

Guiding Principles for the Standards

The following are the guiding principles used in writing these standards:

1. Child care for infants, young children, and school-age children is anchored in a respect for the developmental needs, characteristics, and cultures of the children and their families; it recognizes the unique qualities of each individual and the importance of early brain development in children 0 to 3 years of age.
2. To the extent possible, program activities should be geared to the needs of the individual child, as well as to the group as a whole.
3. The relationship between parent and child is of utmost importance for the child's current and future development and should be supported by caregivers. The parent/legal guardian is the primary decision maker regarding the child's day-to-day care. A cornerstone of out-of-home child care is planned communication and involvement between the parent/legal guardian and the child's caregiver.
4. The nurturing of a child's development is based on knowledge of general health and growth and on the unique characteristics of the individual child. This nurturing enhances the enjoyment of both child and parent as maturation and adaptation take place. As shown by recent studies of early brain development, trustworthy relationships with a small number of adults and an encircling, benevolent, affective atmosphere are essential to the healthy development of children. Staff selection, training, and support should be directed to the following goals:
 - a) Promoting continuity of affective relationships;
 - b) Encouraging staff capacity for identification and empathy with the child; and
 - c) Emphasizing an attitude of playfulness while maintaining the stance of an adult.
5. Programs and care should be based on a child's functional status, and the child's needs should be described in behavioral or functional terms. Rigid categorical labeling of children should be avoided as much as possible.
6. Written policies and procedures should identify facility requirements and persons and/or entities responsible for implementing such requirements. Whenever possible, written information should be provided in the native language of parents, in a form appropriate for parents who are visually impaired, and also for parents who are illiterate. However, processes should never become more important than the care and education of children.
7. Confidentiality of records and shared verbal information must be maintained to protect the child, family, and staff. The information obtained in the course of child care should be used to plan for a child's safe and appropriate participation. Parents/legal guardians must be assured of the vigilance of the staff in protecting such information.
8. Health education for the toddler and for the pre-school and school-age child is an investment in a lifetime of good health practices and contributes to a healthier childhood and adult life. The child care setting offers many opportunities for incorporating health and safety education into everyday activities.
9. The facility's nutrition activities complement and supplement those of home and community. Food provided in a child care setting should help to meet the child's daily nutritional needs while reflecting individual, cultural, and philosophical differences and providing an opportunity for learning. Facilities can contribute to overall child development goals by helping the child and family understand the relationship of nutrition to health, the factors that influence food practices, and the variety of ways to provide for nutritional needs.
10. No child with special needs should be denied access to child care because of his/her disabilities, unless the child's extreme special needs make it unsafe for the child to be cared for in a community child care setting.
11. The facility chosen for each child should be one that is geared to meet the developmental needs of that child. Whenever possible, children with special needs should be cared for and provided services in settings including children without disabilities. If care in an integrated/inclusive setting is not feasible (due to the particular nature of the child's needs and level of care required; the physical limitations of the site; limited resources in the community; or the unavailability of specialized, trained staff), a segregated setting is the next best alternative.
12. The expression of, and exposure to, cultural and ethnic diversity enriches the experience of all children, parents, and staff. Planning for cultural diversity and working with language differences should be encouraged.
13. Community resources should be identified and utilized as much as possible to provide consultation and related services as needed.