anyone who smiles at him. George naps several times each day. He smiles and giggles when mommy comes home after work. He tries to imitate her waving as she come in.

George loves tummy time and playing in the bathtub. He has a short attention span. He fusses when left alone but smiles when a new toy is shown to him.

Physical	Intellectual	Emotional	Social
1. Puts toys in his mouth 2. Tummy time 3. Waving	1. Eyes, hands, and mouth are used to explore 2. Imitates mom waving 3. Short attention span	1. Smiles and giggles at mom 2. Likes to be held 3. Fussing when left alone	1. Goes to anyone 2. Smiles and giggles at mom 3. Smiles when sister lays near him

Case Study 3: Winnie

Winnie is 9 months old. She had a calm and quiet temperament. She enjoys watching what is going on around her but appears shy when she is around people outside of her family. She becomes very vocal around her father and brother, especially when they play with brightly colored toys and help her walk.

Winnie likes music and responds by moving and clapping. Her favorite foods are cooked carrots, pears, and peas. She is very good at picking up these foods with her fingers.

Physical	Intellectual	Emotional	Social
1. Likes help walking 2. Moves and claps to music 3. Picks up food with her fingers	1. Watching what is going on around her 2. Likes brightly colored toys 3. Likes music	1. Calm and quiet 2. Shy and clings to parents 3. Vocal when playing	1. Shy around non-family 2. Vocal with father and brother 3. Babbles to stuffed animals

Lesson Three – Lesson and Daily Schedule Planning

Lesson Overview

Organization and planning are important skills for childcare professionals. In this lesson, participants will use their knowledge about infant development to learn about lesson planning and scheduling for infant care.

Lesson Objectives

After completing this lesson, participants will be able to:

- Understand the importance of organization and planning of time in an infant care setting
- Understand and identify appropriate activities to promote learning for infants
- Plan for a safe and healthy environment for infants of different developmental stages

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Lesson and Daily Schedule Planning Brainstorm Activity</i> • <i>Lesson and Daily Schedule Planning Brainstorm Activity – Answer Key</i>	1. Print/photocopy <i>Lesson Planning and Daily Schedule Planning Brainstorm Activity</i> (one per participant).	20 minutes
LEARN	• Computer and projector • <i>Lesson and Daily Schedule Planning for Infants</i> slide presentation • <i>Lesson and Daily Schedule Planning for Infants Notes</i> • <i>Lesson and Daily Schedule Planning for Infants Notes – Answer Key</i>	1. Print/photocopy <i>Lesson and Daily Schedule Planning for Infants Notes</i> (one per participant). 2. Prepare <i>Lesson and Daily Schedule Planning for Infants</i> slide presentation for viewing.	30-40 minutes
REVIEW	Activity 1 • <i>Child Care Center Licensing Worksheet</i> • <i>Child Care Center Licensing Worksheet – Answer Key</i> • Internet access or printed material about local childcare center licensing requirements. This can be found here: https://www.childcare.gov/index.php/consumer-education/child-care-licensing-and-regulations Activity 2 • <i>Lesson Planning for Infants Worksheet</i> • <i>Lesson Planning for Infants Worksheet – Answer Key</i> • (optional) Child Care Center Design Kit	1. Print/photocopy <i>Child Care Center Licensing Worksheet</i> (one per participant). 2. Print/photocopy <i>Lesson Planning for Infants Worksheet</i> (one per participant).	45-60 minutes

Lesson Three – Lesson and Daily Schedule Planning

FOCUS: Planning Brainstorm Activity

15-20 minutes

Purpose:

Participants will collaborate to generate ideas for a schedule and activities that would be developmentally appropriate for children who are under 1 year of age and in a childcare setting.

Materials:

- *Lesson and Daily Schedule Planning Brainstorm Activity*
- *Lesson and Daily Schedule Planning Brainstorm Activity – Answer Key*

Facilitation Steps:

1. Distribute *Lesson and Daily Schedule Planning Brainstorm Activity* to participants.
2. Guide participants through the introduction and directions.
3. Assign or allow participants to choose partners and allow time for them to complete the activity.
4. Ask for volunteers to share their ideas or call on groups to share ideas. Discuss how the idea would be appropriate or how they could be modified.

Encourage participants by reinforcing that their ideas are good and experienced childcare professionals are always adapting and adjusting planning and schedules based on the individual and changing needs of the children.

Name: _____ Class: _____

Lesson and Daily Schedule Planning Brainstorm Activity

Directions: Individually or with a partner, respond to the questions about planning and scheduling infant activities in a childcare setting.

1. What are 3 important considerations for planning infant activities in a childcare setting?
2. What are some specific examples of how you would ensure that the considerations listed in question 1 are achieved?
3. How would you create a schedule that has structure but allows for flexibility?
4. What characteristics or traits do you feel are necessary in childcare providers?
5. Create a practice schedule including your ideas about the important parts of an infant's day at childcare.

Lesson and Daily Schedule Planning

Brainstorm Activity – Answer Key

Directions: Individually or with a partner, respond to the questions about planning and scheduling infant activities in a childcare setting.

1. What are 3 important considerations for planning activities for infants in a childcare setting?

Student responses will vary, but should include ideas related to:

Safety and well-being of the children

Developmental needs of the children

Resources available

Space and physical environment

2. What are some specific examples of how you would ensure that the considerations listed in item 1 are achieved?

Student responses will vary.

3. How would you create a schedule that has structure but allows for flexibility?

Student responses will vary

4. What characteristics or traits do you feel are necessary in childcare providers?

Student responses will vary but may include:

Knowledge of child development

Enjoy working with children

Patience

Organized and attentive to detail

Responsible

5. Create a practice schedule including your ideas about the important parts of an infant's day at childcare.

Student responses will vary, but may include arrival, feedings, diaper changes, play time, naps, and more.

Lesson Three – Lesson and Daily Schedule Planning

LEARN: Lesson and Daily Schedule Planning Presentation

30 minutes

Purpose:

Through a slide presentation and notes, participants will learn about lesson planning, schedule planning, and activities that would be developmentally appropriate for children who are under 1 year of age and in a childcare setting.

Materials:

- *Lesson and Daily Schedule Planning for Infants* slide presentation
- *Lesson and Daily Schedule Planning for Infants Notes*
- *Lesson and Daily Schedule Planning for Infants Notes – Answer Key*

Facilitation Steps:

1. Distribute *Lesson and Daily Schedule Planning for Infants Notes* to each participant.
2. Set up a projector and the slide presentation.
3. Show the slides and have participants complete the note sheet.
4. Encourage sharing of examples and questions during the presentation.

Slide 2: What To Consider When Planning an Infant Program

When planning programs and schedules for children in a childcare center, these are the first considerations.

Slide 4: Resources for Planning an Infant Program

Staff-to-child ratios: Infant centers typically have higher staff-to-child ratios due to the needs of infants.

Name: _____

Class: _____

Lesson and Daily Schedule Planning for Infants Notes

Instructions: Fill in the blanks with information from the slide presentation.

What To Consider When Planning an Infant Program

- _____ requirements
- Resources that are available
- _____ needs of children
- _____ and well-being of the children
- It is important to have structure, but allow for flexibility and variables

Licensing Requirements

- Different locations may have different licensing requirements
- Childcare centers must adhere to the licensing requirements
- Requirements are in the areas of site/location, equipment, staffing, services, and business practices

Resources for Planning an Infant Program

- Staff (human resource)
 - Licensing requirements will dictate _____-to-child _____
 - For infants, the adult-child ratio is typically _____
- Materials
 - What is _____, and what is _____?
 - All materials must meet _____ guidelines
- Space

Meeting the Developmental Needs of Children

- Programming should be:
 - Appropriate to the _____ needs of the children attending
 - _____
 - Promoting _____ through _____
 - _____

Safety and Well-Being

- Providing an environment that is safe for the _____ of the children is critical
- _____ must meet safety guidelines
- Healthy _____ and _____ practices must be followed
- The health of children should be monitored

Scheduling

- Providing a structured schedule will help keep the childcare center organized, but there must be room for flexibility to meet the needs of the individual children that the center serves

The What and Why of an Infant Schedule

- **Interaction:** Infants should have as much interaction as possible to help them learn about the world around them
 - _____, like feeding and diapering, are times for interaction as well as during play time
 - Talk, talk, talk... this helps infants learn about themselves, others, and the world
- **Exercise** is important
 - Tummy time and free movement within safe surroundings helps gross motor development
- **Licensing requirements** may require _____ of naps, feedings, and diapering
 - Schedules can help facilitate this

An Infant's Day

- Arrival at the center
 - Infants _____ from parent to teacher
 - Discuss the night before, concerns, or any special information that the caregivers should know
- Sleeping
 - Napping according to the infant's individual schedule
 - Record the times to share with parents
- Eating: Infants are held for feeding
 - Feedings for infants are frequent
 - Every _____ hours
 - Caregivers must learn the infant's schedule and _____ of hunger
 - This is a time to nurture social, emotional, cognitive, and language development
 - Time and amounts eaten must be _____
- Diapering
 - Diapers are checked after every feeding and throughout awake times
 - At least every _____ hours
 - One-on-one time provides the opportunity to talk and sing, making it a _____ time
 - Diaper changes are documented
- Playing and learning
 - Teachers and infants play together to nurture _____, social, cognitive, and _____ development
 - Play should include _____ and alone time based on the infant's _____ and _____
 - Outdoor time twice each day if possible
 - Music and movement should be incorporated during each day
- End of the day/departure
 - _____ about the child's day is important

- Infants _____ from teacher to parent

Infant Daily Schedule: Example 1

6:30-8:30 Arrival and Breakfast
8:30-10:30 Morning Naps, Stroller, Gross Motor Activity
10:30-12:30 Lunch and Sensory, Music and Movement, Texture Exploration, Fine Motor
12:30-2:30 Nap and Storytime
2:30-3:30 Stroller and Gross Motor Activity
3:30-4:00 Discovery Play, Social Emotional, Cognitive, Language and Communication Activities
4:00-6:00 Closing Activities: Free Play, Parent Communication, Snack, Transition

Infant Daily Schedule: Example 2

8-9 Drop-off, Bottles/Breakfast
9-9:30 Diapers
9:30-10 Circle Time
10-10:30 Bottles/Snack and Diapers
10:30-11:30 Naptime
11:30-12:00 Bottles/Lunch and Diapers
12-12:30 Story Time
12:30-1 Outside/Gross Motor
1:30-2:30 Naptime
2:30-3 Bottles/Snack and Diapers
3-4 Sensory Play or Art
4-5 Individual Play Time
5-5:30 Pick up

Daily Schedule

- The daily schedule is _____ based on the children's needs
- Childcare providers must also work in cooperation with _____ to meet the children's needs
- Some centers do not post formal schedules because of the infants' varied needs, but it is valuable to have a _____ that ensures the interaction and care that infants require

Lesson and Daily Schedule Planning for Infants Notes – Answer Key

What To Consider When Planning an Infant Program

- **Licensing** requirements
- Resources that are available
- **Developmental** needs of children
- **Safety** and well-being of the children
- It is important to have structure, but allow for flexibility and variables

Licensing Requirements

- Different locations may have different licensing requirements
- Childcare centers must adhere to the licensing requirements
- Requirements are in the areas of site/location, equipment, staffing, services, and business practices

Resources for Planning an Infant Program

- Staff (human resource)
 - Licensing requirements will dictate **staff**-to-child **ratios**
 - For infants, the adult-child ratio is typically **1:3**
- Materials
 - What is **necessary**, and what is **optional**?
 - All materials must meet **safety** guidelines
- Space

Meeting the Developmental Needs of Children

- Programming should be:
 - Appropriate to the **developmental** needs of the children attending
 - **Age appropriate**
 - Promoting **learning** through **experience**
 - **Culturally rich**

Safety and Well-Being

- Providing an environment that is safe for the **developmental age** of the children is critical
- **Equipment** must meet safety guidelines
- Healthy **hygiene** and **sanitation** practices must be followed
- The health of children should be monitored

Scheduling

- Providing a structured schedule will help keep the childcare center organized, but there must be room for flexibility to meet the needs of the individual children that the center serves

The What and Why of an Infant Schedule

- **Interaction:** Infants should have as much interaction as possible to help them learn about the world around them
 - **Care events**, like feeding and diapering, are times for interaction as well as during play time
 - Talk, talk, talk... this helps infants learn about themselves, others, and the world
- **Exercise** is important
 - Tummy time and free movement within safe surroundings helps gross motor development
- **Licensing requirements** may require **documentation** of naps, feedings, and diapering
 - Schedules can help facilitate this

An Infant's Day

- Arrival at the center
 - Infants **transition** from parent to teacher
 - Discuss the night before, concerns, or any special information that the caregivers should know
- Sleeping
 - Napping according to the infant's individual schedule
 - Record the times to share with parents
- Eating: Infants are held for feeding
 - Feedings for infants are frequent
 - Every **2-3** hours
 - Caregivers must learn the infants schedule and **signals** of hunger
 - This is a time to nurture social, emotional, cognitive, and language development
 - Time and amounts eaten must be **recorded**
- Diapering
 - Diapers are checked after every feeding and throughout awake times
 - At least every **2** hours
 - One-on-one time provides the opportunity to talk and sing, making it a **positive connection** time
 - Diaper changes are documented
- Playing and learning
 - Teachers and infants play together to nurture **physical**, social, cognitive, and **language** development
 - Play should include **interactive** and alone time based on the infant's **interest** and **energy**
 - Outdoor time twice each day if possible
 - Music and movement should be incorporated during each day
- End of the day/departure
 - **Reporting to the parent** about the child's day is important
 - Infants **transition** from teacher to parent

Infant Daily Schedule: Example 1

6:30-8:30 Arrival and Breakfast

8:30-10:30 Morning Naps, Stroller, Gross Motor Activity

10:30-12:30 Lunch and Sensory, Music and Movement, Texture Exploration, Fine Motor

12:30-2:30 Nap and Storytime

2:30-3:30 Stroller and Gross Motor Activity

3:30-4:00 Discovery Play, Social Emotional, Cognitive, Language and Communication Activities

4:00-6:00 Closing Activities: Free Play, Parent Communication, Snack, Transition

Infant Daily Schedule: Example 2

8-9 Drop-off, Bottles/Breakfast

9-9:30 Diapers

9:30-10 Circle Time

10-10:30 Bottles/Snack and Diapers

10:30-11:30 Naptime

11:30-12:00 Bottles/Lunch and Diapers

12-12:30 Story Time

12:30-1 Outside/Gross Motor

1:30-2:30 Naptime

2:30-3 Bottles/Snack and Diapers

3-4 Sensory Play or Art

4-5 Individual Play Time

5-5:30 Pick up

Daily Schedule

- The daily schedule is **subject to change** based on the children's needs
- Childcare providers must also work in cooperation with **parents** to meet the children's needs
- Some centers do not post formal schedules because of the infants' varied needs, but it is valuable to have a **framework** that ensures the interaction and care that infants require

Lesson Three – Lesson and Daily Schedule Planning

REVIEW: Lesson and Daily Schedule Planning for Infants

45-60 minutes

Purpose:

Participants will investigate the licensing requirements for their area and apply the planning information that was presented in the slide show.

Materials:

Activity 1

- Internet access or printed material about local childcare center licensing requirements. This can be found here: <https://www.childcare.gov/index.php/consumer-education/child-care-licensing-and-regulations>
- *Child Care Center Licensing Worksheet*
- *Child Care Center Licensing Worksheet – Answer Key*

Activity 2

- *Lesson Planning for Infants Worksheet*
- *Lesson Planning for Infants Worksheet – Answer Key*
- (optional) [Child Care Center Design Kit](#)

Facilitation Steps:

Activity 1

1. Provide participants with internet access or printed copies from the linked site.
2. Distribute the *Child Care Center Licensing Worksheet* to participants.
3. Introduce the activity by reminding participants that childcare centers are under regulations to protect the children and professionals and that the requirements may differ from state to state.
4. Allow work time.

5. Provide help as participants work through the questions and information.
6. Discuss with participants the requirements that they found surprising or that they do not understand.

Activity 2

1. Distribute *Lesson Planning for Infants Worksheet* to participants.
2. Offer the opportunity to work with a partner or independently. Childcare workers will often work cooperatively in planning schedules and activities.
3. Allow work time.
4. Ask for volunteers to share their responses for infant-appropriate activities, circle time, and snacks.

Name: _____ Class: _____

Childcare Center Licensing Worksheet

Directions: Using the website

<https://www.childcare.gov/index.php/consumer-education/child-care-licensing-and-regulations>, answer the questions based on your location/state.

1. Related to childcare centers, who is required to have a federal background check?
2. How often must those background checks be repeated?
3. Describe “child-to-adult ratio.” What is the requirement for your state?
4. Why is it important to have licensing regulations for infant childcare centers?
5. How often are inspections of childcare centers conducted?
6. What are the consequences of licensing violations?
7. Describe “license-exempt” and a situation where this might be applied.
8. What are 3 of the federally required health and safety trainings for childcare workers?

Child Care Center Licensing Worksheet

– Answer Key

1. Related to childcare centers, who is required to have a federal background check?

- All childcare center staff members, including directors, teachers, caregivers, bus drivers, janitors, kitchen staff, and administrative employees
- Every adult volunteering in the program who will have unsupervised access to your child
- Other adults who may come into the program and will have unsupervised access to your child, such as sports, art, or dance instructors

2. How often must those background checks be repeated?

Every 5 years

3. Describe “child-to-adult ratio.” What is the requirement for your state?

The number of adults present to teach and care for children

Answers may vary by state

4. Why is it important to have licensing regulations for infant childcare centers?

Answers may vary

5. How often are inspections of childcare centers conducted?

Once each year

6. What are the consequences of licensing violations?

- Fine
- An order to operate under a conditional license
- Suspension
- Temporary immediate suspension
- Revocation

7. Describe “license-exempt” and a situation where this might be applied.

Childcare programs that are exempt from licensure under state law.

- They meet other government standards for health and safety
- The number of children being cared for is limited
- Family, friend, or neighbor care: The provider cares only for related children or children from no more than one unrelated family
- In-home care: Providing care in the child’s own home
- Playgroups and exchanges

8. What are 3 of the federally required health and safety trainings for childcare workers?

- Pediatric first aid and CPR
- Prevention and control of infectious diseases (including immunizations)
- Safe sleep practices and prevention of sudden infant death syndrome (SIDS)
- Prevention of shaken baby syndrome, abusive head trauma, and child mistreatment
- Recognition and prevention of child abuse and neglect
- Use of medication
- Prevention of and response to emergencies caused by food allergies
- Emergency preparedness and response for natural disasters and other events
- Handling, storage, and disposal of hazardous materials
- Indoor and outdoor safety (including protecting children from hazards, bodies of water, and traffic)
- Safety when transporting children (if applicable)
- Child development, physical activity, and nutrition

Name: _____ Class: _____

Lesson Planning for Infants Worksheet

Directions: Respond to the questions about the example schedules that follow.

Infant Daily Schedule: Example 1

6:30-8:30	Arrival and Breakfast
8:30-10:30	Morning Naps, Stroller, Gross Motor Activity
10:30-12:30	Lunch and Sensory, Music and Movement, Texture Exploration, Fine Motor
12:30-2:30	Nap and Storytime
2:30-3:30	Stroller and Gross Motor Activity
3:30-4:00	Discovery Play, Social Emotional, Cognitive, Language and Communication Activities
4:00-6:00	Closing Activities: Free Play, Parent Communication, Snack, Transition

1. There are many activities grouped in each time period. Why would this be valuable to the infants? Is it valuable for the teachers/caregivers? How or how not?
2. Why are the diaper changes for the children not scheduled?
3. Give an example of an infant-appropriate activity for each of the following:
 - Gross Motor Activity
 - Sensory Activity
 - Fine Motor Activity
 - Music and Movement Activity
 - Story time

Infant Daily Schedule: Example 2

8-9:00	Drop-off, Bottles/Breakfast
9-9:30	Diapers
9:30-10	Circle Time
10-10:30	Bottles/Snack and Diapers
10:30-11:30	Naptime
11:30-12:00	Bottles/Lunch and Diapers
12-12:30	Story Time
12:30-1:00	Outside/Gross Motor
1:30-2:30	Naptime
2:30-3:00	Bottles/Snack and Diapers
3-4:00	Sensory Play or Art
4-5:00	Individual Play Time
5-5:30	Pick up

1. Diaper changes are included in the schedule. Why would this be valuable to the infants? Why would this be valuable for teachers/caregivers?
2. Describe “circle time” for infants.
3. Snacks are included in this schedule. List 5 snacks that would be appropriate for infants 10-12 months of age.
4. Describe an appropriate art activity for an infant who is 6-12 months old.

Lesson Planning for Infants Worksheet – Answer Key

Directions: Respond to the questions about the example schedules that follow.

Infant Daily Schedule: Example 1

6:30-8:30	Arrival and Breakfast
8:30-10:30	Morning Naps, Stroller, Gross Motor Activity
10:30-12:30	Lunch and Sensory, Music and Movement, Texture Exploration, Fine Motor
12:30-2:30	Nap and Storytime
2:30-3:30	Stroller and Gross Motor Activity
3:30-4:00	Discovery Play, Social Emotional, Cognitive, Language and Communication Activities
4:00-6:00	Closing Activities: Free Play, Parent Communication, Snack, Transition

1. There are many activities grouped in each time period. Why would this be valuable to the infants? Is it valuable for the teachers/caregivers? How or How not?

Answers will vary but should address infants' short attentions spans and the importance of following infants' cues for engagement/interest in activities.

2. Why are the diaper changes for the children not scheduled?

Answers will vary but should express something about bladder and bowel are not scheduled activities for infants.

3. Give an example of an infant-appropriate activity for each of the following:
 - Gross Motor Activity
 - Sensory Activity
 - Fine Motor Activity
 - Music and Movement Activity
 - Story time

Answers will vary

Infant Daily Schedule: Example 2

8-9:00	Drop-off, Bottles/Breakfast
9-9:30	Diapers
9:30-10:00	Circle Time
10-10:30	Bottles/Snack and Diapers
10:30-11:30	Naptime
11:30-12:00	Bottles/Lunch and Diapers
12-12:30	Story Time
12:30-1:00	Outside/Gross Motor
1:30-2:30	Naptime
2:30-3:00	Bottles/Snack and Diapers
3-4:00	Sensory Play or Art
4-5:00	Individual Play Time
5-5:30	Pick up

1. Diaper changes are included in the schedule. Why would this be valuable to the infants? Why would this be valuable for teachers/caregivers?

Answers will vary

2. Describe “circle time” for infants.

Answers will vary

3. Snacks are included in this schedule. List 5 snacks that would be appropriate for infants 10-12 months of age.

Answers will vary but should consider nutrition and safety, no choking hazards, and ease of feeding/eating

4. Describe an appropriate art activity for an infant who is 6-12 months old.

Answers will vary

Lesson Four – Communication with Parents

Lesson Overview

In this lesson, participants will learn about the importance of effective communication between caregivers and parents of children in a childcare setting.

Lesson Objectives

After completing this lesson, participants will be able to:

- Understand the importance of communicating with parents about their children in the childcare center
- Understand and identify appropriate forms of effective communication with parents
- Effectively communicate about infants that they care for in a childcare center

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• Printed or online article Provider-Parent Relationships: 7 Keys to Good Communication: Provider-Parent Relationships: 7 Keys to Good Communication – eXtension Alliance for Better Child Care • <i>The 7 Be's of Effective Communication with Parents Worksheet</i> • <i>The 7 Be's of Effective Communication with Parents – Answer Key</i>	1. Print/photocopy <i>The 7 Be's of Effective Communication with Parents Worksheet</i> (one per participant).	20 minutes
LEARN	• Computer and projector • <i>Communication Skills for Childcare Professionals</i> slide presentation • <i>Daily Infant Schedule Report Forms</i>	1. Prepare <i>Communication Skills for Childcare Professionals</i> slide presentation for viewing. 2. Print/photocopy <i>Daily Infant Schedule Report Forms</i> (as needed)	30 minutes
REVIEW	• <i>Parent and Caregiver Communication Student Assessment</i> • <i>Parent and Caregiver Communication Student Assessment – Answer Key</i>	1. Print/photocopy <i>Parent and Caregiver Communication Student Assessment</i> (one per participant).	20-30 minutes

Lesson Four – Communication with Parents

FOCUS: The 7 Be's of Effective Communication with Parents

15-20 minutes

Purpose:

Participants will work cooperatively to discuss the introduction information about childcare providers communicating with the parents of the children in their care.

Materials:

- Printed or online article Provider-Parent Relationships: 7 Keys to Good Communication
<https://childcare.extension.org/provider-parent-relationships-7-keys-to-good-communication/>
- *The 7 Be's of Effective Communication with Parents Worksheet*
- *The 7 Be's of Effective Communication with Parents – Answer Key*

Facilitation Steps:

1. Have participants read the article Provider-Parent Relationships: 7 Keys to Good Communication independently, or it can be read together as a class.
2. Distribute the jigsaw activity sheets to participants.
3. Group participants by numbering or assigning to 7 groups.
4. Assign one of the 7 Be's from the article to each group.
5. Have them work together to discuss and prepare a paraphrased description that they will share with the class. If the number of participants is low, create fewer groups and assign more than one section of the activity to each group.

6. Allow work time.
7. Return to the large group and have participants take turns sharing their information about their section of the jigsaw activity. They will complete the other parts of the activity as other groups share their information.
8. Summarize how these traits create a positive foundation for communication between parents and caregivers about their infants.

Name: _____ Class: _____

The 7 Be's of Effective Communication with Parents Worksheet

Directions: Read the article **Provider-Parent Relationships: 7 Keys to Good Communication**
<https://childcare.extension.org/provider-parent-relationships-7-keys-to-good-communication/>

Following the directions of your teacher, work with your group members to complete your assigned portion of this activity. You will complete the remainder during the discussion time.

1. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

2. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

3. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

4. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

5. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

6. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

7. Be _____

Define this “Be” word:

Paraphrase of the article’s explanation.

Give an example of how a caregiver might demonstrate this trait.

The 7 Be's of Effective Communication with Parents

Worksheet – Answer Key

1. Be **interested**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

2. Be **humble**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

3. Be **respectful**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

4. Be **inviting**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

5. Be **a good listener**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

6. Be **positive**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

7. Be **creative**

Define this “Be” word:

Student responses will vary

Paraphrase of the article’s explanation.

Student responses will vary

Give an example of how a caregiver might demonstrate this trait.

Student responses will vary

Lesson Four – Communication with Parents

LEARN: Communication Skills for Childcare Professionals

15-20 minutes

Purpose:

This presentation will reinforce communication skills and the importance of effective communication between parents and the caregivers of their children.

Materials:

- *Communication Skills for Childcare Professionals* slide presentation
- *Daily Infant Schedule Report Forms*

Facilitation Steps:

1. Present *Communication Skills for Childcare Professionals* presentation. Share the information from the slides and discuss each topic in more detail with participants.
2. Reinforce the value to children in childcare of having cooperating adults caring for them.
3. Encourage participants to compare the examples of daily report forms.

Daily Infant Schedule Report Forms

INFANT DAILY REPORT



Name: _____ Date: _____

Beginning of the Day

I woke up at: _____ and I slept: ☐ Well ☐ Ok ☐ Not Well

I was last fed at: _____ and I ate: _____

Notes or special instructions for the day: _____

MEALS

Time	What I Ate or Drank	How Much

DIAPER CHANGES

Time	Type (Circle)	Notes
	Wet BM	
	Wet BM	
	Wet BM	
	Wet BM	
	Wet BM	
	Wet BM	
	Wet BM	

NAPS

Start Time	End Time	Notes

ACTIVITIES

- ☐ Reading and Language

☐ Outdoor Time

☐ Music/Singing

☐ Motor Skills

☐ Arts and Crafts

☐ Playtime with Toys

☐ Working on Milestone: _____

☐ Other: _____

TODAY I WAS: ☐ Happy ☐ Playful ☐ Cuddly ☐ Fussy ☐ Not Feeling Well

NOTES: _____





Infant Daily Report

Childs Name: _____ Date: _____

Your Child Mood throughout the day:

MOURNING: Happy Talkative Curious Content Fussy Sleepy Irritable Other: _____

MID DAY: Happy Talkative Curious Content Fussy Sleepy Irritable Other: _____

AFTERNOON: Happy Talkative Curious Content Fussy Sleepy Irritable Other: _____

FEEDING TIME	APPETITE	AMOUNT	COMMENTS

NAP TIMES:

	FROM	TO				FROM	TO			
1			Slept	Restless	3			Slept	Restless	
2			Slept	Restless	4			Slept	Restless	

DIAPERING:

S= Sleeping W= Wet D= Dry B= BM

AM	6:30	7:00	7:30	8:00	8:30	9:00	9:30	10:00	10:30	11:00	11:30	12:00
Comments												
PM	12:30	1:00	1:30	2:00	2:30	3:00	3:30	4:00	4:30	5:00	5:30	6:00
Comments												

I played _____

I did New today _____

PLEASE BRING MORE:

☐ Diapers ☐ wipes ☐ diaper ointment ☐ formula ☐ baby jar food ☐ other _____

Dayna's Comments:

All About My Day:

Child's Name: _____

Special activities today: _____



I napped from _____ to _____ My mood today was _____



For breakfast I had: _____

For snack I had : _____

For lunch I had: _____

For snack I had: _____



I had my diaper changed at _____ (time)

☐ wet ☐ b.m. ☐ both

I had my diaper changed at _____ (time)

☐ wet ☐ b.m. ☐ both

I had my diaper changed at _____ (time)

☐ wet ☐ b.m. ☐ both

I had my diaper changed at _____ (time)

☐ wet ☐ b.m. ☐ both

I had my diaper changed at _____ (time)

☐ wet ☐ b.m. ☐ both

I had my diaper changed at _____ (time)

☐ wet ☐ b.m. ☐ both



Please bring the following supplies for me:

☐ diapers ☐ wipes ☐ formula ☐ change of clothes

☐ other _____ ☐ other _____



Infant Daily Report (6 weeks-12 months)

Child's Name: _____ Arrival Time: _____ Date: _____

***Parent's Corner:

Special Instructions For The Day: _____

Baby Last Ate: _____ Time: _____

Breast Milk: _____ Formula (What Kind) : _____

Baby Last Slept: _____ Time: _____

Teacher's Information About Your Baby's Day



Baby Seems: _____ Happy _____ Fussy _____ Not Feeling Well

Baby Slept: From: _____ To: _____ / From: _____ To: _____
From: _____ To: _____ / From: _____ To: _____

Baby Ate:	_____ Breast	Times: _____	
	_____ Bottle	Times: _____	Amount: _____
	_____ Bottle	Times: _____	Amount: _____
	_____ Bottle	Times: _____	Amount: _____
	_____ Solids	Times: _____	Amount: _____
	_____ Solids	Times: _____	Amount: _____

Diaper Time:

Little Job _____
Big Job _____
Diaper ✓ _____
Last Change _____



Notes To Parents: _____

We Need: _____

Lesson Four – Communication with Parents

REVIEW: Communication Skills for Childcare Professionals

15-20 minutes

Purpose:

Participants will practice communication skills that they would use as a childcare professional.

Materials:

- *Parent and Caregiver Communication Student Assessment*
- *Parent and Caregiver Communication Student Assessment – Answer Key*

Facilitation Steps:

1. Distribute the *Parent and Caregiver Communication Student Assessment*.
2. Instruct participants to complete the assessment independently.
3. Allow work time.
4. Collect the assessments to score.

Name: _____ Class: _____

Parent and Caregiver Communication

Student Assessment

Directions: Using the information from the presentation, answer the following questions.

1. Why is it beneficial to children in a childcare setting for their parents and caregivers to work in cooperation?
2. Who are the most important people in a child's life?
3. True or False: When communicating with others, it is important to avoid feedback as it interferes with the understanding of the message.
4. Why is nonverbal communication a valuable part of understanding the meaning of someone's message?
5. True or False: Because email is a form of electronic communication, it is considered nonverbal communication.
6. Why might the message of an email be misinterpreted more easily than an in-person conversation?

7. True or False: Communication should be from parents to caregivers and from caregivers to parents.
8. Why is it especially important to have documented or written information about a child's day to share with a parent?
9. Printed materials, like posters, can be used to communicate with families in childcare centers. What would be an example of an appropriate message to communicate using a poster?
10. How might social media be used effectively for communication in a childcare setting?
11. How often should daily reports be shared with parents?
12. Why might parents feel intimidated by caregivers? How does this damage their relationship?

13. Explain what is meant by “how you say something can have as much meaning or more than the words that you use.”

14. True or False: Because all the families have children in the same childcare center, it is good to talk about other children with any parent who is listening.

15. True or False: Getting to know the families as well as understanding and respecting their culture is valuable to the well-being of the children you care for.

Parent and Caregiver Communication

Student Assessment – Answer Key

Directions: Using the information from the presentation, answer the following questions.

1. Why is it beneficial to children in a childcare setting for their parents and caregivers to work in cooperation?

The needs of the child are known and understood to provide the best care possible.

2. Who are the most important people in a child's life?

The child's parents and siblings.

3. True or **False**: When communicating with others, it is important to avoid feedback as it interferes with the understanding of the message.

4. Why is nonverbal communication a valuable part of understanding the meaning of someone's message?

Posture, facial expressions, and gestures along with eye contact can add meaning to communication

5. True or **False**: Because email is a form of electronic communication, it is considered nonverbal communication.

6. Why might the message of an email be misinterpreted more easily than an in-person conversation?

Because nonverbal communication and tone of voice are not included in email.

7. **True** or False: Communication should be from parents to caregivers and from caregivers to parents.

8. Why is it especially important to have documented or written information about a child's day to share with a parent?

Because details may be forgotten when they are not written down.

Parents may be distracted or rushed. Written communication can be reviewed later.

9. Printed materials, like posters, can be used to communicate with families in childcare centers. What would be an example of an appropriate message to communicate using a poster?
Invitations to special events, notices, field trip reminders, reminders of special schedules/hours
10. How might social media be used effectively for communication in a childcare setting?
General information or special announcements can be shared. Never personal information, names, or photographs of the children.
11. How often should daily reports be shared with parents?
Every day that a child attends the childcare center.
12. Why might parents feel intimidated by caregivers? How does this damage their relationship?
Because caregivers may be experts in child development, but parents know their children better than anyone. It is in a child's best interest that the parents and caregivers have a cooperative relationship.
13. Explain what is meant by "how you say something can have as much meaning or more than the words that you use."
This refers to tone of voice. It is important to be aware of how your words and voice sound to the receiver of the information. Respect is essential.
14. True or **False**: Because all the families have children in the same childcare center, it is good to talk about other children with any parent who is listening.
15. **True** or False: Getting to know the families as well as understanding and respecting their culture is valuable to the well-being of the children you care for.

Lesson Five – Entrepreneurship: Opening a Childcare Center

Lesson Overview

Childcare as a career can be rewarding, fulfilling, and profitable. Being an owner of a childcare center requires learning about licensing, financing, staffing, and working with families. Detailed planning and hard work can lead to a successful business that serves families and promotes the best care and education for children.

Lesson Objectives

After completing this lesson, participants will be able to:

- Understand the requirements of opening a childcare business
- Understand the planning that is necessary for a successful childcare business
- Understand how the requirements are relevant to both the success of the business and the well-being of the children being cared for.

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>Childcare Center Dream Sheet</i>	1. Print/photocopy <i>Childcare Center Dream Sheet</i> (one per participant).	20-30 minutes
LEARN	• <i>Entrepreneurship: Opening a Childcare Center</i> presentation slides • <i>Entrepreneurship: Opening a Childcare Center Notes</i> • <i>Entrepreneurship: Opening a Childcare Center Notes – Answer Key</i>	1. Prepare slides and projector for presentation. 2. Print/photocopy <i>Entrepreneurship: Opening a Childcare Center Notes</i> (one per participant).	30 minutes
REVIEW	• Information from <i>Childcare Center Dream Sheet</i> • Information from <i>Entrepreneurship: Opening a Childcare Center</i> presentation slides • <i>Creating Your Childcare Center Planning Worksheet</i> • <i>Creating Your Childcare Center Planning Worksheet – Answer Key</i> • Internet access or printed materials of local costs and financing options for a childcare center	1. Print/photocopy <i>Creating Your Childcare Center Planning Worksheet</i> (one per participant). 2. Arrange for internet access or print materials of local costs and financing options for a childcare center.	35-45 minutes

Lesson Five – Entrepreneurship: Opening a Childcare Center

FOCUS: Dreaming of a Childcare Center

15-20 minutes

Purpose:

The participants will begin to formulate their ideas for a childcare center.

Materials:

- *Childcare Center Dream Sheet*

Facilitation Steps:

1. Before class, review *Childcare Center Dream Sheet* to think about your personal ideas of planning for a career as a childcare center owner.
2. Distribute the *Childcare Center Dream Sheet* participants.
3. Read the introduction together with participants. Encourage and support the Big Question brainstorming discussion to begin the activity.
4. Direct participants to continue working on the interview questions that follow the brainstorming activity.
5. Allow the participants work time for the activity.
6. Ask for volunteers to share responses from their work.

Name: _____

Class: _____

Childcare Center Dream Sheet

Big Question: Brainstorm with your classmates.

What does it take to open a childcare center?

Interview Questions: This can be done independently or as a partner activity. Imagine that you are thinking about opening your own childcare center. If you are working with a partner, use the questions to interview them. If you are working independently, interview yourself. Read each question and thoughtfully respond.

1. What would you name your childcare center? And why?
2. Where would it be located? (City, state, and where within the city)
3. What skills do think are necessary for the successful operation of a childcare center?
4. What skills do you have that would make you a **great** childcare professional?
5. What would your overall goal be for your childcare center?
6. What goals/expectations would you have for yourself?
7. What goals/expectations would you have for your staff?
8. What goals/expectations would you have for the children who will attend your childcare center?

9. What features and materials are most necessary for the children who will be attending your childcare center?

10. What are some features and materials that might not be necessities, but would be nice to have for the children at your childcare center?

11. What will your expectations for the parents of the children be?

12. What do you think will be the most rewarding aspects of owning a childcare center?

13. What do you think some of the biggest challenges will be in owning a childcare center?

Lesson Five – Entrepreneurship: Opening a Childcare Center

LEARN: Opening a Childcare Center

30 minutes

Purpose:

This presentation will introduce and describe the steps that are required of a person who is interested in opening a childcare center.

Materials:

- *Entrepreneurship: Opening a Childcare Center* presentation slides
- *Entrepreneurship: Opening a Childcare Center Notes*
- *Entrepreneurship: Opening a Childcare Center Notes – Answer Key*

Facilitation Steps:

1. Distribute the note sheet to participants.
2. Present *Entrepreneurship: Opening a Childcare Center* slides.
3. Participants can take notes or use printed copies of *Entrepreneurship: Opening a Child Care Center Notes*.
4. Encourage participants to discuss why many of the requirements are relevant to the success of the business as well as relevant to the well-being of the children.

Entrepreneurship: Opening a Childcare Center Notes

What does it take to open a childcare center?

You are interested in starting your own childcare business

You have passion for _____

You have the knowledge and traits to provide high quality experiences for children

You want to be in control of your own employment

You are ready for _____

You look forward to the rewards that come with success

Then maybe you are ready to become the owner of a childcare center

Let's look at how to get started

The Steps

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.
- 7.
- 8.
- 9.

1. Education

- Obtain an early childhood education degree

— _____

- Learning about owning and operating a small business

— _____

2. Learn About Licensing

- What are the licensing requirements for your chosen area? Local, state, federal...

3. Create Your Business Plan

- A business plan is like a roadmap

- It includes _____

- Be thorough and detailed
- Online resources will help you know what to include
- Learn about the costs involved
- Do you have your own money, or will you need financing?
- Are there grants available?

Goals

- What kind of _____ will you use?
 - Some childcare centers offer a formal schedule while others are more relaxed
- _____ format
 - Will you provide formal learning opportunities?
 - Child guidance and discipline may be included here

Mission statement

- A mission statement is a summary of the _____ and values of the organization
- Example: *It is the mission of A B C Childcare to provide quality childcare in a warm, nurturing, loving, and educational environment*

4. Location

- Understand the needs of the community
 - Where are families coming from and going to?
- Know the local zoning laws and licensing requirements
- Will you _____ property or _____?
- Will you use an _____ or _____?

5. Financing

- Consider startup costs as well as ongoing operating costs
 - Some estimates range from \$10,000-\$50,000
 - There are many variables to consider
- Are there financing options available?
- Remember to consider _____

6. Policies and Procedures

- Your mission statement and goals will be the basis for your policies and procedures
- _____ to avoid having to create policies after problems arise
- A handbook for parents should be printed and distributed

The Parent Handbook

- What to include:
 -
 -
 -
 -
 -
- Meal and snack policies
 - What is provided and what is supplied from home
- Sick day procedures
- Rules for special activities
- _____ policies
- Health and safety regulations
- Emergency procedures
- _____ communications
- Billing policies
- Acknowledgement and signatures
 - Include a form stating that the parents have read and agree to the policies and procedures
 - This should be kept on file

7. Marketing

- What will make your childcare center different from the others?
- Use your _____
- Know your target market and area
- Be creative
- Create a social media presence
- Advertise in _____
- Contact _____
- Print flyers
- Host an open house

8. Hire Staff

- Use the licensing requirements for staff ratios and qualifications
- Verify _____
- Thoroughly check _____
- Conduct background checks
- The quality of your childcare center depends on the quality of the staff
- Hire qualified people and provide _____ to fit your mission and purpose

9. Accept Applications From Families

- To get started, you may want to offer _____ for new families
 - Be _____ in the terms of the introductory offer
 - Ask happy clients to spread the word

Keep up the Good Work

- Once you are open, keep working at it to provide the best care for the children you serve
 - Ongoing training for yourself and the staff
 - Keep current in _____
 - Know your families and understand their _____

The Rewards

Opening and operating a quality childcare center requires a lot of hard work and attention to detail but owning and operating a high-quality childcare center can be very fun and rewarding.

Entrepreneurship: Opening a Childcare Center Notes – Answer Key

What does it take to open a childcare center?

You are interested in starting your own childcare business

You have passion for **the care and education of children**

You have the knowledge and traits to provide high-quality experiences for children

You want to be in control of your own employment

You are ready for **hard work and challenges**

You look forward to the rewards that come with success

Then maybe you are ready to become the owner of a childcare center

Let's look at how to get started

The Steps

1. **Get educated**
2. **Learn about licensing**
3. **Create a business plan that includes financial goals**
4. **Think about a location**
5. **Learn about financing**
6. **Develop policies and procedures**
7. **Market your business**
8. **Hire staff**
9. **Accept applications**

1. Education

- Obtain an early childhood education degree
 - **Gaining knowledge and experience in child development is a starting point**
- Learning about owning and operating a small business
 - **This will increase your chances for success**

2. Learn About Licensing

- What are the licensing requirements for your chosen area? Local, state, federal...
 - **Know what is required**
 - **Follow all guidelines to avoid penalties, fines, or the risk of closure**
 - **Licensing protects the children and childcare professionals**

3. Create Your Business Plan

- A business plan is like a roadmap
- It includes **a mission statement, a marketing plan, organizational plan, staffing, operations, budgets, and more**
- Be thorough and detailed
- Online resources will help you know what to include
- Learn about the costs involved
- Do you have your own money, or will you need financing?
- Are there grants available?

Goals

- What kind of **style** will you use?
 - Some childcare centers offer a formal schedule while others are more relaxed
- **Learning** format
 - Will you provide formal learning opportunities?
 - Child guidance and discipline may be included here

Mission Statement

- A mission statement is a summary of the **goals** and values of the organization
- Example: *It is the mission of A B C Childcare to provide quality childcare in a warm, nurturing, loving, and educational environment*

4. Location

- Understand the needs of the community
 - Where are families coming from and going to?
- Know the local zoning laws and licensing requirements
- Will you **buy** property or **lease**?
- Will you use an **existing building** or **new construction**?

5. Financing

- Consider startup costs as well as ongoing operating costs
 - Some estimates range from \$10,000-\$50,000
 - There are many variables to consider
- Are there financing options available?
- Remember to consider **grants**

6. Policies and Procedures

- Your mission statement and goals will be the basis for your policies and procedures
- **Plan** to avoid having to create policies after problems arise
- A handbook for parents should be printed and distributed

The Parent Handbook

- What to include:
 - **A welcome statement**
 - **Philosophies**
 - **Operating information**
 - **Hours of operation, schedules, calendar**
 - **Enrollment policies**
 - **Drop off and pick up procedures**
- Meal and snack policies
 - What is provided and what is supplied from home
- Sick day procedures
- Rules for special activities
- **Discipline policies**
- Health and safety regulations
- Emergency procedures
- **Parent-staff** communications
- Billing policies
- Acknowledgement and signatures
 - Include a form stating that the parents have read and agree to the policies and procedures
 - This should be kept on file

7. Marketing

- What will make your childcare center different from the others?
- Use your **mission statement**
- Know your target market and area
- Be creative
- Marketing
- Create a social media presence
- Advertise in **local publications**
- Contact **parent groups**
- Print flyers
- Host an open house

8. Hire Staff

- Use the licensing requirements for staff ratios and for the qualifications of staff
- Verify **education**
- Thoroughly check **references**
- Conduct background checks
- The quality of your childcare center depends on the quality of the staff
- Hire qualified people and provide **specific training** to fit your mission and purpose

9. Accept Applications From Families

- To get started, you may want to offer **incentives** for new families
 - Be **clear** in the terms of the introductory offer
 - Ask happy clients to spread the word

Keep up the Good Work

- Once you are open, keep working at it to provide the best care for the children you serve
 - Ongoing training for yourself and the staff
 - Keep current in **trends and practices**
 - Know your families and understand their **needs**

The Rewards

Opening and operating a quality childcare center requires a lot of hard work and attention to detail but owning and operating a high-quality childcare center can be very fun and very rewarding.

Lesson Five – Entrepreneurship: Opening a Childcare Center

REVIEW: Creating Your Childcare Center Plan

35-40 minutes

Purpose:

Participants will use the information from the presentation as well as additional research to practice the kind of planning that might be required of someone who wants to own a childcare center.

Materials:

- Information from *Childcare Center Dream Sheet*
- Information from *Entrepreneurship: Opening a Childcare Center* presentation slides
- *Creating Your Childcare Center Planning Worksheet*
- *Creating Your Childcare Center Planning Worksheet – Answer Key*
- Internet access or printed materials of local costs and financing options for a childcare center

Facilitation Steps:

1. This can be completed by individuals or as partners.
2. Distribute *Creating Your Childcare Center Planning Worksheet* to participants.
3. Allow work time for participants to complete the worksheet.
4. Ask for volunteers or call on participants to share their work.

Name: _____

Class: _____

Creating Your Childcare Center Planning Worksheet

Directions: Use information from the *Childcare Center Dream Sheet*, *Entrepreneurship: Opening a Childcare Center* presentation slides, and internet research for this activity.

Imagine that you want to open a childcare center. Answer the following questions that correspond with the steps for opening a childcare center.

1. Education: Use the internet to search for schools that offer programs that would provide an appropriate education for a professional childcare worker. List the names of 3 schools, the city and state where they are located, and the name of the program.

2. Licensing: Which of the following would have requirements that must be met to legally operate a childcare center:

Federal Government	Yes	No
State Government	Yes	No
Local Government	Yes	No

Why is it necessary to have a license to operate a childcare center?

3. The Business Plan: A mission statement might be included in a business plan for a childcare center. Write a mission statement for your childcare center. Use the name that you chose when you completed the *Childcare Center Dream Sheet*.
4. Location: List 3 things to consider when choosing a location for a childcare center.

Child Care Experience™ Curriculum

5. Financing: Using the internet, look up the estimated cost range for opening a childcare center. Besides the cost of opening, what are some of the ongoing operational costs for a childcare center? List several.
6. Policies and Procedures: It is recommended that policies and procedures be published and given to parents along with a signed statement from parents saying that they have read and agree to abide by the policies and procedures. Why is this recommended?

Create a policy for each of the following topics that might be included in the parent handbook:

Drop off and pick up procedures

Meal and snack policies

Parent-staff communications

Billing policies

7. Marketing: List 3 ways that you will market your childcare center.
8. Hiring Staff: What qualities or characteristics do you want your staff members to have?

Child Care Experience™ Curriculum

9. Applicants: How many children will you be able to accommodate in your childcare center? What if you have more than that number apply?
10. What do you think will be the most challenging aspects of owning your own childcare center?
11. What do you think will be the most rewarding aspects of owning your own childcare center?

Creating Your Childcare Center Planning Worksheet – Answer Key

1. Education: Use the internet to search for schools that offer programs that would provide an appropriate education for a professional childcare worker. List the names of 3 schools, the city and state where they are located, and the name of the program.

Student responses will vary

2. Licensing: Which of the following would have requirements that must be met in order to legally operate a childcare center:

Federal Government	Yes	No
State Government	Yes	No
Local Government	Yes	No

Why is it necessary to have a license to operate a childcare center?

Licensure protects the safety of children, and it provides guidelines and protection for staff and owners of the childcare center

3. The Business Plan: A mission statement might be included in a business plan for a childcare center. Write a mission statement for your childcare center. Use the name that you chose when you completed the *Childcare Center Dream Sheet*.

Responses will vary

4. Location: List 3 things to consider when choosing a location for a childcare center.

Responses will vary but should include ideas about safety, space, convenience for families, etc.

5. Financing: Using the internet, look up the estimated cost range for opening a childcare center.

Responses will vary based on location

Besides the cost of opening, what are some of the ongoing operational costs for a childcare center? List several.

Responses will vary but might include rent of space, utilities, supplies, payroll

6. Policies and Procedures: It is recommended that policies and procedures be published and given to parents along with a signed statement from parents saying that they have read and agree to abide by the policies and procedures. Why is this recommended?

To keep families accountable in following the rules and expectations of the childcare center

Create a policy for each of the following topics that might be included in the parent handbook:

Drop off and pick up procedures

All responses will vary

Meal and snack policies

Parent-staff communications

Billing policies

7. Marketing: List 3 ways that you will market your childcare center.

Responses will vary but may include social media, flyers, advertisements, word of mouth...

8. Hiring Staff: What qualities or characteristics do you want your staff members to have?

Responses will vary

9. Applicants: How many children will you be able to accommodate in your childcare center? What if you have more than that number apply?

Responses will vary

10. What do you think will be the most challenging aspects of owning your own childcare center?

Responses will vary

11. What do you think will be the most rewarding aspects of owning your own childcare center?

Responses will vary

Lesson Six – Introduction to Emergency Infant CPR

Lesson Overview

This lesson gives participants hands-on practice in correct CPR procedures. Completing infant CPR training ensures that participants are prepared in case of emergency. Administering CPR could save a baby's life if their heart stops beating or if they aren't breathing adequately.

Lesson Objectives

After completing this lesson, participants will be able to:

- Identify the steps in assessing when emergency medical help is needed in a life-threatening situation
- Demonstrate how to call for emergency medical assistance when needed
- Perform CPR on an unresponsive infant.

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• Envelopes • <i>Infant CPR Steps</i> • <i>Infant CPR Steps – Answer Key</i>	1. Print/photocopy <i>Infant CPR Steps</i> (one per group).	10-20 minutes
LEARN	• 3-month Child Care Experience™ Baby • Alcohol swabs • <i>Emergency Infant CPR</i> slide presentation • <i>Check Your Skills</i>	1. Print/photocopy <i>Check Your Skills</i> (one per participant). 2. Prepare <i>Emergency Infant CPR</i> slide presentation for viewing.	30 minutes
REVIEW	• <i>Emergency Infant CPR Test</i> • <i>Emergency Infant CPR Test – Answer Key</i>	1. Print/photocopy <i>Emergency Infant CPR Test</i> (one per participant).	5-10 minutes

Lesson Six – Introduction to Emergency Infant CPR

FOCUS: What Do I Do Next?

10-20 minutes

Purpose:

This activity will help participants identify the proper sequence of steps needed to perform infant CPR.

Materials:

- Envelopes
- *Infant CPR Steps*
- *Infant CPR Steps* – Answer Key

Facilitation Steps:

1. Divide participants into groups of two or three.
2. Give each group of participants an envelope with one set of *Infant CPR Steps* inside.
3. Read the following scenario: You are working in a childcare setting and suddenly notice an infant that was just playing is now lying motionless on the floor, is blue, and is not breathing.
4. Instruct participants to open the envelope, take out the pieces of paper, and place them face-up on their table or desk. Explain that they are to arrange the pieces of paper in sequential order, starting with the first step of infant CPR at the top, the second step directly below the first, and so on.
5. After five minutes, lead a class discussion. Ask for the first step of infant CPR, the second step, and so on. Instruct groups to correct the order of their steps, if necessary.
6. Instruct groups to turn their pieces of paper over, mix them up, and repeat arranging them in sequential order. This time, challenge groups to put the steps in order as quickly as they can. The first group to complete this task wins.
7. Briefly review the proper sequence of steps needed to perform infant CPR, ensuring all groups have placed their pieces of paper in the correct order once again.

Have participants justify why they would do that step next. If correct, go to the next step. If incorrect, discuss why.

Infant CPR Steps

Make sure the scene is safe for you and the infant.

Tap foot and shout, "Are you okay?"

If no response, shout for help. If someone comes, have them call for emergency medical assistance.
Start CPR.

Gently place the infant on a firm, flat surface.

Open the airway by tilting the head and lifting the chin.

Look, listen, and feel for breathing (5 to 10 seconds).

If not breathing, give 2 small puffs (one second each). Watch for the chest to rise with each breath.

Quickly move or open clothes from the front of the chest so that you can perform chest compressions.

Give 30 chest compressions (100-120 per minute) then give two breaths. After each compression, release pressure on the chest, letting it come back to its normal position.

After 1 minute or 5 sets of 30 chest compressions and two breaths, you can call for emergency medical assistance if not already done.

Answer all the dispatcher's questions, then return to the infant and start the steps of CPR again.

Continue giving sets of 30 chest compressions and 2 breaths until the infant starts to breathe voluntarily or trained medical help takes over.

Check for a brachial pulse.

Infant CPR Steps – Answer Key

1. Make sure the scene is safe for you and the infant.
2. Tap foot and shout, “Are you okay?”
3. If no response, shout for help. If someone comes, have them call for emergency medical assistance. Start CPR.
4. Gently place the infant on a firm, flat surface.
5. Quickly move or open clothes from the front of the chest so that you can perform chest compressions.
6. Give 30 chest compressions (100-120 per minute) then give two breaths. After each compression, release pressure on the chest, letting it come back to its normal position.
7. Look, listen, and feel for breathing (5 to 10 seconds).
8. Open the airway by tilting the head and lifting the chin.
9. If not breathing, give 2 small puffs (one second each). Watch for the chest to rise with each breath.
10. After 1 minute or 5 sets of 30 chest compressions and two breaths, you can call for emergency medical assistance if not already done.
11. Answer all the dispatcher’s questions, then return to the infant and start the steps of CPR again.
12. Continue giving sets of 30 chest compressions and two breaths until the infant starts to breathe voluntarily or trained medical help takes over.
13. Check for a brachial pulse.

Lesson Six – Introduction to Emergency Infant CPR

LEARN: Infant CPR

30 minutes

Purpose:

This activity helps participants learn about, practice, and check their understanding of the proper procedures in handling an emergency and performing infant CPR.

Materials:

- 3-Month Child Care Experience™ Baby
- Alcohol swabs
- *Emergency Infant CPR* slide presentation
- *Check Your Skills*

Facilitation Steps:

1. Display **Slides 1-7** and discuss.
2. Display **Slides 8-10** and discuss. Explain that there are differences between infant and child CPR. Since we are only using the 3-Month Child Care Experience™ Baby, we are only demonstrating and discussing infant CPR.

Explain that the skills demonstrated and practiced in this lesson will be peer-assessed.

Step	Description
1. Check to see that the scene is safe.	
2. Tap the infant's foot and shout, "Are you okay?"	
3. If the infant does not respond, yell for help: • If someone comes, ask them to call for emergency medical assistance. • If no one comes, stay with the infant to start steps of CPR.	
4. Gently place the infant on a firm, flat surface.	
5. Quickly move or open clothes from the front of the chest.	
6. Use either heel of one hand or two-thumb encircling, 1 finger width below the nipple line, give 30 chest compressions, pushing straight down $\frac{1}{3}$ - $\frac{1}{2}$ the depth of the infant's chest at a rate of 100-120 compressions per minute. Give 2 small breaths. After each compression, release pressure on the chest, allowing it to return to its normal position.	This pressure not only squeezes the heart to keep it going, but it increases intrathoracic pressure.
7. Look, listen, and feel for breathing (5-10 seconds).	Put your head sideways down by the chest to see if the chest rises, indicating that the baby is breathing; listen by the nose and mouth area to hear if the baby is breathing.
8. Open the infant's airway.	Tilt the head and lift the chin slightly.

9. If not breathing, give 2 small puffs (1 second each). Watch for the chest to rise with each breath.	If air does not seem to be going through, or the chest does not rise, re-tilt the head and try again. If air is not going through, the airway is blocked, and you'll need to perform the steps for airway obstruction.
10. After 1 minute or 5 sets of 30 chest compressions and 2 breaths, you can call for emergency medical assistance if not already done.	
11. Answer all the dispatcher's questions, then return to the infant/child and start the steps of CPR again.	
12. Check for brachial pulse.	When you return to the infant to continue CPR, you have the option of finding the brachial artery in the arm to ensure there is no pulse. If an infant is not breathing, they typically do not have a heartbeat either, but it's a good idea to check. If the infant does have a heartbeat, you do not need to continue with the chest compression, but you will need to continue with rescue breathing at the rate of 1 breath every 3 seconds, checking for brachial pulse every 2 minutes.
13. Continue giving sets of 30 chest compressions and 2 breaths until the infant/child starts to breathe on her own or trained medical help takes over.	

- For **Slide 11**, step 8, demonstrate how to feel for a brachial pulse: Place 2 fingers on the brachial artery, inside of the upper arm about halfway between the elbow and the shoulder.

- Demonstrate how to perform infant (age 0-1 year) CPR, explaining the steps as you go.

- Display **Slides 12-14** and discuss it in more detail. Consider allowing time for participants to practice accessing medical care and calling for emergency medical assistance.

Divide participants into pairs and instruct a participant to role-play the dispatcher and the other the caregiver. You may provide disconnected phones to practice this skill.

- Ask the following questions to assess participants' understanding of the information presented:
 - What are the 3 C's in an emergency?
Answer: Check, Care, Call
 - Describe "Check."
Answer: Check the scene for safety; check the victim for injuries
 - Describe "Care."
Answer: Assess the most life-threatening injury and treat first
 - Describe "Call."
Answer: Call for emergency medical assistance
 - What information must the caregiver provide when calling for emergency medical assistance?
Answer: Address, cross streets, phone number, number of people injured, type of injury, and type of care administered
- Have participants form groups of 2-3 to practice the technique you modeled.

Child Care Experience™ Curriculum

8. Give each participant a photocopy of the *Check Your Skills*. If you have participants working in groups, give them 1 copy for each peer assessor that will observe them.

They should put their name on the top and have their peer assessor(s) fill out the worksheet as they demonstrate the process.

Remind participants that the one performing the procedure should not refer to the worksheet while completing the steps.

9. Consider assigning numbers (1, 2, and 3) to each participant within the group so that participant 1 practices first while 2 and 3 observe and peer evaluate, and vice versa.
10. Have each pair or group of participants take turns practicing the techniques you modeled with the 3-Month Child Care Experience™ Baby. Use alcohol swabs to clean the baby between participants.

Circle the room, helping and answering questions as necessary. You can find instructions for how to use the Child Care Experience™ Baby for CPR here:
www.realityworks.com/childcareexperience-downloads

Name: _____ Class: _____

Check Your Skills

Directions: Take turns with your partner(s) demonstrating and assessing the rescue skills you have learned. For example, one will demonstrate the steps for infant CPR while the other checks off each step as it is performed. If any steps are missed or performed incorrectly, stop, explain the correct procedure, and practice the sequence of steps again.

Peer evaluators: be sure to add up the total points earned for the skill, make any comments and/or notes as needed, and sign at the conclusion of the demonstration.

	Excellent	Good	Fair	Poor
	1	2	3	4
1. Check to see that the scene is safe.				
2. Tap the infant's foot and shout, "Are you okay?"				
3. If the infant does not respond, yell for help: If someone comes, ask them to call for emergency medical assistance. If no one comes, stay with the infant to start steps of CPR.				
4. Gently place the infant on a firm, flat surface.				
5. Quickly move or open clothes from the front of the chest.				
6. Give 30 chest compressions (100-120 per minute) then give 2 breaths. After each compression, release pressure on the chest, letting it come back to its normal position.				
7. Look, listen, and feel for breathing (5 to 10 seconds).				
8. Open the infant's airway (tilt head and lift chin).				
9. If not breathing, give 2 breaths (1 second each). Watch for the chest to rise with each breath.				
10. After 5 sets of 30 chest compressions and 2 breaths, call for emergency medical assistance if not already done.				
11. Answer all the dispatcher's questions, then return to the infant/child and start the steps of CPR again.				
12. Check for a brachial pulse.				
13. Continue giving sets of 30 chest compressions and 2 breaths until the infant/child starts to move or trained medical help takes over.				

Total Points Earned: _____

Comments/Notes:

Peer Evaluator Signature: _____

Lesson Six – Introduction to Emergency Infant CPR

REVIEW: Check Your Understanding

5-10 minutes

Purpose:

This activity assesses participants' understanding of the information presented.

Materials:

- *Emergency Infant CPR Test*
- *Emergency Infant CPR Test – Answer Key*

Facilitation Steps:

1. Distribute the *Emergency Infant CPR Test* to each participant and have them complete it.

Name: _____ Class: _____

Emergency Infant CPR Test

1. What are the 3 C's in handling a medical emergency? Circle the correct answer.

- a. Console, Calm, Care
- b. Care, CPR, Calm
- c. CPR, Check, Call
- d. Check, Care, Call
- e. Care, CPR, Console

2. What do the CAB's of CPR stand for? Circle the correct answer.

- a. Chest, Airway, Breathing
- b. Chest Compressions, Assist, Breathing
- c. Cardio, Attend, Back Support
- d. Compress, Attend, Body Position
- e. Chest Compressions, Airway, Breathing

3. Order the steps of infant CPR by placing the correct step number next to each step.

	Steps
	If not breathing, give 2 breaths (1 second each). Watch for the chest to rise with each breath.
	Give 30 chest compressions (100-120 per minute) then give 2 breaths.
	Quickly move or open clothes from the front of the chest.
	Gently place the infant on a firm, flat surface.
	Answer all the dispatcher's questions, then return to the infant and start the steps of CPR again.
	Open the infant's airway (tilt head and lift chin).
	Continue giving sets of 30 chest compressions and two breaths until the infant starts to breathe on her own or trained medical help takes over.
	Look, listen, and feel for breathing (5 to 10 seconds).
	After 1 minute or 5 sets of 30 chest compressions and 2 breaths, call for emergency medical assistance if not already done.
	Check for a brachial pulse.

4. How many compressions should you perform in each set of compressions and breaths of CPR? Circle the correct answer.

- a. 10
- b. 20
- c. 30
- d. 40
- e. 50

5. How many breaths should you give after each set of 30 chest compressions? Circle the correct answer.

- a. 1
- b. 2
- c. 3
- d. 4
- e. 5

Emergency Infant CPR Test – Answer Key

1. What are the three C's in handling a medical emergency? Circle the correct answer.

- a. Console, Calm, Care
- b. Care, CPR, Calm
- c. CPR, Check, Call
- d. Check, Care, Call**
- e. Care, CPR, Console

2. What do the CAB's of CPR stand for? Circle the correct answer.

- a. Chest, Airway, Breathing
- b. Chest Compressions, Assist, Breathing
- c. Cardio, Attend, Back Support
- d. Compress, Attend, Body Position
- e. Chest Compressions, Airway, Breathing**

3. Order the steps of infant CPR by placing the correct step number next to each step.

	Steps
6	If not breathing, give 2 breaths (1 second each). Watch for the chest to rise with each breath.
3	Give 30 chest compressions (100-120 per minute) then give 2 breaths.
2	Quickly move or open clothes from the front of the chest.
1	Gently place the infant on a firm, flat surface.
8	Answer all the dispatcher's questions, then return to the infant and start the steps of CPR again.
5	Open the infant's airway (tilt head and lift chin).
10	Continue giving sets of 30 chest compressions and two breaths until the infant starts to breathe on her own or trained medical help takes over.
4	Look, listen, and feel for breathing (5 to 10 seconds).
7	After 1 minute or 5 sets of 30 chest compressions and 2 breaths, call for emergency medical assistance if not already done.
9	Check for a brachial pulse.

4. How many compressions should you perform in each set of compressions and breaths of CPR? Circle the correct answer.

- a. 10
- b. 20
- c. 30**
- d. 40
- e. 50

5. How many breaths should you give after each set of 30 chest compressions? Circle the correct answer.

- a. 1
- b. 2**
- c. 3
- d. 4
- e. 5

Additional Resources

Organizations and Websites

American Academy of Pediatrics www.aap.org

American Heart Association www.americanheart.org

American Red Cross www.redcross.org

KidsHealth www.kidshealth.org

MedlinePlus www.medlineplus.gov

National Institutes of Health (NIH) www.nih.gov

Lesson Seven – Infant Airway Obstruction Emergency Procedures

Lesson Overview

Choking is often caused by food or other foreign objects becoming lodged in the throat and blocking the flow of air to the lungs. It can result in unconsciousness and cardiopulmonary arrest. Choking accounts for more than 3,000 deaths each year. It is the number one cause of infant death. The recognition and proper steps in a choking emergency can save the life of a child.

Lesson Objectives

After completing this lesson, participants will be able to:

- Identify objects that can cause choking in an infant or toddler
- Explain why abdominal thrusts (the Heimlich maneuver) should not be used on an infant
- Explain and demonstrate the proper procedures a caregiver should administer in a choking emergency

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• <i>What's in the Bag?</i> • Large paper bag, such as a grocery bag • 20 small objects/toys/foods Typical unsafe objects include balloons, plastic bags, hard candy, paperclips, teddy bears with button eyes, coins, grapes, hotdog slices, nuts, popcorn, raw vegetables, batteries, broken crayons. Note: About half of the objects you gather should be unsafe for infants • <i>Infant Airway Obstruction Emergency</i> slide presentation	1. Print/photocopy <i>What in a Bag?</i> (one per participant). 2. Gather the 20 small objects and large bag. 3. Prepare to share slide presentation.	10 minutes
LEARN	• <i>Infant Airway Obstruction Emergency</i> slide presentation • 9-month Child Care Experience™ Baby • <i>Check Your Skills</i>	1. Prepare to share the slide presentation. 2. Prepare the 9-month Child Care Experience™ Baby with the choking object. 3. Print/photocopy <i>Check Your Skills</i> (one per participant).	30 minutes
REVIEW	• <i>Infant Airway Obstruction Emergency Procedures Test</i> • <i>Infant Airway Obstruction Emergency Procedures Test – Answer Key</i>	1. Print/photocopy <i>Infant Airway Obstruction Emergency Procedures Test</i> (one per participant).	5 minutes

Lesson Seven – Infant Airway Obstruction Emergency Procedures

FOCUS: Identifying Choking Hazards

10 minutes

Purpose:

This activity will help participants identify what might cause a choking emergency in an infant or toddler and how to prevent it.

Materials:

- *What's in the Bag?*
- Large paper bag filled with 20 small objects/toys/foods
 - Typical unsafe objects include balloons, plastic bags, hard candy, paperclips, teddy bears with button eyes, coins, grapes, hotdog slices, nuts, popcorn, raw vegetables, batteries, and broken crayons
- *Infant Airway Obstruction Emergency* slide presentation

Facilitation Steps:

1. Share information the following background information as you see fit. Choking is often caused by food or other foreign objects becoming lodged in the throat and blocking the flow of air to the lungs.

It can result in unconsciousness and cardiopulmonary arrest. Choking accounts for more than 3,000 deaths each year. It is the number one cause of infant death.

The recognition and proper steps in a choking emergency can save the life of a child.

2. Give each participant a photocopy of the *What's in the Bag?* worksheet.
3. Explain that infants like to put things into their mouths as they explore their world. Caregivers are responsible for ensuring that the environment is safe from choking emergencies.

An airway obstruction emergency occurs when an object becomes lodged in the throat, restricting air from getting into the lungs.

If this happens, the caregiver must act immediately or the infant's heart will stop, and death will occur.

4. Explain to participants that you will show them a variety of small objects, and it is their job to determine whether each object is safe or unsafe for an infant or toddler under the age of four.

Instruct them to individually write their answers on their worksheet as each object is shown.

5. One at a time, quickly pull the 20 small objects out of the large paper bag, show them to the participants, and place each object on a table at the front of the classroom.
6. Lead a class discussion by asking participants which objects are safe and which are unsafe. Ask participants to give evidence to justify their decisions.

Form two piles, safe and unsafe, and explain that the objects in the unsafe pile could cause choking and should never be placed within the reach of an infant or toddler.

7. Brainstorm other objects that might be found in a home, daycare setting, or other environment that could be unsafe for an infant or toddler, putting them at risk of choking. Tell participants that round items are especially dangerous because they can form a plug over the airway.

8. Display **Slide 2** and summarize the discussion by pointing out the foods to avoid with infants 4-12 months. Foods to avoid with infants 4-12 months:
- Avoid soft or sticky foods: Soft, sticky foods, such as marshmallows and peanut butter, can get lodged in the throat. Peanut butter and other nut butters are difficult for an infant to swallow safely.
 - Avoid hard foods: Nuts, popcorn, raisins, and other small, dried fruit or seeds are potential choking hazards.
 - Avoid large pieces of food: Be sure all food is no larger than the size of a pea. Do not give infants hard, uncooked vegetables, such as carrots, celery, and green beans. These should be diced, shredded, or cooked and cut up or mashed. Cut all fruits, such as grapes, melons, or berries into quarters before serving. Avoid hard fruits, such as apples. Cut meats and cheeses into very small pieces or shred them and give only one or two pieces as a time.

Name: _____ Date: _____

What’s in the Bag?

Directions: As your instructor quickly pulls objects out of the paper bag, determine whether each object is safe or unsafe for an infant or toddler under the age of four. Place your answers below, creating two lists, safe and unsafe, then explain why you made the decision you did.

Safe Objects:	Why do you think the object is safe?
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

Unsafe Objects:	Why do you think the object is unsafe?
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____
6. _____	_____
7. _____	_____
8. _____	_____
9. _____	_____
10. _____	_____

Lesson Seven – Infant Airway Obstruction Emergency Procedures

LEARN: Handling an Infant Airway Obstruction Emergency

30 minutes

Purpose:

This activity helps participants learn about, practice, and check their understanding of the proper procedures in handling an infant choking emergency.

Materials:

- *Infant Airway Obstruction Emergency* slide presentation, slides 3-9
- 9-Month Child Care Experience™ Baby
- *Check Your Skills*

Facilitation Steps:

1. Insert the round ball into the 9-Month Child Care Baby's oral cavity so it falls into the back of the throat. At this point the Baby is ready for proper technique demonstration and practice.

Use of proper technique coupled with the appropriate force will dislodge the object from the back of the throat.

2. Ask participants what they've heard about airway obstruction/choking emergencies and what procedure(s) they've heard about with these emergencies. They will likely bring up the abdominal thrust (Heimlich maneuver).

- For those who may not know about abdominal thrusts, briefly explain the process: The Heimlich maneuver forces air pushed out of a person's lungs, making him cough. The force of the cough may help push the object out of the airway, allowing him to breathe.
- Explain that while the Heimlich maneuver works well with adults and children over one year of age, it should not be used on infants. Doing the Heimlich maneuver on infants less than a year old may cause harm to their body.

3. Display **Slide 3** and discuss how to recognize a choking infant.
4. Display **Slides 4-9** and demonstrate the steps in handling an infant airway obstruction emergency using the 9-Month Child Care Experience™ Baby.

You can find instructions for how to use the 9-Month Child Care Experience™ Baby here: www.realityworks.com/childcareexperience-downloads

Explain that the skills demonstrated and practiced within this lesson will be peer-assessed.

Steps
1. If alone, shout for help: • If someone comes, have them call for emergency medical assistance • If no one comes, continue rescue skills for one minute, and then call for emergency medical assistance
2. Hold the infant face down on your forearm, supporting the infant's head and jaw with your hand. Keep the airway open by not letting the infant's head drop forward. Sit or kneel and rest your arm on your thigh, holding the infant's shoulders below his/her hips. Straddle the infant's legs on your arm.
3. Give up to 5 "back slaps" with the heel of your free hand between the infant's shoulder blades. Each slap slightly harder to help the obstruction dislodge.
4. If the object does not come out after 5 back slaps, turn the infant onto his/her back by holding the back of the infant's head with your free hand and flipping the infant to your free forearm, supporting the infant's head and neck with your hand.
5. Give up to 5 "chest thrusts" on the breastbone using the heel of the hand, placing your fingertips one finger width below the nipple line. Press down $\frac{1}{3}$ to $\frac{1}{2}$ the depth of the infant's chest (1 second in length). Allow the chest to come back to normal position.
6. Alternate giving 5 "back slaps" and 5 "chest thrusts" until the object comes out; the infant breathes, coughs, or cries; or until the infant stops responding. If the infant stops responding and becomes unconscious or limp, perform the steps of infant CPR.

If this works, and the object comes out, call an emergency medical person, and let parents know what happened. The baby will still need to be checked for any damage or bruising from the procedure. Possible trauma to the airway could result in friction swelling of the airway. Possible aspiration if a particle got down into the lungs could result in pneumonia later.

- | | |
|--|---|
| <p>5. Have participants form groups of 2-3 to practice the technique you modeled.</p> | <p>Consider assigning a number (1, 2, and 3) to each participant within the group such that 1 practices first while 2 and 3 observe and peer evaluate, and vice versa.</p> |
| <p>6. Give each participant a copy of the <i>Check Your Skills</i> worksheet and have them complete it as they work with their partner or group.</p> | <p>8. Have each pair/group work with the 9-month Child Care Experience™ Baby to complete the review assessment. Ensure that participants lodge the round ball into the airway passage completely before performing their steps.</p> |
| <p>7. Explain that the one performing the procedure should not refer to the worksheet while completing the steps.</p> | <p>9. Circle the room, helping and answering questions as necessary.</p> |

Check Your Skills

Name: _____ Date: _____

Directions: Take turns with your partner demonstrating and assessing the rescue skills you learned. For example, one will demonstrate the steps to help a choking infant while the other checks off each step as it is performed. If any steps are missed or performed incorrectly, stop, explain the correct procedure, and practice the sequence of steps again.

Peer evaluators: Be sure to add up the total points earned for the skill, make any comments and/or notes as needed, and sign at the conclusion of the demonstration.

	Excellent	Good	Fair	Poor
	1	2	3	4
1. If alone, shout for help: • If someone comes, have them call for emergency medical assistance • If no one comes, continue rescue skills for 1 minute, and then call for emergency medical assistance				
2. Hold the infant face down on your forearm, supporting the infant's head and jaw with your hand. Keep their airway open by not letting the infant's head drop forward. Sit or kneel and rest your arm on your right thigh, holding the infant's shoulders below their hips. Straddle the infant's legs on your arm.				
3. Give up to 5 "back slaps" with the heel of your free hand between the infant's shoulder blades. Each slap slightly harder to help the obstruction dislodge.				
4. If the object does not come out after 5 back slaps, turn the infant onto his/her back by holding the back of the infant's head with your free hand and flipping the infant to your free forearm, supporting the infant's head and neck with your hand.				
5. Give up to 5 "chest thrusts" on the breastbone using the heel of the hand 1 finger width below the nipple line. Press straight down $\frac{1}{4}$ - $\frac{1}{2}$ the depth of the infant's chest (1 second in length). Allow the chest to come back to normal position.				
6. Alternate giving 5 "back slaps" and 5 "chest thrusts" until the object comes out or the infant breathes, coughs, cries, or stops responding. If the infant stops responding and becomes unconscious or limp, perform the steps of infant CPR.				

Total Points Earned: _____

Child Care Experience™ Curriculum

Comments/Notes:

Peer Evaluator Signature: _____ -

Lesson Seven – Infant Airway Obstruction Emergency Procedures

REVIEW: Check Your Understanding

5 minutes

Purpose:

This activity assesses participants' understanding of the information presented.

Materials:

- *Infant Airway Obstruction Emergency Procedures Test*

Facilitation Steps:

1. Distribute the *Infant Airway Obstruction Emergency Procedures Test* to each participant and have them complete it.

Infant Airway Obstruction Emergency Procedures Test

1. For each of the following objects, indicate whether it is safe or unsafe for an infant by writing the correct letter in the space next to each object.

Object	Safe or Unsafe
___ marble	a. Safe
___ rattle	b. Unsafe
___ grape	
___ stuffed animal	
___ small Lego® piece	
___ hot dog cut into slices	
___ play money and coins	

2. Order the steps of helping a choking infant by placing the correct number next to each step.

	Step
___	Give up to 5 “back slaps” with the heel of your free hand between the infant’s shoulder blades. Each slap slightly harder to help the obstruction dislodge.
___	Give up to 5 “chest thrusts” on the breastbone using the heel of the hand, placing your fingertips 1 finger width below the nipple line. Press straight down $\frac{1}{3}$ - $\frac{1}{2}$ the depth of the infant’s chest (1 second in length). Allow the chest to come back to normal position.
___	If alone, shout for help: • If someone comes, have them call for emergency medical assistance • If no one comes, continue rescue skills for one minute, and then call for emergency medical assistance
___	Alternate giving 5 “back slaps” and 5 “chest thrusts” until the object comes out or the infant breathes, coughs, cries, or stops responding. If the infant stops responding and becomes unconscious or limp, perform the steps of infant CPR.
___	Hold the infant face down on your forearm, supporting the infant’s head and jaw with your hand. Keep their airway open by not letting the infant’s head drop forward. Sit or kneel and rest your arm on your right thigh, holding the infant’s shoulders below his/her hips. Straddle the infant’s legs on your arm.
___	If the object does not come out after 5 back slaps, turn the infant onto their back by holding the back of the infant’s head with your free hand and flipping the infant to your free forearm, supporting the infant’s head and neck with your hand.

3. Why should abdominal thrusts (the Heimlich maneuver) not be used on an infant? Circle the correct answer.
- It may cause harm to the infant’s body
 - It doesn’t work
 - The baby will cry
 - It will cause the object to go further into the airway

Infant Airway Obstruction Emergency Procedures Test – Answer Key

1. For each of the following objects, indicate whether it is safe or unsafe for an infant by writing the correct letter in the space next to each object.

Object	Safe or Unsafe
<u> b </u> marble	a. Safe
<u> a </u> rattle	b. Unsafe
<u> b </u> grape	
<u> a </u> stuffed animal	
<u> b </u> small Lego piece	
<u> b </u> hot dog cut into slices	
<u> b </u> play money and coins	

2. Order the steps of helping a choking infant by placing the correct number next to each step.

	Step
<u> 3 </u>	Give up to five “back slaps” with the heel of your free hand between the infant’s shoulder blades. Each slap slightly harder to help the obstruction dislodge.
<u> 5 </u>	Give up to five “chest thrusts” on the breastbone using the heel of the hand, placing your fingertips one finger width below the nipple line. Press straight down $\frac{1}{3}$ to $\frac{1}{2}$ the depth of the infant’s chest. (1 second in length.) Allow the chest to come back to normal position.
<u> 1 </u>	If alone, shout for help: • If someone comes, have them call for emergency medical assistance. • If no one comes, continue rescue skills for one minute, and then call for emergency medical assistance.
<u> 6 </u>	Alternate giving five “back slaps” and five “chest thrusts” until the object comes out; the infant breathes, coughs, or cries; or until the infant stops responding. If the infant stops responding and becomes unconscious or limp, perform the steps of infant CPR).
<u> 2 </u>	Hold the infant face down on your forearm, supporting the infant’s head and jaw with your hand. Keep airway open by not letting the infant’s head drop forward. Sit or kneel and rest your arm on your right thigh, holding the infant’s shoulders below his/her hips. Straddle the infant’s legs on your arm.
<u> 4 </u>	If the object does not come out after 5 back slaps, turn the infant onto his/her back by holding the back of the infant’s head with your free hand and flipping the infant to your free forearm, supporting the infant’s head and neck with your hand.

3. Why should abdominal thrusts (the Heimlich maneuver) not be used on an infant? Circle the answer.
- It may cause harm to the infant’s body**
 - It doesn’t work
 - The baby will cry
 - It will cause the object to go further into the airway

Lesson 8 – Child Care Experience™

Lesson Overview

In this lesson, participants will practice giving care based on the needs demonstrated by the Child Care Experience™ Baby. It will provide a hands-on experience as a childcare worker caring for multiple infants of varying ages simultaneously.

Lesson Objectives

After completing this lesson, participants will be able to:

- Understand and respond to the demands of infants of varying ages
- Master the care of the Child Care Experience™ Baby during the Child Care Experience™
- Understand the responsibilities and demands of working as an infant care provider, managing the needs of multiple infants simultaneously

Lesson at a Glance

Activity	Materials	Preparation	Approximate class time
FOCUS	• 3-Month Child Care Experience Babies • 9-Month Child Care Experience Babies • Smart device and software • Swaddling blanket • Diapers • Bottles • Pacifiers • Solid food spoons • Bottles • Diapers • Portable cribs • Changing pad • Highchair • Tummy time mat • Beacons • <i>Child Care Experience™ Baby Accessory & Care Event Chart</i> • <i>Participant Care Card</i> • <i>Child Care Experience™ Directions</i> • <i>Infant Daily Report</i> • <i>Child Care Experience™ Readiness Quiz</i> • <i>Child Care Experience™ Readiness Quiz – Answer Key</i>	1. Print/photocopy the <i>Child Care Experience™ Readiness Quiz</i> (one per participant). 2. Have software ready for programming. 3. Have all Babies, accessories, and supplies ready for use.	10 minutes
LEARN	• 3-Month Child Care Experience Babies • 9-Month Child Care Experience Babies • Smart device and software • Swaddling blanket	3. Print/photocopy the <i>Child Care Experience™ Baby Accessory & Care Event Chart, Participant Care Card, and Child Care Experience™ Directions</i>.	30-90 minutes

Child Care Experience™ Curriculum

	• Diapers • Bottles • Pacifiers • Solid food spoons • Diapers • Portable cribs • Changing pad • Tummy time mat • Beacons • Baby wristbands and marker • <i>Child Care Experience™ Baby Accessory & Care Event Chart</i> • <i>Participant Care Card</i> • <i>Child Care Experience™ Directions</i> • Classroom Management Pack	4. Set up Classroom Management Pack materials in stations around the room.	
REVIEW	• Student Report • Group Report • Baby Report • <i>Child Care Experience™ Reflection</i> • <i>Child Care Experience™ Assessment Rubric</i>	4. Print out all desired versions of the reports. 5. Print/photocopy the <i>Child Care Experience™ Reflection</i> (one per participant).	20-30 minutes

Child Care Experience™ (CCE) Purpose

The Child Care Experience™ is designed for the specific purpose of teaching infant care career skills, emulating that experience as closely as possible. It is meant for programs that want to teach childcare as a career pathway whether within Human Services or Education and Training. After students have completed the Child Care Experience™, working in a real childcare center should feel very familiar, as if they have done it before.

The Child Care Experience™ is a complete solution that combines simulation and curriculum to provide a capstone project for early childhood pathway programs in which each student participates in an in-class infant childcare simulation where they manage the care of multiple infants simultaneously. The simulation will consist of providing care for infants that are three months and nine months old because the needs of these two age groups differ.

This simulation takes place in a classroom setting, which will act as a pop-up childcare center. The program will include everything you need to create a simulated childcare facility, including portable cribs, changing pad, highchair, supplies, infant simulators, and accessories. The simulation provides students with transferable career skills in infant care.

How It Works

The participants(s) will begin the Child Care Experience™ when the instructor starts the simulation in class. Participants will be given a Beacon that will identify themselves as the caregiver for tracking purposes. Participants will “clock in” on the smart device with this Beacon as they would in a real job setting. Each participant or participants will be assigned to a specific group of Child Care Experience Babies that they must provide care for. The ratio of infants to childcare providers will be set up by the instructors. The simulation will begin when the instructor starts the simulation. Babies will start to fuss and cry, indicating that a Care Event is beginning.

It is possible that simultaneous Care Events will happen among several Babies at once, thereby making the participants multi-task and prioritize infant care as they would in a real childcare setting. Care Events that students will need to handle include feeding, rocking, burping, changing diapers, choking, and fussing. Random health and parent communication scenarios will happen during the simulation as well. Participants will enter their response to the scenario into the smart device provided.

During the simulation, participants will also be tasked with recording infant-specific information into a Baby Care Journal found on the smart device. Participants will log in and record information on each infant in their care during the simulation. They will report on things like feeding history, diaper changes, health concerns, and more just as real childcare workers do on the job. This childcare reporting information will also be available in hard copy form in the curriculum.

Individual participant, group, and Baby reports are available after the Child Care Experience™ is finished. These reports will provide details on the care given. Information will be shared on the problem solving the participants used for the random events that occurred during the simulation.

Infant Health Training Modules

The Child Care Experience Babies have been designed as standalone trainers to teach students infant CPR and infant airway obstruction emergency procedures. The 3-Month Child Care Experience™ Baby is a CPR trainer, which provides real time feedback to students on the compression depth and rate. The 9-Month Child Care Experience™ Baby is an infant choking trainer. Students will learn how to dislodge objects blocking the airway through back slaps and chest thrusts. See Lessons Six and Seven for information on teaching these skills.

Lesson Eight – Child Care Experience™

FOCUS: Introduction to Child Care Experience Babies and Care Events

10 minutes

Purpose:

Participants will be introduced to the Child Care Experience™ including the 3-Month and 9-Month Child Care Experience Babies. Supplies, accessories, and Care Events will be shared so that participants will understand how all the parts and pieces work together in the Child Care Experience™.

Materials:

- 3-Month Child Care Experience Babies
- 9-Month Child Care Experience Babies
- Smart device and software
- 3-Month Child Care Experience™ Baby Accessories
 - Swaddling blanket
 - Diapers
 - Bottles
- 9-Month Child Care Experience™ Baby Accessories
 - Pacifiers
 - Solid food spoons
 - Bottles
 - Diapers
- Portable cribs
- Changing pad
- Highchair
- Tummy time mat
- Beacons
- *Child Care Experience™ Baby Accessory & Care Event Chart*
- *Participant Care Card*
- *Child Care Experience™ Directions*
- *Infant Daily Report*
- *Child Care Experience™ Readiness Quiz*
- *Child Care Experience™ Readiness Quiz – Answer Key*

Facilitation Steps:

1. Begin by sharing the following information with participants:
The Child Care Experience™ is designed for the specific purpose of teaching infant care career skills, emulating that experience as closely as possible. After you have completed the Child Care Experience™, if you go to work in a real childcare center, it should feel very familiar, as if you have done this before.

The Child Care Experience™ will provide you with an in-class infant childcare simulation experience during which you will manage the care of multiple infants simultaneously. The simulation will consist of providing care for three-month-old and nine-month-old infants because the infants' needs differ at these ages. The Child Care Experience™ will take place in the classroom, which will act as a pop-up childcare center. The program includes everything you need to create a simulated childcare facility, including portable cribs, changing pad, highchair, supplies, infant simulators, and accessories. The simulation experience will provide you with transferable career skills in infant care.

2. You will begin the childcare simulation at the desired time in class. Explain the following to the participants:

You will be given a wristband with a Beacon to wear that you will use to

identify yourself as the caregiver for tracking purposes. You will use this to “clock in” on the smart device provided just as you would in a real job setting. Once everyone has clocked in, the instructor will start the simulation. You or a small group of you will be assigned to a specific group of Child Care Experience Babies to provide care for. The ratio of infant to childcare providers will be set up by the instructor. The simulation will begin when the instructor starts it. Babies will begin to fuss and cry, indicating that a Care Event is beginning.

It is possible that simultaneous Care Events may happen among several Babies at once, thereby making you multi-task and prioritize infant care as you would in a real childcare setting.

Care Events that you will need to handle include feeding, rocking, burping, diaper changing, choking, and fussiness. Random health and parent communication scenario will happen during the simulation as well. You will be notified via an audio cue, and you will choose your name from the list. Then enter your response to the event into the smart device provided.

During the simulation experience, you will also be tasked with recording specific care information for each Baby interaction in your care onto the smart device. You will log things like feeding history, diaper changes, health concerns, and more just as real childcare workers do on the job. This will provide information for the parent on the Baby report.

Individual student, individual Child Care Experience™ Baby, and group reports are available after the Child Care Experience™. These reports will provide details on the care given. Information entered as the solution for handling the random scenarios that

occurred during the simulation will also be on the report.

3. Introduce the 3-Month and 9-Month Child Care Experience Babies. Each of the Babies should be dressed in the outfit and diaper it arrived in. Have one of each Child Care Experience™ Baby available on display to show and pass around to participants. Explain that each of these babies has a specific set of accessories that will be used to provide care and help them successfully handle each of the Care Events.
4. Name each of the Babies. As you name each Baby, identify the name on its wristband. We suggest writing the Baby’s name on tape and adhering it to the wristband. This will help participants identify each of the Child Care Experience Babies in their care during the simulation experience.
5. Introduce participants to the accessories that will be used with each Child Care Experience™ Baby.

Accessory	3-Month Child Care Experience ™ Baby	9-Month Child Care Experience ™ Baby
Bottle	X	
Solid Food Spoon		X
Swaddling Blanket	X	
Pacifier		X
Diapers	X	X
Tummy Time Blanket	X	X
Highchair		X
Crib	X	X
Beacon with Wristband	X	X

Changing Pad	X	X
---------------------	---	---

Hold up each of the accessories and explain that some of the items are only used with the 3-Month Babies, some only with a 9-Month Baby, and some with both. Give participants the *Child Care Experience™ Baby Accessory & Care Event Chart*, so that they understand what item may be used with which Baby.

Care Event	3-Month Child Care Experience™ Baby	9-Month Child Care Experience™ Baby
Burp	Beacon	Beacon
Rock	Beacon	Beacon
Feed	Beacon Bottle	Beacon Solid Food Spoon Highchair
Diaper Change	Beacon 3-Month Diaper Set Changing Pad	Beacon 9-Month Diaper Set Changing Pad
Fussy	Beacon Swaddling Blanket	Beacon Pacifier
Random Events	Smart device	Smart device
Resting/Awake	Crib or Tummy Time Mat	Crib or Tummy Time Mat
Choke	N/A	Beacon Choking Object

6. Care Event Overview: Give each participant the *Child Care Experience™ Baby Events* handout. Share the information below while you have access to all supplies and accessories as well as the two Child Care Experience Babies. There are five Care Events that the infants in your care will require assistance with (plus a choking event, if desired). You and/or the participants in your group of childcare workers will need to respond to and provide appropriate care for each of the following events:

Feed:

- 3-Month Baby: Hold the bottle to the Baby's mouth. The Baby makes a sucking sound and coos when it is done.
- 9-Month Baby: Put the Baby in the highchair and use the solid food spoon to feed the Baby by placing the spoon in and out of the Baby's mouth, as if feeding it baby food. The Baby makes a feeding sound and coos when done.

Rock: Provide constant, gentle rocking with side-to-side or up-and-down motions. The Baby makes soft whimpering sounds and coos when done.

Burp: Place the Baby up to your shoulder and pat its back. The Baby makes small whimpering sounds and burps after several minutes.

Diaper Change: Put the Baby on the changing pad in the designated area. The Baby must be on the changing pad prior to changing the diaper. Take the Baby's diaper off; the Baby still whimpers. Put the other diaper on; the Baby coos.

Note: When documenting the diaper change in the app, write "I washed my hands" in the notes section.

Fussy:

- **3-Month Baby:** Place the swaddling blanket on a flat surface. Lay the Baby onto the swaddling blanket so that the sensor lines up with the diaper sensor. Wrap the Baby in the swaddling blanket. The Baby will coo when it is done.
- **9-Month Baby:** Pick up the Baby and put a pacifier into the Baby's mouth. The Baby will coo when the event is over.

All Care Events start with the Child Care Experience™ Baby fussing and then escalating to a full cry. That is the indication that Baby is asking for care. Each of the cries for the five Care Events are slightly unique. If you listen carefully, you will be able to discern the difference in the cries. The first step to providing care is to pick the Baby up. Don't forget to support the head of the 3-Month Baby. The Babies' cheeks light up when making any sounds to help you identify which Baby needs care.

If you do not recognize the Care Event associated with the cry, it is suggested to start with the bottle or spoon for feeding. If the Child Care Experience™ Baby continues to cry, you'll know immediately that the Care Event is not a feed event, and you can move on, trying a different Care Event. You must keep trying until you successfully stop the Baby's crying. It is recommended to try feeding, changing a diaper, or comforting with the swaddling blanket/pacifier. If the Baby continues to cry, try

rocking for one minute. If it continues to cry, the Baby's head may have been unsupported, or it may have been roughly handled. The Child Care Experience Babies will make softer sounds during care of feeding, burping, rocking, and fussing.

7. **Missed, Attempted, and Proper Care Events:** Child Care Experience™ Baby will track when no care is attempted by student(s) responsible for providing care. For example, if you are responsible for caring for three Child Care Experience Babies and miss a Care Event because you are tending to another Baby, that would be 'missed care.' This can be avoided by learning to multi-task and handle the needs of several infants at once.

The Child Care Experience™ Baby will also identify when the proper care is provided to the Baby. This occurs when the caregiver successfully cares for the Baby.

Attempted care occurs when the participant attempts to provide care but is never successful in identifying the Care Event in the time permitted. It is recorded as an "attempted care" and partial credit is given. The reasoning here is that it is better to attempt care than provide no care at all.

8. **Abuse Events:** Child Care Experience™ Baby will report when there is abuse. There are three types of abuse that it will record: head support failure, rough handling, and shaken baby.
 - **Head support failure:** Baby's head falls back (3-Month Baby only)
 - **Rough handling:** Hitting, kicking, dropping type of movements
 - **Shaken baby:** Baby's head goes back and forth 3 times in quick succession (3-Month Baby only)
9. **Baby Care Journal:** Participants will be responsible for reporting all infant care to the parents. There are three methods for this.

Method 1: Log the infant care in the Baby Care Journal on the smart device provided.

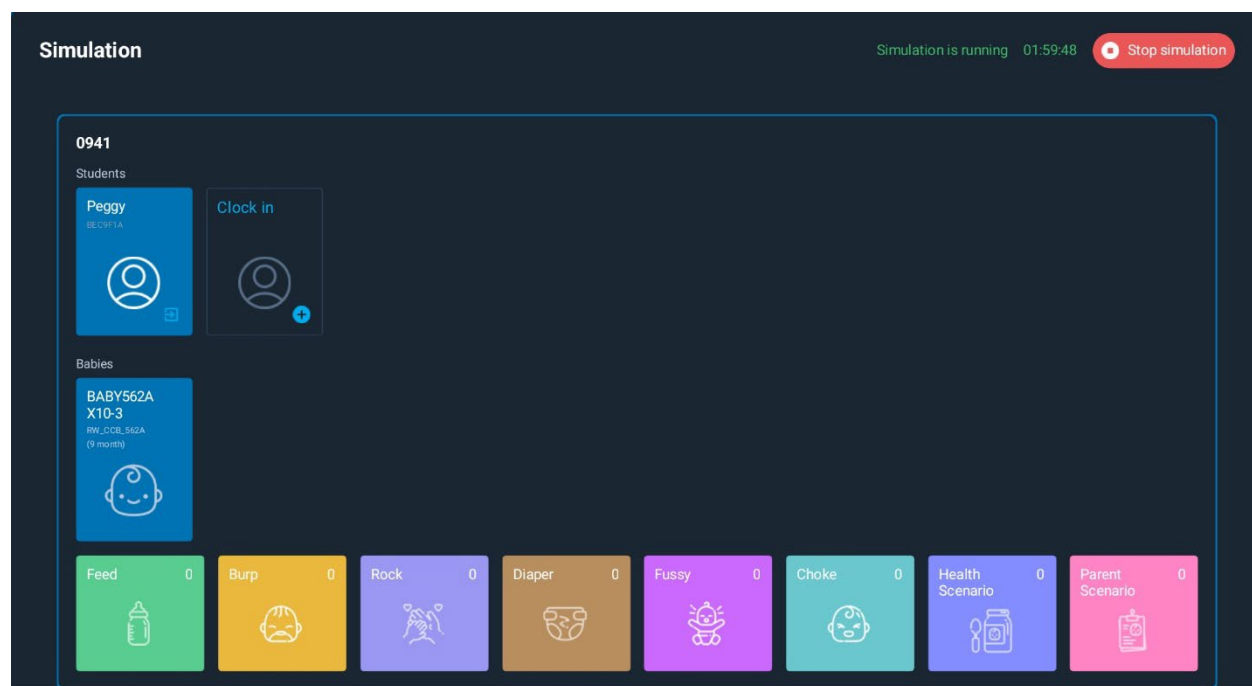
Child Care Experience™ Curriculum

Method 2: Document infant care on the *Infant Daily Report* form provided.

Method 3: Document care on the paper form and enter it into the smart device when you have a moment to do so.

The instructor may choose which method they wish to use for this task. Give each participant a copy of the *Infant Daily Report* form for reference.

After a specific Care Event is completed, the student must record the care on the smart device Baby Care Journal screen by clicking on the appropriate button in the software, such as diaper, feed, burp, rock, or fuss.



10. Random Health and Parent Communication Scenarios: During a simulation, an audio cue alerts the participant(s) of a new question on the smart device. There are two possible question categories: infant health and safety and parent communication. The student will select their name from the dropdown menu, read the question, then tap “What will you do in this case?” The participant will then type their answer in the space provided and tap OK. If there is more than one student participating in the simulation experience, only one of them will answer each Scenario. They can decide among themselves whose turn it is to answer. Note that nothing else, including entries in the Baby Care Journal for the parent report, can be done on the

smart device until the Scenario question is answered.

11. Give participants the *Child Care Experience™ Directions* to review, so they understand how the simulation will work.
12. Give participants the *Child Care Experience™ Readiness Quiz* and allow 5-10 minutes for completion. Have participants self-correct or peer correct as you reference the *Child Care Experience™ Readiness Quiz – Answer Key*.

Child Care Experience™ Baby Accessory & Care Event Chart

The following chart shows each Care Event and the accessories used to handle that Care Event. The Beacon on the wristband is used for each Care Event to identify who cared for the infant. The Child Care Experience™ Baby will register to closest Beacon on its own when care is given.

Care Event	3-Month Child Care Experience™ Baby	9-Month Child Care Experience™ Baby
Burp	Beacon	Beacon
Rock	Beacon	Beacon
Feed	Beacon Bottle	Beacon Solid Food Spoon Highchair
Diaper Change	Beacon 3-Month Diaper Set Changing Table/Pad	Beacon 9-Month Diaper Set Changing Table/Pad
Fussy	Beacon Swaddling Blanket	Beacon Pacifier
Scenarios	Smart device	Smart device
Resting/Awake	Crib or Tummy Time Mat	Crib or Tummy Time Mat
Choke	N/A	Beacon Choking Object



What to Do When a Child Care Experience Baby Starts Crying

NOTE: You must always wear your Beacon when caring for Babies. Always ensure the 3-Month Child Care Baby's head is properly supported.

Feed

Bottle (3-Month Child Care Baby only) – Place the Bottle up to the 3-Month Baby's mouth. The Baby's cry will change to a sucking sound and continue until you hear the Baby coo.

Solid Food (9-Month Child Care Baby only) – Place the Baby upright in the highchair, aligning the tag on the highchair with the tag on the Baby's diaper. If the tags are properly aligned, you will hear a slight change in the Baby's cry. Secure the highchair strap. Put the solid food spoon in the Baby's mouth for a few seconds and then remove it. The Baby will make chewing sounds on and off. Repeat this process until you hear the Baby coo.



Rock

Rock the Baby gently from side to side. The cry will change to soft sounds. Continue rocking until you hear the Baby coo.

Diaper

Place the Baby on the changing pad and line up the diaper tag with the changing pad tag. The Baby's cry will become much softer when the tags are aligned correctly. Remove the current diaper and replace it with the another one. If you changed the diaper correctly, the Baby will coo immediately.

NOTE: When documenting diaper changes in the Baby Care Journal, note that you washed your hands after changing the diaper.

Fussy

3-Month Baby – Pick up the Baby. It will detect movement and start to whimper. Remain rocking, walking, and/or providing nurturing movement for the duration of the Care Event and the Baby will continue to whimper. The Baby will coo when it is done.

OR

Place the soothing blanket on a flat surface. Lay the Baby on the soothing blanket so that the sensor lines up with the diaper tag. The cry will change to a whimper when aligned correctly. Wrap the Baby in the soothing blanket. The Baby will coo when done.



Fussy

9-Month Baby – Pick up the Baby and place the pacifier in its mouth. The cry will change to softer sounds. Leave the pacifier in until you hear the Baby coo.

Burp

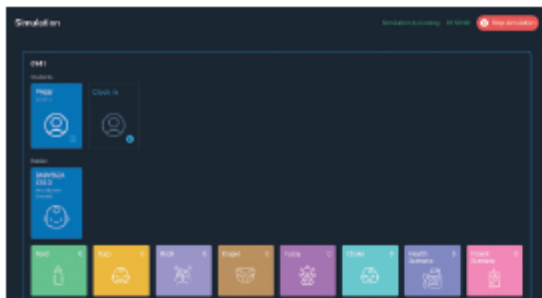
Place the Baby in an upright position on your shoulder. Lightly pat the Baby's back until you hear it burp.

Choke (9-Month Baby only)

The Baby will start to cough or make choking sounds when something is lodged in its throat. Place the Baby on its stomach at a 15-to-85-degree angle; the Baby's head should be lower than its feet. Hit the Baby 3-5 times between its shoulder blades. Turn the Baby onto its back and thrust into its chest 3-5 times. Repeat this process, alternating between hitting between the shoulder blades and thrusting into the chest, until the Baby coos and the item is dislodged from its throat.



Baby Care Journal



All Care Events listed above should be noted in the Baby Care Journal.

Digital Care Journal – Select yourself and the Baby you cared for on the smart device. Choose the event you are reporting and enter the information in the space provided. Save and close.

Printed Care Journal – Document the Care Event on your Infant Daily Report.

Health & Parent Scenarios

Scenarios may appear on the smart device throughout the simulation. When this happens, a Baby will make a ding-dong sound. Read through the scenario carefully and select your name from the student dropdown. Type your answer in the textbox and tap Submit.



Frustration-Reducing Measures for When Child Care Experience Babies Cry

- Take several deep breaths and count to 10
- Say the alphabet
- Close your eyes and think of something pleasant

NOTE: All Babies record abusive events. The 3-Month Child Care Babies record head support, rough handling, and shaken baby syndrome. 9-Month Child Care Babies record rough handling.

Child Care Experience™ Directions

The length of the Child Care Experience will be set by your instructor. Use the *Child Care Experience™ Baby Participant Care Card* as a helpful resource and do not forget the basics:

- When a Baby cries, pick it up while carefully supporting the head
- Try these Care Events:
 - Feed
 - Fussy
 - Burp
 - Rock
 - Diaper

Note: Make sure to use the appropriate accessories for each of the Child Care Experience Babies in your care.

- Do not use the solid food spoon, highchair, or pacifier with the 3-Month Child Care Experience™ Baby
 - Do not use the swaddling blanket with the 9-Month Child Care Experience™ Baby
 - Remember to use the changing pad for all diaper change events
- When the Child Care Experience™ Baby cries due to the following, rock the Baby:
 - Rough handling
 - Head support failure
 - Shaken baby
- Remember to log the appropriate Care Events in the Baby Care Journal on the smart device or complete the hardcopy *Infant Daily Report* form provided for each Baby
- Listen for audio cues from the smart device, alerting you that a Scenario must be completed. If you are working in a group of caregivers, only one needs to respond per Scenario.

Some infants are more challenging than others. Your goal is to satisfy each Child Care Experience™ Baby's needs as best you can. It is also your goal to prioritize and manage the Child Care Experience Babies in your care simultaneously.

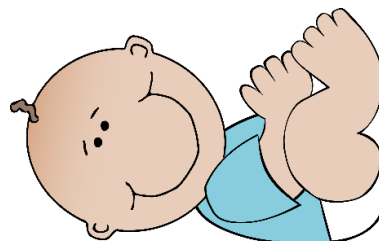
The Beacon should remain on your wrist throughout the simulation. This holds you accountable for providing appropriate care for the infants you are responsible for. It is recommended to wear the Beacon on the non-dominant hand with the Beacon facedown, not on top of the wrist.

Infant Daily Report

Teacher Name: _____

Child's Name _____

Arrival Time _____ Date: _____



Information about your baby's day

Feeding information:

_____  Bottle Time: _____  _____ Solids Time: _____
_____ Bottle Time: _____ _____ Solids Time: _____
_____ Bottle Time: _____ _____ Solids Time: _____

Diaper changes:

Time: _____

Time: _____

Time: _____



Demeanor: _____



Notes to Parent:



Child Care Experience™ Readiness Quiz

Name: _____

Date: _____

Directions: Answer the following questions by writing your response in the space provided.

1. List the six types of care you will provide for Child Care Experience™ Baby.

_____	_____
_____	_____
_____	_____

2. List three other sounds (besides crying) Child Care Experience™ Baby makes.

3. The first indication that care is needed is _____.

4. _____ is used to track who cares for Child Care Experience™ Baby.

5. An _____ cue will alert you when a Scenario has begun.

6. List two things that are considered abuse and will be recorded during the simulation.

_____	_____
-------	-------

7. Name four things that need to be recorded in the Baby Care Journal.

_____	_____
_____	_____

8. The first thing you do when beginning the simulation is _____.

9. Circle the accessories that are used with each of the Child Care Experience Babies:

3-Month Child Care Experience™ Baby:

Bottle

3-Month Diaper Set

Solid Food Spoon

9-Month Diaper Set

Highchair

Changing Table

Pacifier

Swaddling Blanket

Tummy Time Mat

Crib

Child Care Experience™ Curriculum

9-Month Child Care Experience™ Baby:

Bottle	3-Month Diaper Set
Solid Food Spoon	9-Month Diaper Set
Highchair	Changing Table
Pacifier	Swaddling Blanket
Tummy Time Mat	Crib

Child Care Experience™ Readiness Quiz— Answer Key

1. List the six types of care you will provide for Child Care Experience™ Baby.

Feed
Fussy
Burp

Choke
Rock
Diaper

2. List three other sounds (besides crying) Child Care Experience™ Baby makes.

Answers will vary but could be burping, cooing, coughing, fussing

3. The first indication that care is needed is **Child Care Experience™ Baby starts to whimper, cry, fuss, or cough.**

4. **The Beacon** is used to track who cares for Child Care Experience™ Baby.

5. An **audio** cue will alert you when a random event has begun.

6. List two things that are considered abuse and will be recorded during the simulation.

Answer will vary but could be rough handling, head support failure, and shaken baby

7. Name four things that need to be recorded in the Baby Care Journal.

Bottles

Diaper Changes

Notes

Solid Food

8. The first thing you do when beginning the simulation is **clock in and put the Beacon on.**

9. Circle the accessories that are used with each of the Child Care Experience Babies:

3-Month Child Care Experience™ Baby:

Bottle

3-Month Diaper Set

Solid Food Spoon

9-Month Diaper Set

Highchair

Changing Table

Pacifier

Swaddling Blanket

Tummy Time Mat

Crib

Child Care Experience™ Curriculum

9 Month Child Care Experience™ Baby:

Bottle

3-Month Diaper Set

Solid Food Spoon

9-Month Diaper Set

Highchair

Changing Table

Pacifier

Swaddling Blanket

Tummy Time Mat

Crib

Lesson Eight – Child Care Experience™

LEARN: Demo and Child Care Experience™

30-90 minutes

Purpose:

Participants will practice with each Child Care Experience™ Baby to ensure understanding of each Care Event, Scenario, abuse event, and parenting reporting responsibilities. Participants learn how the Child Care Experience™ Baby works and how to properly respond and report its basic needs. Participants will then participate in the fully immersive Child Care Experience™.

The simulation will put participants in the role of a childcare worker in an infant room. Participants will learn how to provide care to multiple infants simultaneously, learning time management and prioritization skills.

The purpose is to provide students with the opportunity to learn transferable childcare career skills.

Materials:

- 3-Month Child Care Experience Babies
- 9-Month Child Care Experience Babies
- Smart device and software
- 3-Month Child Care Experience™ Baby Accessories
 - Swaddling blankets
 - Diapers
 - Bottles
- 9-Month Child Care Experience™ Baby Accessories
 - Pacifiers
 - Solid food spoons
 - Diapers
- Portable cribs

- Changing pad
- Tummy time mat
- Beacons
- Baby wristbands and marker
- *Child Care Experience™ Baby Accessory & Care Event Chart*
- *Participant Care Card*
- *Child Care Experience™ Directions*
- Classroom Management Pack

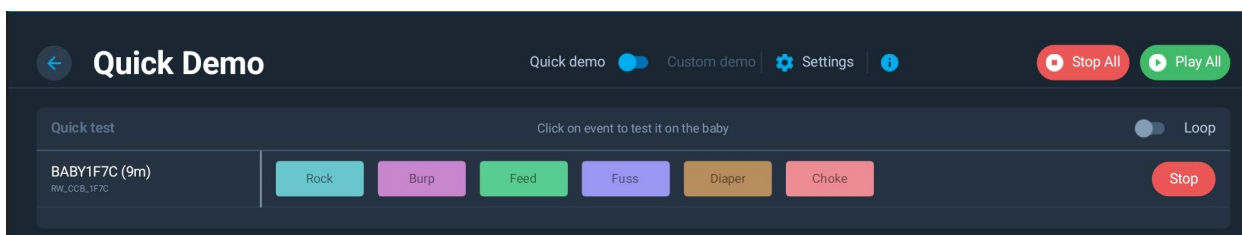
Facilitation Steps:

Part 1: Demonstration Mode & Practice

1. **Quick Demo:** It is recommended to use the Quick Demo for the instructor to demonstrate both care and abuse events. Each event will run for one minute, and Child Care Experience™ Baby will respond to care and abuse the same as in a simulation. Scenario questions, clock-in, and Baby Care Journal are not available in Demo mode.

If there is abuse, then the Baby will play a 57-second, much louder cry in addition to the one minute. You can also loop the demo to play the same Care Event on repeat until manually stopped.

There is also a **Play All** feature. This will play all events for all Babies on the screen. Each Baby will go through each one-minute care event. The **Stop All** button will stop all Babies, regardless of how you started them. Choke will only be available for 9-Month Babies.



2. **Distribute Handouts:** Give each participant the *Child Care Experience™ Baby Accessory & Care Event Chart*, *Participant Care Card*, and *Child Care Experience™ Directions* handouts and briefly discuss.

Encourage the use of these resources, as needed, during practice and the simulation. Demonstrate all the events for a 3-Month Baby and a 9-Month Baby. Note that burp, rock, and diaper events are the same for both ages, so it's not necessary to repeat on a second Baby.

Beacons are not needed when a Child Care Experience™ Baby is in demo mode.

3. **Demonstrate Abuse:** The three forms of abuse are head support, rough handling, and shaken baby. Explain that these three events will be recorded as abuse on the reports and take points off the final score in a simulation.

Demonstrate each of the following as what **not** to do during the simulation.

- Rough handling: Dropping, hitting, kicking, or generally handling the baby roughly (3-Month and 9-Month Child Care Experience Babies)
- Head support failure: Not supporting the neck/head and the head snaps back (3-Month only)
- Shaken baby – Vigorously shaking the Baby, causing the head to snap back and forth 3 times in 2 seconds (3-Month only)

4. **3-Month Child Care Experience™ Baby Demo:** Start with the 3-Month Child Care Experience™ Baby and demo the full sequence of feed, burp, rock, diaper change, and fussy.

Have accessories available for use during the demo.

5. Have participants rotate through handling each of these Care Events successfully in demo mode until they feel confident that they understand how to do it.
6. Next start a demo for the 3-Month Child Care Experience™ Baby in random order. Rotate the 3-Month Child Care Experience Babies through students for additional Care Event practice.
7. **9-Month Child Care Experience™ Baby Demo:** Demo the 9-Month Child Care Experience™ Baby with the full sequence of feed, burp, rock, diaper change, choke, and fussy.

Have accessories available for use during the demo.

8. Have participants rotate through handling each of these 5 Care Events successfully in demo mode until they feel confident that they understand how to do it.
9. Next start a demo for the 9-Month Child Care Experience™ Baby in random order. Rotate the 9-Month Child Care Experience Babies through students for additional Care Event practice.
10. **Clock In:** Start a simulation to demonstrate how to clock in using the software. Have each student locate the correct button on the software, submitting when the Beacon number in the popup matches the number on the back of the Beacon. Then put the Beacon on.

Participants must complete this step in the real Child Care Experience™. It is important that students understand the process.

Beacons must be worn during the simulation.

11. **Scenario Demonstration:** The Scenarios cannot be shown in demo mode. Instructors will need to explain the process to students.

Step 1: An audio cue will be given by the smart device and a caregiver should go to the device.

Step 2: Log in by identifying yourself in the dropdown menu.

Step 3: The event will display on the smart device and the caregiver should read it.

Step 4: The caregiver must enter their answer in the space provided and submit it.

12. **Baby Care Journal:** Review with participants that after a specific Care Event is completed, the student should record the care given in the Baby Care Journal by tapping on the appropriate button in the software: diaper, feed, burp, rock, fussy, choke, health scenario, and parent scenario.

Step 1: A caregiver in the simulation should go to the smart device and select their name from the dropdown menu, identifying themselves.

Tell participants if there are multiple caregivers participating in the simulation, decide quickly among the group members as to who will respond to the scenario.

Step 2: Choose the event you are reporting.

- Diaper: Participants may make a note if it was a wet diaper or bowel movement. This will not be real, however, because the Child Care Experience™ Baby does not do either of these.

- Feed: Participants may wish to make a note of how much of the bottle the Baby finished, or which food was eaten.
- Fussy: Participants may note if the Baby was fussy or difficult to soothe
- Participants may note any abnormal issues

Step 3: Enter the information in the space provided.

Step 4: Save and close.

Or the instructor has the option to use a hardcopy of the Infant Care Journal found in this lesson.

13. **Reports:** Review the reports that will be available upon completion of the simulation with the participants. Show participants a sample Group Report, Student Report, Baby Report, and Child Care Experience™ Assessment Rubric so they understand what they will be held accountable for during the simulation.

Part 2: Child Care Experience

14. Program the Child Care Experience™ using the Help Guide, if needed. The Help Guide can be accessed at the following URL:

www.realityworks.com/childcareexperience-downloads

- a. Identify the number of students that will go through the Child Care Experience™ and the number of Child Care Experience Babies you have available to use.

This will help determine how many class periods it will take to rotate through all the students.

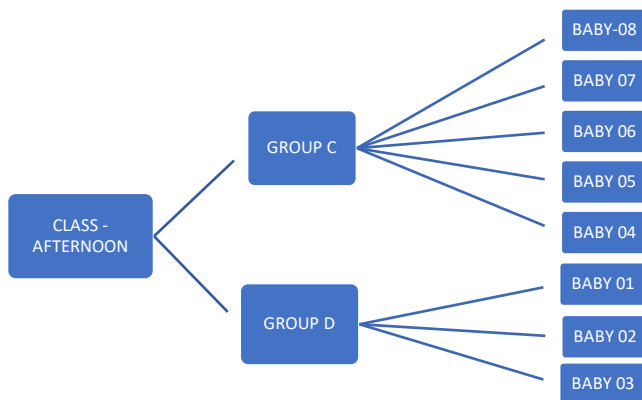
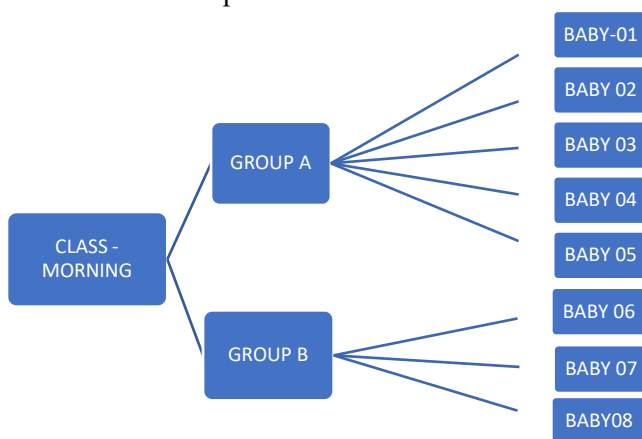
- b. Determine the participant:infant ratio that you want to assess in the simulation. For example, it could be 1 student caring for 3 babies or 2 students

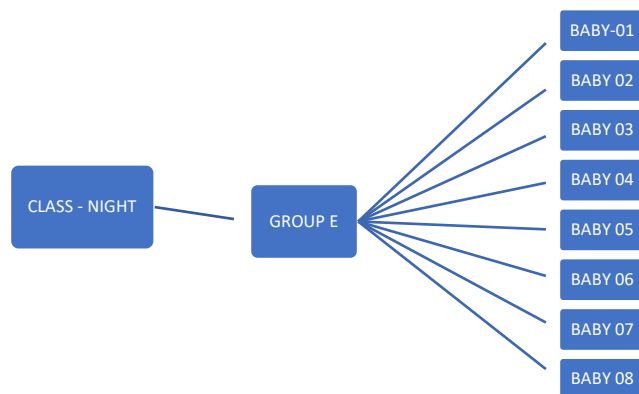
caring for 4 babies etc. The number of Child Care Experience Babies you have will help you make this decision.

Each Class must have one or more Groups. Classes and Groups are created in the Instructor Dashboard.

Babies are then assigned to the Group(s). A Baby can only be assigned to one Group in a Class, but there is no limit to how many Classes. See examples below:

You can also schedule more than one simulation during a class period by dividing Babies into groups. Simulations would need to start and stop at the same time, but each group would have its own schedule and reports. The ratio of caregiver to Babies is determined during the clock-in process. For example, Bob and Betty clock in to take care of Group A, the ration would then be two students to five Babies.





- c. Refer to the Help Guide to set up the simulation in the software:
 - I. Add Babies to the Baby list.
 - II. Pair Babies with the software.
 - III. Assign Baby names.
 - IV. Assign start and stop times (duration of the simulation).
 - V. Create and save your own schedules with difficulty levels.
 - VI. Make sure Beacons have enough battery power.
 - VII. Pair Beacons.
 - VIII. Set up a Class (name of Class).
 - IX. Set up a Group (create Group name if new Group and select existing Group).
 - X. Assign Babies to Groups.
 - XI. Configure Simulation Settings – select class, program groups by choosing the schedule.
 - XII. Program the schedule by selecting events desired for each Baby or choosing

random. You can also select Scenarios to happen during the simulation. Note: You can reuse schedules for future simulations once it is set up. Name each schedule to save it and select difficulty (novice, intermediate, proficient). There is also a Random Selection feature that creates a schedule for you. Select desired schedule and send it to the Group.

- XIII. Select the Class, select the group of Babies, create/select schedule, and start simulation. At this time, students will clock in by Class.
- XIV. Once participants clock in, you tap “Run Babies” and the simulation begins.

15. The participant(s) will then begin the simulation, caring for each infant in the Group they are responsible for. The simulation will count down the set time in the programming.

You can stop the simulation at any time using the “Stop Simulation” button. Remind students that, in addition to handling each Care Event, they are to document the care appropriately in the Baby Care Journal or *Infant Daily Report*.

16. Classroom Management Strategies Using the Classroom Management Lab Pack
 - a. All your participants will most likely not participate in the Child Care Experience™ simultaneously. It will involve rotating students through the experience.

Because it is an onsite simulation, the rest of the class will need tasks to do while the simulation is going on in the room.

You could have students observe the simulation, making notes on what they see.

- b. There are 4 different sets of scenario cards included with the Classroom Management Lab Pack.
 - Child Care Scenario Card Pack
 - Infant Health and Safety Scenario Cards
 - CDA Prep Card Pack for Infants and Toddlers
 - CDA Prep Card Pack for Preschoolers
 - c. It is recommended to set up 4 different stations around the room and have students complete scenarios found in each of the scenario card decks.

Child Care Scenario Card Pack: This card pack includes 19 unique scenario cards, each with a different soft skill focus set in a realistic childcare scenario. The cards include the scenario, points of view to consider, and key questions. It is recommended to assign students to complete a certain number of the scenarios in the card pack by reading the card and answering the key questions in writing. The focus here is on soft skill development. These are not the same scenarios they are tasked with during a simulation.

RealCareer™ Employability Skills Program
Child Care Careers

Responsibility

Scenario: One day, a child in your care breaks his arm. This was traumatic for all involved, but you made it through and the child is doing okay. The center director needs a detailed report on the accident. She asks you to take the last 20 minutes of your shift to complete the forms for the insurance company and the State Licensing Department. She will be asking your co-teacher, Gretchen, to fill them out also.

It's been a tiring day and you want to leave early. Gretchen is also filling out the forms and she's a better writer, so you scribble down some general information and put it in the center director's box. You get to leave 15 minutes early!

Later that night, you receive a text from the center director, asking for specific details of the accident. She needs more information because your forms weren't thorough. You text Gretchen and ask her about the report. She tells you that the center director asked her to fill out the actual report documents. She is working on them right now and they are due first thing in the morning. You feel badly because you didn't complete your responsibility and others are needing to pick up your slack.

Points of view to consider

- You, the employee
- Your coworker, Gretchen
- Your center director

Key questions

(Review the definition of responsibility)

Definition of Responsibility: A duty or task that you are required or expected to do; something that you should do because it is morally right, legally required, etc.

- What are you responsible for in this scenario and why?
- What should you have done differently?
- How has this impacted each person involved in this scenario?
- How can you restore trust after you have been irresponsible?

©2019 Realityworks, Inc. All rights reserved. 10108048-02

Infant Health and Safety Scenario Cards Pack: This card pack includes 27 different infant health, safety, and first aid scenarios on five different topics. These include falls and bruises, car seats and broken bones, burns, heat and cold exposure, and infant illness. Each card includes a brief scenario and key questions to answer. It is recommended to assign students one scenario from each of the five topics to read through and answer the key questions.

RealCare™ Infant Health & Safety
Health & Safety Scenario Cards

Car Seats & Broken Bones - 2

Scenario: As the parent/guardian of a five-month-old arrives by car at the day care facility, an animal unexpectedly runs into the road, causing the driver to brake quickly. Upon braking, the infant, who was sitting face forward in a car seat in the front seat, was forcefully thrown forward. The caregiver rushes to the scene of the accident and notices that the infant's right leg is swollen, red and in an unusual position. The caregiver suspects a broken leg. What steps would you take as the caregiver?

Car Seats & Broken Bones - 2

Key questions:

1. What safety steps should the caregiver have taken to PREVENT this accident from happening?
2. What first aid steps must the caregiver take to INTERVENE and help the infant?

©2019 Realityworks, Inc. All rights reserved. 10108710-04

CDA Prep Kit Card Pack for Infants and Toddlers: This card pack includes 39 different scenarios focusing on 13 competency areas found in the Child Development Associate standards. The focus is on problem-solving real-world childcare scenarios involving the care of infants and toddlers. It is recommended to assign students five cards of their choice to read through and answer the key questions.

CDA Prep Kit Infant-Toddler Scenario Cards	
Scenario 7 Competency Standard I: To establish and maintain a safe, healthy learning environment Functional Area 3: Learning Environment Problem-Solving Scenario: You work in a toddler classroom with children from a diverse set of backgrounds. As you look around the room, you notice that most of the displays, books, and photos only represent one demographic. Key Questions 1. What elements do you think make up a culture? 2. What factors should you take into consideration when adding multicultural elements to your classroom? 3. What other ways are there, beside those mentioned on the scenario card, to make your classroom environment multicultural?	Possible Solutions • Ask family members to bring in pictures that you can laminate and hang on the wall at eye level for the children. • Ask your director for a budget to purchase new board books for you to read to the children. • Talk to fellow teachers in the building and ask them to bring in pictures of their families or vacation pictures.

CDA Prep Kit Card Pack for Preschoolers: This card pack includes 39 different scenarios focusing on 13 competency areas found in the Child Development Associate standards. The focus is on problem-solving real-world childcare scenarios involving the care of preschool-aged children. It is recommended to assign students 5 cards of their choice to read through the scenarios and answer the key questions. You could specify that students choose scenarios from 5 different competency areas.

CDA Prep Kit Preschool Scenario Cards	
Scenario 11 Competency Standard II: To advance physical and intellectual competence Functional Area 4: Physical Problem-Solving Scenario: In your preschool classroom you have a wide range of developmental levels regarding fine motor skills. You would like to add more materials to assist in development. Key Questions 1. What are fine motor skills a precursor for? 2. What is the pincer grasp and how can you develop that skill in young children?	Possible Solutions • Increase the amount of playdough, modeling clay, slime, etc. available on your art shelf so more children can play at the same time. • Add clothespins, large tweezers, eye droppers, and small manipulatives such as sequins, buttons, pom-poms, etc. for children to explore with. • Engage in fingerplays and songs that involve the movement of hands, wrists, and fingers.

Lesson Eight – Child Care Experience™

REVIEW: Debrief

20-30 minutes

Purpose:

This activity provides time for participants to share feelings, thoughts, and experiences from the Child Care Experience™. The care simulation and the reflective discussion activities invite participants to assess current readiness for the realities of childcare as an occupation.

Materials:

- *Student Report*
- *Group Report*
- *Baby Report*
- *Child Care Experience™ Reflection*
- *Child Care Experience™ Assessment Rubric*

Instructor Note:

This class debrief should be completed after all students have had a chance to rotate through the Child Care Experience™. Give individual Student Reports to each participant as soon as possible after they complete the simulation.

Save the Group Report for this debrief activity. Prior to this debrief, prepare an assessment grade using the *Child Care Experience™ Assessment Rubric* provided. Use the Student Report information to calculate the total using the rubric.

Facilitation Steps:

1. Ask participants to share any outstanding incidents or challenges that occurred while caring for the Child Care Experience Babies.
2. Give individual Student Reports to each participant if you haven't already done so.
3. Divide participants into the groups they were in for the Child Care Experience™ and give each group their Group Report.
4. Allow 5-10 minutes for each group to look over the report and discuss the results.

Note: If privacy is a concern, you may view the Group Report yourself and orally share highlights.
5. Call the class back together for a discussion on the simulation and ask the following questions:
 - How was the simulation more difficult than expected?
 - How was the simulation less difficult than expected?
 - What emotions did you feel during the simulation? Happy, sad, angry, frustrated, proud, bored, and/or resentful? When and where did you feel this way? Why?
 - How did the crib, highchair, and changing pad make things easier or harder? More realistic versus less?
 - What changes, if any, would you make to the accessories, furniture, or features?
 - Do you believe this has given you a glimpse into what it is like for childcare workers? How so?
6. Give each participant a copy of the *Child Care Experience™ Reflection* worksheet to complete.
7. Give each participant an assessment grade based on the *Child Care Experience™ Assessment Rubric* provided. Calculate the totals on the rubric and give it to each individual participant.

Child Care Experience™ Reflection

Directions: Answer each of the following questions based on your Child Care Experience™.

What were your expectations about being the caregiver of an infant before you cared for the Child Care Experience Babies?

What do you know now that you did not before about being the caregiver of an infant after caring for Child Care Experience Babies?

How ready are you for the responsibilities of caregiving, especially for multiple infants at once?

What are the REWARDS of caregiving?

What are the CHALLENGES of caregiving?

Child Care Experience™ Curriculum

What knowledge might HELP you meet the responsibilities of caregiving?

What attitudes might HELP you meet the responsibilities of caregiving?

What attitudes might LIMIT you meet the responsibilities of caregiving?

What skills might HELP you meet the responsibilities of caregiving?

What life experiences might HELP you meet the responsibilities of caregiving?

Child Care Experience™ Curriculum

In what ways was caring for the Child Care Experience Babies easier than expected? In what ways was it harder than expected?

What did you learn from this experience?

What suggestions do you have for improving the experience with the Child Care Experience Babies?

Child Care Experience™ Assessment Rubric

	World Class Caregiver	Amateur Caregiver	Indifferent Caregiver	Abusive Caregiver
Care Quality – Proper Care % for student (see Summary by Student Total # Care Events / Proper Care Total) on the Group Report	85-100% (20 points)	70-84% (15 points)	55-69% (10 points)	54% or less (5 points)
Teamwork Skills (Group Overall Performance % on Group Report)	90-100% (20 points)	80-89% (15 points)	70-79% (10 points)	60-69% (5 points)
Abuse Events (Head Support and Rough Handling on Student Report)	2 or less instances (20 points)	3 instances (15 points)	4 instances (10 points)	5 or more instances (5 points)
Shaken Baby (SBS on Student Report)	0 instances (10 points)	0 instances (10 points)	0 instance (10 points)	1 or more instances (-10 points)
Infant Report for Parent/Guardian (Compare Summary of Baby Care Events to Infant Report on Student Report)	0-1 care event missing documentation (5 points)	2 care events missing documentation (4 points)	3 care events missing documentation (3 points)	4 care events missing documentation (2 point)
Responsive Caregiver (Average Response Time Student Report)	Average response time < 30 seconds (5 points)	Average response time 31-45 seconds (4 points)	Average response time 46-60 seconds (3 points)	Average response time > 1 minute (2 point)
Problem Solving Skills (Random Scenarios – Student Report) Extra credit per scenario	Answer is appropriate and effective for the scenario (5 points extra credit)	No Random Event Card Completed (0 points)	No Random Event Card Completed (0 points)	No Random Event Card Completed (0 points))
Total Points				

Total 80 = 100%

Total 60 = 75%

Total 40 = 50%

Total 20 = 25%

Sources

1. Alli, R. (2020, June 06). Giving Baby Finger Foods at 7-8 Months. Retrieved November 07, 2020, from <https://www.webmd.com/parenting/baby/introducing-finger-foods>
2. Bender, J. (2016, October 26). Daycare Company Goals and Objectives. Retrieved November 07, 2020, from <https://smallbusiness.chron.com/daycare-company-goals-objectives-22524.html>
3. Botulism. (2019, August 19). Retrieved November 07, 2020, from <https://www.cdc.gov/botulism/index.html>
4. Child Care Licensing and Regulations. (n.d.). Retrieved November 07, 2020, from <https://childcare.gov/consumer-education/child-care-licensing-and-regulations>
5. Davies, A. (2014, August 19). Bottle-Feeding 101: How to Bottle-Feed a Baby. Retrieved November 07, 2020, from <https://www.thebump.com/a/how-to-bottle-feed-a-baby>
6. Decker, C. A. (2016). *Child development: Early stages through age 12*. Tinley Park, IL: Goodheart-Willcox.
7. Default - Stanford Children's Health. (n.d.). Retrieved November 07, 2020, from <https://www.stanfordchildrens.org/en/topic/default?id=feeding-guide-for-the-first-year-90-P02209>
8. Default - Stanford Children's Health. (n.d.). Retrieved November 07, 2020, from <https://www.stanfordchildrens.org/en/topic/default?id=infant-feeding-guide-90-P02694>
9. Flavin, B. (2017, October 30). Your Step-by-Step Guide to Opening a Daycare. Retrieved November 07, 2020, from <https://www.rasmussen.edu/degrees/education/blog/how-to-open-a-daycare/>
10. Glosson, L. R., Meek, J. P., and Smock, L. G. (2000). *Creative living*. New York, NY: Glencoe/McGraw-Hill.
11. Grummer-Strawn, L., Scanlon, K., and Fein, S. (2008, October 01). Infant Feeding and Feeding Transitions During the First Year of Life. Retrieved November 07, 2020, from https://pediatrics.aappublications.org/content/122/Supplement_2/S36
12. Huntington, M. (2017, August 19). The Average Start-Up Cost for a Childcare Center. Retrieved November 07, 2020, from <https://smallbusiness.chron.com/average-startup-cost-childcare-center-16097.html>
13. Infant Food and Feeding. (n.d.). Retrieved November 07, 2020, from <https://www.aap.org/en-us/advocacy-and-policy/aap-health-initiatives/HALF-Implementation-Guide/Age-Specific-Content/Pages/Infant-Food-and-Feeding.aspx>
14. Jay L. Hoecker, M. (2020, August 05). Infant growth: What's normal? Retrieved November 07, 2020, from <https://www.mayoclinic.org/healthy-lifestyle/infant-and-toddler-health/expert-answers/infant-growth/faq-20058037>

15. Jen, U. (n.d.). The Ultimate Guide to Starting a Daycare Center. Retrieved November 07, 2020, from <https://blog.mybrightwheel.com/checklist-starting-a-daycare-business>
16. Johnson, L. (2002). *Strengthening family and self*. Tinley Park, IL: Goodheart-Willcox.
17. Leonard, K. (2019, March 04). What Do You Need to Open a Daycare Center? Retrieved November 07, 2020, from <https://smallbusiness.chron.com/need-open-daycare-center-3253.html>
18. Provider-Parent Relationships: 7 Keys to Good Communication. (2019, August 15). Retrieved November 07, 2020, from <https://childcare.extension.org/provider-parent-relationships-7-keys-to-good-communication/>
19. Redirect Notice. (n.d.). Retrieved November 07, 2020, from <https://www.google.com/url?sa=i>
20. Shaw, G. (2011, October 18). Baby Development Stages: The First Year. Retrieved November 07, 2020, from <https://www.webmd.com/parenting/baby/features/stages-of-development>
21. Thompson, M. (2017, November 21). Ways to Communicate to Parents and Staff at a Day Care Center. Retrieved November 07, 2020, from <https://smallbusiness.chron.com/ways-communicate-parents-staff-day-care-center-41329.html>