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Basic Knowledge Curriculum
Infants and Toddlers

Developmentally
Appropriate Practice for
Infants and Toddlers
Module 1
Participant Workbook



Acknowledgement

This training has been designed to give child care and early learning professionals' foundational knowledge to be successful when caring for infants and toddlers. The information presented in the curriculum is for all professionals working in family child care or center-based child care and early learning programs. This basic information about concepts and skills is ideal for an entry-level staff member, but may also be beneficial for more seasoned professionals as a "refresher course."

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Agenda

BKC – I/T Module 5: Supporting the Development and Well-Being of Infants and Toddlers

Welcome

Learning Objectives
Getting Started Activity

Part 1:

Developmentally Appropriate Practice for Infant and Toddler Care

What is Developmentally Appropriate Practice (DAP)?

What is high quality infant and toddler care?

10 Components of High Quality Infant and Toddler Care

1. Active and responsive caregiving to support development
2. Primary caregiving
3. Continuity of care
4. Small groups with optimal ratios
5. Individualized programming through observation and curriculum
6. Age appropriate responsive environments (Inclusive Environment)
7. Competent, trained staff
8. Appropriate health & safety practices
9. Emerging language and literacy
10. Family involvement and cultural continuity

Part 2:

Developmentally Appropriate Activities in Group Care

Young Infant
Mobile Infant
Toddler

Part 3:

Routines

Why are routines so important?

Arrival and departure routines

Diapering and toileting routines

Eating and Mealtimes

Sleeping: Safe sleep and SIDS prevention strategies (Children's Trust Fund DVD)

Wrap up and Transfer Activity

Learning Objectives

BKC – I/T Module 1: Developmentally Appropriate Practice for Infants and Toddlers

At the end of the professional development event, participants will be able to:

Part 1:

1. Define Developmentally Appropriate Practice.
2. Identify the components of high quality infant and toddler care.
3. Describe how to provide an inclusive environment when caring for infants and toddlers.

Part 2:

1. Describe the importance of primary caregivers for healthy infant and toddler development.
2. Describe how to be active and responsive when responding to infants and toddlers.

Part 3:

1. Identify how routines support infant and toddler development.
2. Describe how to change diapers in an infant and toddler program.
3. Identify when toddlers are ready to start toilet learning.
4. Define how to support infants and toddlers during mealtimes.
5. List safe sleep strategies to reduce the risk of SIDS (Sudden Infant Death Syndrome).

This professional development event meets the requirements of the *Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri)* and Child Development Associate Credential (CDA) in the following areas:

CDA	Safe, Healthy Learning Environment
<i>Core Competencies for Early Childhood and Youth Development Professionals (Kansas and Missouri)</i>	Content Area II: Creating a Developmentally Appropriate Learning Environment and Curriculum Level 1a: Explains Developmentally Appropriate Practice. Content Area V: Health and Safety, Promoting Mental Health Level 1d: Follows practices to support the emotional well-being of children and youth. Content Area V: Health and Safety, Promoting Physical Health Level 1a: Follows practices to support the health of each child and youth.

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Developmentally Appropriate Practice

PH#3



What is Developmentally Appropriate Practice?

DAP is defined as an approach to teaching and/or caring for children based on early childhood research in child development and learning and on effective early childhood teaching practices. It is a framework that can be combined with pre-existing curriculum and is designed to promote learning for young children.

Developmentally Appropriate Practices.....

- Allow infants and toddlers to participate in activities at their own developmental level.
- Allow for flexibility, with no “right” or “wrong” outcome.
- Encourage active learning through participation.
- Encourage exploration and processing.
- Allow for socialization and interaction with others.
- Enable infants and toddlers to learn through their senses.
- Allow infants and toddlers hands-on experience of their world.
- Present choices in ways to learn and through interactions.
- Foster positive feelings about self for young children.
- Respect individual differences and cultural diversity.
- Acknowledge the needs of infants and toddlers.



High Quality Infant and Toddler Care

PH#4

1. Active and Responsive Caregiving to Support Development
2. Primary Caregiving
3. Continuity of Care
4. Small Groups with Optimal Ratios
5. Individualized Programming through Observation and Curriculum
6. Age Appropriate Responsive Environments (Inclusive Environment)
7. Competent, Trained Staff
8. Appropriate Health & Safety Practices
9. Emerging Language and Literacy
10. Family Involvement and Cultural Continuity

How can child care and early learning professionals be active and responsive throughout the day?

Primary Caregiving

Primary caregiving helps build a positive, continuing, intimate relationship with the infant or toddler.

How can child care and early learning programs, especially larger programs, provide primary caregiving to infants and toddlers?

High Quality Infant and Toddler Care

PH#5

Notes

Continuity of Care	
Small Groups with Optimal Ratios	
Individualized Programming through	
Observation and Curriculum	
Age Appropriate Responsive	
Environments (Inclusive Environment)	
Competent, Trained Staff	
Appropriate Health & Safety Practices	
Emerging Language and Literacy	
Family Involvement and Cultural Continuity	

Responsive and Inclusive Environments

PH#6

- ❑ Indoor and outdoor spaces are safe, clean and welcoming.
- ❑ There should be a large space to allow infants and toddlers to move around.
- ❑ The environment should meet the needs of the infant, toddler, child care and early learning professional, and families.
- ❑ There are separate, defined spaces for eating, diapering, sleeping, and play.
- ❑ Toys and materials are displayed on open, low shelves for easy access by the children.
- ❑ There is a larger area (inside and outside) for infants and toddlers to engage in push/pull toys, throwing, riding, climbing, running, jumping, and general exploration.



Notes.....

Activity: High Quality Infant and Toddler Care

PH#7

Directions: In your small group, discuss 3 practices that can be implemented in your program.

Active and Responsive Caregiving to Support Development

1. _____
2. _____
3. _____

Primary Caregiving

1. _____
2. _____
3. _____

Continuity of Care

1. _____
2. _____
3. _____

Small Groups with Optimal Ratios

1. _____
2. _____
3. _____

Individualized Programming through Observation and Curriculum

1. _____
2. _____
3. _____

Age Appropriate Responsive Environments (Inclusive Environment)

1. _____
2. _____
3. _____

Competent, Trained Staff

1. _____
2. _____
3. _____

Activity: High Quality Infant and Toddler Care

PH#7

Appropriate Health and Safety Practices

1. _____
2. _____
3. _____

Emerging Language and Literacy

4. _____
5. _____
6. _____

Family Involvement and Cultural Continuity

1. _____
2. _____
3. _____

Developmentally Appropriate Activities for Young Infants (birth-8 months)

PH#8

Young Infants Communicate with infants! Talk to infants and echo their babble. They may not be able to understand you now, but will learn words for the foundation of their speech later on.

- Explain to infants what you are doing throughout the day, including during routine care such as diapering, feeding, sleeping and playing.
- Respond to their cries. Infants feel secure when their cries are responded to. When you provide them with the sense of security, they are willing to explore and try new things.
- Hold and sing to young infants. Even when babies are able to hold their own bottle, they should be held. Being cuddled frequently assists in building the child's self-worth, security, and tactile system. Propping an infant with a bottle is a choking hazard.
- Rock, sway, and swing infants gently. This will help them develop a sense of movement and balance.
- Take infant play activities outside on nice days and let them experience the new surroundings with you.
- Be consistent so the infant knows what to expect. Infants have their own schedule for eating, sleeping, and diaper changes. This may not be the same as another child's. It is important to allow for individual differences between children.
- Play appropriate music.
- For newborns, use contrasting colored toys, such as black, white and red. These are easier to see and to distinguish between for newborns. As the newborn gets older, place brightly colored toys near them.
- Give them soft, washable toys (a stuffed animal or soft rattle) to hold, grasp and feel.
- Give infants toys they can make noise with.
- Provide tactile toys such as bumpy balls or fabric with textures.
- Create fun tummy time activities. Get down on their level.
- Watching and exploring with the hands and mouth are prominent learning activities of young infants. Provide opportunities for this type of exploration.
- Infants spend a great deal of time looking up toward the ceilings, walls and lights, so these elements of the environment should be pleasant to look at but not over-stimulating. Bare light bulbs and bold colors and patterns can be irritating to young infants.
- Remember to supervise infants with toys at all times.



Developmentally Appropriate Activities for Mobile Infants (8 to 16 months)

PH#9

Mobile infants are at the peak of motor exploration and learning through their senses. As infants become more mobile, they need safe and interesting opportunities to explore and investigate.

Infants put almost everything in their mouths, so toys should be safe and appropriate. They trust their environment is safe so dangerous and breakable objects should be kept out of their reach. Be close by, but allow mobile infants to explore.

- Mobile infants like to climb. Allow safe opportunities for them to climb such as soft climbers.
- Peer play and conflict begin at this time. More than one of a popular toy should be provided, as well as opportunities for social play, such as a double slide or two rocking horses, side by side.
- Provide opportunities for opening/shutting, picking up/dropping and filling/dumping.
- Soft blocks for building and nesting cups for stacking.
- Balls of different sizes for rolling.
- Books for reading including family picture books.
- Appropriate music for children.
- Baskets for pushing and pulling.
- Large knob puzzles.
- Pots, pans, wooden spoons, pie tins, plastic ware for banging, stacking and sorting.
- Textured fabrics and materials.
- Noise makers.
- Large manipulative toys to stack, dump and sort.
- Provide the opportunity to experience various smells. This may include lemon, vanilla, apple juice, or natural smells such as grass or flowers.
- Hang up big pictures of people (can include their family members) and animals on the wall at their eye level.
- Provide outdoor learning opportunities: play in the grass, climb, roll, throw, etc.
- Have a clean space for babies to crawl. Put bright toys near them so they can reach out for them or move toward them.
- Put a big cardboard box on the floor so infants can crawl inside and play.
- Read books that have bright colorful pages. Infants will respond to the rhythm in your voice.
- Remember that infants put everything in their mouths, so wash toys frequently and be sure toys are large enough that the child cannot swallow them.



Developmentally Appropriate Activities for Toddlers (18-36 months)

PH#10

Toddlers are discovering who they are. Around 18 months toddlers show interest in their identity. Along with their developing sense of identity comes the desire for independence and control. Their language is developing at rapid rates. Frequent words include “no, mine, why and me do it.” They are encouraged to see themselves as big girls or big boys now.



Developmentally Appropriate Activities for toddlers.

- Once toddlers master walking, their motor skills grow quickly. They are learning to jump, march, throw, and kick a ball. Allow them to practice their motor skills outside where they have lots of room to run.
- Toddlers enjoy dress-up and fantasy play. Creating a special area and providing materials for this type of activity is enriching for them.
- Toddlers need choices. Provide choices to eliminate power struggles.
- Provide opportunities for peer play.
- Provide noisy items such as keys to jingle or rainmakers.
- Display their work. Toddlers like their products displayed, so allow wall space for this purpose. Remember, work includes more than art. Pictures can be taken of sculptures, block creations or anything they can create.
- Toddlers need room for large-muscle movement available throughout the day.
- Toddlers do not consider the needs or safety of younger infants in rough-and-tumble play, so use developmental barriers to protect younger infants in mixed age groups.
- Along with autonomy, they need gentle guidance and to be kept safe.
- Toddlers need activities offering a variety of small-muscle and sensory related activities.
- Bubble wrap for jumping on, walking and crawling over.
- Bubbles to blow, catch and chase.
- Masking tape, newspaper and different textures for exploration and art projects.
- Ping Pong balls for dropping into containers.
- Plastic bottles with holes poked in them, measuring cups and spoons for playing with in a water table.
- Sock balls for throwing or tossing into laundry baskets.
- Tennis balls and muffin tins for matching and grasping.
- Washing baby dolls.

Routines

PH#11

- ❑ Routines enhance the quality of the relationships between adults, infants and toddlers.
- ❑ Routines respond to the needs, cues, and interests of the child.
- ❑ Infants and toddlers who trust their environment discover and explore more freely, constantly learning about their world.
- ❑ They develop a sense of trust in their environment and interact more positively with peers and adults learning with them and from them.
- ❑ Consistent routines help young children accept new and possibly objectionable activities. For example, clean up, nap and transition times.
- ❑ Routines promote flexibility and adaptability making it easier for infants and toddlers to adjust to stressful situations and conflict.

Arrivals and Good Bye's

- ❑ Create a Special Good-Bye Area – Have a special part of the room or an area outside the door that is the special good-bye area. This will create a designated space for families and children to say good-bye. You may want to decorate this area to make it a comfortable, easy place to say good-bye and start the day.
- ❑ Display Family Photos/Objects – Have family photos or favorite objects displayed around the room so children can see their families throughout the day, especially when they are feeling a little scared or lonely. Infant and toddler professionals can point out the family pictures, talk about how loved the child is and remind him/her a family member will be back to pick him/her up later in the day.
- ❑ Talk about Feelings – Acknowledge the feelings of infants, toddlers and adults. Talk to young children about their feelings and what they can do to feel better.
- ❑ Distract infants and toddlers--Play a favorite game such as peek-a-boo, read their favorite book or sing songs.



Diapering Procedures

PH#12

1. **Get Organized!** Before you bring infants and toddlers to the diaper changing area, wash your hands, gather and bring what you need to the diaper changing table.
 - ◆ Paper liners (while not required) provide an extra layer of protection against the spread of disease.
 - ◆ Fresh diaper, remove wipes from container, clean clothes (if necessary), a plastic bag for soiled clothes, disposable gloves, and diaper cream (when appropriate medication documentation has been signed by parent) removed from the container to a piece of disposable material such as tissue.
 - ◆ Diaper changing tables have the potential to become storage containers. It is easy to place items such as professional's supplies, food, clipboards, children's items, small toys, etc. on the changing tables. Picture this...would you place your lunch such as a pizza on the toilet? The diaper changing table should be treated as a toilet. Nothing is placed on the diaper changing area except the child.
2. **Carry the child** keeping soiled clothing away from you and any surfaces you cannot easily clean and sanitize after the change.
 - ◆ Always keep one hand on the child, while he/she is on the table.
 - ◆ Remember, children cannot be left unattended while on the diapering table, even with the safety strap.
3. **Remove soiled diaper** and set it aside on the prepared surface.
 - ◆ Clean the infant or toddler with a wipe from **FRONT to BACK**. Do not reuse wipes. Place dirty wipe with the soiled diaper. Look for rash or reddened area. Apply ointment if necessary and requested by parent.
 - ◆ While changing the diaper, interact with the infant or toddler by talking or singing.
 - ◆ Remove your gloves, fold them —outside to inside, setting them aside on the paper with the soiled diaper and wipes. If no gloves were used, wipe your hands with a wipe prior to putting on a clean diaper.
4. **Fold soiled disposable** diaper, gloves, and wipe together in paper and place in a hands-free covered trash can. (Wrapping soiled diaper and materials in trash bag will reduce the smell.)
5. **Place a clean diaper** on and then put the outer clothing back on the infant or toddler.
6. **Clean the area....**contaminated areas such as the diapering surface need to be cleaned and sanitized. Using three spray bottles works best.
 - ◆ Wash with soapy water. Mix soapy water in a spray bottle for easy use. (spray bottle 1)
 - ◆ Remove soap residue with clear water. (spray bottle 2)
 - ◆ Sanitize the contaminated areas with an approved sanitizing solution. (spray bottle 3)
 - ◆ Allow the changing area to air dry before using it with another child.
7. **Wash hands...**Remove child from the diaper changing table. Wash your hands and their hands for at least 15-20 seconds. Hands must be washed before returning to other duties.
8. **Record all** diaper changes on the infant or toddler daily log or family communication sheet and include what was in the diaper, any concerns, and the time of day.

Good to Know

safe sleeping

Babies can spend as many as 16 hours a day sleeping. As a parent or caregiver, it is important to be sure your baby's sleep environment is a safe one. These six simple steps will help make your baby's crib a safe place to sleep and help decrease the chances for injury, overheating, suffocation, strangulation, and Sudden Infant Death Syndrome (SIDS).

The message is as simple as 'ABC':
 Babies should sleep ...
Alone,
Back on their **B**acks,
Crib in a **C**rib.

SIDS Resources, Inc.
www.sidsresources.org
 800-421-3511

First Candle-Bedtime Basics
www.firstcandle.org/bedtimebasics

American Academy of Pediatrics
www.aap.org

Report Child Abuse
 1-800-392-3738
 ParentLink Warmline
 1-800-552-8522

Children's Trust Fund
 Missouri's Foundation for Child Abuse Prevention
Strong Families, Safe Kids

Children's Trust Fund
 P.O. Box 1641
 Jefferson City, MO 65102-1641
 573-751-5147 • Fax 573-751-0254
ctf@ca.mo.gov • www.ctfmidk.org

Simple Steps to make your baby's
Crib Safe

Safe Sleep for Babies...
 a Guide for Parents
 & Caregivers

Children's Trust Fund
 Missouri's Foundation for Child Abuse Prevention
www.ctfmidk.org

Step 1. Place your baby on his or her back to sleep at nap and night time. Share this important advice with everyone who cares for your baby.

Step 2. Place your baby on a firm, tight-fitting mattress in a safety-approved crib. Do NOT place your baby to sleep on an adult bed or other soft mattress, waterbed, sofa, beanbag, pillow, cushion or other soft surface.

- The crib mattress should be firm and fit tightly so that not more than two fingers can fit between the crib and mattress.
- Make sure everyone caring for your baby has a safe crib and is aware of these steps. Take a part crib when visiting family and friends.
- Hand-me-down cribs/cradles and cribs from thrift stores are often unsafe. Make certain the spaces between the crib slats are no wider than a soda can. Be sure there are no splinters or cracked or chipped paint on the crib. End panels should not have any decorative holes or cutouts, and corner posts should have flat tops.
- Keep the sides of the crib up at all times. Drop sides should have a locking latch that will not accidentally release.

Step 3. Remove all fluffy and loose bedding from the sleep area. Take all pillows, quilts, blanket, stuffed toys, bumper pads, comforters, sleepskins and other soft items out of the crib.

- Use a tightly fitted sheet.
- Avoid commercial devices marketed to reduce the risk of SIDS, such as wedges and positioners.
- Hanging toys and hammocks should not be in or around the crib nor within the child's reach.

Step 4. Instead of a blanket, consider using a sleeper, sleep sac or other sleep clothing with no other covering.

- Do not let your baby get too hot. Dress him or her in as much or as little as you would wear. Do not wrap your baby in lots of blankets or clothes. If your baby is sweating, has damp hair or a heat rash, he or she may be too hot.
- Do not place the crib near a heat source, such as a furnace vent, radiator or space heater.

Step 5. Make sure your baby's face and head remain uncovered during sleep.

- Always keep the baby's face and head clear of blankets, sheets and other bedding. Remember, it is not necessary to cover the baby's head indoors.
- If using a blanket, put your baby with his or her feet at the foot of the crib. Tuck a thin blanket around the mattress, reaching only so far as the baby's chest.
- Offer a pacifier to your baby at nap and night time for the first year.

Step 6. Bed sharing can be dangerous. The safest place for a baby to sleep is alone on his or her back in a standard crib on a firm mattress.

Placing your baby to sleep in a crib or other, separate and safe sleep space next to your bed is safer.

- Babies sleeping in adult beds, otherwise known as bed sharing, are at increased risk of SIDS, suffocation, strangulation and other injury.
- Do not allow your baby to sleep with siblings.
- The baby may be brought into bed for nursing or comfort, but should be returned to his or her own crib when the parent is ready to return to sleep.
- If you are concerned you may fall asleep while breastfeeding, talk with your healthcare provider about ways to successfully and safely breastfeed your baby.

Reflection Activity

PH#14

As a child care and early learning professional, it is important to assess strengths and opportunities to help identify areas of professional growth. Over time, skills will develop and strengthen. Based on the information you received today, answer the following questions honestly and thoughtfully.

My reflection on today's materials is.....

The most important thing I learned from this session is.....

What I have learned or discovered connects to me personally because.....

Goal	Action Steps to Meet Goal	Completion Date