

GUIDING PRINCIPLES

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

1. The health and safety of all children in early care and education settings is essential. The child care setting offers many opportunities for incorporating health and safety education and life skills into everyday activities. Health education for children is an investment in a lifetime of good health practices and contributes to a healthier childhood and adult life. Modeling of good health habits, such as healthy eating and physical activity, by all staff in indoor and outdoor learning/play environments, is the most effective method of health education for young children.
2. 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 young children and in particular children birth to three years of age.
3. To the extent possible, indoor and outdoor learning/play activities should be geared to the needs of all children.
4. The relationship between parent/guardian/family and child is of utmost importance for the child's current and future development and should be supported by caregivers/teachers. Those who care for children on a daily basis have abundant, rich observational information to share, as well as offer instruction and best practices to parents/guardians. Parents/guardians should share with caregivers/teachers the unique behavioral, medical and developmental aspects of their children. Ideally, parents/guardians can benefit from time spent in the child's caregiving environment and time for the child, parent/guardian and caregiver/teacher to be together should be encouraged. Daily communication, combined with at least yearly conferences between families and the principal caregiver/teacher, should occur. Communication with families should take place through a variety of means and ensure all families, regardless of language, literacy level, or special needs, receive all of the communication.
5. The nurturing of a child's development is based on knowledge of the child's general health, growth and development, learning style, and unique characteristics. This nurturing enhances the enjoyment of both child and parent/guardian as maturation and adaptation take place. As shown by studies of early brain development, trustworthy relationships with a small number of adults and an environment conducive to bonding and learning 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 with and empathy for the child;
 - c) Emphasizing an attitude of involvement as an adult in the children's play without dominating the activity;
 - d) Being sensitive to cultural differences; and
 - e) Being sensitive to stressors in the home environment.
6. Children with special health care needs encompass those who have or are at increased risk for a chronic physical, developmental, behavioral, or emotional condition and who also require health and related services of a type or amount beyond that generally required by children. This includes children who have intermittent and continuous needs in all aspects of health. No child with special health care needs should be denied access to child care because of his/her disability(ies), unless one of the four reasons for denying care exists: level of care required; physical limitations of the site; limited resources in the community, or unavailability of specialized, trained staff. Whenever possible, children with special health care needs should be cared for and provided services in settings including children without special health care needs.
7. Developmental 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. Children with special needs should have a comprehensive interdisciplinary or multidisciplinary evaluation if determined necessary.
8. Written policies and procedures should identify facility requirements and persons and/or entities responsible for implementing such requirements including clear guidance as to when the policy does or does not apply.
9. Whenever possible, written information about facility policies and procedures should be provided in the native language of parents/guardians, in a form appropriate for parents/guardians who are visually impaired, and also in an appropriate literacy/readability level for parents/guardians who may have difficulty with reading. However, processes should never become more important than the care and education of children.
10. Confidentiality of records and shared verbal information must be maintained to protect the child, family, and staff. The information obtained at early care and education programs should be used to plan for a child's safe and appropriate participation. Parents/guardians must be assured of the vigilance of the staff in protecting such information. When sharing information, such as referrals to services that would benefit the child, attainment of parental consent to share information must be obtained in writing. It is also important to document key communication (verbal and written) between staff and parents/guardians.
11. 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, religious, 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 importance of positive child feeding practices, the factors that influence food practices, and the variety of ways to meet nutritional needs. All children should engage in daily physical activity in a safe environment that promotes developmentally appropriate movement skills and a healthy lifestyle.

12. The expression of, and exposure to, cultural and ethnic diversity enriches the experience of all children, families, and staff. Planning for cultural diversity through the provision of books, toys, activities and pictures and working with language differences should be encouraged.

13. Community resources should be identified and information about their services, eligibility requirements, and hours of operation should be available to the families and utilized as much as possible to provide consultation and related services as needed.

14. Programs should continuously strive for improvement in health and safety processes and policies for the improvement of the overall quality of care to children.

15. An emergency or disaster can happen at any time. Programs should be prepared for and equipped to respond to any type of emergency or disaster in order to ensure the safety and well-being of staff and children, and communicate effectively with parents/guardians.

16. Young children should receive optimal medical care in a family-centered medical home. Cooperation and collaboration between the medical home and caregivers/teachers lead to more successful outcomes.

17. Education is an ongoing, lifelong process and child care staff need continuous education about health and safety related subject matter. Staff members who are current on health related topics are better able to prevent, recognize, and correct health and safety problems. Subjects to be covered include the rationale for health promotion and information about physical and mental health problems in the children for whom the staff care. If staff turnover is high, training on health and safety related subjects should be repeated frequently.

18. Maintaining a healthy, toxic-free physical environment positively impacts the health and well-being of the children and staff served. Environmental responsibility is an important concept to teach and practice daily.