



Tony Jordan, Executive Director 1100 H Street • Modesto CA 95354 • (209) 238-1800 • FAX (209) 238-4217

INFANT TODDLER/SOCIAL/EMOTIONAL HEALTH CLASSROOM, SOCIALIZATION OBSERVATION MH-7 IT

COVER SHEET Site/Class: Date: Number of Children: Observer: Title:_____ Start Time: _____ End Time: ____ Names of Caregivers/Providers: **Observed (Circle all that apply) Routines** Small Group Individual/Free Choice Outside Meals/Snacks **SUMMARY** Concerns (if referencing children, use initials only): Recommendations for Follow-Up_____ Signature Education TA/ Monitor or Licensed Clinician: Reviewed by: Title: Date: Please note: Send copy of white to Grantee Disabilities Supervisor.





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Infant/Toddler Classroom/Socialization Observation

Key: N/O = NOT OBSERVED/COULD NOT DETERMINE 0 = COULD USE IMPROVEMENT 1 = APPROPRIATE 2 = EXCELLENT

I.	Environments	N/O	0	1	2
A.	Caregivers provide quiet retreat areas for infants/toddlers in indoor and		_		
	outdoor environments by ensuring noise, excess adults, and general				
	commotion are kept at a minimum to avoid overstimulation.				
В.	Caregivers primarily use muted colors on walls and fixtures and provide				
	areas free of clutter (i.e., tops of shelves and walls) to avoid over-				
	stimulation.				
C.	Caregivers display photographs of children and their families at their eye				
	level to support their connection with home.				
D.	A variety of developmentally appropriate materials and toys are available				
	including toys that can be used by multiple children at the same time and				
	duplicates of highly preferred toys.				
E.	Caregivers provide children with opportunities to make choices throughout				
	the day to encourage growing responsibility for their behavior/self-				
	regulation and to support children's feelings of autonomy.				
F.	Children demonstrate an attachment to their caregivers, are content and are				
	engaged in exploring their environment.				
G.	Caregivers promote interactions between toddlers in the context of activities				
	and routines.				
Comments:					
Rec	ommendations:				

Distribution: White - Center Supervisor/Teacher Yellow- Delegate Director/Supervisor Pink - Education TA Monitor/Licensed Clinician





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II.	Responsiveness/Daily Routines/Transitions:	N/O	0	1	2
A.	There is a primary caregiver assigned to children to individualize care based				
	on each child's needs (i.e., diapers are changed as needed rather than fixed				
	schedule, infants are soothed in different ways, and infants eat on their own				
	schedule/ esp. under 12 mos.).				
В.	Caregivers interact socially with infants and toddlers by individualizing all				
	daily routines such as, mealtimes, feeding, and diapering.				
C.	Caregivers immediately respond to children in distress to assess child status				
	and provide support.				
D.	Caregivers consider context in the assessment of a child's distress and				
	respond appropriately (i.e., a child fussing while beginning to nap may be				
	given a back rub).				
E.	Caregivers use physical touch and make eye contact, to build trust and				
	develop attachments with their children.				
F.	Transitions are individualized, and wait time is kept at a minimum.				
G.	Caregivers use gestural, verbal, visual and/or object cues to prepare children				
	for upcoming transitions.				
Recommendations:					
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III.	Adult/Child Communication:	N/O	0	1	2
A.	Caregivers talk often to their individual children, calling them by name, but				
	avoid over stimulating chatter.				
В.	Caregivers follow the child's lead when engaged in interaction (i.e., adults				
	talk about what the child is doing, interact with the child and a toy or play				
	activity the child has selected; allow the child to direct the play and their				
	pace).				
C.	Caregivers acknowledge and appropriately respond to children's verbal and				
	non-verbal cues.				
D.	Caregivers respond to children's communication attempts and extend				
	conversations (i.e., expanding language experiences).				
E.	Caregivers use words, facial expressions, gestures, and physical positioning				
	in response to children's cues that they are ready to engage, in order to				
	maintain and extend the child's interest and engagement.				
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IV. Social Emotional Interactions:		N/O	0	1	2
A.	Interactions between caregivers and children provide appropriate models of				
	social interaction (i.e., supportive, and respectful).				
В.	Caregivers verbally comment on children who are engaging in pro-social				
2.	behaviors (i.e., giving a toy to another child, taking turns, and smiling at				
	another child).				
C.	Caregivers guide children in their play with peers as developmentally				
	appropriate by describing another child's interest ("He wants to look at the				
	book with you") and guiding simple interactions ("Push the car to her.").				
D.					
	feelings, look at pictures of different emotional expressions, caregivers label				
	their own emotions) into routines throughout the day.				
E.	Caregivers comment on children's feelings/thought perspectives to				
	encourage children's expression of thoughts, feelings, and needs.				
F.	Caregivers make positive and individually appropriate attempts to engage				
	children who are not engaged in play or with peers.				
Recommendations:					