

Chapter 6: CHILDREN'S RECORDS AND ACTIVITIES

Purpose Of These Requirements

The health and safety of individual children requires that information regarding each child in care be kept and available when needed. Children's records consist of various documentation such as a child's medical and immunization history, emergency medical care information, and parental permission to participate in specific activities. This information is a basis for meeting each child's physical, emotional, cognitive, and social needs. The purpose of these requirements is to ensure child care providers maintain accurate documentation that remains available at the child care center to determine compliance with the child care rules and ensure the health and safety of each child.

Child care programs must establish and implement, planned program of daily activities based on each child's individual development at each stage of early childhood. Child care providers should be clear about the curriculum and activities they plan to implement. Having a written description of the planned program of daily activities give staff and parents a common understanding. The written plan helps define the service and contributes to the relationship between the provider and parent. Written activity plans and daily schedules provide parents and staff a clear picture of the programming components of the program.

Definitions

Developmentally Appropriate: suitable to the chronological age range and developmental characteristics of a specific group of children. This means the materials should interest and challenge the children, in terms of their age and abilities, without them becoming frustrated.

SECTION 1: CHILDREN'S RECORDS

Records at a child care facility can consist of financial records, enrollment applications, medical records, and other items used to verify that the center meet the appropriate child care requirements. Good record keeping is important to the success of the child care business.

NC GENERAL STATUTE 110-91(9) Requirement for General Record Keeping

- ★ Each child care facility must keep accurate records on each child receiving care in child care.
- ★ All records of any child care center, except financial records, must be available for review by a Division representative.

- Records should be accessible at all times.

- An “accessible” file means that staff must be able to reach that file at all times. If the file is kept locked, the staff must have keys, or one key must be in a place available to every staff member.
 - Some records must be on forms furnished or approved by the Division, and be submitted as required by the Division.
 - The Division has supplied sample forms as a convenience to the center and operator. Centers are not required to use most of the Division’s suggested forms, unless the child care requirement specifies a certain form created by the Division must be used. However, if a center or operator chooses to create their own forms, all information that is specified in the requirement must also be included on any other forms used.
- HH** – A good record keeping system will help save you time. By keeping your records organized and located in one place, you will have immediate access to emergency information for children and staff. In an emergency situation center staff may need to grab records such as emergency contact information for children and staff, applications, attendance lists, children’s health information, etc. to evacuate the center. It might be helpful to store this information in individual alphabetized folders or compile all information into one binder. The information should be easy to grab and go in emergency situations.
-  A sample **Children’s File Checklist** is located in the resource section to help identify information that needs to be present for each child’s.
 -  Refer to Chapter 1 – Getting Started for record retention requirements for program, staff and children’s records.

NC GENERAL STATUTE 110-91(1) Requirement for Child's Health Assessment

- ★ Each child must have a health assessment before being admitted, or within 30 days following admission to a child care center.
- ★ The assessment must be completed and signed by one of the following:
 - a licensed physician
 - the physician's authorized agent who is currently approved by the North Carolina Medical Board, or comparable certifying board in any state contiguous to North Carolina
 - a certified nurse practitioner
 - a public health nurse meeting the Department's Standards for Early Periodic Screening, Diagnosis, and Treatment Program.

-  A sample **Child's Medical Report** form (health assessment) is located in the resource section. If a center chooses to develop its own health assessment form, it must include every item of information found on the sample form.
- The top portion of the sample form should be completed by the child's parent or guardian. A health care professional completed the bottom portion.
- A health assessment is not required for a child who is and has been in normal health if the child's parent, guardian, or full-time custodian objects in writing to a health assessment on religious grounds which conform to the teachings and practice of any recognized church or religious denomination. The written statement must be maintained in the child's records. An objection based upon a "scientific" belief (i.e. a foreign substance or chemical may be harmful) or non-religious personal belief or philosophy (i.e. clean living, fresh air, pure water) is not considered to be a religious exemption and is not allowed under North Carolina law.
- A health assessment is not required for school age children.
- Review health assessment information carefully to see if there is health care information such as allergies, special diets, prior medical history, asthma, etc that you need to be aware of to be able to provide proper care.

HH – Although not required, request parents to update their child’s health assessment information annually, after each annual well check visit to a physician, or when a child’s medical condition changes, such as being diagnosed with an allergy to ensure you have the most up-to-date health information on file.



The health assessment does not have to be kept on-site at the licensed program. However, the **Public School Off-Site Records Verification for Children’s Records** must be on-site that identifies the storage location, name, and contact information of the individual responsible for maintaining the record, and a statement that the record is on file and contains the appropriate information. This form is available in the resource section.

NC GENERAL STATUTE 110-91(1) Requirement for Immunization Records

-  Each child must have an up to date record of immunization on file at the center within 30 days of enrollment.
-  A current immunization record showing child is age-appropriately immunized, must remain on file for each child while in care.
-  Every center must file an immunization report annually with the State Health Department as required by General Statute 130A-155(c).

- Child care operators must request a certificate of immunization for every child on the first day of attendance. If a certificate is not presented on the first day, the operator must notify the parent they have 30 calendar days from the first day of attendance to obtain the required immunizations for the child.
- Child care operators must request parents to provide a copy of each child’s immunization (shot card) record whenever new immunizations are given.
- Child care operators must complete an Annual Child Care Immunization Report annually. Each center should receive the forms with instructions in the mail each year. If the operator has questions about immunizations or needs information about completing the report, contact the NC Immunization Branch at 919-707-5550 or <http://www.immunizenc.com/ChildCares.htm>.

- When a child transfers to another child care facility, the facility where the child previously attended, must, upon request, send a copy of the child's immunization record, at no charge, to the child care facility to which the child has transferred.
- Even though a school age child does not need a medical report on file at the center, the operator must have a copy of the immunization record.
-  A sample **Immunization History** form is located in the resource section. This information is located on the back of the sample Child's Medical Report form and should be turned in at the same time.
-  For information on types of shots needed for children and a list of vaccines and their brand names refer to the resource section.
-  Additional resources are available from Immunize North Carolina. Visit www.immunizenc.com for the recommended immunization schedule for children and adults.
-  The immunization record does not have to be kept on-site at the licensed program. However, the **Public School Off-Site Records Verification for Children's Records** must be on-site that identifies the storage location, name, and contact information of the individual responsible for maintaining the record, and a statement that the record is on file and contains the appropriate information. This form is available in the resource section.

CHILD CARE RULE .0801 & .2318 Child's Application for Child Care

-  Each child must have a completed application on file on the first day of attendance and must remain on file for at least one year from the date the child is no longer enrolled in the center.
-  The child's parent or guardian must sign the application.
-  The application must be available and easily accessible to the caregiving staff.
-  The completed application must include, at a minimum, the following information:
 - the child's full name and the name the child is to be called
 - the child's date of birth, any allergies, particular fears, or unique behavior characteristics that the child has
 - names of individuals to whom the center may release the child as authorized by the person who signs the application
 - date of enrollment
 - emergency medical information

- Applications should be reviewed for accuracy and as needed to update any important information that might have changed such as address, phone numbers, and emergency contacts.
- Each child enrolled must have a separate application. Brothers and sisters cannot share an application form.
- If operators choose to develop their own application form, it must include, at a minimum, every item of information found in the child care requirements.

HH - In an emergency situation center staff may need to grab emergency contact information for children and staff, records, applications, attendance lists, children's health information, etc. to evacuate the center. It might be helpful to store this information in individual alphabetized folders or compile all information into one binder. The information should be easy to grab and go in emergency situations.

-  A sample **Child's Application for Child Care** form is located in the resource section.



The application for child care does not have to be kept on-site at the licensed program. However, the **Public School Off-Site Records Verification for Children's Records** must be on-site that identifies the storage location, name, and contact information of the individual responsible for maintaining the record, and a statement that the record is on file and contains the appropriate information. This form is available in the resource section.

CHILD CARE RULE .0802

Emergency Medical Care Authorization

-  Each child's parent, legal guardian, or full-time custodian must sign a statement authorizing the center to obtain medical attention for the child in an emergency.
-  The medical care authorization must be on file on the first day the child attends the center.
-  The authorization must be easily accessible to staff so that it can be taken with the child whenever emergency medical treatment is necessary.



Emergency information must be available to staff at all times.



One person on each shift should be designated to assure that the medical care authorization and emergency medical care information is taken with the ill or injured child to the medical facility.



A sample **Child's Application for Child Care** form is located in the resource section, which includes space for emergency medical care authorization.

CHILD CARE RULE .0802

Emergency Medical Care Information

-  Emergency medical care information must be on file for each individual child.
-  The emergency medical care information must include the following:
 - Name of the parent or other person to be contacted in case of an emergency
 - Address of the parent or other person to be contacted in case of an emergency
 - Telephone number of the parent or other person to be contacted in case of an emergency
 - The responsible party's choice of health care provider
 - Preferred hospital
 - Any chronic illnesses the individual child has
 - Any medication taken for that illness
 - Any other information that has a direct bearing on assuring safe medical treatment for the child

- The emergency medical care information must be on file in the center on the child's first day of attendance.
- Remember to update the information regularly to assure that current emergency information is always on file for each child.
-  A sample **Child's Application for Child Care** form is located in the resource section, which includes space for emergency medical care information.

CHILD CARE RULE .0802 Incident Reports

- ★ An incident report must be completed each time a child receives medical treatment by a physician, nurse, physician's assistant, nurse practitioner, dentist, community clinic, or local health department, as a result of an incident occurring while the child is at the child care center.
- ★ The incident report must include, at a minimum:
 - child's name
 - type of injury
 - piece of equipment involved (if any)
 - date and time of incident
 - names of adults who saw the incident
 - part of body injured
 - description of how and where incident occurred
 - where and what kind of treatment received
 - steps taken to prevent reoccurrence
- ★ This report must be signed by the person completing it and by the parent, and maintained in the child's file. A copy of the incident report must be mailed to a Division representative within seven calendar days after treatment.

- This requirement also applies when the parent takes the child to the doctor after the incident just to be evaluated, even when the child receives no medical treatment.
- Some operators choose to complete an incident report any time a child is injured. However, the operator only needs to submit to the Division when a child receives medical treatment.
-  A copy of the **Incident Report Form** is located in the resource section.
-  Remember to record the incident on the incident report log. Refer to Chapter 12 – Medical Care for requirements for completing and maintaining an incident log.

**NC GENERAL STATUTE 110-102.1A & CHILD CARE RULE .0803
Administering Medication**

-  Written authorization is required any time prescription or over-the-counter medication is administered by center personnel to children receiving care, including any time medication is administered in the event of an emergency medical condition.
-  The child's name, the date, time, amount, and type of medication given, and the name and signature of the person administering the medication must be recorded.

- This information must be noted on a medication permission slip developed by the Division, or on a separate form developed by the provider which includes the required information.
- The information must be available for review by a Division representative during the time period the medication is being administered, and for at least 6 months after the medication is administered.
- Refer to Chapter 12 - Medical Care for detailed requirements on the administration of medication.
-  Samples of the **Medication Administration Permission and Record, Permission to Administer Topical Ointment/Lotion/Powder** and **Permission to Administer Medication for Chronic Medical Conditions and Allergic Reactions** are located in the resource section at the end of this chapter.
-  For a copy of the Steps to Administering Medication poster that was developed by the NC Child Care Health and Safety Resource Center go to the Resource tab on their website, www.healthychildcarenc.org.

CHILD CARE RULE .0902**Feeding Schedules**

- ★ Feeding Schedules are required for each child under 15 months of age.
- ★ The schedule must include the child's name, be signed by the parent or health care provider, and be dated when received by the center. It should also include the amounts of food/formula the child should be served and the time intervals for feeding.
- ★ Each infant's schedule must be modified, in consultation with the child's parent and/or health care provider, to reflect changes in the child's needs as he or she develops.
- ★ The feeding instructions for each infant must be posted for quick reference by the caregivers.
- ★ Centers licensed to care for 3 to 12 children in a residence are not required to post the feeding schedule but must have it available for review.

- The parent or health care provider of each child under 15 months of age must give the center an individual written feeding schedule for the child.
- The schedule must be posted and followed at the center. Centers licensed to care for 3 to 12 children in a residence are not required to post the feeding schedule but must have it available for review.
- Each infant's schedule should be updated in consultation with the child's parent and/ or health care provider, to reflect changes in the child's needs as he or she develops.
- If a parent makes a verbal request for a change to a child's feeding schedule, the staff member can note the change on the schedule and have the parent review and initial it at a later time.
- Whenever there are questions about the type or quantity of food listed on the feeding schedule, the caregivers should check with the parent and/or with the center's medical consultant.
-  A sample **Infant Feeding Schedule** is located in the resource section.

NC GENERAL STATUTE 110-91(10) & .1801 Requirement for the Discipline Policy

-  Each operator or staff member shall attend to any child in a nurturing and appropriate manner, and in keeping with the child's developmental needs.
-  Each parent, legal guardian, or full-time custodian must sign a statement which attests that a copy of the center's written discipline policies were given to and discussed with him or her.
-  The written discipline policy must be discussed with, and a copy given to, each child's parent prior to the first time the child attends the center.
-  The signed statement must bear the child's name, the date of enrollment, and if different, the date the parent, legal guardian, or full-time custodian signs the statement.
-  The signed, dated statement must be in the child's record and must remain on file in the center for one year from the date the child is no longer enrolled in the center.
-  If a center changes its discipline policy at any time, it must give written notice of such a change to the child's parent, guardian, or full-time custodian 30 days prior to the implementation of the new policy and the parent, guardian, or full-time custodian must sign a statement that attests that a copy of the new policy was given to and discussed with him or her. The statement must be kept in the child's file.

- One copy of the statement may be completed and signed to include all of the children from one family as long as each child's name is listed on the form. The original may be kept in one file, and copies may be kept in the files of other brothers or sisters.

 Refer to Chapter 11 – Behavior Management for detailed requirements and resources related to a program's written discipline policy.

CHILD CARE RULE .1003 Permission to Transport

-  Before children are transported, written permission from the parent must be obtained which must include when and where the child is to be transported, expected time of departure and arrival, and the name of the transportation provider.
-  Parents may give standing permission, valid for up to 12 months, for routine transport of children to and from the center.

- Permission to transport must be on file.

 Refer to Chapter 10 – Transportation for specific requirements and resources related to transportation of children in child care.

 Samples of the **Blanket Permission for Routine Transport of Children Form** and **Permission Slip for Field Trip** are located in the resource section.

CHILD CARE RULE .1003

Emergency and Identifying Information in the Vehicle

 For each child being transported, emergency and identifying information must be in the vehicle.

A copy of the child's Emergency Medical Care information as well as the Emergency Medical Care Authorization must be in the vehicle when transporting children. This information is located on the Child's Application for Child Care.

HH - A current picture of each child being transported, with the child's name and birth dates, should be in the vehicle for quick access in case a child is separated from the group and identification information is needed.

CHILD CARE RULE .0512

Off Premise Authorization

 Before staff members walk children off premises for play or outings, the parent of each child must give written permission for the child to be included in such activities.

 Parents may provide a written statement giving standing permission which may be valid for up to 12 months for participation in off premise activities that occur on a regular basis.

 The facility must post a schedule of off premise activities.

Off premise activities refers to any activity which takes place away from licensed and approved space.

The schedule must be current and must include the activities that are scheduled for indoor and outdoor areas.

 A sample **Off Premise Activity Authorization** form is located in the resource section.

Child Care Rule .0302 Attendance Records

 Each center must maintain accurate records on attendance of children.

Attendance records should accurately reflect the number of children in care at all times.

HH – Operators are highly encouraged to maintain daily records of attendance that includes arrival and departure times for children as well as the signatures of the parent or authorized individual accompanying the child during these times.

 A sample **Attendance Report for Children** is located in the resource section.

 A sample **Daily Child’s Sign-In/Out** form is located in the resource section.

GENERAL STATUTE 110-91(15) & CHILD CARE RULE .0606 Receipt of Safe Sleep Policy & Waiver

 A copy of the center’s safe sleep policy must be given and explained to the parents of infants 12 months and younger on or before the first day the infant attends the center.

 The parent must sign a statement acknowledging the receipt and explanation of the policy.

 The center must retain the acknowledgement in the child’s record for at least one year from the date the child is no longer enrolled in the center.

 If a health care provider or parent completes a waiver authorizing an alternate sleep position, the center must retain the waiver in the child’s record for at least one year from the date the child is no longer enrolled in the center.

 Centers must post the safe sleep policy or poster about safe sleep practices in a prominent place in the infant room.

For children 12 months and younger, a copy of a signed statement acknowledging receipt of the center’s safe sleep policy from the parent must be maintained in each infant’s file.

If a written waiver is received for an infant six months of age or less, that indicates the infant may sleep in another sleep position other than back to sleep, the waiver must be signed and dated by the infant’s physician, bear the infant’s name and birth date and specify the authorized sleep position.

- If a written waiver is received for an infant older than six months, the waiver may be from a health care provider, a parent or legal guardian. The waiver must bear the infant's name and birth date, be signed and dated by the infant's physician or parent, and specify the infant's authorized sleep position.
-  Copies of the **Alternative Sleep Position Waiver (Physician Recommendation)** and **Alternative Sleep Position Waiver Parent Request** is located in the resource section.
-  Additional requirements for creating and maintaining a safe sleep environment is located in Chapter 5 – Indoor Learning Environment.

GENERAL STATUTE 110-102

Receipt of Summary of the Child Care Law

-  Operators of child care centers must provide a copy of a summary of the child care law to each child's parent, guardian, and full-time custodian before the child is enrolled in the center.
-  Each parent, guardian, or full-time custodian must sign a statement acknowledging that he or she received a copy of the summary before the child's enrollment.

-  A **Summary: North Carolina Child Care Law and Rules** is located in the resource section.
-  This summary is updated as changes occur to the child care law and rules. You may request a copy of summary from the Division at 1-800-859-0829 or access it online at www.ncchildcare.net.

SECTION 2: DAILY SCHEDULES AND ACTIVITY PLANS**CHILD CARE RULE .0508
Requirement for Daily Schedules**

- ★ All centers must have a schedule for each group of children posted for easy reference by parents and by caregivers.
- ★ The written schedule must show blocks of time usually assigned to types of activities and include periods of time for both active play and quiet play or rest.
- ★ Blocks of time must show activities that are scheduled for indoor and outdoor areas.
- ★ The activities and allotted times reflected in the schedule must be developmentally appropriate for the children in care.
- ★ When children two years old or older are in care, the schedule must also reflect daily opportunities for both free-choice and teacher-directed activities.

- The written schedule must include all the activities for that day from the time the center opens until it closes.
- A schedule serves several purposes.
 - It shows what children actually experience each day.
 - It establishes a routine that helps children know what to expect on most days; for example, circle time, nap time follows lunch, etc.
 - It helps parents know approximately when their child will be involved in certain types of activities in case they want to observe the program, join them for lunch, or avoid picking them up during their favorite activity.
 - A schedule helps caregivers plan a day of activities around blocks of time that usually work for the children in that group.
- There are times when you need to be flexible with the written schedule to meet special needs of the day, meet the needs of the whole group and/or meet an individual's needs.
- You will need to have several different schedules that are rotated throughout the year. As the seasons change, so will the times allotted for outdoor play. In warm weather, children should be taken outside in the early part of the day when it is coolest. Likewise, in cool weather, you will want to take them outside late in the afternoon when the temperature is warmest.

- Free-choice (child-initiated) activities are started by children using materials that are accessible to them. Examples include: choosing to use paint at an easel, choosing to put together a puzzle, climbing an outdoor climber, or choosing to listen to music.
 - Teacher-directed activities are planned and started off by staff and children are invited to participate. Examples include: setting up and guiding an art activity, reading to children during circle time, or teaching children a song.
 - The schedule should reflect opportunities indoors and outdoors for free-choice and teacher directed activities.
 - A daily nap/rest period must be provided for each child in child care. For more information on this requirement refer to Chapter 5 – Indoor Learning Environment.
- HH** – It is recommended that children be offered a minimum total of one hour of outdoor time throughout the day, if weather conditions permit.
- HH** – Refer to the resource section for Issue Brief 2 - *Best Practices for Nutrition, Physical Activity & Screen Media Time in Child Care Settings*. It provides practical nutrition, physical activity and screen media time recommendations for the child care environment.
- HH** – Keep these characteristics of an appropriate schedule in mind when setting up your classroom schedule.
- The schedule is flexible and adaptable. Change to meet individual and group needs.
 - The schedule sets an unhurried, child-directed pace for routines and experiences of the day.
 - There should be enough time for routines, play, and transitions.
 - Balance between active and quiet times.
 - Children go outdoors twice a day in a full day programs.
 - Children have opportunities to be alone (although supervised), spend time with teacher/caregiver, and have small group time.

CHILD CARE RULE .0508 Requirement for Activity Plans

- ★ All centers must develop a written plan of developmentally appropriate activities designed to stimulate social, emotional, cognitive (intellectual) and physical development for each group of children in care.
- ★ The activity plan must always be current and accessible for easy reference by parents and caregivers.
- ★ The activity plan must include at least one daily activity for each developmental goal.
- ★ Activities which allow children to choose to participate with the whole group, part of the group, or independently must be identified.
- ★ The activity plan must reflect that the children have at least four different activities in which they may choose to participate on a daily basis.
- ★ The schedule and activity plan may be combined as one document as long as it is always current and posted for easy reference by parents and caregivers.

 **Guide to Planning Developmentally Appropriate Activities** is available in the resource section of this chapter.

It is important to provide a stimulating environment that offers many opportunities for exploration, discovery and learning. Children learn and develop through their experiences. Through these experiences children development social, emotional, intellectual (cognitive), language/communication and physical skills that prepare them for later successes in life.

Many activities will address more than one developmental goal.

 Blank **Activity Planning Forms** are available in the resource section. Teachers may create their own planning form or may use a planning form provided by one of the NC Approved Early Childhood Curricula (list located in Chapter 17 – Star Rated License). Keep in mind that what ever activity planning form used must meet the child care requirements for activity plans.

HH – When developing an activity plan, consider the classroom activity or learning centers, the skills and interests of the children, and available resources.

HH – Activities can take place indoors and outdoors. Offer at least one of the daily activities outdoors, if weather conditions permit.

HH – In the activity plan, include a daily gross motor activity which can occur indoors or outdoors to promote physical health and well-being.



Early Learning Guidelines: North Carolina has published two documents that articulate expectations for children’s development and learning. These guidelines provide a common vision for the development and learning of all children in North Carolina from birth to five years of age.

- Infant-Toddler Foundations: Guidelines for Development and Learning for North Carolina’s Infants and Toddlers (Birth to 36 months). Infant-Toddler Foundations provides guidelines and strategies that may help caregivers, teachers, and families focus on experiences that will make a difference in young children’s lives. Infant-Toddler Foundations is available from the Division or is available online at www.nccchild.net.
- Foundations: Early Learning Standards for North Carolina Preschoolers and Strategies for Guiding Their Success. Foundations is an important book that provides early learning standards for children ages three, four and pre-k five. Foundations is a guide for teachers, administrators, families or any adult working with preschool children in North Carolina. This document is available through the Department of Public Instruction or is available online at www.osr.nc.gov.

The child care rules require centers to plan developmentally appropriate activities that stimulate four developmental goal areas.

Social development:	Social development occurs through activities which encourage children to share, to take turns, and to play together. Caregivers can support social development by building positive relationships with children and their parents, helping children to form friendships, and by providing secure and stimulating environments.
Emotional development:	Emotional development occurs through activities that help children learn about different feelings and how to express

	<p>themselves, and develop a sense of others. Playing in the housekeeping area gives children an opportunity to act out many different feelings. Showing children pictures of someone who is smiling, frowning, crying, or laughing and talking about the person in the picture is another activity that encourages emotional development. Caregivers can support emotional development by observing children and responding with sensitivity to the individual needs of children. Warm guidance and encouragement help children learn how to successfully interact with others.</p>
<p>Cognitive development:</p>	<p>Cognitive (intellectual) development occurs when children are encouraged to be creative, use their imaginations, explore, and ask questions. Some specific examples are: having the children tell a story about what they are doing, letting the children draw pictures about something they have done or have seen, playing games which help teach ideas such as “alike” and “different”, “over” and “under”, “near” and “far” , talking about the size, shape, or color of blocks, puzzle pieces, and toys.</p>
<p>Physical development:</p>	<p>Physical development occurs through activities that provide opportunities for children to begin developing and refining motor skills, self-care, physical health and growth, and safety awareness. Running, jumping, climbing, crawling, hopping, skipping and riding a tricycle are examples of activities that promote physical development. These activities develop a child’s large muscles. Learning to hold a paint brush or crayon, putting a puzzle together, and stringing beads are examples of activities that promote the development of small muscles.</p>

Additional developmental goal areas are important to the development and learning of children. These include:

Language	Language development and communication
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<p>Development and Communication:</p>	<p>occurs when caregivers and parents talk to children and respond to a child’s effort to communicate. Caregivers expose children to language when they talk, read, play, respond, and interact with children. Caregivers can give children opportunities to build receptive language skills (hearing, listening, and understanding) by reading, singing and talking to children. Caregivers can give children opportunities to build expressive language skills (talking and communicating) by letting children express their wants, needs, and feelings in many ways including speech, gestures, and sign language. Early literacy the foundations of reading and writing begin in infancy. Incorporate the child’s home language into the environment.</p>
<p>Approaches to Learning</p>	<p>Children’s approaches to learning include how they go about developing new skills and concepts and their attitude toward learning. Caregivers should support children’s efforts and encourage children’s enthusiasm for learning by honoring their culture, valuing their curiosity, and setting up safe, interesting environments. Approaches to learning are intertwined in all developmental goals of learning. Caregivers who nurture healthy approaches to learning lay a strong foundation for future learning, success, and enjoyment of life.</p>

SECTION 3: ACTIVITIES

CHILD CARE RULE .0509

Requirement for Activities

- ★ Each center shall have developmentally appropriate equipment and materials accessible on a daily basis.
- ★ The materials and equipment shall be sufficient to provide a variety of play experiences that promote the children's social, emotional, intellectual and physical development.
- ★ Teacher-made and home-made equipment and materials may be used if they are safe and functional.
- ★ Materials and equipment that are accessible to children cannot be coated or treated with, nor should they contain, toxic materials such as creosote, pentachlorophenol, tributyl tin oxide, dislodgeable arsenic, and any finishes which contain pesticides.
- ★ Developmentally appropriate equipment and materials must be provided for a variety of outdoor activities that allow for vigorous play and large muscle development.
- ★ Each child must have the opportunity for outdoor play each day that weather conditions permit. The center must provide space and time for vigorous activities when children cannot play outdoors.

- ☑ There must be enough materials to offer each child a variety of play experiences.
- ☑ The play materials must be suitable for the ages of the children in the center. All equipment and materials assigned to each group of children must be age appropriate.
- ☑ All children must be taken outside each day, weather permitting. If the weather is too bad for the children to go outside, the center must provide some vigorous activities indoors. For example, dancing, marching, tumbling and certain climbing activities can all be done indoors.
- ☑ Examples of both indoor and outdoor equipment and materials can be found in Chapter 3 - Outdoor Learning Environment and Chapter 5 - Indoor Learning Environment.
- 📁 Refer to the resource section for examples of **Equipment and Material Suggestions for Preschool Age** children.
- 💻 The National Health and Safety Performance Standards developed by The Iowa Department of Public Health created the Child Care Weather Watch as a guide to assist caregivers in planning for playtime, field trips, and weather safety. A copy of this guide is available at www.idph.state.ia.us/hcci/common/pdf/weatherwatch.pdf. The Child Care Weather Watch is also used by the North

Carolina Rated License Assessment Project to determine
“weather permitting.”

SECTION 4: ACTIVITIES FOR CHILDREN UNDER 2 YEARS OF AGE

Consider each child’s individual interest, development, language skills, feelings, and culture when selecting toys and activities.

CHILD CARE RULE .0511 **Requirement for Toys and Activities**

- ★ Each center must have developmentally appropriate toys and activities for each child to promote the child’s physical, emotional, intellectual and social well-being including appropriate books, blocks, dolls, pretend play materials, musical toys, sensory toys, and fine motor toys.
- ★ The materials must be kept in an identifiable space where related equipment and materials are kept in identifiable groupings and must be made available to the children for a substantial portion of each day.
- ★ The materials must be offered in sufficient quantity to allow all children to use them at some point during the day and to allow for a range of choices with duplicates of the most popular toys.
- ★ Caregivers must make provisions for the promotion of physical development for a substantial portion of the day which should include varied developmentally appropriate physical activities.
- ★ A safe clean, uncluttered area must be available for infants to crawl or creep and toddlers to move around.
- ★ Hands-on experiences, including both familiar and new activities, must be provided to enable the infant or toddler to learn about himself and the world.
- ★ The center must provide time and space for sleeping, eating, toileting, diaper changing, and playing according to each child’s individual need.

- ☑ A substantial portion of the day is defined as 1/3 of the center’s operating hours. To calculate, divide the total number of hours the program is open by three. For example, if a center is open for 9 hours per day, the substantial portion of that day would be 3 hours.
- ☑ Toilet training should begin in cooperation with the parent when the individual child shows an interest. It should not begin just because a child reaches a certain age or because other children in the group are being toilet trained.
- 📁 Refer to the resource section for examples of **Equipment and Material suggestions for Infants and Toddlers.**

- ☑ Toys with small removable parts that could choke a child should not be used. A list of appropriate toys and equipment is in the resource section.
- ☑ Positive interaction on the part of caregivers with the children normally happens as they play with the children, but it should also occur during routine activities such as diaper changing and feeding. These activities provide an opportunity for one-on-one attention and nurturing for each child. Talking and reading to children, encouraging them to make sounds, and praising them for their efforts help them to develop their own language skills.
- ☑ Children who stay in a crib or playpen for extended periods of time will not experience the social, physical, emotional or intellectual stimulation so important to their development. Infants and toddlers who experience a variety of sensory (touching, hearing, seeing, tasting) and motor (movement) experiences will benefit in all areas of development.
- HH** - Loud background music which is on much of the day interferes with ongoing activities. Constant background music makes conversation in normal tones difficult. Integrate music activities into meaningful experiences. Play one or two songs then turn the music off. At naptime make sure the music is not too loud and is not played simultaneously with music that can be heard coming from another room.
- HH** – It is recommended to prohibit the use of screen time with infants and toddlers.

CHILD CARE RULE .0511
Requirement for Outdoor Play

- ★ Each child must have the opportunity to be outdoors daily when weather conditions permit.
- ★ Arrangements must be made to take young infants as well as older toddlers outside. This may mean using several strollers and having someone to help with the babies.

- ☑ Take infants out for as long as you are able and still be able to attend to the needs of all infants in care. Shorter, but more frequent opportunities outside may be more feasible for your room.

- If infants and toddlers are outdoors at the same time as older children, they will need a separate play area. This will help prevent any possible injury as a result of the more active play of the older children. The area can be separated by a fence, or the playground can be used at different times by different age groups.
- Large blankets spread on the ground make fine places for infants to play outdoors.
- HH** – It is recommended for children under two years of age to have at least thirty minutes of outdoor time throughout the day either as part of a small group, whole group, or individual activity, if weather conditions permit.

SECTION 5: ACTIVITY AREAS

An activity area is an identifiable space that is accessible to the children and where related equipment and materials are kept in an orderly fashion.

NC GENERAL STATUTE 110-91(12) Requirement for Activity Areas

- Each child care center must have developmentally appropriate activities and play materials.
- Each child care center must make four of the following activity areas available daily: art and other creative play, children's books, blocks and block building, manipulatives, and family living and dramatic play.
- Each child care center must have a planned schedule of developmentally appropriate activities and the appropriate materials and equipment available to implement the scheduled activities.

- An activity area is an identifiable space which is accessible to the children and where related equipment and materials are kept in an orderly fashion.
- Activity areas should contain materials that stimulate and support a specific type of play. For example, the blocks and block building area may include blocks made of different materials (wood, plastic, cloth) and various sizes, standard sets as well as props could be added to the block center such as large hollow blocks, road signs, vehicles, toy people and animals.

- Materials in an activity area should be well organized and accessible. If it is easy for the children to see and get what they want, it will also be easy for them to return the items to the shelf or toy box themselves. Having pictures on the shelves will help children know where to return the toys.
- To keep things running smoothly, and to keep the children interested, it is best to have materials ready before the activity starts. When materials are ready to use and children do not have to wait, behavior problems are prevented.
- HH** - If paint needs to be mixed, have it mixed before the children come to the art center. Children should not have to wait for the paint to be prepared.
- Involving the children in clean-up helps children develop a good habit and social skills. Ask them to return everything to its appropriate container and activity area. Materials will last longer and the children will develop a sense of responsibility for the condition of their activity areas.

CHILD CARE RULE .0510

Activity Areas for Children Two Years and Older

- ★ Each center must have equipment and materials available in activity areas on a daily basis.
- ★ Centers with a licensed capacity of 3 to 12 children located in a residence are not required to have activity areas, but must have equipment and materials available daily for the children in care.
- ★ Each activity area must contain enough materials to allow three related activities to occur at the same time.
- ★ The equipment and materials must be in sufficient quantity to allow at least three children to use the area regardless of whether the children choose the same or different activities.
- ★ Each center must make at least four of the activity areas available daily to preschool children two years or older as follows:
 - Centers with a licensed capacity of 30 or more children must have at least four activity areas available in the space occupied by each group of children.
 - Centers with a licensed capacity of less than 30 children must have at least four activity areas available daily. Separate groups of children may share use of the same activity areas.
 - Centers with a licensed capacity of 3 to 12 children located in a residence must have at least four types of activities available daily.
- ★ Each center must have materials and equipment in sufficient quantity to ensure that activities are made available at least once per month in each of the five activity areas.
- ★ Each center must provide materials and opportunities for music and rhythm activities, science and nature activities, and sand and water play for each group of children at least once per month.

- ☑ There must be enough space and required play materials in each activity area so three children can be involved in the same or different activities at the same time.
- ☑ “Group” is defined as the children assigned to a specific caregiver(s) to meet the required staff-child ratios, using space which is identifiable for each group.
- ☑ Attention must be paid to the number of items required in each activity area. There must be enough of each item so that the children may have a choice.
- ☑ Materials should not be too far below or above the ability level or the children will lose interest. Materials should always be age and developmentally appropriate for the children who use them. This means something they are interested in and something they can use or work with without adult help.

- ☑ Regardless of which 4 activity areas are available each day, each center must make the fifth activity area available at least once a month.
- ☑ Also, the equipment and materials for music and rhythm, science and nature, and sand and water play activities must be available. If these activities are not in progress, the materials and equipment do not have to be available to the children. However, the daily schedule should show when these activities will be available to each group each month.
- ☑ If more than one group has the same 4 daily activity areas available each day, those groups may share the fifth activity area. The fifth area can be available to different groups on different days. It is important to have required materials for the fifth activity area on hand to be certain this area can easily be included for each group.
- 📁 Refer to **Equipment and Material Suggestions for Preschoolers** in the resource section.
- 📁 Programs that serve school-age children have different requirements for activities. The requirements can be found in Chapter 16 – School-Age Care.
- HH** – When screen time is used, offer only as a free-choice activity, limit to no more than a total of two and a half hours per week, and use it to meet a developmental goal.
- ★ Centers wishing to be eligible for the most points in program standards for a Two-Five Star Rated License will need additional activity areas, equipment and materials available. Refer to Chapter 17 – Star Rated License for additional details.

RESOURCE SECTION

Chapter 6: CHILDREN'S RECORDS AND ACTIVITIES

The following pages contain resource materials discussed in or related to the preceding chapter.

Some of the resources are forms created by the Division of Child Development and must be used by licensed child care centers. Other materials are provided as a resource only for child care centers and can be used at the discretion of the center.

Center operators may also wish to use this section to add any additional resource materials they have that are related to the chapter or information that is specific to their child care center.