

# Choosing Child Care: What's Best for Your Family?



The child care that you choose for your family will play a key role in your child's health and development. Finding high-quality child care is very important, but not always easy. You will need to consider many questions. But you are not alone—an increasing number of parents rely on quality child care so that they can work or attend school. The following information may help you in your search for the child care option that is best for your family.

## Types of child care

You can choose from the following 3 types of care:

- **In-home care**—the caregiver comes into your home.
- **Family child care**—you take your child to the home of the caregiver.
- **Center-based care**—you take your child to a place that is organized and staffed specifically to care for a group or groups of children.

Consider the pros and cons of each type of care with your child's and your family's needs in mind.

### In-home care

Having the caregiver come to or live in your home can be very convenient. In-home caregivers often can arrange their schedules to match your needs. Your child stays at home and does not have to adjust to a new setting. Your child will not be exposed to many seasonal illnesses because he will not be with groups of children. Your child may receive more individual attention, especially if the caregiver does not pursue other interests while caring for your child. If your caregiver also does housekeeping for your family, stress that your child's needs come first.

Your in-home caregiver needs to know exactly what you expect. Discuss the following issues specifically with prospective caregivers:

- Activities and interactions that you want for your child, such as reading and playtime.
- How to use positive, effective discipline with your child, and what rules and limits you have set for your child.
- What the caregiver will and will not do in your home.
- Outings that are acceptable for your child and how to use the proper car safety seat, booster seat, or seat belt for your child in motor vehicles.
- **Limits for television**, video games, or other media. The American Academy of Pediatrics (AAP) does not recommend television for children younger than 2 years. For older children, the AAP recommends no more than 1 to 2 hours per day of educational, nonviolent programs.
- How and when the caregiver can contact you with questions or if there is an emergency.

The caregiver should provide you with a daily schedule of what is planned and a daily report of what occurred. However, it is hard to know for sure what the caregiver does when you are not there. You will want to arrange for frequent, unannounced visits by a friend or family member who can observe how the caregiver interacts with your child and tell you about it. Keep in mind that relationships with in-home caregivers tend to be very personal.

## Your caregiver

Selecting the right person to care for your child is one of the most important decisions you will make. Caregivers can be family members, people you knew before considering them as caregivers, or people with whom you will develop new relationships. Whatever type of care you choose, the relationship between you and your child's caregiver will be an important aspect of your life. Plan to spend some time together with your caregiver and your child so that you can learn about each other.

It is important to check your caregiver's background, training, and references. The **training of caregivers** should include the following:

- Child development and early education (ie, the types of behavior that are typical for children your child's age and the types of activities that will help your child learn and grow)
- Using positive, effective discipline (including how to handle challenging behavior)
- Recognizing signs of illness
- Cleanliness and safety standards to prevent illness and injury (including how to use the proper car seats, booster seats, and seat belts for children in motor vehicles)
- First aid and proper response to choking and other emergencies
- How to evacuate the home or child care center safely in an emergency

At times you may function as both employer and friend or extended family for the caregiver.

Skilled in-home caregivers are difficult to find. You will need a backup plan for the times when the caregiver is sick, has a personal need for time off, or goes on vacation. In some areas, agencies may provide training, placement, and supervision for in-home caregivers.

### Family child care

This type of care takes place in the caregiver's home. Many family child care providers have young children of their own. They may care for children who are the same age as their own children or for children of different ages. Carefully review the program, policies, caregiver's qualifications, and condition of the home. Ask about children, teenagers, or other adults who live in the home. Who are they, what are their backgrounds, and how may they interact with your child?

The AAP recommends that a child care home should not have more than 6 children per adult caregiver, including the caregiver's own children. (Some states allow more children when at least 2 adults are available at all times in larger family child care homes.) The total number of children should be fewer when infants and toddlers are included. No caregiver working alone should handle more than 2 children younger than 2 years.

Because there usually is only 1 adult, backup care in an emergency situation must be nearby. In some areas, caregivers belong to a network of

family child care providers who may provide training, shared toys, and backup help.

Family child care providers usually work alone. This makes it hard to judge their work. Look for caregivers who are licensed or registered with the state and, as a result, have unannounced visits by an inspector. Some family child care providers have earned accreditation as well. (See “Accreditation”, right.)

### Center-based care

Center-based care has many names—child care center, preschool, nursery school, or learning center. Center-based care also may have different sponsors, including churches, schools, colleges, universities, social service agencies, Head Start, independent owners and chains, and employers.

Regardless of what type of center-based care you choose, there are some basic things to consider. Centers should be licensed and inspected regularly for health, safety, cleanliness, staffing, and program content. (Some programs are exempt from state licensing.) Just because a center is licensed, do not assume it is regularly inspected. Check to see how often the center had announced and unannounced inspections in the past year and what was checked.

Keep in mind that state licensing regulations set the lowest legal limit for staying in business. High-quality care requires more than complying with regulations. To find out about what is covered by the regulations in your area, contact your city, county, or state department of social services. State licensing regulations can also be reviewed at the local licensing agency. Most are listed at the National Resource Center for Health and Safety in Child Care Web site at [nrc.uchsc.edu](http://nrc.uchsc.edu).

High-quality centers should be accredited or in the process of obtaining accreditation. (See “Accreditation”, above right.)

Parents should be welcome to make unannounced visits to the center to see their child, and they should be notified quickly if their child needs medical attention. Policies should be written and should explain how the center’s staff promotes positive, effective discipline and responds to sick children. There should be a daily schedule that is used and posted for review by parents. Toys and activities should be suited to the children’s ages and abilities. The facility should follow safety guidelines. Caregivers and center directors should be trained (see “Your caregiver” on page 1). Look for centers that have at least 2 caregivers per group and 1 group per room, a window or glass door for supervisors to view activities, and a plan for ongoing staff training.

### Where to begin

When you start to look for child care, you may wish to contact a group such as Child Care Aware by phone at 800/424-2246 or online at [www.childcareaware.org](http://www.childcareaware.org). This group can provide resources on high-quality child care and tell you if there is a local Child Care Resource and Referral agency in your community. All types of child care may be listed through this agency.

Once you receive a list of caregivers in your area, review written material that these caregivers make available, then call them. Ask questions on the phone to help you select those that you want to visit. Whatever type of child care you choose—in-home, family, or center-based—consider the following factors as you begin your search:

- **Location**—How far is the child care from home? From your work? Is this convenient for both parents? Can either parent get there quickly in an emergency?

### Accreditation

Accreditation means that an outside observer has determined that the facility generally meets the criteria for high-quality child care. Family child care providers can be accredited through the National Association for Family Child Care (NAFCC).

Several independent groups of early childhood care and education professionals offer accreditation for centers. These include the National Association for the Education of Young Children (NAEYC) and the National Child Care Association (NCCA). If a seemingly good center is not accredited by either of these organizations, ask why. Encourage the staff to consider seeking accreditation.

- **Hours**—What hours of care are available? What happens if you are late in picking up your child? How are vacations and holidays scheduled?
- **Licensing/accreditation**—Is the facility or home licensed or registered with the appropriate local government agencies? Are there any outstanding violations? Is the program currently accredited; if so, by what organization?
- **Inspections/consultations**—Is there a qualified health professional, such as a doctor or nurse, who serves as a consultant for the child care program? (The national standard is that center-based infant-toddler programs should be visited by a health professional at least monthly, and all other child care programs should be visited at least quarterly.)
- **Visiting policy**—Are you welcome to visit during normal operating hours before and after enrolling your child? Can you see all the areas that your child will use?
- **Caregiver experience and training**—What education, training, and experience do the caregiver or center director and staff have? (See “Your caregiver” on page 1.) What type of training has the staff had during the past year? Do outside experts provide training?
- **Adequate staffing**—Are there enough trained adults available to children on a regular basis? Are there enough caregivers to fill in if one is ill or on vacation?

Do the child–staff ratios and the size of the groups of children fall within nationally recognized standards? (See chart below. For the recommended child–caregiver ratio for family child care homes, see “Family Child Care” on page 1.)

Age	Child–staff ratio*	Maximum group size*
Birth–12 months	3:1	6
13–30 months	4:1	8
31–35 months	5:1	10
3-year-olds	7:1	14
4–5-year-olds	8:1	16
6–8-year-olds	10:1	20
9–12-year-olds	12:1	24

\*As recommended by the AAP. For more information, see *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs*, listed in “Resources” on page 13.

- **Health standards**—What is the policy regarding sick children? Is a health assessment required before children enroll? Have caregivers and others who may spend time with your child been checked by a doctor to be sure that they are healthy?
- **Quality of program**—Are children cared for in small groups? Are activities proper for the children’s level of development? Is there a daily schedule? Are there daily opportunities for indoor and outdoor play? Is television viewing permitted and, if so, what is watched and for how long? (See “In-home care” on page 1 for recommended limits for television.)
- **Policies**—Check the center’s policies. Are the policies in writing? What is the discipline policy? Do the children go on any outings? If they travel by car, van, or bus, are the proper child safety seats, booster seats, and seat belts used?
- **Consistency**—Are the program’s policies on meals, discipline, and issues such as toilet training the same as yours? How long have the caregivers who will take care of your child worked at the facility with children of your child’s age? Will your child be able to have a stable relationship with 1 caring adult for at least 1 year?
- **Backup plans**—What happens if your child is sick or when the caregiver is not available or the child care program is closed?
- **Fees and services**—What is the cost for child care and/or optional services? How are payments collected? Are there other services available in addition to child care? Is safe transportation available daily and/or for trips?
- **References**—Ask for references and contact information from several parents who are currently using the program, as well as at least 1 parent whose child was in the program during the past year but is now too old to receive care at the facility.
- **Communication**—Can you talk with the caregiver on a regular basis? You will need to spend time with your child and the caregiver every day, both before you leave and when you return.

It is ultimately your responsibility to ensure that your child receives the best care. When problems occur, your caregiver should be able and willing to work through the situation with you. If at any time problems persist and you suspect your child’s health or safety is in question, you will need to find other child care for your child right away.

## What to observe

Visit the child care settings that you are seriously considering for your child. As you observe, consider the following questions:

1. Are there enough adults to meet the children’s needs?
2. Do the caregivers seem to enjoy caring for the children? Are there joyful interactions between the children and caregivers?
3. Do the adults and the children often talk with each other? Are children encouraged to talk with each other?
4. Do the children in the program seem happy? When a child cries or acts out, how does the caregiver respond?
5. Is the noise level in the child care areas comfortable?
6. Is the center or home bright, cheerful, clean, safe, and well ventilated? Is all equipment clean, safe, and in good working order?
7. Is there a posted plan of activities being followed that includes large muscle play (ie, running, climbing), quiet play with toys the child chooses, time for reading and talking, rest, and snacks and meals?
8. Is the indoor space large enough? Look for 50 square feet, measured wall-to-wall, per child.
9. Is there a sleeping or quiet area large enough for all the children to rest during nap time? (There should be at least 3 feet of space between children unless each has a separate partitioned sleeping compartment.) Are there individual cribs, beds, cots, or mats to sleep on? Do sleeping children stay within view of caregivers? Do caregivers place infants to sleep on their backs? Are cribs free of blankets, toys, or other objects that could pose a hazard?
10. Does each child have a place for her own belongings?
11. Is there a clean diaper-changing area for infants and toddlers? Is a sink within the caregiver’s reach near the diaper-changing area?
12. Are infants always fed in an upright position and, until they can sit by themselves for feeding, held by an adult? (No bottles should be allowed in bed or propped.)
13. Is the food nutritious, well prepared, suitable for the age group, and served in an appetizing way? Do you see posted menus, or are menus given to parents in advance? Do the menus match the food that is served?
14. Are there enough safe toys easily within reach of children? Are the toys suited to the age group?
15. Are dangerous toys and equipment such as baby walkers not used?
16. Are toys that are mouthed by infants or toddlers sanitized before other children are allowed to play with them?
17. Is there protective surfacing under all indoor and outdoor climbing equipment? Indoor climbing equipment requires the same types of impact-absorbing materials and fall zones as equipment installed outdoors.
18. Are the outside play area and equipment free of sharp edges, pinch points, rocks, uneven surfaces, and ditches? Is the area free of hazards such as high climbing equipment, tall slides, merry-go-rounds, trampolines, unprotected seesaws, and swings with wooden or plastic swing seats?
19. Is equipment sized and planned for use by the age group using it and inaccessible to those who are too young or too little to use it safely? Is the equipment properly installed, well maintained, and in good working order?
20. Is there well-maintained impact-absorbing material such as soft sand, wood chips, smooth gravel, or specially manufactured rubber mats under and extending at least 6 feet out from equipment?
21. Is the outside play area completely surrounded by the building and fencing?
22. Are the toilets and sinks clean and easy to reach? Can children reach clean towels, liquid soap, and toilet paper?
23. Do caregivers and children wash their hands at the following times:
  - Upon arrival for the day
  - When moving from one child care group to another
  - Before and after eating, handling food, or feeding a child
  - Before giving medication to a child
  - Before playing in water that is used by more than 1 person
  - After playing in sandboxes
  - After changing a diaper, using the toilet, or helping a child use the toilet
  - After handling any sort of bodily fluids, such as those from noses, mouths, cuts, or sores
  - After handling pets or other animals
  - After cleaning or handling garbage
24. Does the facility use disposable paper towels to ensure that each child uses only his own towel?

25. Are there sinks in each room (in centers), with separate sinks for food preparation and hand washing?
26. Is the center or home free of secondhand tobacco smoke?

## Different children, different care

One key to good child care is whether the caregiver can adapt to the needs of each child and family. Not all children of the same age are at the same level of development; each child has unique character traits. A good caregiver understands these personal and developmental differences and creates a program to meet each child's needs. The type of child care that is best for your child may change as she grows older.

Finding programs and caregivers to meet the needs of children with disabilities or other special needs may be challenging. Inclusive programs usually work closely with parents and the child's pediatrician to find the best ways to provide a safe and supportive environment for every child. Discuss your child's needs with your pediatrician and caregiver to help your child function well in a positive environment.

Ask your pediatrician for advice about child care for your child. Your pediatrician can help you and your child's caregiver plan for your child's special needs, development, activities suitable for his age, health, safety, and any problems that come up while you are using child care.

## Preparing your child

Most young infants, up to 7 months, adapt to caring adults and seldom have problems adjusting to good child care. Older infants may be upset when left with strangers. They may feel separation anxiety, which is a normal part of development for some children. They will need extra time and your support to "get to know" the caregiver.

Some children show changes in behavior when they start child care. Toddlers may cry, pout, refuse to go to child care, or act angry in other ways. Preschoolers may regress and behave like a younger child. They may be more wakeful at night. This behavior usually goes away after a few days or weeks in high-quality child care.

You can help your child adjust to a new child care arrangement. Arrange a visit with in-home caregivers while you are at home or when you need child care for a short time. Visit the center or family child care home that you have chosen with your child before beginning care. Show your child that you like and trust the caregiver.

Some children like to carry a reminder of home when they go to child care. A family photograph or small toy can be helpful. Talking to your child about child care and the care-giver is helpful. Being prepared makes any new experience easier for children. There also are storybooks about child care that you and your child can read together. (Check with your local library.)

After a child has been in child care, a sudden change in caregivers may be upsetting. This can happen even if the new caregiver is kind and competent. If you are concerned about your child's feelings, you may want to arrange a meeting with the caregiver or ask your pediatrician for advice. Parents need to help the caregivers and the child deal with any changes in the child's routine at home or child care.

High-quality child care helps children grow in every way and promotes their physical, social, and mental development. It offers support to working parents. Your pediatrician wants your child to grow and develop with enjoyment in a setting that supports you as a parent.

## Planning for child care costs

Child care can be expensive, so families must budget ahead of time. Although the cost may seem high, consider how little the caregiver is actually earning per hour for the responsibility of ensuring your child's healthy growth and development during the hours when you use child care. Ask your employer for assistance from

- Direct payment through cafeteria plans
  - Dependent-care spending accounts (tax savings)
  - Voucher programs
  - Employer discounts
- High-quality child care is an important investment for your child.

## Resources

The following is a list of child care and early education resources. Check with your pediatrician for resources in your community.

### American Academy of Pediatrics

Web site: [www.aap.org](http://www.aap.org)

### American Academy of Pediatrics

#### Healthy Child Care America

141 Northwest Point Blvd

Elk Grove Village, IL 60007

Phone: 888/227-5409

Fax: 847/228-6432

Web site: [www.aap.org/advocacy/hcca.htm](http://www.aap.org/advocacy/hcca.htm)

*Publications from the American Academy of Pediatrics*

- *Caring for Your Baby and Young Child: Birth to Age 5*
- *Caring for Your School-Age Child: Ages 5–12*
- *Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care Programs*
- *Preparing for Illness: A Joint Responsibility for Parents and Caregivers*

### Medem (an e-health network)

Web site: [www.medem.com](http://www.medem.com)

### National Association for the Education of Young Children

1509 16th St, NW

Washington, DC 20036-1426

Phone: 800/424-2460

Web site: [www.naeyc.org](http://www.naeyc.org)

### National Association of Child Care Resource and Referral Agencies

1319 F St, NW, Suite 500

Washington, DC 20004-1106

Phone: 202/393-5501

Web site: [www.naccrra.org](http://www.naccrra.org)

*Child Care Aware* (a program of the National Association of Child Care Resource and Referral Agencies)

Phone: 800/424-2246

Web site: [www.childcareaware.org](http://www.childcareaware.org)



**National Child Care Information Center**

243 Church St, NW, 2nd Floor  
Vienna, VA 22180  
Phone: 800/616-2242  
TTY: 800/516-2242  
Web site: [www.nccic.org](http://www.nccic.org)

**National Resource Center for Health and Safety in Child Care**

Campus Mail Stop F541  
PO Box 6508  
Aurora, CO 80045-0508  
Phone: 800/598-KIDS (800/598-5437)  
Web site: [nrc.uchsc.edu](http://nrc.uchsc.edu)

Please note: Inclusion on this list does not imply endorsement by the AAP. The AAP is not responsible for the content of the resources mentioned above. Addresses, phone numbers, and Web site addresses are as current as possible, but may change at any time.

The information contained in this publication should not be used as a substitute for the medical care and advice of your pediatrician. There may be variations in treatment that your pediatrician may recommend based on individual facts and circumstances.

From your doctor

