



**2010**

## **Infant – Toddler Companion Guide to the Minnesota Core Competencies**

A Companion Guide to the Core Competencies for Early Education and Care Practitioners in Minnesota

This publication was developed with assistance from many people who contributed important perspectives on child care and early education in tribal, bilingual, rural and urban settings. Christopher Watson and Vicki Hawley at the Center for Early Education and Development (CEED) at the University of Minnesota were instrumental in gathering and organizing much of the information. Ann Edgerton, director of the University of Minnesota's Child Development Center, provided important consultation and advice, as did Huda Farah and Beth Menninga. Sue Heisler from White Earth Child Care Services provided valuable input. Resources for Child Caring was instrumental in gathering focus group members, whose time and insights were enormously helpful.

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LB2-0014 (10-09)

ADA4 (5-09)

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# Infant-Toddler Companion Guide to the Minnesota Core Competencies for Early Education and Care Practitioners: What providers need to know and do



This document is a companion guide to the publication “Minnesota Core Competencies for Early Childhood Education and Care Practitioners Who Work With Children Birth Through Age Eight and Their Families.” That document can be found at [www.mncpd.org](http://www.mncpd.org)

## Since infants and toddlers are included in the original guide, why add another guide?

The years from birth to 3 are the period of greatest change and growth in life. The companion guide is intended to emphasize areas of knowledge and skill so that adults know what to do during this unique and critical stage. This Infant-Toddler Companion Guide does not replace the original Minnesota Core Competencies document but is a supplement. Companion guide users will find information and strategies that are meant specifically for those who care for infants and toddlers.

## For whom is the Infant-Toddler Companion Guide written?

This guide is for all adults who care for infants and toddlers. The information is designed to identify:

- Knowledge and skills that are important for all adults who care for children under age 3, regardless of setting (licensed or unlicensed). This level identifies essential, fundamental skills for infant-toddler care teachers, whether they are Family-Friend-Neighbor caregivers (FFN), family child care providers, or center-based teachers.
- In some sections of the Companion Guide, additional strategies, knowledge, and/or skills are listed that caregivers develop through added experience and training. The additional items represent a deeper understanding of theory, growth and development, and of which types of interactions and environments support particular areas of young children’s development.
- Knowledge and skills that apply particularly to leaders and/or administrators.

## Which words does this guide use to describe adults who work with infants and toddlers?

Adults who work with infants and toddlers use many different words to describe the roles. A few of the most common words are: “teacher,” “caregiver,” “child care provider,” and “practitioner.” Some adults who care for babies are grandparents, relatives or friends, and some are licensed professionals. Some have early childhood degrees, and some do not. This guide will use “caregiver” and “teacher” to describe any adult who is responsible for children under age 3. All provide nurturing, loving care, and all are teaching – whether it is when to say “please,” how to stack blocks, or how to calm down.

**What resources were used to write the guide?** The writing team included professionals and caregivers from academic and program backgrounds, representing various types of work with infants and toddlers: center directors, trainers, and teachers from diverse cultural settings. Ideas for organizing the materials and the actual content relied on four primary sources:

- Key concepts from the Program for Infant Toddler Care
- The policy manual of Early Head Start
- The publication “Minnesota Early Childhood Indicators of Progress: Birth to 3”
- Examples from other states.

# About the organization and structure of this document

The Infant-Toddler Companion Guide is divided into the same eight content areas of the Minnesota Core Competencies:

- I. Child growth and development
- II. Learning environment
- III. Assessment and planning for individual needs
- IV. Interactions with children
- V. Families and communities
- VI. Health and safety
- VII. Program planning and evaluation
- VIII. Professional development and leadership

The eight content areas are further divided into what caregivers and teachers should know and do with infants and toddlers at a very basic level. Some sections list further examples of knowledge and

skills expected of caregivers and teachers as growth in professional development and experience occurs.

The Infant-Toddler Companion Guide also includes “Stories from caregivers and teachers” that help demonstrate the knowledge and skills needed to provide quality care for infants and toddlers. Some of the stories are first written in languages other than English to remind us of the importance of recognizing and honoring cultural differences.

At the end of every content area is a section, “Want to learn more?” It contains lists of books, DVDs, websites, etc. that provide helpful additional resource information about infant and toddler care.

## Child growth and development

## Learning environment

## Assessment and planning for individual needs

## Interactions with children

## Families and communities

## Health and safety

## Program planning and evaluation

## Professional development and leadership





## Six things every caregiver should know about infant-toddler care

Together, the following points of knowledge create a foundation that all caregivers can use to increase their knowledge and to build skills with infants and toddlers.

### 1 **Knowing ourselves is part of caring for infants and toddlers.**

All adults have personal, family, and cultural experiences and knowledge about young children. Infant-toddler care teachers build on what they already know and believe as they add experience and education. Education, experience, and interactions with families and co-workers may challenge some early values and beliefs. When teachers are self-aware, they pay attention to underlying feelings as they decide how to connect old knowledge with new knowledge.

### 2 **Relationships are at the heart of infant-toddler care.**

A common saying in early care and education is, “it’s all about relationships.” Parents and caregivers learn to respect one another in their own roles with the child. Teachers build relationships with infants when they get to know each individual child’s likes and dislikes, needs, and personalities. Caregivers create a welcoming place where all children feel they belong, and learn to welcome and include one another. When adults treat children with respect, they learn to respect themselves and others. Building relationships with families takes time and planning. In a true partnership, families and caregivers bring equal value to the relationship and respect one another’s beliefs and practices.

### 3 **All children need a rich, engaging environment that is physically and emotionally secure.**

Interesting environments with clear boundaries help children to explore and learn. There are many resources and people with expertise who can help caregivers to create an environment that nurtures children of all ability levels and those with special needs. Consistent, nurturing routines help children build trust and independence, encourage secure attachments, and support development and learning.

### 4 **Infants and toddlers develop in the context of their families, cultures, and communities.**

Young children learn by observing the important people in their lives. Their families’ home cultures shape children’s understanding of which emotions to express, and how and when to express them, the rate at which they develop motor skills, the way they learn and process new information, and the ways in which they use verbal language, facial expressions, gestures and silence to communicate. Culturally responsive caregivers honor children’s cultural identities throughout daily practice, interactions and routines. Caregivers must make this effort with families from all cultural backgrounds (including their own) because each family expresses their culture in unique ways.

### 5 **Birth to 3 represents a period of rapid growth and development that is critical to the foundation of a healthy human being.**

Very young children are both competent and vulnerable. The care children receive during this critical period will have a powerful influence on how they view the world, relate to others, and succeed as learners. Teachers have a unique opportunity to make a difference in the lives of very young children and their families. Children who receive nurturing, consistent care are more likely to thrive and become sociable, capable preschoolers who get along with others, demonstrate self-control, and love learning.

### 6 **Multiple abilities and skills are developing simultaneously in a child’s first three years.**

Caregivers make many daily decisions about how and when to talk to children, which experiences to offer, and when children are ready to take a new step in their development. Caregivers who know and understand what is going on in this time of change and growth are better equipped to support that growth. The first three years of life are a period of incredible growth in all areas of an infant’s development. Experiences and interactions make a difference even in how infant brains are structured. Find more information about early brain development at [www.zerotothree.org](http://www.zerotothree.org).

## Content area I: Child growth and development

Infants' and toddlers' early experiences shape their fast-growing brains. Although infants and toddlers develop in generally similar ways, each child's individual life experiences (as part of a family, a culture and a community) can result in very different patterns of learning, behavior and developmental outcomes.

The bonds an infant builds with others during the first years of life provide the basis for all learning.

To provide quality care, caregivers and teachers:

- Talk with family members about how they handle everyday routines such as sleeping, eating, diapering, toileting, and getting dressed, and we discuss interests they have with respect to their cultural traditions.
- Wonder, "What is this child trying to tell me?" when she cries or tries to get our attention. Then we respond quickly so that the child knows she can count on familiar adults.
- Are warm and affectionate.
- Know what to expect and when to be concerned about infants and toddlers at different ages and stages.

As caregivers and teachers grow in knowledge and skills, they:

- Seek continued education about typical development, as well as what to look for when a child is not developing in a typical way.
- Understand that it takes time and practice to figure out what a child needs. Responsiveness comes from repeatedly observing the child, attempting to read the cues, changing our behavior, and then reading the cues again. Not every caregiving act will be in tune since responsiveness includes trial and error.

Leaders and administrators:

- Provide training and workshops on the critical nature of attachment/connection/relationships in early care, along with understanding the developmental stages identified by Erik Erikson: trust vs. mistrust, autonomy vs. shame and doubt, initiative vs. guilt, industry vs. inferiority, identity vs. role confusion, intimacy vs. isolation, generativity vs. stagnation, ego integrity vs. despair.
- Follow-up training with teacher support that offers opportunities for reflective practice.
- Identify and implement a way to regularly assess and evaluate teaching staff (using skills inventory and observation) to ensure quality and best practices.



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## Each infant has his own distinct identity, shaped by his own in-born personality, family and culture.

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To provide quality care, caregivers and teachers:

- Observe and respect what each infant can do.
- Get to know each infant's unique temperament and personality.
- Get to know how each infant

communicates his wants, needs, and interests.

- Talk with every family about how they do things at home, and use that information to make each infant feel at welcome and comfortable with us.
- Respond to every child in ways

that support their identity within the group.

- Make sure that the learning environments reflect and respond to each child's needs, abilities and interests.

As caregivers and teachers grow in knowledge and skills, they:

mental health), depending on the child's needs.

Leaders and administrators:

- Use knowledge of individual child's temperament and goodness of fit when assigning primary caregivers.
- Provide resources, training, self-awareness reflection, and follow-up on temperament and goodness of fit.
- Act as a cultural bridge among different groups, when appropriate.

The Program for Infant-Toddler Care describes the responsive process as watch/ask/adapt. For example, we notice (watch) that Ana likes to be held so that she can see the other children, but Jose does not seem to like this position (ask). When they need comforting, we adapt the way we hold each child according to what they need. In this way, we get "in tune" with individual children.



- Understand temperamental differences, and have the flexibility to meet each child's temperamental needs.
- Set learning goals and plan learning experiences by using our knowledge of each child's temperament, interests, gender, culture, language, learning approaches and abilities.
- Develop deeper understanding of the various cultures or culture within your geographic community.
- Work alongside families and specialists (for example, medical, dental, speech, nutrition,

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## Young children's brains are developing at a rapid rate.

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To provide quality care, caregivers and teachers:

- Promote a welcoming, safe, cozy, warm environment. Consider displaying pictures of the children and their families and place them at the child's eye level.
- Recognize that repeated positive experiences are helping infants to develop good "brain patterns."
- Talk to infants and toddlers to support the development of speech, self-esteem, and understanding of how we use words to communicate our needs, wants, and feelings.

- Take the infant to interesting items, such as toys, food, flowers, and describe them.
- Bring interesting items close to the child so she can explore them.





## Stories from caregivers and teachers

(use of skills is *italicized* in the story, and identified in the right hand column)

Toddler expresses independence/autonomy	
<p>Peter stomps his foot and shakes his head back and forth. “No, no, no,” he said as Numa tries to put his mittens on him for outside playtime. <i>“It is frustrating to put all of your fingers inside,”</i> Numa says in a calm voice. <i>“Here, why don’t you hold your blue mitten while I help Sondra put her mittens on?”</i> Numa knows that toddlers are full of strong emotions and they need to express them. She also <i>recognizes that Peter is more cooperative when he has a little time to get ready for a transition.</i> “Sondra, look, we put four fingers in your mitten—where’s your thumb? There it is!” Peter snuffles as he watches Sondra and Numa play with her mittens. “OK, Sondra, you are ready to go play in the snow. Here is a shovel to carry outside.” Numa turns back to Peter. <i>“Peter, should I put your mitten on this hand (she points to his right hand) or this hand (points to his left) first?”</i> Peter hands his mittens to Numa and gives her his right hand. “Outside,” he says.</p>	<p><i>Names feelings</i>  <i>Maintains calm</i>  <i>Suggests something else to do</i></p> <p><i>Allows time for child with slow-to-transition temperament</i></p> <p><i>Offers choice—two ways to achieve the same end result</i></p>



## Infants' needs change as they grow.

To provide quality care, caregivers and teachers:

- Help infants and toddlers adjust to new discoveries and abilities.
- Change the environment so they can use their developing skills.
- Adapt interactions (guidance strategies, for instance) to match their changing abilities to understand and communicate.
- Realize that individual children learn and grow at different rates.
- Continue to seek knowledge about developmental stages to understand when different behaviors and skills develop.
- Connect with community resources (referrals) when concerned about a child's development.

## Stories from caregivers and teachers

A teacher expresses concern about an infant's development	Caregiver strategies:
Annie, an infant teacher in rural Minnesota, had been caring for 9-month-old Kali for two weeks. One day at pick-up time, Kali's mom, Melissa, said she was worried because Kali wasn't crawling like the other children her age. Annie asked Melissa to describe what she and Kali did during a typical evening together. Melissa's eyes shone as she shared that the first thing she does when they get home is to put Kali in the stroller and go for a walk through the park. After their outdoor time they come home and Melissa makes supper while Kali sits near her in her high chair. After supper they spend time rocking and reading stories before bath and bed time.	Annie listened carefully, and then complimented Melissa on her nurturing care and the importance and value of her consistent daily routines. "You are building a very special bond and relationship," she affirmed. Annie then talked about the opportunities of play and floor time and asked Melissa if there were times when they could play together while Kali is on her tummy, since that type of play would strengthen her upper body as she reaches for toys and plays on the floor with her mother.



### Want to learn more?

Video: "Flexible, Fearful, Feisty"  
([www.pitc.org](http://www.pitc.org))

Video: "Getting in Tune"  
([www.pitc.org](http://www.pitc.org))

Video: "Ages of Infancy"  
([www.pitc.org](http://www.pitc.org))

Book: "Infants, Toddlers, and Caregivers: A Curriculum of Respectful, Responsive Care and Education" by J. Gonzalez-Mena, and D. Widmeyer-Eyer, D. (2008). New York: McGraw-Hill.

Website: [www.zerotothree.org](http://www.zerotothree.org)



## Content area II: Learning environment

### A. General

All children need a rich, engaging environment that is physically and emotionally secure. Learning environments may look very different from one another and include homes, classrooms, yards, playgrounds, neighborhoods and the larger community.

Caregivers and educators create an emotionally secure environment when they:

- Promote a familiar and friendly environment. Consider displaying pictures of the children and include sights, sounds and smells they recognize.
- Include sights and sounds that are like those of children's own homes.
- Accept and appreciate each child's growing ability to do more for himself and others.
- Respond consistently to each child's needs.
- Support predictable and consistent daily routines (example, hellos/goodbyes, diapering, napping, feeding) by:
  - using (and/or posting) a daily schedule that helps children and families to know what to expect
  - adapting to the individual needs of children and their families
  - using routines as one-on-one opportunities to build closer relationships
  - using routines as teaching opportunities for self-help skills, language, math, science, social/emotional, fine and large motor skills.
- Help the child feel accepted in the group.
- Create a sense of community where children notice and care about each other.
- Recognize, respect, and label feelings in children and ourselves. For example, say, "I see you are sad that Daddy is leaving; he will be back to pick you up." Or, "I'm so happy to see you this morning."
- Set up spaces that send positive messages to children: I belong here, I am safe, and there is room to explore and discover.
- Let children keep favorite items (for example, blanket, toys) in a special place.



Diapering, like other routines, is a rich opportunity to get to know each other and learn new concepts. Caregivers can use this time to name body parts, play games ("This little piggy went to market..." "How big is Aram? SO BIG!"). Talking with and encouraging the child's participation during diapering supports feelings of competence and facilitates language development.

Caregivers and educators create a physically secure environment when they:

- Follow health and safety guidelines.
- Include furnishings and equipment that are comfortable for very young children (child-sized, flexible, allowing movement and choice).
- Arrange the room so that children can be seen at all times.
- Define areas that need protection, such as places where infants will be playing on the floor.
- Arrange the environment in such a way that children can explore it safely
- Change, as needed, for children with physical disabilities and sensory impairments.



As caregivers and teachers grow in knowledge and skills, they:

- Have the area and supplies organized so that routines (diapering, eating, sleeping, etc.) are easier to manage—this will allow us to focus on our interactions with children.

Caregivers and educators create an engaging environment when they:

- Choose toys and materials that are interesting for young children to investigate.
- Choose materials that gently challenge children's developing abilities and skills.
- Provide multiples of favorite toys.
- Provide opportunities for toddlers to do things independently, such as climbing up a step to the changing table, or serving themselves from a serving bowl.
- Ask families to help collect materials, such as pretend play props, boxes, books, family pictures, empty cereal/juice boxes, etc.
- Include materials that:
  - honor diverse families and cultures
  - support a variety of skills (fine and gross motor)
  - encourage children to use all of their senses (sight, sound, touch, smell, taste)
  - allow children to explore shapes, sizes, colors and balance
  - encourage quiet and active play.
- Give children room and time to solve problems on their own or with others (when safety is not an issue), staying close and offering help when needed.

### Want to learn more?

Video: "Space to Grow"  
([www.pitc.org](http://www.pitc.org))

Video: "More than Just Routine"  
([www.pitc.org](http://www.pitc.org))

Video: "First Moves: Welcoming A Child To A New Caregiving Setting"  
([www.pitc.org](http://www.pitc.org))

Book: "Caring Spaced, Learning Places" by J. Greenman, J. (1996). Minneapolis: Redleaf Press.

Book: "Infant and Toddler Experiences" by F. Hast, F. and A. Hollyfield, A. (2002). Minneapolis: Redleaf Press.

Article: "Landscape for learning: The impact of classroom design on infants and toddlers" by L. Torelli and C. Durret in *Early Childhood News*, vol. 8, number 2.



## B. Physical

Infants need opportunities to move their bodies as they grow.

To provide quality care, caregivers and educators:

- Sit on the floor and play with them.
- Put young babies on their tummies when they're awake so that they can strengthen their muscles and learn to use their arms to raise their heads and bodies and look around.
- Provide safe, closely supervised, interesting places for infants and toddlers to move around and explore the environment as they become more mobile, including safe places to roll, crawl, walk, run, jump and climb.
- Childproof the spaces infants will explore and remove unsafe and valuable objects.
- Set time aside where children can move their bodies and crawl into and around items, such as boxes, tunnels and tables.
- Bring infants and toddlers outdoors as often as possible and allow them to explore.
- Know who to ask (a parent, occupational therapist, physical therapist, speech and language therapist) about how to best position (stand, sit, on their side, etc.) children for them to be most successful in their exploration of the environment.
- Encourage many different positions during play (tummy time, supported sitting, and use of adaptive equipment for children with disabilities if necessary).



Young children slowly develop the ability to grasp and use objects.

To provide quality care, caregivers and educators:

- Provide opportunities for infants to practice reaching and grasping our fingers or small objects and toys.
- Include many kinds of safe materials that toddlers can hold, move, stack, and assemble, such as puzzles, stacking toys, balls, and containers.
- Play games that require physical actions, such as patty-cake, songs that include motions, or using different kinds of balls to roll, throw or kick.
- Give toddler materials that they can use to create, build, and draw, such as large crayons, markers and play dough.
- Allow children to begin simple chores like dressing, pulling up socks and washing off cabinets.
- As caregivers and teachers grow in knowledge and skills, they:
  - Use movement to teach a variety of skills. For example, jumping four times to teach the quantity of four.
  - Adapt (change, modify) physical activities for children with special needs.
  - Encourage families to participate in physical activities with their children, both inside and outdoors, and in natural settings like parks, whenever possible.
  - Provide tools and materials for infants and toddlers with disabilities to explore and activate events in their environment (adapted handles, stabilizing materials, switches, etc.).



## C. Language

Babies are born communicators who learn about language through important relationships.



Newborn infants see best at a distance of about 8 to 15 inches, just about the distance your face will be when feeding or playing with them. Babies are most interested in looking at the human face. Babies hear sounds, such as their mother's voice and heartbeat, before they are born. Newborns are especially fascinated with the human voice. They are capable of hearing all speech. If they do not hear lots of language, the brain areas for the perception of speech do not develop normally. They know and prefer their parents' voices. Babbling usually begins about 6 months of age. Its absence beyond this age may indicate a developmental problem.

To provide quality care, caregivers and teachers:

- Respond to infants' cries, coos, gestures and facial expressions to let them know we care and want to communicate with them.
- Watch and pay attention to when babies need quiet and when they need interaction with others.
- Imitate the sounds babies make to us, playfully taking turns just like a conversation.
- Talk to babies, describing what we are doing ("self talk") or what they are doing ("parallel talk") as we feed them, change them and help them go to sleep. For example, "I'm picking you up now and

putting you down on the diaper table. I'm going to take off your diaper." Or, "You're kicking your little feet and smiling—are you happy to see your friends?"

- Sing songs and play with language, using rhymes and gestures, repeating them many times to help babies learn language.
- Know who to ask (such as a parent or speech and language therapist) to provide an environment that encourages language development for all children, including those with language delays and other special needs.

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Children understand the meaning of many words before they can say them (receptive language).

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To provide quality care, caregivers and teachers:

- Give names to objects and actions. If a child is looking intently at something such as a wooden spoon, label the object by saying, "That's a wooden spoon." Point out the names of objects ("diaper," "bowl," "water") as the two of you are using them. Identity actions as they happen.
- Make language a part of playtime. Even a simple game such as peek-a-boo demonstrates the link between language and social interaction. Read plenty of simple picture books together, and let the child interrupt to point to objects and say their names.
- Ask the child questions. Even if you know that the child can't answer, ask "What's your name?"

- Talk about what the child is doing by describing the child's action. "You're putting that block in your mouth."
- Support the understanding and expression of language through picture symbols and voice output devices such as a "BIGMack" (a voice activation device that is one of several adaptive technologies available from Emptech at [www.emptech.info](http://www.emptech.info)).



## Stories from caregivers and teachers

A Somali grandmother supports language during routines (diapering)	Strategies the grandmother uses for language development
<p>Cali kaalay, wax baa u rayee. Keen fiirshee, haa waad xaartay. Innakeen ku soo nadiifinee oo kaa badalno xafaayada. Hab miiska aan ku saaree, surwaalkana kaa bixinee. Hoo qabo xaashidan, ii hay. Fariid glove-ka ii dhiib aan gashadee, xafaayadana kaa saaro, xaashidana ku masaxno dabada, nadiifinay. Innakeen kuu dhaqno dabada, dabadeedna qalajino, kuuna xirno xafaayad cusub oo nadiif ah. Surwaalkana gasho fariidkay, waanigaa glove-ka iska bixiyeyo. Inna keen gamcaha dhaqanee oo qalajinee. Nadiif shaxshax.</p> <p>English:</p> <p>Ali come here, something smells. Let me see. Yes, you did it, let's go clean you up and change this diaper. Hop; let me put you on the table, take off your pants. <i>Take and hold this tissue paper, good boy keep it for me.</i> Give me the gloves, <i>I will put them on, then take off the diapers, wipe your bottom with tissue.</i> We cleaned it, let's wash up your bottom, then dry it, then put new and clean diaper. My good boy <i>put on your pants</i>, I took my gloves off, come with me we will wash our hands and then dry them. <i>All clean bri</i></p>	<p><i>Supports independence</i>  <i>Uses self talk (describes what she is doing)</i>  <i>Uses parallel talk (describes what the child is doing)</i>  <i>Encourages</i></p>





Between 16 and 36 months, children’s ability to say words (expressive language) moves from one or two words to full sentences. This developmental period is sometimes called the “language explosion.”

To provide quality care, caregivers and teachers:

- Expect and accept mistakes—children are still learning. For example, if a child says “I want nanas,” adult models rather than corrects by saying, “Oh, you want bananas.”
- Ask questions. Older toddlers begin to respond to open-ended questions like, “What do you want to take on the picnic?”
- Provide play opportunities and materials that encourage conversations such as dressing up, or using props like play telephones, restaurant menus and walkie talkies.
- Tell stories that use new, interesting and descriptive words.
- Encourage conversations—during routines, play time, and anytime.

Stories from caregivers and teachers

A family child care provider supports language during routines (greeting)	Strategies used
Alona hears a knock at the door. “ <i>Sasha, good morning! It’s good to see you here today.</i> ” Alona greets Sasha’s dad and asks how their morning went. “ <i>OK, I’m going to unbutton your coat and then we can go into the kitchen for breakfast.</i> ” Sasha hugs her daddy and reaches out for Alona.	Conversational greeting  Self talk



Infants learn about and develop an interest in books and writing through meaningful, active exploration and exposure.


To provide quality care, caregivers and teachers:

- Read books regularly with children individually, in small groups, and in various settings (for example, the block area or housekeeping area).
- Provide opportunities to draw/write on paper with writing tools such as markers, crayons and paint.
- Read and write during the day and talk about why, such as “Oh, I’d better write down that appointment so that I can remember it.”
- Use and talk about environmental print. Examples of environmental print are traffic signs in the neighborhood, labels in the classroom or home and posters in a store.





## Stories from caregivers and teachers

A center-based teacher reads a book	Teacher strategies:
 <p>Nindaanis brings the “Firefly Night” book to teacher Kim and holds the book up. <i>Kim snuggles down into a bean bag with Nindaanis to once again read her favorite story.</i> Nindaanis turns the pages quickly to get to her favorite page to see the bears sleeping in the cave and the wolf peeping in. Kim asks, “<i>Where’s the makwa (bear)?</i>” Nindaanis points to the makwa and her makoons (bear cubs) as <i>she growls and giggles</i> and then quickly snuggles next to Kim again to look for the wah-wah-taysee (firefly). “There they are!” Kim exclaims as she points and counts the fireflies, “Bezhigh (one), niizh (two),” and together they say “Niswi (three)!”</p>	<p><i>Shares positive emotion</i>  <i>Repeats books/stories</i></p> <p><i>Supports home language (Ojibwe)</i></p> <p><i>Points /labels</i>  <i>Non-verbal communication</i></p>

## Stories from caregivers and teachers

A director chooses a curriculum by including staff input and community needs
<p>As part of the center evaluation process, Margaret (the director) had an all staff meeting to discuss “Building Language and Literacy Skills” in their centers. She asked staff to share what they knew about early literacy, what they were doing to promote language and literacy, and what results they had seen as they began to use new teaching strategies. The meeting gave teachers the opportunity to study the continuum of infants’ and toddlers’ developing language. These staff conversations led to a concern about their proficiency of speaking the Ojibwe language. Margaret decided to invite Ojibwe-speaking community members with teaching experience to come to the center regularly to speak the language. That way, both children and teachers would hear Ojibwe and learn together. One teacher suggested that families might want to be invited to stop in during the community member visits. Margaret knew Ojibwe language was important to the families per an interest survey - where they indicated that learning the Ojibwe language was a skill they wanted their children to learn and to carry on to preserve their native language.</p>



### Want to learn more?

Video: “Early Messages”  
[www.pitc.org](http://www.pitc.org)

Video: “Food For Thought”  
[www.parentsknow.state.mn.us/parentsknow/newborn/tips/VL](http://www.parentsknow.state.mn.us/parentsknow/newborn/tips/VL)

## D. Cognitive

Birth to 3 is a time of rapid growth, and infant learning (cognitive development) takes place in the context of social relationships and experiences.

To provide quality care, caregivers and educators:

- Provide emotional support and encouragement as children explore the world around them.
- Respond to an infant's awareness of cause and effect (for example, when a baby kicks the rattle with his feet and looks startled, or when he responds to pop up toys).
- Know each child's interests and notice when they are ready for particular types of play.
- Have plenty of materials for exploration and discovery (items from nature, toys, and objects to handle, sort, and stack). These experiences support children's classification skills (the ability to notice differences/similarities in order to sort objects into categories).
- Allow long blocks of uninterrupted time for play—trying out new activities promotes learning, even when things don't work out. ("Oh, that block won't fit in that hole. I wonder if another one will.")

- Ensure there is plenty of space for children to explore materials.

As caregivers and teachers grow in knowledge and skills, they:

- Support play by offering the least amount of help needed to keep it going (instead of "rescuing").
- Provide opportunities for young children to explore object permanence (knowing that things and people exist even when one cannot see them) by playing "peek-a-boo," facilitating parent-child separation, or offering items children can identify and track through space (ball on a string, fish in an aquarium).
- Provide materials and opportunities to explore spatial relationships (including distance, perspective, size relationships, gravity and balance), such as
  - toys that move through space and fit into spaces
  - spaces and objects, such as boxes, wagons, that they can fit into

- objects of various sizes, so children can try to fit an object into a container. Such as a coffee can with round whole cut in plastic lid, or use measuring cups or spoons
- items that can drop into containers (to demonstrate gravity)
- materials of different shapes and sizes that can be stacked, such as wood table blocks, squares and rectangles.
- Expand children's knowledge of nature, living things and materials by providing objects, tools, and experiences that will allow them to observe closely and explore nature and scientific concepts (cause and effect, time, temperature, buoyancy, changes in materials).
- Encourage children to use their imagination through pretend play, exploration, and conversations that include a sense of wondering ("I wonder what will happen when..."; "I wonder why...")



### Want to learn more?

Video: "Discoveries Of Infancy: Cognitive Development and Learning" ([www.pitc.org](http://www.pitc.org))

## **E. Personal and social development**

Social-emotional development is the foundation for other areas of development. Additional content for this area is also located in Content Area I: Child Growth and Development; teacher strategies to support emotional security are in Content Area II: Learning environment - General; program policies that promote social-emotional development are found in Content area VII: Program planning.

From birth, children begin to develop self-regulation (the ability to calm themselves, cope with stress, pause before they react; follow rules).

To provide quality care, caregivers and teachers:

- Become familiar with the infant's ways of calming and seeking comfort.
- Use the infant's name.
- Have daily predictable patterns and routines so that infants begin to know what will happen next.

- Recognize when they do show self-control. For example, when the child looks at you and puts the block down instead of throwing it, say, "Thank you for putting the block down gently—when you put the block down gently you were being very careful." This type of phrasing labels the child's behavior and verbally shares a value that is acceptable in play.

- Give toddlers clear expectations and simple rules.
- Give toddlers opportunities to choose, or to say "no."
- Model self-control in our own behavior.

Children begin to develop empathy (understanding how others feel) very early in their lives, and adults play an active role in how children get along with other children.

To provide quality care, caregivers and teachers:

- Describe their behavior when we see them being friends (giving a toy to a friend, patting a sad child on the back).
- Share ideas that support play and positive interaction ("Oh, can you get the ball for the baby?" "Let's roll the ball back and forth to each other." "You can pass out the napkins at snack today.").
- Encourage them to talk about and understand their (and other's) feelings, such as happy, sad, angry, and distressed, through role modeling, reading books, and pretend play.
- Provide opportunities for pretend play (caring for baby dolls, pretending to bandage animals at the veterinarian's office).

- Play games, sing songs, and read books that include imitation.
- Use caring words to let children know they are valued, understood, and respected.
- Encourage age-appropriate tasks that help children take care of their own eating, toileting, dressing and hygiene—and recognize their accomplishments when they try.
- Provide warmth, sensitivity, nurturance, acceptance and safety.

As caregivers and teachers grow in knowledge and skills, they:

- Support children's decision-making and autonomy (their sense of personal independence and the ability to make and act on moral decisions) by encouraging them to choose their own activities and begin to solve conflicts.

- Model ways to share, help, and cooperate with others.
- Encourage older infants to work together by planning opportunities for children to work in a group and solve problems together.
- Observe children and notice challenges as they first begin to play with others. Based on your observations, set up opportunities to work on new play skills. For example, say, "I see that Angel is ready to trade the blue crayon when you are finished with the red one." Or, "I see Luke is taking care of his pet in the pretend pet area with stuffed animals. Here is a bowl for you to give him so that he can feed the puppy."



## F. Creativity and the arts

Participation and exploration in the arts promotes a sense of competence, enjoyment and self-expression.

To provide quality care, caregivers and teachers:

- Provide musical experiences in a variety of ways, such as singing, musical toys, recorded music.
  - Expose infants and toddlers to different types of music – such as lullabies, classical, jazz, folk music, children’s songs – from a variety of cultures and languages.
  - Provide simple instruments and toys/materials that make sounds
  - Encourage movement to music
- and holding infants and toddlers while “dancing.”
- Offer safe art materials for infants and toddlers to use independently as a form of self-expression, focusing on process (how they are using the materials) rather than an end product. Avoid using models/templates of what you feel an end product should look like. Also avoid materials that may be a choking hazard, are toxic, or irritating to the eyes, nose, or skin.

- Provide a variety of visual displays in the environment, such as mobiles, pictures/photos and children’s artwork.
- Offer materials that can be used for active exploration such as markers, paint, finger paint, clay, etc., that are easy to reach and available throughout the day.

### Want to learn more?

Video: “Sensory and Art: Infant and Toddler Care” (available from Redleaf Press).





## Content area III: Assessment and planning for individual needs

Infants and toddlers are born to learn. Careful observation of a young child's play and exploration of his surroundings can help caregivers provide learning activities and experiences that will be the most meaningful to each child.

Children have individual interests, needs, and abilities.

To provide quality care, caregivers and teachers:

- Pay attention to and comment about children's individual abilities and interests.
- Add activities or materials that individual children enjoy ("Teran, I know you love big machines. Look at the book I found for you at the library on bulldozers.")
- Share with families what the children enjoyed or learned.

As caregivers and teachers grow in knowledge and skills, they:

- Regularly keep a record of children's abilities and

achievements (written notes, check lists on specific areas of development, work sampling, and photos).

- Use standardized assessment tools in order to offer experiences that meet children's interests and individual needs.

Leaders and administrators:

- Train and/or review assessment procedures.
- Support staff with training in observation, use of assessment tools, early child development and use of child-centered curriculum.



Stories from caregivers and teachers

A teacher of older toddlers uses assessment to plan activities	Caregiver strategies
<p>Tus zov menyuam: “Yam tas dhau los kuv tsis paub ntau txog kev ntsuam xyuas menyuam kev loj hlob li tam sim no. Tam sim no nws pab tau kuv ntau heev. Piv txwv, kuv tsis tau xav hais tias menyuam yuav tsum xyauv taug kev ib kab ncaj ncaj. Thaum kuv pom hais tias phau ntawv Creative Curriculum Assessment nug txog yam ntawd, kuv mus raum zoov thiab muab ib txoj xov paj cab ntev ntev. Kuv yuav hais kom Zuag taug kev ncaj ncaj raws txoj xov paj seb nws puas tau txawj taug kev ib kab ncaj ncaj tab sis thaum kuv tig los kuv pom tau hais tias nws twb taug kev raws txoj xov paj lawv kuv qab lawm! Nrhiav ntau yam rau menyuam ua thiab paub hais tias menyuam yeej ua tau no lom zem rau menyuam thiab hos pab tau rau kuv.”</p> <p><b>English</b> <b>Child care center teacher, older toddlers:</b> “I didn’t really know much about assessment until recently. Now it really helps me. For example, I didn’t think about a child learning to walk in a straight line. When I saw that on the Creative Curriculum assessment, I went outside and stretched out a long yarn. I was going to ask Zhoua to walk on the yarn, but then I noticed as I was stretching it out she was following right behind me—right on the yarn! Setting up things to do and finding out what the children can do is fun for the children and helpful for me.”</p>	<p><i>Uses assessment to plan activities</i> <i>Makes observations</i></p>



## Content area IV: Interactions with children

What is most essential for healthy development and learning is the kind of relationships the infant/toddler has with the important adults in her life. Infants and toddlers who have nurturing and responsive caregivers are better able to learn, play, and grow in healthy ways.

The way we adults act with infants and toddlers provides a model for how they will interact with others as they grow.

To provide quality care, caregivers and teachers:

- Talk with families about their expectations and rules, and then find ways to include them whenever possible in your care and education setting.
- Help the child learn another way to act without shaming him when he does something we feel is wrong or dangerous.
- Use positive statements to guide children's behavior so they learn what to do. For example, say, "please sit in the chair" instead of "don't stand on the chair."

- Set clear and consistent limits.
- Keep rules simple.
- Welcome children's contributions and participation.
- Ask for children's input and opinions.
- Communicate with children regularly and often (greetings and departure, notes, phone calls).

### Want to learn more?

Video: "Time with Toddlers: Training for Caregivers" by Kidspace Child Care Center.

Book: "Behavior Guidance for Infants and Toddlers" by A. Sterling Honig (1996). Little Rock: Southern Early Childhood Association (SECA).

Book: "1,2,3: The Toddler Years" by I. Van der Zande, (1995). Santa Cruz: Santa Cruz Toddler Care Center.





Stories from caregivers and teachers

A toddler gets angry and his aunt responds	Caregiver strategies
<p>Kyle (age 2) was moving the pieces of the puzzle, trying to get them to fit together. His face reddened and he threw the puzzle piece across the room and fell to the floor. After he calmed down, Annie acknowledged his feelings by showing she accepted him and his feelings when she said: <i>“Not being able to finish that puzzle made you feel mad. Nishkendam (feel mad). It is scary to be so angry.” “Next time you feel mad, you can ask me to help you.”</i></p>	<p><i>Develops “emotional literacy” by acknowledging and naming feelings.</i></p> <p><i>Teaches positive options. Once a tantrum has started, there is little you can do except keep the child from hurting himself or someone else and assure the child that you will help him. Once he has calmed down you can begin your teaching of developing their self-regulation skills - prevention is key.</i></p>





## Content area V: Families and communities

The most important relationship a child has is with his family. Infant/toddler care teachers who understand this will spend time building a positive, respectful relationship with the child's family. Frequent communication and support between the care provider and the family will help make certain the child's needs are being met in ways that support healthy development.

Parents are the child's first and most important teachers.

To provide quality care, caregivers and teachers:

- Listen with understanding to parents' needs and concerns.
- Encourage children to share stories from their daily family life, such as favorite family activities or pets.
- Respect and promote the rights of families to make their own decisions about what their children need.
- Protect the privacy and confidentiality of each family's information, only making an exception when filing necessary reports to protect the safety of a family member (for example, Children's Protective Services, Duty to Warn).
- Exchange complete and unbiased information in a supportive manner with families and other professionals who work with the family/child.

Children's feelings of security and self-esteem are deeply embedded in a positive identification with their own family and culture of origin.

To provide quality care, caregivers and teachers:

- Support the child's home language and culture with an openness and sensitivity to cultural and family styles of care, communication and interaction.
- Respond to young infants' non-verbal communication.
- Learn phrases and non-verbal communication techniques from the child's home language and culture.
- Play tapes, stories, rhymes, and songs in the child's home language.
- Learn about families without making cultural assumptions; for example, not all Native American families dance in pow-wows or know Wenabozho stories.
- Recognize that many families have blended cultures of traditional and modern values and beliefs.
- As caregivers and teachers grow in knowledge and skills, they:
  - Help children learn about themselves and others by designing and providing meaningful experiences to explore similarities and differences between people.
  - Use play, language and literacy experiences (for example, conversations, books, writing) and face-to-face interactions (such as field trips) to help children learn about their community.
  - Provide opportunities for children to learn about the different cultures, traditions, languages, and family structures of the other children and families in their child care setting and the greater community.
  - Develop awareness about our own cultural assumptions and biases in order to recognize when these assumptions (beliefs) may cause problems or conflict.



Leaders and administrators:

- Make certain that policies are written and /or revised to support family partnerships.
- Provide staff and parent training that supports communication and partnership.

- Review philosophy and mission statement to reflect policies and procedures for family partnerships and relationships with community specialists.
- Watch for and work to eliminate inequity or bias in program policies as well as daily interactions with children and families.

## Want to learn more?

Video: “Protective Urges”  
([www.pitc.org](http://www.pitc.org))

Video: “Essential Connections”  
([www.pitc.org](http://www.pitc.org))

## Stories from caregivers and teachers

A family child care provider talks with parents about language development.	Caregiver – parent relationship and interaction
<p>María ofrece cuidado infantil/guardería y tiene a seis niños bajo su cuidado. Josie, madre de Ariana, una niña de 15 meses, esta interesada en aprender más sobre el desarrollo de lenguaje/idioma. Ella esta preocupada por Ariana porque no ve que la niña repita sus palabras en la casa. “Cuales palabras le estas enseñando?” pregunta María. “En general palabras como por favor y gracias,” responde Josie. María afirmo, “Yo puedo trabajar en eso también!” Al siguiente día en el cuidado infantil/guardería, Ariana le llevo una taza a María mostrándosela con un pequeño pujido. “Por favor?” dijo María, haciendo la señal de “por favor.” María sabe que a Ariana le encanta bailar, y entonces aplaudió y dijo, “Pam pam por favor, pam pam por favor.” Después de dos días de jugar el juego rítmico de “por favor”, Ariana aplaudió las manos y dijo, “favo, favo.” María se rió y después le contó a Josie sobre la palabra nueva de Ariana. “A veces solo toma un poco de practica y usar algo divertido también ayuda.”</p> <p><b>English</b></p> <p>Maria is a family child care provider with six children in her care. Josie, mother of 15-month-old Ariana, is interested in learning more about language development. She is worried about Ariana because she doesn't see her copying or imitating words at home. “What are some words you are teaching her?” Maria asks. “Mostly things like please and thank you,” Josie replied. The next day in child care, Ariana brought a cup over to Maria and held it up with a grunt. “Please?” Maria said, making the sign for “please.” Maria knows that Ariana loves to dance, and so she clapped her hands and said, “Boom boom please, boom boom please.” After two days of playing the “please” rhythm game, Ariana clapped her hands and said, “peas, peas.” Maria laughed and later told Josie about Ariana's new word. “Sometimes it just takes a little more practice and using something that is fun helps, too.</p>	<p><i>Parent is comfortable asking caregiver questions, talking about concerns</i></p> <p><i>Makes observation</i></p> <p><i>Uses sign language</i></p> <p><i>Plays with language</i></p> <p><i>Caregiver shares information with parent</i></p>



## Content area VI: Health and safety

When parents are asked what is most important to them when looking for child care, a healthy and safe environment is at the top of the list. Infants and toddlers are at greater risk for disease and injury in group settings than older children and need more adult supervision to stay safe and healthy. A healthy environment also means providing infants and toddlers with nutritious food and daily opportunities for physical activity. Healthy eating and daily exercise will ensure that infants and toddlers meet their full potential. Research has shown that children whose basic health needs are met are more able to learn from their environment and are much more prepared to succeed in school than those children with poor health.

When the environment is safe and healthy for young children, they are able to explore and learn.

To provide quality care, caregivers and teachers:

- Promote healthy eating and active living by providing regular structured and unstructured physical activities and offering nutritious foods for snacks and meals.
- Recognize health and safety risks and take appropriate action.
- Maintain health and safety procedures (for example, follow universal precautions, regularly sanitize equipment and child-proof environments).
- Check cribs for safety, keep sleeping areas clean, keep the environment smoke-free, and follow the recommended guidelines for lowering the risk of SIDS at all times by putting babies on their backs to sleep ([www.nichd.nih.gov/sids](http://www.nichd.nih.gov/sids)).
- Have young and mobile infants (birth to 18 months) nap as needed throughout the day.
- Make prompt and correct reports of harm or threatened harm to a child's health or welfare to protective services.
- Learn the procedure of reporting safety concerns to county/tribe/other.
- Keep emergency telephone numbers handy.
- Personally work within the requirements of:
  - Federal, state and local law agencies' policies and practices
  - The National Association for the Education of Young Children (NAEYC) code of conduct.





## ***(Content area VI: Health and safety continued)***

Leaders and administrators:

- Know, review and routinely update all applicable rules and regulations of record keeping (from emergency card information to written procedures and data privacy and confidentiality) to ensure that your home program/center and/or agency comply.
- Offer orientation and staff training on each applicable component in their area(s) of responsibility.
- Ensure that staff training includes health promotion, including daily provision of nutritious foods and age-appropriate physical activities.
- Provide staff training on recognizing and responding to child abuse and neglect.
- Establish clear procedures for documentation and notification of suspected abuse and neglect.
- Review Content area II: Learning environment, which also has tips on creating a safe environment.





## Content area VII: Program planning and evaluation

Group care outside of the child's home can have a positive or a negative impact on the child's development. Program planning that includes nurturing, responsive care and thoughtful program planning can improve the quality of care for infants and toddlers, regardless of setting.

Programs can be structured in a way that supports nurturing relationships.

To provide quality care, caregivers and teachers:

- Are sensitive to parents and children as they enter child care and provide extra time for the child to separate from the parent. Extra support can happen during visits to the home or center with the parent before entering care and at the time of drop-off. This way, the first days in child care are more comfortable for everyone.

As caregivers and teachers grow in knowledge and skills, they:

- Find ways to offer primary care for each child (many home-based programs offer primary care as a matter of course, since one adult regularly cares for all of the children). For larger settings that include more than one caregiver (some family child care, child

care centers) provide primary care when assigning one adult to a small group of children (see "What is primary care?"). Primary care is good for children and families because of the regular and consistent care they experience and the opportunity they have to build relationships that support their interests, abilities, and needs.

- Find ways to offer continuity of care. Continuity in group care supports the infant's attachment to a special caregiver and small group of children over time, and promotes the child's healthy growth and development. Having one special caregiver over time helps the infant learn to predict and become a competent participant in her or his own care.

### What is "primary care?"

In a primary care system, each child is assigned to one special infant/toddler care teacher who is principally responsible for that child's care.

Each child should have a special infant/toddler care teacher assigned to him or her at all times during the child care day. Primary care works best when infant/toddler care teachers team up and support each other and provide a back-up base for security for each other's primary care children. Primary care does not mean exclusive care. It means, however, that all parties know who has primary responsibility for each child. For further information, visit the resources library at the Program for Infant-Toddler Care at [www.pitc.org](http://www.pitc.org).

## ***(Content area VII: Program planning and evaluation continued)***

Leaders and administrators:

- Write policies and job descriptions for teaching staff so that “primary caregiving” and “continuity of care” are practiced in their agency or center to the highest possible degree
- Provide oversight and use assessment/evaluation tools to check routinely that policies and procedures are implemented.

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Infants and toddlers can become overstimulated by the amount of noise and activity in large groups. In small groups, very young children are more able to focus on exploration and discovery.

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To provide quality care, caregivers and teachers:

- Limit the number of adults and children in the overall group size.
- Limiting group size helps young infants develop deep relationships and a feeling of trust in the world around them.



## Content area VIII: Professional development and leadership

Child development research, especially regarding infant and toddler development, is growing and best practices are rapidly improving. It is essential that all child care providers continue to take professional development training and participate in professional organizations to increase knowledge and improve their skills related to providing quality care for infants and toddlers, regardless of setting.

Professional development activities that apply to all caregivers and teachers can be found in the publication, "Minnesota Core Competencies for Early Childhood Educators and Care Practitioners Who Work with Children Birth Through Age 8 and their Families" (2004) at [www.mncpd.org](http://www.mncpd.org).

Additional information and resources on professional development and leadership can be found at the Minnesota Center for Professional Development website at [www.mncpd.org](http://www.mncpd.org).

### General resources

**These additional resources will help you learn more about infant-toddler caregiving:**

Early Head Start National Research Center: [www.ehsnrc.org](http://www.ehsnrc.org)

Minnesota ParentsKnow: [www.parentsknow.state.mn.us](http://www.parentsknow.state.mn.us)

The Center for Child and Family Studies: [www.wested.org](http://www.wested.org)

The Program for Infant-Toddler Care: [www.pitc.org](http://www.pitc.org)

Zero to Three: [www.zerotothree.org](http://www.zerotothree.org)





