Credential AREA: Early Childhood Credential (Level 5) TOPIC: HSW Domain-Specific Assessment Example Child Health & Program Profile

I. Assessment Competency & Standards Alignment

Gateways Competencies Assessed	Competency Alignment						
	NAEYC	NAEYC	IPTS	InTASC (2019)			
	Standards	Competencies	(2013)				
	(Draft 2020)	(Draft 2020)					
ECE HSW1: Articulates components of a safe and healthy	6b	6b-LVL1-3-4	4G	3(k)			
environment							
ECE HSW2: Maintains a safe & healthy environment	1d, 6b	1d-LVL1-2, 6b-	4I	3(k)			
		LVL1-3					
ECE HSW3: Creates a healthy and safe environment	1d, 6b	1d-LVL2-2, 6b-	4I, 4K,	3(b), 3(d), 3(e), 3(i),			
		LVL1-3	4M, 4P	3(k)			
ECE HSW4: Assesses healthy and safe early childhood			4E, 4L				
environments							
ECE HSW5: Designs and implements learning opportunities	1d	1d-LVL2-2	2K, 2M,	1(g), 4(a), 5(b)			
emphasizing healthy bodies, healthy lifestyles, and a healthy			2N				
environment							
ECE HSW6 : Collaborates with families and community	2b	2b-LVL2-4	8K, 8L,	1(c), 3(a), 3(c), 10(a),			
organizations to support children's healthy development and			8T, 9L,	10(c), 10(e), 10(m),			
learning			9N	10(q)			
HSW7 : Identifies plans and procedures that support healthy	1d	1d-LVL3-2	5S, 9B,	6(k), 7(k), 9(j), 9(o)			
and safe early childhood program practices			9C, 9R				
HSW8 : Develops and implements policies, methods, plans,	1d	1d- LLV3-2	4I, 4J,	1(c), 3(a), 3(b), 3(c),			
and guidelines reflective of healthy and safe program			4K, 9I,	3(f), 3(i), 3(k), 9(a),			
practices			9J, 9Q,	9(d), 9(f), 10(d), 10(g),			
F			9R	10(i), 10(j), 10(k), 10(q)			

II. Assessment Task Description/ Directions

This assessment requires that you conduct a family interview designed to gain information about a child's health. You will also be developing a profile of an early childhood program related to their health, safety, and nutrition practices. Following completion of these activities, you will reflect and analyze implications for early childhood classrooms and practitioners. The goal of your assessment is to

determine competencies in identifying components of a safe and healthy environment, and maintaining basic health, safety, and nutritional practices to create a healthy and safe environment.

This assessment has three parts. In Part 1, you will interview a family member of a young child to complete a Child Health Assessment. In Part 2, you will interview an ECE administrator of a licensed school/ program/ center to develop an ECE Program Health, Safety, and Nutrition Profile. Part 3 requires that you analyze the data collected in parts one and two and process classroom/ practitioner implications.

Part 1: Family Interview Child Health Assessment

Before you start on the Child Health Assessment, you should:

- Study the attached Child Health Assessment attached to prepare for your interview
- Select a child between the ages of birth and eight. This child can be a family friend, a niece or nephew, a neighbor, or a child in your early childhood classroom environment. However, the child cannot be your own child.
- Arrange a time to interview the child's parent or a close family member. Try to conduct the interview in the child's home so that you can form a very brief snapshot of the child's environment. Your interview is likely to last approximately one hour.

During the Interview:

- Use the "Child Health Assessment" below to gather your data
- Let the parent help you assign an alias name for the child so that he/ she can be reassured that the child's identity will be protected

Technology Option: Video/audio options

Post Family Interview Reflection:

- Summarize your interview
- This summary should include the following:
 - Your overall assessment of this child's health
 - Strengths you feel exist within the child's environment that support his/her present and long-term health
 - Risk factors you feel exist within the child's environment that may impact his/her present and long-term health
 - Suggestions you have to support the child's present and long-term health in the future
 - Learning opportunities for the child and family that would be culturally responsive and would support knowledge and skills in the areas of health, safety, and nutrition
 - Strategies you would use to collaborate with this family in the future to support their child's health, safety and nutritional needs
 - Community organizations and health personnel that you feel would be beneficial resources for this family
 - Based on what you learned from this interview, how will you collect and use individual child health and nutrition information as a practitioner?

Part 2: ECE Program Health and Safety Profile

This part of the assessment requires that you develop a health and safety profile of an early childhood program that serves children between the ages of birth and five. The program you choose must be licensed by the Department of Children and Family Services. To gather this data, you will interview a director/ assistant director from this setting.

Before Your Interview:

- Locate and study the licensing standards for day care centers (e.g. in 2019, and in Illinois, this would be Subpart G: Health and Hygiene from the Illinois Department of Children and Family Services (2010, December 15), *Licensing standards for day care centers*. Available from http://www.state.il.us/dcfs/docs/407.pdf) If not there, please search for the most recent version.
- Arrange to interview the director or assistant director from your selected licensed childcare program that serves children between the ages of birth and five. You may wish to interview additional people within the program to determine their knowledge of the policies and practices discussed. Your interview is likely to last approximately one hour.

During the Interview:

- To complete this assignment, use the "Program Health and Safety Profile" below to gather your data as you conduct the interview.
- In addition to gathering data with the form, please respond to the questions below.
- Finally, obtain copies of this site's policies as artifacts to refer to in your post-reflection

Health and Nutrition

- What regular policies and practices are used within the environment to control the spread of infectious diseases?
- What kind of record-keeping systems do you use to track immunizations and health checks?
- What strategies does the program use on a regular basis to manage children's communicable and acute illness?
- How are the documentation and distribution of medicines and medical treatment managed?
- What strategies are used to adhere to state and local regulations for food preparation and handling?
- What daily routines and activities do you practice supporting opportunities for children, families and staff to practice safe and healthy behaviors?

Safety

- What strategies within the program support knowledge of and appropriate implementation for emergency medical and first aid procedures?
- How do you ensure that a safe and risk-free environment is maintained, indoors and outdoors?
- How are the safety strategies communicated to staff?
- How effectively do you feel these safety strategies are implemented?
- What policies and practices does the program have regarding the prevention, identification, and reporting of child abuse and neglect?

Community Collaboration



- What community organizations does the program currently coordinate with in support of health, safety, and nutrition?
- How does this program engage with families related to health, safety, and nutrition? In what ways are families engaged in the collaborative process?
- What role do health personnel have in this collaboration?

Post-Interview Reflection:

- Write an interview summary/reflection, including examples from your interview, that includes the following points:
- Your overview of the program's specific strengths in terms of implementation of basic health, safety, and nutritional practices. Be sure to include commentary regarding the following:
 - Instructions and required documentation for administration of different medicines and approved medical treatments,
 - State and local regulations for meal preparation,
 - Maintaining a healthy, safe and risk-free environment
 - · Record keeping
 - Reporting child abuse and neglect
 - Community collaboration and family engagement in collaboration
- Provide an overview of the program's specific challenges in each of the above areas
- Describe how the environment you observed compares to licensing standards provided through the Department of Children and Family Services
- Explain how children, families, and staff are supported in practicing safe and healthy behaviors through culturally responsive daily routines and activities
- Include additional information that would have been beneficial for you to make a full assessment of health and safety factors within the program

Part 3: Classroom/Practitioner Implications

- Based on your Center Interview, respond to the following prompt: What is your overall assessment of the program in terms of their implementation of basic health, safety, and nutritional practices? Be sure to include commentary regarding the following:
 - Instructions and required documentation for administration of different medicines and approved medical treatments,
 - State and local regulations for meal preparation,
 - Maintaining a healthy, safe and risk-free environment
 - Record keeping
 - Reporting child abuse and neglect
 - What opportunities would you develop for children and staff to practice safe and healthy behaviors through daily routines and activities?



- Imagine that you are placed in a position as the new director of the early childhood program you observed within. Based on your observational data and knowledge you have gained regarding health, safety, and nutrition, please respond to the following:
 - What suggestions would you make for creating an environment that is safe and free from physical dangers and potential hazards? Be sure to provide a rationale for suggestions. If no suggestions are indicated, please include an overview of why these are not warranted.
 - What policies, methods, and guidelines would you suggest ensuring that the program is in alignment with quality standards? Be sure to provide a rationale for suggestions. If no suggestions are indicated, please include an overview of why these are not warranted.



III. Assessment Rubric

	ECE Health, Safety & Wellness Master Rubric	
Competency	Competent	Unable to Assess
	Checklist Criteria	
HSW1 : Articulates	At the classroom level	
components of a safe	signs of abuse and neglect	
and healthy	ways of documenting abuse and neglect	
environment	steps in reporting abuse and neglect	
NAEYC: 6b (6b-LVL1-3-4) IPTS: 4G InTASC: 3(k)	maintenance of a safe and risk-free indoor environment for children in which hazards are identified, risks assessed, and threats responded to with appropriate corrective action	
III ASC. S(K)	food preparation, and handling procedures	
	emergency medical and first aid procedures	
	ongoing wellness (providing instructions and required documentation for administration of different medicines and approved medical treatments and heath appraisals)	
	contagious disease prevention	
	contagious disease procedures	
	nutritional practices	
	record keeping related to health and safety (risk analysis documentation, accident reports, etc.)	
	standards & regulations related to health & safety	
Competency	Competent	

		Unable
	Checklist Criteria	- to Assess
HSW2 : Maintains a safe	At the classroom level	
& healthy environment	documents abuse and neglect	
	follows steps in reporting abuse and neglect	
NAEYC : 1d, 6b (1d-LVL1-2, 6b-	maintains a safe and risk-free indoor environment for children in which hazards are identified,	
LVL1-3) IPTS : 4I	risks assessed, and threats responded to with appropriate corrective action	
InTASC: 3(k)	follows food preparation, and handling procedures	
	follows emergency medical and first aid procedures	
	follows ongoing wellness procedures (providing instructions and required documentation for	
	administration of different medicines and approved medical treatments and heath appraisals)	
	follows contagious disease prevention procedures	
	follows contagious disease procedures	
	maintains healthy nutritional practices	
	follows record keeping expectations related to health and safety (risk analysis documentation,	
	accident reports, etc.)	
	follows standards & regulations related to health & safety	
Competency	Competent	Unable to
		Assess
	Checklist Criteria	_
HSW3 : Creates a	At the classroom leveldesigns & implements procedures which reflect regulations and standard	ls
healthy and safe	related to	
environment	child abuse and neglect procedures	
NAEYC : 1d, 6b (1d-LVL1-2, 6b-	safe and risk-free indoor environment for children in which hazards are identified, risks	
LVL1-3)	assessed, and threats responded to with appropriate corrective action	
IPTS : 4I, 4K, 4M, 4P	safe and risk-free outdoor environment for children in which hazards are identified, risks	
InTASC : 3(b), 3(d), 3(e), 3(i), 3(k)	assessed, and threats responded to with appropriate corrective action	
	food preparation, and handling procedures	
	emergency medical and first aid procedures	
	ongoing wellness procedures (providing instructions and required documentation for	
	administration of different medicines and approved medical treatments and heath appraisals)	
	contagious disease prevention procedures	
	contagious disease procedures	

Competency	Competent									
		Checklist	t Criteria							
HSW4: Assesses	At the classroom level	.consistently assesses (ha	azards are identified, risl	ks assessed, and threats	•					
healthy and safe early	responded to with appr	ponded to with appropriate corrective action) classroom practices related to								
childhood	child abuse and n	child abuse and neglect procedures								
environments	safe and risk-free	indoor environment								
	safe and risk-free	outdoor environment								
NAEYC: IPTS: 4E, 4L	safe and risk-free	outdoor environment								
InTASC:	food preparation,	and handling procedures								
	emergency medic	al and first aid procedures								
	ongoing wellness	ongoing wellness procedures (providing instructions and required documentation for								
	administration of	administration of different medicines and approved medical treatments and heath appraisals)								
	contagious diseas	contagious disease prevention procedures								
	contagious diseas	e procedures								
	healthy nutritiona	ıl practices								
	record keeping ex	pectations (risk analysis do	ocumentation, accident rep	orts, etc.)						
Competency	Distinguished	Competent	Developing	Unacceptable	Unable to					
HSW5: Designs and	Creates, implements	Creates and implements	Creates and implements	Creates and	Assess					
implements learning	and advocates for	activities for children	activities for children	implements activities						
opportunities	activities for children	that are culturally	that provide children	for children that do not						
emphasizing healthy	that are culturally	appropriate and	opportunities to make	support children in						
bodies, healthy	appropriate and	provide children	healthy, safe and	making healthy, safe						
lifestyles, and a healthy	provide children	opportunities to make	nutritious choices.	and nutritious choices.						
environment	opportunities to make	healthy, safe and								
	healthy, safe and	nutritious choices.	Learning opportunities	Learning opportunities						
NAEYC : 1d (1d-LVL2-2)	nutritious choices.		emphasize healthy	do not emphasize						
IPTS: 2K, 2M, 2N		Learning opportunities	bodies, healthy	healthy bodies, healthy						
InTASC : 1(g), 4(a), 5(b)	Learning opportunities	emphasize healthy	lifestyles, and a healthy	lifestyles, and a healthy						
	emphasize healthy	bodies, healthy	environment.	environment.						
	bodies, healthy	lifestyles, and a healthy								
	lifestyles, and a healthy	environment.								
	environment.									
		Families are engaged in								
	Families are engaged in	activities as								

	activities as appropriate.	appropriate.						
Competency	Distinguished	Competent	Developing	Unacceptable	Unable to Assess			
HSW6: Collaborates with families and community organizations to support children's healthy development and learning NAEYC: 2b (2b-LVL2-4) IPTS: 8K, 8L, 8T, 9L, 9N InTASC: 1(c), 3(a), 3(c), 10(a), 10(c), 10(e), 10(m), 10(q)	Identifies, implements and advocates for strategies, including use of community resources, that promote collaboration with families and community organizations (including health personnel) to support each child's healthy development and learning	Identifies and implements strategies, including use of community resources, that promote collaboration with families and community organizations (including health personnel) to support each child's healthy development and learning	Identifies and implements strategies that promote collaboration with families and community organizations	Identifies and implements strategies that do not promote collaboration with families and community organizations	7.55555			
Competency		Сотр	etent		Unable to Assess			
		Checklis	t Criteria		. 1100000			
HSW7 : Identifies plans		am level plans and proce	dures that reflect standa	rds and regulations relat	ed			
and procedures that	to	1 1						
support healthy and safe early childhood	signs of abuse and	ting abuse and neglect						
program practices		abuse and neglect						
F 9 F		safe and risk-free indoor e	nvironment for children in	which hazards are				
NAEYC : 1d (1d-LVL3-2) IPTS : 5S, 9B, 9C, 9R	identified, risks a	ssessed, and threats respo	nded to with appropriate c	orrective action				
InTASC: 6(k), 7(k), 9(j), 9(o)		maintenance of a safe and risk-free outdoor environment for children in which hazards are identified, risks assessed, and threats responded to with appropriate corrective action						
	food preparation,							
	U ,	emergency medical and first aid						
		(providing instructions an						
	contagious diseas	es and approved medical to	reatments and neath appra	nsalsj				
	contagious diseas							
	nutritional practi							
	maci icionai pi acci							

	record keeping related to health and safety (risk analysis documentation, accident reports, etc.)	
Competency	Competent	Unable to Assess
	Checklist Criteria	
HSW8 : Develops and	Develops and implements ethical program level practices that reflect standards and regulations r	elated
implements policies,	to	
methods, plans, and	ways of documenting abuse and neglect	
guidelines reflective of	steps in reporting abuse and neglect	
healthy and safe program practices	maintenance of a safe and risk-free indoor environment for children in which hazards are identified, risks assessed, and threats responded to with appropriate corrective action	
NAEYC : 6b (6b-LVL1-3-4) IPTS : 4I, 4J, 4K, 9I, 9J, 9Q, 9R	maintenance of a safe and risk-free outdoor environment for children in which hazards are identified, risks assessed, and threats responded to with appropriate corrective action	
InTASC : 1(c), 3(a), 3(b), 3(c),	food preparation, and handling	
3(f), 3(i), 3(k), 9(a), 9(d), 9(f),	emergency medical and first aid	
10(d), 10(g), 10(i), 10(j), 10(k), 10(q)	ongoing wellness (providing instructions and required documentation for administration of different medicines and approved medical treatments and heath appraisals)	
	contagious disease prevention	
	contagious disease procedures	
	nutritional practices	
	record keeping related to health and safety (risk analysis documentation, accident reports, etc.)	

Yellow = Level 2

Green = Level 3

Orange = Level 4

Blue = Level 5

IV. Data Collection & Analysis Tool

Competency 8	Competency & Standards Alignment					Cumu	lative Assessme	ent Data	
Competency	NAEYC Stand. (Draft 2020)	NAEYC Comp. (Draft 2020)	IPTS (2013)	InTASC (2019)	Distinguished	Proficient	Needs Improvement	Unsatisfactory	Unable to Assess
ECE HSW1: Articulates components of a safe and healthy environment	6b	6b- LVL1- 3-4	4G	3(k)					
ECE HSW2: Maintains a safe & healthy environment	1d, 6b	1d- LVL1-2, 6b- LVL1-3	4I	3(k)					
ECE HSW3 : Creates a healthy and safe environment	1d, 6b	1d- LVL2-2,	4I, 4K,	3(b), 3(d), 3(e), 3(i), 3(k)					

		6b-	4M,				
		LVL1-3	4P				
ECE HSW4: Assesses healthy and			4E,				
safe early childhood			4L				
environments							
ECE HSW5: Designs and	1d	1d-	2K,	1(g), 4(a), 5(b)			
implements learning		LVL2-2	2M,				
opportunities emphasizing			2N				
healthy bodies, healthy lifestyles,							
and a healthy environment							
ECE HSW6: Collaborates with	2b	2b-	8K,	1(c), 3(a), 3(c),			
families and community		LVL2-4	8L,	10(a), 10(c),			
organizations to support			8T,	10(e), 10(m),			
children's healthy development			9L,	10(q)			
and learning			9N				
HSW7: Identifies plans and	1d	1d-	5S,	6(k), 7(k), 9(j),			
procedures that support healthy		LVL3-2	9B,	9(0)			
and safe early childhood program			9C,				
practices			9R				
HSW8 : Develops and implements	1d	1d-	4I, 4J,	1(c), 3(a), 3(b),			
policies, methods, plans, and		LLV3-2	4K,	3(c), 3(f), 3(i),			
guidelines reflective of healthy			9I, 9J,				
and safe program practices			9Q,	9(f), 10(d),			
			9R	10(g), 10(i),			
				10(j), 10(k), 10(q)			
				10(4)			

CHILD HEALTH ASSESSMENT

Child's name	Birth Date
Parent/Guardian names	Date Completed

HEALTH HISTORY

Age of child			
Were there any complications during the pregnancy?	Y		N
If yes, what were they?			
Were there any difficulties during labor or delivery?	\ \ \ \ \ \	Y	N
If yes, what were they?			
Did your child have any special conditions at birth? (prematurity, jaundice, medical diagnosis, etc.)	Y		N
If yes, what were they?			
Has your child had any illness with a high fever?	Y		N
(104 longer than 2 days)			
Has your child had a serious illness or injury?	Y		N
If yes, please explain			
Has your child been screened for vision problems?	Y	N	Result
Has your child been screened for hearing problems?	Y	N	Result
Has your child been screened for lead level?	Y	N	Result

CURRENT HEALTH

Does your child get regular medical checkups?	Y	N
By whom?		
Have there been any concerns raised?	Y	N
If so, please explain	'	
Does your child have a current or chronic medical condition?	Y	N
If so, please explain		
Does your child take medication regularly?	Y	N
Why and what is it?		
Does your child have any allergies?	Y	N
If so, what are they?	'	
What strategies are used to protect the child from communicable illnesses?		
Is the child fully immunized?	Y	N

GENERAL DEVELOPMENT

Has your child received a Developmental Screening? (ex. ASQ or Denver Developmental)	Y	N
If so, what if any, concerns were raised?		
Is your healthcare provider ok with your child's height and weight?	Y	N
Do you or someone else have any concerns about general growth and development?	Y	N
If so, what are they?		
Do you or someone else have any concerns about your child's behavior?	Y	N

If so, what are they?
What things can your child do very well?
What things are challenging for your child?

DENTAL HEALTH

Does your child see a dentist regularly?	Y	N
Does anything appear abnormal on the child's teeth or gums?	Y	N
(swelling, redness, apparent decay)		
Is brushing part of your child's daily routine?	Y	N
Does your child fall asleep with a bottle in his/her mouth?	Y	N

NUTRITION

Is your child on a special diet?	Y	N
If so, describe the diet.		
Does your child have any diet-related health problems?	Y	N
Diabetes allergies other		
If so, what are they?		
Does your child eat things not usually considered food e.g. paste, dirt paper?	Y	N
What is eaten?		
What are some of your child's favorite foods?		

What food does your child dislike?			
How much water does your child norm	nally drink throughout the day?		
Is your child taking a vitamin or miner	al supplement?	Y	N
	at your child eats or drinks on a typical day.		
TIME	PLACE	FOOD	AMOUNT

SLEEP

Does your child have regular nap and bed times?	Y	N
How many hours does your child sleep per day?		
Describe any concerns you have about your child's sleep.		

SAFETY

Does your child ride in an approved car seat?	Y	N
Is a helmet used for skating or biking?	Y	N

Health and Safety Checklist

Three and Older

Date Completed:

	Yes	No	Not
A. Food Preparation			Observed
1. Hands are washed before food is prepared			
2. Raw meat and fish handled appropriately			
3. Pot handles turned to back of stove*			
B. Environment			
1. Safety caps on electrical sockets*			
2. Electrical cords are inaccessible or secured*			
3. No peeling or chipped paint in area children have access to			
4. Smoke detectors or sprinklers installed (see Rule in Section 406.8a.4 of Licensing Procedures for specific locations)			
5. Rotary fan is child-safe (blades protected)			
6. No protruding nails on furniture or boards			
7. Dangerous substances are locked away or out of reach (e.g., medicines, cleaning supplies, garden sprays, matches) *			
8. Toys and objects small enough to be swallowed kept away from children			

9. Children are not left in play pens, swings, jumpers, strollers or other restraints for more than half of the observation period		
10. Area used for child care has enough light to read by		
11. Temperature in area used for child care is comfortable (e.g., see Rule in IL DCFS: Section 406.8a.7 of Licensing Procedures for specific temperatures)		
12. Some fresh air in the area used for child care		
13. Good space for resting (setting is quiet)		
14. Quiet area for sick children available and can be easily supervised		
15. Radiators and pipes covered		
C. Routines		
1. Caregiver washes hands with soap and water after each diapering, when helping children with toileting, or when handling soiled clothing		
2. Diapers/soiled clothing are checked and changed as needed (observe at least one checking during observation period, no prolonged odor)		
3. Children's hands are washed after using the toilet or after diaper change		
4. Accessible place for children to wash hands (e.g., steps or stool near sink)		
5. Extra clothes available to change children		
6. Feeding is appropriate: cereal fed with spoon, sandwiches and finger food in small pieces		
7. Children are not left unattended on changing tables		
D. Outdoor Play		
1. Covered sandbox		
2. Soft surface under swings (e.g., grass or dirt) *		
3. Helmets worn when riding two-wheelers or scooters *		

4. No protruding nails on outdoor play equipment		
5. Outdoor play area free of animal feces or broken glass		

The Institute for a Child Care Continuum, Bank Street College of Education and Mathematica Policy Research, Inc. Checklist modified to meet minimum Illinois DCFS licensing standards where appropriate.