

**SOCIAL/EMOTIONAL HEALTH (0 – 5 Year Olds)
FAMILY CHILD CARE HOME OBSERVATION
MH-FCCH -7**

COVER SHEET

Site/Home Address: _____ Contracting Agency: _____

_____ Date: _____

Observer Name: _____ Number of Children: _____

Title: _____ Start Time: _____ End Time: _____

Name of Provider(s): _____

Observed (Check all that apply)

Whole Group Routines Meals/Snacks Individual/Free Choice Small Group Outside

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.

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

0 – 5 Year Olds

Family Child Care Home Observation

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

I. Environments: (All letters apply to 0-5 age group)		N/O	0	1	2
A.	Provider provides 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.				
B.	Provider primarily provides areas free of clutter (i.e., tops of shelves and walls) to avoid over- stimulation.				
C.	Provider displays 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. Materials are rotated inside/outside as children lose interest.				
E.	Provider provides 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 independence.				
F.	Provider promotes interactions between children in the context of activities and routines.				
G.	Provider is actively engaged in the activities and the focus is the health and safety of the children.				
H.	Children demonstrate an attachment to their provider, are content and are engaged in exploring their environment.				

Comments:

Recommendations:

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II. Responsiveness/Daily Routines/Transitions (0 – 3 years old only):		N/O	0	1	2
A.	Primary caregiver is assigned to each infant or toddler in order to develop attachment and provide individualized care through daily routines (i.e., diapers are changed as needed rather than fixed schedule, infants are soothed in different ways, and infants eat on their own schedule)				
B.	Provider interacts socially with infants and toddlers by individualizing all daily routines such as, mealtimes, feeding, and diapering.				
C.	Provider immediately responds to children in distress to assess child status and provide support.				
D.	Provider evaluates the need and considers context of a child's distress and respond appropriately (i.e., a child fussing while beginning to nap may be given a back rub).				
E.	Provider uses physical touch and makes eye contact, to build trust and develop attachments with their children.				
F.	Transitions are individualized, and wait time is kept at a minimum.				
G.	Provider uses gestural, verbal, visual and/or object cues to prepare children for upcoming transitions.				

Comments:

Recommendations:

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III. Schedules/Routines/Rules (Preschool: 3 – 5 years olds only):		N/O	0	1	2
A.	The daily schedule is posted at child's eye level, with visuals and the provider refers to it throughout the observation so that children are aware of sequence of activities.				
B.	There are both large and small group activities. Where there are mixed age groups the daily schedule reflects the need of each group throughout the day.				
C.	Routines are structured (clear beginning, middle, and end) and there is a balance of child-directed and provider-directed activities.				
D.	Provider-directed activities continue only when majority of children are actively engaged and are shorter than 20 minutes.				
E.	Individual children who need extra support are prepared for activities using cues at the beginning and end of activities.				
F.	Children's transitions are structured and wait time is kept to a minimum.				
G.	A whole-class warning is provided prior to transition and individual children who need extra support are effectively guided during the transitions.				
H.	Rules are posted, illustrated with a picture or photo of each rule or expectation, limited in number (3-5), and stated positively (all have to be true to score a 1 or 2).				

Comments:

Recommendations:

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IV. Supportive Communication:

	N/O	0	1	2
(All letters apply to 0-5 age group except where noted)				
A.	Provider talks often to individual children, calling them by name. His/her tone in conversations with children is generally positive, calm and encouraging.			
B.	Provider follows 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 at their pace).			
C.	Provider acknowledges and appropriately responds to children's verbal and non-verbal cues.			
D.	Infant/Toddler only: Provider responds to children's communication attempts and extends conversations (i.e., expanding language experiences).			
E.	Infant/Toddler only : Provider 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.			
F.	Preschool only: Provider responds to children's comments and ideas by asking questions, making comments.			
G.	Preschool only: Provider has positive conversations with children about their interests and ideas during routines and activities.			
H.	Preschool only: Provider provides instructions that are simple, short and specific. S/he tells the children what to do instead of what not to do			

Comments:

Recommendations:

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V. Building Positive Relationships:

(All letters apply to 0-5 age group except where noted)

	N/O	0	1	2
A. Interactions between provider and children reflects appropriate models of social interaction (i.e., supportive, and respectful).				
B. Provider recognizes verbally the positive action of the children who are engaging in pro-social behaviors (i.e., give a toy to another child, take turns, and smile at another).				
C. Provider embeds social/emotional teaching (i.e., talk about the child's feelings, look at pictures of different emotional expressions, caregivers label their own emotions) into routines throughout the day.				
D. Provider comments on children's feelings/thought perspectives to encourage children's expression of thoughts, feelings, and needs.				
E. Provider makes positive and individually appropriate attempts to motivate children who are not engaged in play or with peers.				
F. Preschool only: Multiple opportunities to make meaningful choices within activities (choosing center, choosing how to use materials, choosing where to sit, etc.) are provided and individual children are assisted as needed.				
G. Preschool only : Provider joins in children's play to support their interactions and expand their ideas.				
H. Preschool only : Provider redirects children who are withdrawn, distracted, or off task to more productive activities.				

Comments:

Recommendations:

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