

# ECE Standards Checklist

This childcare facility practices the following:



## INFANT FEEDING

Child Care Center: \_\_\_\_\_

### General Plan for Feeding Infants, 4.3.1.1

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- Keeps records of whether a child is breastfed, or formula fed, and the type of formula used
- Provides a designated space in the classroom for mothers to breastfeed during the day
- Provides a private area (not a bathroom) with an outlet, access to water, a pillow, and a nursing stool for feet for mothers to pump
- Introduces age-appropriate solid foods other than human milk or infant formula no sooner than 6 months of age or as indicated by the individual child's nutritional and developmental needs

### Feeding Cow's Milk, 4.3.1.7

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- Does not serve cow's milk to infants from birth to 12 months of age, unless provided with a written exception and direction from the infant's primary health care provider and parents/guardians
- Children between 12 and 24 months of age are served whole pasteurized milk
- Children 2 years and older are served low-fat (1%) or nonfat (skim, fat-free) pasteurized milk

### Categories of Foods, 4.2.0.4

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- Meals and snacks follow the Child and Adult Care Food Program (CACFP)
- When buying foods we choose no salt added, low-sodium or reduced sodium versions, and prepare foods without adding salt.

### Feeding Infants on Cue by a Consistent Caregiver/Teacher, 4.3.1.2

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- Whenever possible, the same caregiver/teacher feeds an infant for most of that infant's feedings
- Children are not fed beyond satiety
- A pacifier is not offered to an infant prior to being fed

### Techniques for Bottle Feeding, 4.3.1.8

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*During feeding time, caregivers/teachers practice the following:*

- Hold infants in their arms or sitting up on caregiver's lap for bottle feeding
- Do not use a bottle or cup to modify or pacify a child's behavior
- Bottle feed only 1 infant at a time
- Allow breaks for burping
- Bottles are not given to children in cribs
- Allow the infant to stop the feeding
- Children are not permitted bottles while standing, walking, or running.
- Respond to vocalizations with eye contact and vocalizations
- Do not prop bottles



## Introduction of Age-Appropriate Solid Foods to Infants, 4.3.1.11

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- Facilitate a plan with parents/guardians for introducing solid foods to infants
- Introduce age-appropriate foods at 6 months of age, with flexibility to introduce sooner or later based on the child's developmental status
- Introduce breastfed infants gradually to iron-fortified foods no sooner than four months of age, but preferably around 6 months
- Record what foods are consumed and how much, and share with parents

## Preparing, Feeding, and Storing Infant Formula, 4.3.1.5

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- Allow only factory-sealed formula to be brought into the center
- Wash and dry hands, container, and lid before opening
- Only use scoop that came with the container to ensure proper volume is served
- Do not feed formula mixed with cereal, fruit juice, or any other food, unless written permission is given from child's primary care doctor
- Label bottles of formula with child's full name, time, and date of preparation
- Discard any prepared formula within 1 hour after serving to infant
- Feed infants the same formula being used at home

## NUTRITION

### 100% Fruit Juice, 4.2.0.7

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- Do not offer juices to infants younger than 12 months
- Only serve pasteurized and 100% juice without added sugars or sweeteners
- Only serve juice 1x per day, with a scheduled meal or snack, and in an age-appropriate cup
- Limit consumption to 4 oz/day for ages 1-3 year
- Limit consumption to 4-6 oz/day for ages 4-5

### Encouraging Self-Feeding by Older Infants and Toddlers, 4.3.2.3

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- Encourage older infants and toddlers to hold and drink from an appropriate child-sized cup
- Encourage the use of a child-sized spoon and fork

### Availability of Drinking Water, 4.2.0.6

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- Water is available and *offered* to children both indoors and outdoors each day



## Serving Size for Toddler and Preschoolers, 4.3.2.2

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- Children are served portions outlined in the CACFP
- Children are not required or forced to eat any specific food item
- Children are served food in/on developmentally appropriate sized plates, bowls, and cups

## Nutrition Learning Experiences, 4.7.0.1

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- Utilize a written plan that integrates the introduction of food and feeding experiences with facility activities and home feeding.
- The plan is developed by/with a nutritionist, registered dietician or health care consultant
- Incorporate education into the mealtime pattern including but not limited to; taste, texture, smell, vocabulary, language, portion size.

## Socialization During Meals, 4.5.0.4

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- Adults sit at the table and eat meals and snacks with children
- Family style meal service with serving platters, bowls, and pitchers on the table
- Children self-serve as able
- Encourage, but not force, children to help themselves to all food components offered
- Eat only food that meets the nutrition standards
- Encourage social interaction and conversation using vocabulary related to food

## Prohibited Uses of Food, 4.5.0.11

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- Teachers/caregivers do not force or bribe children to eat nor use food as a reward or punishment

## PHYSICAL ACTIVITY/SCREEN TIME

### Active Opportunities for Physical Activity, 3.1.3.1

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- 2-3 occasions of active play outdoors, weather permitting
- 2 or more structured (caregiver led) activities that promote movement – indoor or outdoor
- Offer continuous opportunities to develop and practice age-appropriate gross motor movement
- Infants are taken outside 2-3 times per day, as tolerated
- 60-90 minutes per day of outdoor play, weather permitting
- Toddlers (12-35 months) are allowed 60-90 minutes per 8-hour day for vigorous activity
- Preschoolers (3-6 years) are allowed 90-120 minutes per 8-hour day for moderate to vigorous activity
- Infants have supervised tummy time every day when awake
- Active play is not withheld for children who misbehave



## Teachers/Caregivers Encouragement of Physical Activity, 3.1.3.4

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- Participate in orientation and yearly training opportunities to learn about age-appropriate gross motor activities and games that promote physical activity.
- Lead structured activities to promote children's activities 2 or more times per day
- Wear clothing and footwear that permits easy and safe movement
- Prompt children to be active (e.g. Great throw!)
- Do not sit during active play

## Policies and Practices that Promote Physical Activity, 9.2.3.1

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The facility has written policies for the promotion of indoor and outdoor physical activity and the removal of potential barriers to physical activity participation, and cover the following areas:

- Benefits of physical activity and outdoor play
- Duration of time to be spent outdoors (60-120 min. weather permitting), a description of what will be done to ensure physical activities indoors on days when outdoor play is not permitted
- Structured verses unstructured activity
- Provision of covered areas for shade and shelter on playgrounds, if feasible
- Clothing: Protects children from sun exposure and permits movement for running and climbing

## Screen Time/Digital Media Use, 2.2.0.3

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- Do not use any screen time with children ages 2 and younger
- For children ages 2-5, total exposure (in early care and education and at home combined) to digital media should be limited to 1 hour per day of high-quality programming, and only viewed with an adult who can help them apply the content to the real world
- Never use screen time media during snacks/meals or nap/rest times
- Communicate with parents about appropriate amounts of screen time use at home

\*All standards are drawn from the Caring for Our Children Online Standards Database

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