

Tennessee Additional Notes to FDCRS

Overview

The purpose of the Tennessee additional notes is to improve the interrater agreements of assessors, and to provide further interpretation of items and indicators to assist with scoring decisions by Tennessee Assessment Program Staff (APS). Thelma Harms and Richard M. Clifford, authors of the scale, developed the notes without dates or with reference in parenthesis to North Carolina. These notes have been adopted for use in Tennessee assessments. All notes, whether NC or TN, clarify information to help in accurate scoring.

Be sure to replace older notes with newer notes.

The most recent TN changes are:

4/09: General Notes, Items 2, 8, 9, 11 and 19

4/28/08: Items 9, 13, 23

1/1/08: Overview, General Notes, Item 1, 4, 5, 10, 16, 17, 20, 22, 27, 35, 40

4/30/07: Item 9

11/01/06: Item 9; Item 13

10/24/05: Item 8

4/25/05: Item 28

11/1/04 General, 1, 4, 8, 10, 12, 16, 20, 28, 29,

7/26/04 General Notes, Items # 8, #10

4/19/04 General Notes, #1, 2, 3, 4, 5, 6a, 6b, 7, 8, 9, 10, 11, 12, 20, 21, 22, 25, 26, 29, 35

8/25/03 #22, 23

5/19/03 # 12 and 17

2/3/03 GENERAL NOTES, # 8

10/21/02: GENERAL NOTES, #3, #6b, #8, #10, #12, #13, #14a, #14b, #15b, #22, #26

6/24/02 GENERAL NOTES, Items #14a, 15b, and 24

4/1/02 GENERAL NOTES, Items #2, 5, 8 and 9

3/13/02 GENERAL NOTES

1/18/02 GENERAL NOTES, Items #12 and 13

9/20/01.

General Notes for FDCRS

In all items involving any type of interaction, "care provider" refers to those adults that are in the home and who work with the children daily (or almost daily), for a substantial part of the day. This can include volunteers and other family members (but not other children), if they are in the home for the required amount of time. Adults who are in the home for short periods of the day, or who are not a regular daily part of the classroom, do not count in evaluating whether the requirements of the item are met. For example, if a therapist, parent, or friend comes into the home and interacts with children, for short or irregular periods, these interactions do not count in scoring the item unless they are extremely negative.

In all items or indicators where a particular age is required (i.e., items 14a, 15 a, 19, 21, 22, 23 and indicators requiring child-sized furniture for "toddlers"), some flexibility is allowed when scoring. The rule for applying the flexibility is as follows: If there is only 1 child in the group who meets the age requirement, and the child is less than 1 month older than the age requirement, then the item/indicator can be marked NA. If the child is more than 1 month older than the age requirement, or if there are 2 or more children who meet the age requirement, then the item/indicator must be scored.

Materials are considered accessible only if it is observed that children freely access and are permitted to use most of the materials.

Ex. Some materials may not be accessible during the observation. If the schedule indicates an additional time for access to materials, base score on teacher questions and how materials were used. In order to meet much of the day there should be no significant extended periods of time where structured activities prevent access to materials. At the good level, access must be observed throughout the day.

The term "accessible" requires that children can reach and use materials by themselves for at least one hour daily. Materials are not accessible to infants and toddlers if there are tops on containers that cannot be easily opened, even if they are on child-level.

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

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“very few” or “very little” or “rarely” are used under inadequate, then “some” represents a mid-point between what is required for the 1 and the 5 levels.

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

For all scales-the presence of weapons or characters displaying weapons is no longer an automatic discount. With regard to books, pictures, and materials, if the combined, overall impact is negative, displays graphic violence, and promotes aggressive behavior such as play fighting that is not stopped by the caregiver, then discounting is valid and should be well documented in the assessor notes. (TN 4/1/02)

Ask upon arriving, “What areas do the children have access to and use?” Rate the setting based upon the caregiver’s response.

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

In all scales where special allergy needs must be considered, the list of food allergies does not have to be publicly displayed; however, directions for finding this information should be publicly displayed in the room where children eat.

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

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

The following indicators are connected indicators. When credit is not given for the first indicator, credit cannot be given for the second indicator: 4/5.2 & 5.3, 22/ 5.1 & 5.2

Items to be omitted from TN scoring: #36, #37, #38, #39

Specific Notes for FDCRS

1. Furnishings for routine care and learning

1.1 To score No for this indicator, there must be some arrangement made to store children’s things, such as coat hooks or a shelf for coats and diaper bags or back-packs. The arrangement should minimize cross-contamination, be safe and easily accessed by adults and older children.

1.3, 3.3 Crib slats should not be further apart than 2 3/8 inches. (TN 4/23/01)

3.2 Other examples that might be observed to meet this indicator include: rocking chair used by children to rock dolls, love seat used as a pretend car, coffee table used for pretend meals.

3.4 Children, ages 2 years and older, should have a place to store personal belongings, etc.

5.1 To meet the requirements of this indicator, it is important that some accommodation be made so that furnishings in the home are appropriate for children’s use. For example, booster seats can be used to allow children to reach an adult-sized table more comfortably, or a small children’s table and chairs might be used to meet the requirement of this indicator. Even if the child-sized furniture does not meet the definition of child-sized required in 7.1, credit can be given for 5.1. Also, if all furniture used for routine care and learning is child-sized, and no adaptations are needed for children, then give credit for 5.1. Other examples that might be observed to meet this indicator include: a table such as a coffee table or end tables used with floor cushions or throw pillows for seating, or a foot stool used as a laptop table.

7.3 N/A for infants (less than 12 months) and children aged 7 years or older.

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2. Furnishings for relaxation and comfort

3.1 To give credit, children must have daily access to the soft furniture, for more than just one or two short periods. Cushions can be used as a substitute for one piece of soft furniture. To meet the requirements of this indicator at least 2 pillows or cushions (the size used on beds) must be present for children's comfort. Soft furnishings must be located in indoor space used by the children to give credit.

5.1 Daily access for much of the day while children are awake and indoors is required to give credit. As a substitute for 2 pieces of furniture, 4 or more cushions/pillows can count to meet the requirements of this indicator.

5.2 "Stuffed toys" can be interpreted as "soft toys". Do not count soft books or blankets to meet the requirements of this indicator. Look for soft dolls, soft blocks, soft animals, cloth puppets, etc. The intent of requiring "many" soft toys is to allow children to have choice, without undue competition. To meet the requirement of "many" there should be about 10-20 soft toys and at least two per child in a group with more than 10 children. However, if only 1 or 2 children are enrolled in the home, there can be fewer soft toys as long as sufficient choice is provided and competition over the toys does not occur. **To give credit, the soft toys must be accessible for at least an hour throughout the day.**

5.3 N/A if no children under 24 months are in care.

7.1 This indicator requires at least two child-sized soft furnishings be accessible for much of the day. Base your determination of excellence on what is provided for the ages of children in the group.

3. Child related display

Child related display at child level refers to a range that is comfortable for the children, not a specific height. Note: If only infants are in care, do not count 5.1 & 5.2 in scoring, and decide whether score can be a 6 or higher (i.e. all of 3 plus half or more of 7).

1.2 "Child-related" need not refer to content when scoring this item. Colorful prints, pictures, posters, wallpaper, floral arrangements, etc. are acceptable.

3.1, 5.1 and 5.2 N/A if only infants (less than 12 months) are in care.

3.1 "Displayed" does not require artwork to be on the walls. Children's artwork can be displayed on the refrigerator, coffee tables, end tables, cabinet fronts, display boards, placemats, etc. The purpose of this indicator is for children to see and take pride in their work, and to have it acknowledged and recognized as something the child has created. In addition, children's work should be displayed in a manner that allows children, caregivers, and other adults to see, point out, and use the display as a learning tool to promote self-esteem, language, recall, recognition, etc.

5.1 Some flexibility can be used in determining whether there is enough artwork displayed to give credit. First, no artwork is required for any child under 12 months of age. However, artwork done by children in this age group should be counted if it is displayed. Second, interpret "at least 2 items per child enrolled" to mean that the total number of displayed items should be twice the enrollment (i.e., if there are 6 children enrolled, there should be approximately 12 items displayed). In addition, it should be evident that most of the enrolled children over 12 months of age are represented in the display. If it is not easy to determine whether the work of most children is displayed, ask the provider to tell you about who did the various items.

5.2 Eye level is a comfortable range for the children in the group. There is no standard definition of "eye level". (TN 4/23/01)

4. Indoor space arrangement

1.1, 3.1 "Set aside" does not require that the space be used only by the children. All spaces to which the children have access should be considered.

1.2 N/A if no children under 24 months are in care. Delete the words "crawling/walking" and "in cribs or playpens". The indicator should read "Infants and toddlers kept confined for long periods."

3.1 Delete the word "crawling" from the indicator. The indicator should read "Adequate space set aside for use by children: space for infants, play space for toddlers and preschoolers."

5.1 5.1 can be scored No, even if 5.3 is scored Yes. 5.1 requires an evaluation of spaces used for both play and routines. 5.3 evaluates the storage and space used only for play activity areas.

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5.2 If 5.2 is scored No (i.e., there are not 2 or more play areas clearly defined) it is unlikely that 5.3 would be scored Yes.

5.3 Adequate storage and space must be provided for the 2 or more clearly defined areas required in 5.2. Materials that are brought out occasionally are not considered here.

7.1 Materials may be organized in a manner that makes them convenient for the caregiver to know what materials are available whether it be in a box, on a shelf, in a closet, attic, basement, outside storage building, etc. "Available" does not require materials to be in an area that can be accessed easily while children are present; if the provider states additional materials are available, the assessor must be able to document and confirm the requirements of the indicator.

7.2 Other examples that might be observed to meet this indicator include: clear storage containers, open containers such as baskets, boxes, counter tops, etc.

5. Active physical play

Omit "walkers" from the list of materials in the original notes.

1.2, 3.2 N/A if no children under 24 months are in care.

1.2 Delete the word "crawling" from the indicator. The indicator should read "No space used indoors for infants and toddlers."

1.3 This indicator is scored Yes if there are no materials, or if some materials are in such poor repair that they are dangerous, or if most of the materials are in poor repair. A few materials may be in poor repair as long as they do not pose a serious threat to children's safety.

3.2 Delete the words "to crawl and walk around" from the indicator. The indicator should read "Clean, safe indoor space provided for infants and toddlers much of the day."

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

3.3 The additional note requirements for 1.3 must be met in order to consider scoring 3.3 yes. Only minor issues of poor repair (such as a deflated ball, or a flat tire on a tricycle) would allow scoring to continue. Issues of poor repair impacting safety (such as a missing rung from climber or broken swing seat) would result in this indicator being scored "no".

5.1 The timeframe listed in the indicator is to be used as an overall average; a minimum of one hour daily is required, except in extreme weather conditions.

5.1 Physical activity is defined as anything that involves movement and use of gross-motor skills; it may include crawling, walking, climbing, stretching, dancing, etc.

7.1 Requires at least 3 materials per age group.

1.3 N/A if only infants (less than 12 months) are in care.

7.3 This item does not require use of items not typically found in a home environment. Crawling under tables can create a tunnel, tumbling can be on carpeted areas, and rolled socks can be substituted as balls for tossing or rolling back and forth.

6a. Space to be alone (infants/ toddlers)

Score this item N/A if no infants/toddlers are enrolled or if the children generally get along very well and the caregiver uses other effective means of protecting a child from being annoyed by others. For example, space to be alone is not needed (score item N/A) if the caregiver successfully redirects annoying children to use other toys. However, the item must be scored if anything in the 1 is true, or if the caregiver uses a play-alone space for a child. Restraining equipment such as high chairs, walkers, or baby swings can count as "space to be alone" when used as such. However, walkers are also considered a safety concern.

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- 3.2 Score N/A if caregiver does not place child into an alone space that the child cannot leave independently.
- 3.3 Examples to meet this indicator might include: smiles at or talks to infants/toddlers, offers toys to the child, retrieves dropped objects for child.
- 5.1 Omit the word "placed" from this indicator to score.
- 7.1 "Planned activities" refers to planning ahead to provide opportunities for the child's entertainment whether that is by making favorite toys available, offering a variety of items to stimulate curiosity, or imagination, etc.

6b. Space to be alone (2 years and older)

The intent of this item is to give children respite from the pressures of group care in programs where children participate in routines and play together most of the day. In a program where playing alone is enforced during much of the observation, and children are not allowed to play together, then the intent of this item is not being met at all, so score 1. Space to be alone is not to be confused with time out. Discipline is addressed in Item 28.

- 3.1 Any area of the home in which the child seeks refuge from the other children is to be considered space to be alone.
- 5.1 The space that is "set aside" must be observed, although children do not have to be observed using the space during the observation. The space must be accessible daily. If children are not observed using the space, look for evidence to show whether the provider is inclined to limit children from getting away from the group, for example by calling them back to the group when they try to go off to play alone. If the provider limits children so they can not access private space, then do not give credit.

7. Arriving/ leaving

If the caregiver provides transportation to the family child care home for some or all of the children, then ask questions to find out whether the requirements of this item are met under these circumstances.

If a child is confronted with a negative response upon entering the childcare setting, credit is not given for greeting that child. Greeting implies positive. (TN 4/23/01)

- 1.2 If a child is picked up at a time other than their normal time, assuming a pick-up routine has been established either through verbal communication or consistent pick-up times in recent history, do not consider this child in making a determination about scoring this item.
- 3.1 Omit "but not each one individually" to score this indicator.
- 3.2 To allow for positive scoring, change indicator to read "Children greeted even when inconvenient for caregiver." (TN)

8. Meals/snacks

1.2, 3.2 Eating surfaces must be cleaned and sanitized prior to, and following, use for food service. Follow the "2-step" process. Eating surfaces should be: 1) washed with a soap and water mixture to remove gross soil and, 2) sanitized with a bleach-water solution before and after being used for meals/snacks. To allow bleach-water solution to do its job, it should be allowed to sit for at least 10 seconds (preferably longer) before wiping dry or allowing to air dry. For other acceptable sanitizing agents, refer to the general notes. If proper sanitary measures are clearly practiced as part of the child care program, but an occasional lapse does occur, credit can be given. If food is served directly on the eating surface (such as a high chair tray), the food should be dry (example, crackers, cheerios, etc.) for credit to be given; otherwise a plate, bowl, or paper towel, etc. should be used.

- 1.3, 3.4 N/A if no infants (less than 12 months) are in care.
- 3.3 To determine whether sanitary preparation of food can be scored Yes, observe to see whether there are any severe problems (such as dropping food on the floor and then serving it to children). **Also, ensure that the caregiver washes their hands with soap and running water before preparing foods, before and after bottle feeding, and that serving of the food is sanitary (i.e. clean dishes and utensils used, foods are not contaminated during food service).** Handwashing should occur 75% of the time; however, observe the lapses to see the severity of the impact that it has on the children. (Does it affect one child or many to all of the children.)

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1.4, 3.6 N/A if no children under 24 months are in care.

1.5, 3.1 The intent of this indicator is to determine whether the correct components of a meal or snack are being served to the children. No analysis of the nutritional value of foods served is necessary. Use the Food Guide to determine whether the components are present. The guidelines also require all components to be served together. Personal dietary preferences of the assessor (e.g., whole grain vs. white breads; fresh vs. canned vegetables, high vs. low sugar or fat content, etc.) are not to be used in determining the quality of the foods served. Also, consider perishable foods, which are left out longer than 1 hour. . Regardless of source or ages served, 75% of all children must receive meals and snacks that meet USDA guidelines. Providers may supplement if they choose in order to guarantee 75% compliance. Programs that choose to “offer” rather than “serve” food i.e. family style serving, school-age multiple choice snacks) carry an additional responsibility to encourage appropriate choices and model good nutritional habits. Combination foods can be counted to meet up to two components. Scoring consideration of combination foods should. be balanced with other items on the menu. **No condiments or breadings on meat products may be counted (i.e. jelly, ketchup, etc.) When pickles are served in sufficient quantities, they may be considered to meet the requirement as a vegetable.**

3.5 N/A if no toddler (12-23 months of age) is in care.

5.1 Children allowed to assist in meal time preparation such as helping set the table, or being actively involved in play during meal preparation time can be considered as careful organization.

5.2 If only one age group is in care, score for the one group.

7.1 N/A for young infants (6 to 7 months) (e.g., cannot sit in high chair, can not manage finger feeding or holding own bottle).

9. Nap/rest

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

1.2, 3.4 Sleeping infants should be checked every 15 minutes by touch.

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

5.1 "Different age groups" should be interpreted as "each age group".

5.2 Due to new information on the transmission of respiratory illnesses 3 feet is required between cots/mats unless solid barrier separates sleeping spaces.

10. Diapering/ toileting

1.2, 3.1 Basic sanitary conditions include proper diapering procedures as outlined in the TN 10-Step Diapering Process.

- When cleaning or sanitizing surfaces, a disposable towel or fresh cloth must be used for each part of the process. If the same sink is used for all handwashing, it must be properly sanitized following toileting/diapering handwashing routines before it is used for any other purpose. Proper sanitizing includes spraying the sink bowl, rim, and faucets with an appropriate sanitizing agent. If the facility permits sinks to be designated for specific purposes, then this should be done (for example, sinks near toilets should be used for handwashing following toileting/diapering, while sinks in the food prep area are used for food-related and other purposes). The intent is to cut down on fecal-oral contamination (intestinal germs on the hands). As an exception to this rule, in order to avoid requiring children to wash hands in quick succession between toileting and being fed, the following applies: If children use the toilet, wash hands and then immediately sit down for meal/snack, contamination of children’s hands at the toileting sink must be minimized. This can be accomplished several ways – children or adult turn off faucet with paper towel, water from faucet is left running in between use by children and then turned off by adult with paper towel, etc.

- If a regular practice of adequate basic sanitary conditions is observed, with only an occasional lapse, then score 1.2 No and 3.1 accordingly.

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

3.2, 3.4 Handwashing should occur 75% of the time for children and 75% of the time for adults.

3.3 Replace “changed often” with “changed as needed to meet the individual child’s needs”. Diapers should be visually checked approximately every 2 hours.

3.4 Add the words “or after being diapered.”

5.1 This indicator does not require that diapering be done in a bathroom, but merely near a source of hot water.

5.2 N/A if only infants (less than 12 months) are in care.

5.3 N/A if no toddlers or children being toilet trained are in care.

7.2 N/A if only young infants (e.g. less than 6-7 months) are in care.

11. Personal grooming

1.2, 3.1 These indicators refer only to whether the children can reach the sink easily while standing at the sink.

1.3, 3.2 These indicators are not intended to disallow multiple children to use an individual cloth towel if the towel is laundered between uses.

3.3 To allow staff to keep their focus on children while they are eating a separate wipe may be used on each child’s hands that have finished eating and may leave the table. When the last child has finished eating, all children should be expected to wash hands (except children without head control). Hands must be washed with soap and running water at least 75% of the time.

5.1 N/A if only young infants (e.g. less than 6-7 months) are in care.

5.2 N/A if no children under 24 months are in care.

7.1 This indicator requires a toothbrush be used for each child, although tooth paste is not required. Toothbrushes should be allowed to air dry, by leaving them uncovered (out of the danger of contamination) or covered in a way that allows them to breathe. N/A for children under 12 months.

12. Health

1.1 Smoking in the presence of children is never allowed and should be discounted here.

1.2, 3.2 Signed statement from parent suffices for school age immunizations.

3.2 Omit requirement for information on dentist.

5.1 This indicator does not address issues related to nap, meals/snacks or toileting/diapering; problems in those areas are addressed in the item(s) specific to the concern. "Cutting down on the spread of germs" means avoiding contamination is obviously an important part of the program and that it is practiced consistently, with relatively few (3-4) lapses during the observation (such as sneezing without washing hands, not wiping a nose immediately). However no major problems, (animal contamination in space used by children) can exist to give credit for this indicator.

5.3 Address use/lack of sunscreen at this indicator if you observe a child endangered by overexposure to the sun.

5.5 Prescription medication given only to child for which it was prescribed.

7.2 If a child becomes sick during the course of the day and the parents are called to come pick the child up, the provider has a space available for the child to await the parent’s return that would lessen the likelihood of the sick child coming in contact with non-sick children.

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13. Safety

1.2, 3.6 Bleach and water solution, used to sanitize surfaces, do not have to be locked, but must be stored out of reach of young children. Safety concerns such as glass, unsteady furniture, sanitizing agents sprayed directly in breathing areas of children, etc. are considered here. Crib slats should measure less than 2 and 3/8 inches. Discount if bottles or baby food are heated in the microwave and immediately fed to children without first being shaken or stirred to eliminate “hot spots”. Sleeping infants should be checked every 15 minutes by touch.

3.4 “Official fire safety inspection” means that there is a signed report from the fire inspector. If Fire Inspectors do not complete a fire safety inspection, ask the caregiver whether the fire extinguisher is charged, the smoke alarm is working, and monthly fire drills are completed, to meet the requirements of this indicator.

3.6 If adults pick up infants/toddlers by hand or arm, putting children at risk for joint injuries, then this indicator must be scored No. The same is true if infants under 12 months of age are put to sleep on their stomachs or sides, putting children at risk for Sudden Infant Death Syndrome.

5.2 N/A if family childcare provider never transports children.

5.4 Change “last 2 years” to “last 3 years”.

7.1 CPR training must be renewed yearly.

14a. Informal use of language (infants/ toddlers)

1.1, 3.1 and 3.2 1.1 is scored Yes when the caregiver does little or no talking of any type to infants/toddlers. 3.1 is scored Yes when there is some, or even much talking throughout the observation, but the talking that occurs is mainly to control children. 3.2 is scored Yes when there is some social talking (not necessarily much) throughout the observation in addition to that used for controlling children.

3.1 To allow for positive scoring, change indicator to read, “Some talking used to control child’s behavior”.

5.1 Interpret “infants” as “infants and toddlers”. This requirement applies to both age groups.

7.2, 7.3 N/A if only infants (less than 12 months) are in care.

14b. Informal use of language (2 years and older)

1.1 Talking used (cross out “mainly”; insert “only”) to control children's behavior... (TN 3/2/01)

3.2 Remove the word “primarily”.

5.2, 5.4, 5.5 Must be observed at least two times.

7.2 Interpret “preschoolers” as children 3 years or older. N/A if children are less than 3 years of age.

15a. Helping children understand language (infants/ toddlers)

1.1 Interpret “picture games” as “pictures” for this age group. Games are not required for this age group, but pictures are.

3.3 For this indicator, pictures can include those in books.

5.1 To give credit for this indicator, the books must be accessible to the children.

5.1 Some books can count for both indicators (15a/5.1 & 15b/5.1) if deemed appropriate for multiple age groups. (TN 7/13/01)

5.2 To give credit for this indicator, many of these types of interactions must be observed, but not all that are listed in the indicator. For example, credit will be given for 5.2 when the provider does not say nursery rhymes with the children, but she has many of the other types of required interactions.

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Tennessee Additional Notes to FDCRS

15b. Helping children understand language

3.1 Change indicator to read, "At least 10 children's books available; some picture games and children's records (tapes, CD's, etc.) present." Age-appropriate children's books are acceptable for this indicator. Books do not have to match exactly the ages of children in care.

5.1 There needs to be several (3-5) different picture games to give credit. Multiples of the same games do not count as several. Different versions of the same type of game are counted, such as 3 different sets of flash cards, 3 different versions of a memory game. Some books might be appropriate for more than one age group (15a/5.1 & 15b/5.1).

5.2 This indicator requires that both books and picture games be appropriate for all age groups considered in this item (i.e., all age groups enrolled). Some materials may be appropriate for more than one age group. The number of books required for each age group will depend on the number of children in each of the different age groups enrolled, and how widely the age groups differ from one another.

7.2 Discount for consistent use of incorrect/poor grammar by the provider. (TN)

16. Helping children use language

3.1 Change indicator to read, "Some materials accessible for helping children practice talking."

3.2, 5.2 To give credit for these indicators, the activities must be adult-initiated. Does not require a structured activity; look instead for teacher-initiated interaction that includes each age group. You do want to see activities inclusive of all age groups present. A school-age example is asking, "How did it go today?" (TN 4/23/01)

17. Helping children reason

3.1 Delete the words "present and used." Replace the word "accessible". The indicator should now read "Some materials accessible."

3.2 For infants, simple naming or exposure is enough (ex. playing with a shape sorter). (TN 4/23/01)

5.1 Wide range of children may be in the family child care home, the requirement for "games" is only applicable if there are children over two years of age in care. However, the requirement for materials refers to all ages. Developmentally appropriate materials for infants and toddlers are required. Variety requires 3 to 5 different materials for each age group, including at least 1 game per age group when children over 2 years of age are enrolled. In a very large family child care group, more would be needed.

7.1 When looking at this indicator, get a general feel for what is happening. It is not necessary to chart whether or not each child has had the opportunity to work on an appropriate concept.

18. Eye-hand coordination

3.2, 5.2 As long as there is variety, there can be duplication in the number of materials required for these indicators. For example, a family childcare home may have two different busy boxes, a pegboard with big pegs, and two different simple puzzles to meet the requirement for 3.2 for toddlers. In addition, there can be some overlap of materials for the different age groups. For example, both toddlers and younger preschoolers may enjoy using large interlocking plastic blocks, and so the blocks would count for each age group.

5.1 The variety in this indicator requires at least 3-5 different types of materials for each age group to be accessible during the required time, so children have different experiences.

19. Art

7.1 For this indicator, preschoolers include children aged 2 years or older. N/A if no children aged 2 or older are in care. The materials that are used to give credit for drawing at indicator 5.1 may not be counted at 7.1.

20. Music and movement

5.1, 5.3 This indicator requires musical experiences in addition to informal singing.

5.1 Examples for meeting this indicator might include: dancing, marching in a pretend parade, playing with musical toys or instruments.

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Tennessee Additional Notes to FDCRS

5.2 At least one instance must be observed. “Informal” is anything outside of an organized music time. (TN 4/23/01)

5.3 If all age groups participate in any of the musical experiences observed, give credit for this item. Add the word “appropriate” and “three times a week”. The indicator should now read, “Appropriate musical experiences provided for all age groups at least three times a week.” (TN 1/1/08)

7.2 For this indicator, only musical toys are required for children under 24 months of age. The indicator requires dance props and musical instruments; musical instruments may not be given credit as dance props. Dance props may include scarves, hats, streamers, and generally anything a child is allowed to use while dancing.

21. Sand and water play

Water play can be met by allowing children to help wash dishes, wash dolls and other toys in the sink or tub, play in the tub while taking a bath. Use of sprinklers and water hose does constitute water play. Sand play can be met by allowing children to play with other age-appropriate materials with similar qualities to sand, such as dry rice, dried beans, etc.

1.1 Change indicator to read, “No sand or water play available to children indoors or outdoors.”

5.2 Interpret “toys for sand and water play” as “toys for sand and/or water play”

7.1 This does not mean sand 3 times a week and also water 3 times a week. However, each must be provided weekly, and between the two, this should happen 3 times a week.

22. Dramatic play

3.1 Other examples for meeting this indicator might include: trucks, cars, towels for use as capes, sheet over table with flashlight for pretend camping, etc.

3.2 Change the “few” to “some”.

5.1 Replace the word “available” with “accessible.” To give credit for this indicator, there must be many general dramatic play materials for acting out family roles, such as dolls, doll beds, pots & pans, dress-ups. Other examples, many of which are naturally available in a home, include bowls, aprons, hats, scarves, boots, etc. Creativity can also turn chairs lined up into a train or bus, towels become capes, baby blankets, hoods, beds, or beach necessities. A home also provides a variety of dramatic play areas such as beds can become hospitals, tables can become caves, etc. Pay careful attention to not overlook the not so obvious expressions of, and materials for, dramatic play if they are observed. The variety required will vary by age group in care, with less variety needed to meet the needs of toddlers, but more will be required for preschoolers to act out more complicated roles. This indicator requires a specific area set aside for dramatic play.

5.2 Requirements for 5.1 must be met in order to give credit for 5.2.

5.3 Change indicator to read, “Props accessible for themes other than just housekeeping, such as transportation, work roles, or adventure.”

23. Blocks

3.1 Enough blocks must be present for simple block building, such as stacking blocks, putting blocks in a line to make a road. Interlocking blocks are acceptable for this indicator. For toddlers, at least 6 blocks must be present to score Yes, while for older children at least 20 blocks are required.

5.1 Change the word “available” to “accessible.” Blocks and accessories are to be gathered together and “accessible” for daily use. (TN 3/2/01) This indicator requires 3 different types of blocks and 3 to 5 examples from three categories of accessories, such as vehicles, people figures, animals and road signs.

5.2 Credit can be given if blocks can be used on a table or in a corner of the room where block play will not be interrupted (i.e., a place that is not in traffic). It must be obvious during the observation that blocks are generally used in the protected space, rather than in traffic.

24. Use of T.V.

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Tennessee Additional Notes to FDCRS

If the assessor observes movies/videos being used that have violent or otherwise inappropriate material, discount the appropriate indicator. Otherwise, ask about the program's/provider's policy concerning use of TV and videos. No longer base your determination on what you see stored in the room. Do not reference movie/program names or ratings on summary reports. (TN)

Note: If caregiver does not use TV while children are in care, score 7.4 Yes, and mark N/A for all other indicators, score is a 7. If caregiver uses TV while children are in care 7.4 is N/A, and all other indicators are scored as needed. (TN 6/24/02)

3.1 To allow for positive scoring, change indicator to read "TV is not used as a baby-sitter" to amuse and keep children busy in place of play activities." (TN 3/2/01)

3.3 To allow for positive scoring, change indicator to read, "Programs are limited to those that are good for children." (TN)

5.1 Change indicator to read, "Caregiver limits use of TV to programs and video games regarded as educational and appropriate for children."

25. Schedule

1.1, 3.1 Indicator 1.1 is not true when there is only a small problem (e.g., one infant's diaper not checked for 2 hours) while all other routines are managed appropriately. However, 3.1 would not be given credit in this circumstance.

5.2 The 2 special activities do not have to be completed during the observation. Look for evidence of 2 activities (e.g., on schedule or activity plan) and ask caregiver to get more information. "Special activity" means something that the caregiver initiates that goes beyond what is regularly accessible to the children. This is not intended to mean an overly controlled or adult-directed activity.

5.3 Determining whether there is a balance of indoor and outdoor activities will depend on a number of factors, including the ages of the children in care, the mood and needs of the children, and the weather. The balance will change somewhat from day to day, so no specific amount of time can be applied to this indicator. However, it is expected that most very young babies would get to go outdoors for sometime during the day, and as children get older, this time would increase. If the weather is especially nice, the balance would require that more time is spent outdoors. "Outdoor activities" can include both active physical play or more quiet activities, such as riding in a stroller or having a picnic.

5.4 While no specific amount of time should be required for this indicator, overall the schedule should reflect a combination of both active and quiet activities.

26. Supervision of play indoors and outdoors

Since the intent of this item is to evaluate general supervision of children, omit the word "play" from the item title.

1.2 Change the examples within the indicator to read: (Ex. Talking on the telephone, watching T.V., doing housework without involving the children.)

3.1 In family child care, it is usually necessary for providers to leave children for short periods of time for example to use the toilet, prepare food, answer the door or phone, etc. To meet the requirements of 3.1, the provider is only allowed limited momentary lapses in supervision (2-4 minutes), and when children are out of sight, they must be within hearing range. Children must be in a safe place while not within view, and checked on frequently. In addition, children must be involved in low risk activities (eating is a high risk activity) while not within view, and checked on frequently. Children under the age of 6 cannot be left outdoors unsupervised, and older children must be checked regularly.

3.2 Replace the word "mainly" with the word "given" when scoring this indicator.

7.1 Other examples to meet this indicator might include: actively looks for and expands upon spontaneous learning opportunities.

27. Tone

3.1 To allow for positive scoring, change indicator to read, "Physical contact not limited to routine care of children; some display of affection. (TN 3/2/01)

3.2 To allow for positive scoring change indicator to read, "Caregiver smiles at, talks to, or listens to children." (TN 3/2/01)

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Tennessee Additional Notes to FDCRS

3.3 To allow for positive scoring, change indicator to read, "Does not have favorite child who gets most of the attention." Also, implication is that staff neither favor nor dislike particular child(ren). (TN 4/23/01)

5.1 To give credit for this indicator, physical contact to show affection must be observed as the general practice for each age group present during the observation. For some older children this can be shown through something as simple as a hand on the child's back or shoulder, while for infants/toddlers, it should be more substantial and frequent.

28. Discipline

3.1 Discount if teacher/caregiver uses harsh punishment, threatens, or physically disciplines any child.

3.2 Both social/emotional and physical hurting of others is included in this indicator. If children persistently tease, harass, or show discrimination against others and the care provider ignores this behavior, score No on this indicator. Must see 2 or 3 incidences to discount. (TN 4/23/01)

7.3 N/A if only children under 24 months are in care.

29. Cultural awareness

1.3 Change examples within indicator to: (Ex. Girls directed towards housekeeping roles, boys directed to cars.)

3.1 Interpret "dolls" broadly to include small figures such as Lego or Playmobile figures, dollhouse figures, or even paper dolls being used by older children. To give credit materials must be accessible daily. Dolls should not all be from the same color group and racial differences should be easily discernable.

5.1 Many examples of racial variety in dolls, (people figures), pictures, and books accessible for at least 1 hour daily. Materials count as well.

5.2 Interpret "included" broadly, so that if provider acknowledges children's holidays and customs rather than celebrating them, for example by talking about them, credit can be given.

5.3 Give credit for a male caregiver in the home. (TN 4/23/01)

5.4 To give credit for pictures, they must be where children can easily see them, although not necessarily on the child's eye level. Consider the size, clarity and placement of pictures. Give credit for an elderly person in the home who interacts with children in positive ways.

35. Adaptations for other special needs

Note: Omit the word "other" from the title of this item, and consider all special needs under this item. Include needs of children with physical handicaps in scoring, as well as all others.

ECERS 37, ITERS-R 32, FDCRS 35 and 40, and SACERS 44 should be scored NA unless a child with a disability that has been diagnosed through a formal assessment procedure and receives (or is eligible for) early intervention services is enrolled. Across all four scales, the following aspects should be considered when scoring: modifications, parent involvement, inclusion, and use of assessment information. Look for the extent of modifications needed to the schedule or classroom to include the child in daily activities, parent and staff communication regarding the child's assessment information and ongoing therapy, and the use of assessment information into planning throughout the day. Some parents may not share all information with staff for various reasons. Consider the levels of quality when determining if staff and parents have shared enough information to meet the child's needs. Even if staff put significant effort into asking about a child's needs, if parents share no information, the child's development is compromised.

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