

ACCREDITATION FEEDBACK REPORT
Child Development Day Homes
February 2013

AELCS has granted your program accreditation status to recognize that you have met the provincial requirement for high quality child care as demonstrated using specific data collection strategies and identifications in the criteria outlined in the Quality Standards.

DEMONSTRATED BEST PRACTICE

STANDARD 1 – Children are safe, secure, well cared for and nurtured.

There are policies and practices in place that support the children forming secure attachments.

Menus reflect the Canada Food Guide to ensure children's nutritional needs are met.

All Providers have First Aid.

Providers are supported in building positive relationships in their practice.

Providers maintain a safe environment for the children.

Individual training plans are completed for Providers. *Each Provider has an action plan with at least 5 goals to be accomplished over the next year.*

Monthly visits are being completed in the homes.

Policies and procedures are in place to ensure medication and herbal remedies are administered safely.

Practices were observed that reduce cross contamination of germs.

Policies are in place to ensure that food handling procedures are safe.

Policies are in place to ensure the outdoor environment is safe for children.

Policies are in place to ensure that field trips and outings for children are safe.

Specific Examples of Best Practice

Provider and children's hand washing practices were thorough and consistently excellent in all three homes.

The providers and agency staff regularly attend workshops and conferences. The agency requires that providers attend a minimum of three workshops per year. One of the latest workshops offered was: "A child's eye: How to present your play space and make it appealing and functional".

Validators witnessed good written communication between providers and parents. Providers filled out age appropriate daily communication sheets as well as sent parents daily e-mails.



Agency staff, provider, and child files contained all required documentation. Provider files were comprehensive and contained: Provider profile, information sticker for when first aid expires, medical and criminal record checks, oath of confidentiality, child intervention record, training checklists, safety checklists on the home, authorizations, checklist for reviewing files, provider registration, provider/agency contact and expectations contract and provider action plans.

STANDARD 2 – Relationships between the staff and children are supportive and respectful.

Providers interacted with children at their level.

Children were treated with respect.

Providers engaged in conversation with children.

Children's needs were responded to promptly.

Providers were responsive to the children's backgrounds, needs, preferences, and abilities.

Children see themselves reflected in their various environments; pictures from home and day home activities were posted in all 3 homes.

Providers offered choices and asked children for their opinions.

Providers were appropriately affectionate with the children.

Independence was encouraged and supported.

Parents and Providers share information about the children on a daily basis.

Families are encouraged to share their knowledge, experiences and expertise, as well as make suggestions for their child's care.

Routines and activities are planned to support children's backgrounds, needs, preferences and abilities.

Children's respectful peer interactions were supported.

Appropriate conflict resolution was modeled and socially acceptable ways to express feelings were encouraged.

Specific Examples of Best Practice

The level of communication was adjusted to match the children's communication abilities. In Home 1 the provider spoke Spanish to a child with Spanish as his first language.

In Home 2 the provider speaks the same language as the child which is Gujarati. Parents have asked the provider to speak to the child in Gujarati, but also in English so his English skills will improve. She repeats every phrase or sentence in both languages.



In Home 1, the provider is attentive to the age and ability needs of the children in her home (both toddlers) and their desire to want to do everything themselves even though they are just learning how. A child held up a paint container and said "Mine", the provider said "Yes it's yours, would you like me to get the lid off for you?" "No mine" said child. "Ok" said the provider "You do it."

In Home 2, the provider uses e-mails to communicate daily activities of the children to her parents. This was at the parent's request. They did not want to use the communication book.

In Home 3, the provider respected the children's emotional needs. One child was very shy and was afraid of the Validator; the provider constantly reassured the child and kept her close. As well, the child was very slow at eating and the provider gave her all the time she needed to eat in a relaxed manner. Activities were offered for the other child so he could leave the table when he was finished.

STANDARD 3– Every child's optimal development is promoted in an inclusive early learning and child care environment.

A variety of open-ended play experiences was available for the children.

Children's creative expression is encouraged.

Providers interacted with children during play activities.

There were many age-appropriate toys and equipment available for children.

Peer learning is encouraged.

Children are encouraged and given time to make their own choices about their play and to explore their interests.

Children's interests are observed and documented by Providers.

Providers interacted with children during play.

Providers extended children's activities.

Program planning incorporates children's interests, neighborhood experiences, community resources and diverse experiences.

Children's backgrounds are used in planning daily experiences.

Materials for play reflected a full range of diversity.

Quiet areas for reading and napping are provided.

Early literacy is promoted.

Mixed-age groups are used as a learning opportunity.

Problem-solving skills were modeled.



Providers encouraged children to take responsibility for their own actions.

Rules, limits and consequences were geared to the children's developmental level.

Children's development and progress is being documented and monitored.

Any developmental issues identified are communicated to the family; and a plan of action is prepared together.

Transitions accommodate the needs of individual children.

The agency has a policy on the thoughtful and intentional use of technology.

Program planning is done by Providers and posted in full view for parents.

Household activities are used as learning experiences for the children.

Specific Examples of Best Practice

All homes offered cultural foods on the menu and all providers had a very multicultural atmosphere in the homes. There were world maps, dolls, costumes, books, pictures, photos and other languages spoken.

Child interest sheets are filled out by providers and have a direct correlation with the activities listed on the planning sheet. In Home 1, the provider extended all planned play activities to include shape since this was listed as an interest. The children used different sizes of boxes, used shape cutters in the play dough and also stamp painted with the shapes. When a child took out a box of shells (his interest) the provider was enthusiastic and asked him all about the shells.

In Home 2, the provider has documented that the children are very interested in winter and snow play. The provider has listed many outdoor activities the children could do in the snow. The provider also extended the interests of the children to the dramatic play area where she placed many kinds of outdoor clothing so the children could practice putting them on.

In Home 3, the provider has documented that butterflies are one of the children's interests. When they are playing with play dough the provider makes a butterfly and asks the child many questions about butterflies like: "Does a butterfly fly south in the winter? And why don't we see butterflies in the winter?"

Providers are using literacy bags provided to them by the agency to promote literacy in the homes. In all homes, languages other than English are spoken. All of the providers have labeled bins and activity centres. They have many ABC and 123 literacy posters on the walls along with the calendar with numbers and days of the week etc. In all homes books were plentiful and accessible to the children.

STANDARD 4 – Families are supported as the primary caregivers for their children.

The agency has an open-door policy and families are welcome to visit.

The agency provides support and information for families who need resources and referrals.



There are opportunities for families to get together at specially planned events.

Families have input to policies and procedures through the parent board.

Agency staff and Providers ensure confidentiality by signing a confidentiality agreement.

Specific Examples of Best Practice

The agency has a clear intake process to orient new parents to the program and to match families and Providers. A detailed parent handbook is provided. During the registration time for parents they watch a slide show called "What the ---- agency can do for you and your family."

Parents have input to the agency through surveys, a suggestion box, and verbal contact. The agency also has a "Customer service survey link" on the agency's website. The Agency e-mails the monthly newsletter to providers and parents.

STANDARD 5 – Relationships with families are supportive and respectful.

Parent expertise is asked for as part of programming.

Parents are encouraged to share their culture, knowledge and experiences with the children at the day home.

Families are encouraged to express their needs and preferences, as well as make suggestion for their child's care.

The parent handbook clearly states the program's philosophy, goals, policies and practices.

Families are consulted about policy and practice changes that may affect them.

There is evidence of a complaint process and effective methods for resolving issues between Providers, families and the agency with consideration to parent's perspective.

Specific Examples of Best Practice

The agency has parents fill out a survey annually. The survey is done online through the agency website.

There is a regular exchange of information through monthly newsletters, bulletin boards and white boards. The newsletters the agency sends out are very extensive and contain information on workshops, community events, menus and recipes, providers birthday's, multicultural events in the community, children's quotes, provider spotlights, online parent and provider courses and fieldtrip ideas.

The agency has increased payment options for parents. They can now do e-mail transfers and automatic withdrawal from back accounts.

STANDARD 6 – Program philosophy, policies and procedures support staff in providing high quality early learning and child care services.

Statements are written in plain language style.



There are detailed job descriptions for all agency staff.

Providers are given a handbook, which contains details of their job expectations.

Policy manuals and handbooks are clear, current and consistent with best practices.

Policies and procedures are clearly reflected in everyday practice.

Agency consultants and Providers work together as a team.

The handbook for agency staff clearly states their philosophy, goals and objectives, which are reviewed annually.

There is a clear mission statement in the handbooks.

The agency orients Providers to their philosophy, goals, objectives, policies and procedures.

Each provider receives a Provider handbook when they are contracted.

Specific Examples of Best Practice

A code of ethics guides the agency and the Providers. Providers have recently taken part in a workshop called Ethics, Professionalism and Business.

Agency staff members receive a handbook when they are hired; and policies and procedures are reviewed with the director. The CFSA policy book has been added to the employee policy binder.

Staff and Provider meetings provide for an exchange of information and provide a way for both to have input to policies and procedures. The agency reviews their policies, procedures and practices with the Providers. A social media policy has recently been developed and put into practice.

STANDARD 7 – The work environment supports quality service delivery.

Providers and agency staff have opportunities to further their education and opportunities for professional development.

Performance reviews for agency staff and Providers are completed annually.

Staff and Providers complete an annual self-evaluation.

Staff and Providers complete a survey on an annual basis.

There is low staff turnover.

There are staff and Provider meetings.

Job descriptions are detailed and regularly updated.

Consultants have consistent day home caseloads.



The agency is responsive to their Providers' requests and has practices in place to support them.

There is evidence that the agency provides staff and providers with opportunities to participate in decision making.

Providers have opportunities to participate in decision making at the operational level, as they can sit on the board.

Specific Examples of Best Practice

Resources are available for agency staff. Agency staff recently attended a Colour Spectrums workshop.

There is a well-defined process to recruit, orient and monitor new Providers. The Agency has developed a "What we expect" binder which is used when recruiting and orienting new providers.

Providers are given anniversary gifts and are acknowledged on their birthdays in the newsletter.

Resources are available for Provider's information, education and program planning. Early literacy bags and other practical resources are available through the agency. The agency bought each provider a world map to post in her home.

STANDARD 8 – The program responds to the needs and concerns of children, their families, the staff and the community.

The agency uses community resources to meet the needs of the children and families it serves.

There is evidence of community relationships with numerous outside agencies, as well as local schools.

There is daily verbal communication between families and Providers.

Parents are directed to various community agencies that can offer them support when needed.

The agency's policies and practices reflect a focus on meeting diverse needs.

Specific Examples of Best Practice

The agency has a well-developed interactive web site.

There is evidence that the agency is responsive to complaints, issues and concerns from members of the broader community. One of the consultants has the Car seat inspection training and does a community check throughout the year on the day home car seat installations.

The agency has been a partner, funder and stakeholder for a community volunteer program. It is a "Safe community" organization and the agency has participated in the "Family Safety Day" program for over three years.



STANDARD 9 – Families and community stakeholders are actively engaged in ensuring that community diversity and interests are reflected in the delivery of early learning and child care services.

Parents are invited and encouraged to sit on the Board of Directors.

Various community stakeholders are also members of the board.

The board invites parents to their meetings and the AGM.

Some staff and Providers are members of professional organizations.

There is an established pattern for regular community consultation with stakeholders.

The agency receives newsletters from local schools, health services and professional organizations.

Outcomes of planning processes are communicated with stakeholders.

Roles and responsibilities of stakeholders are clearly defined.

The agency relies on the support of community stakeholders for program input and development.

Specific Examples of Best Practice

The director is a member of one or more associations in the community. The agency is working together with EC-Map, the region and the local school board. Staff members attend conferences and workshops offered in the community.

The agency belongs to a professional organization; the Alberta Child Care Association.

To ensure clear communication between the agency and community stakeholders the coordinator of the agency will be simplifying the Annual General Report, to make it more readable.

STANDARD 10 – Early learning and child care services participate in ongoing monitoring and evaluation processes that support continuous quality improvement.

Working through the accreditation process is one way this standard is being met.

Policy development and revision involve relevant stakeholders.

Ongoing monitoring and evaluation processes of the program are completed through file reviews; FCCERS; CIS assessments; and parent, staff and Provider input.

There is evidence that the opinions of families, staff and Providers are sought and taken into consideration.

A strategic plan is in place.

There is an annual program review.



Specific Examples of Best Practice

Formal goal setting is completed through the QEP which is comprehensive.

The providers work through monthly enhancement goals such as health and safety issues, meeting children’s needs and challenging behaviors.

ACCREDITATION STANDARDS REPORT

The Accreditation Standards Report listed a minimum of two items under each standard and sometimes more, demonstrating how the program met or exceeded ACCAP Quality Standards. There were many innovative items listed which were specific to the standard and Validators were able to confirm that these were in place.

ANNUAL REVIEW

The program’s Annual Review indicates progress towards achieving their goals as set out in their Quality Enhancement Plan.

QUALITY ENHANCEMENT PLAN

The QEP primarily demonstrated clear, specific and ongoing action plans.

The program had achieved many of the goals that had been set.

The Quality Enhancement Plan was comprehensive.

The agency listed many goals under each standard that are relevant, practical and doable.

These goals were listed as action plan statements that were concrete and comprehensive—that is, they included measurable descriptions with identified responsibilities and dates for completion. *The QEP was 26 pages long.*

LACK OF EVIDENCE TO SUPPORT BEST PRACTICE

STANDARD 1 – Children are safe, secure, well cared for and nurtured.

None

STANDARD 2 – Relationships between the staff and children are supportive and respectful.

None

STANDARD 3 – Every child’s optimal development is promoted in an inclusive early learning and child care environment.

None



STANDARD 4 – Families are supported as the primary caregivers for their children.

None

STANDARD 5 – Relationships with families are supportive and respectful.

None

STANDARD 6 – Program philosophy, policies and procedures support staff in providing high quality early learning and child care services.

None

STANDARD 7 – The work environment supports quality service delivery.

None

STANDARD 8 – The program responds to the needs and concerns of children, their families, the staff and the community.

None

STANDARD 9 – Families and community stakeholders are actively engaged in ensuring that community diversity and interests are reflected in the delivery of early learning and child care services.

None

STANDARD 10 – Early learning and child care services participate in ongoing monitoring and evaluation processes that support continuous quality improvement.

None

ACCREDITATION STANDARDS REPORT

None

ANNUAL REVIEW

None

QUALITY ENHANCEMENT PLAN

None



RECOMMENDATION TO THE APPLICANT PROGRAM

General

The evidence provided during your site visit demonstrated best practices in all areas of your program. The Quality Enhancement Plan reflected a clear understanding of areas where you would like to focus your attention in the next three years. Regularly review your QEP to ensure that the goals and strategies continue to be relevant and current. Your progress on the goals of your QEP should be included in your annual report.

