Components of a Healthy Nutritional Environment at Child Care

Level 3

Participant Handouts
### K-W-L Table

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<th>K: What I <strong>Know</strong></th>
<th>W: What I <strong>Want</strong> to know</th>
<th>L: What I have <strong>Learned</strong></th>
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## Supporting Healthy Eating for Young Children at Child Care

### Food and Beverage Provisions

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<tr>
<th>Best Practice</th>
<th>Why is this important?</th>
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| Fruit that is fresh, frozen, or canned in its own juice is offered every time fruit is served. | • Fruit canned in syrup is high in added sugars, which adds empty calories to the fruit being served to children.  
• Fruit that is fresh, frozen or canned in juice or water supplies the most nutrients to children without all of the added sugar of fruit canned in syrup. |
| Children are offered dark green, orange, red, or deep yellow vegetables (not including white potatoes or corn) 1 time per day or more. | • Vegetables that are dark green, orange, red, or deep yellow are packed with vitamins, minerals, and fiber, more so than other vegetables.  
• They should be offered at least once a day, since these vegetables are such great sources of nutrients needed for children to build healthy bones, immune system, and eyesight, along with other systems. |
| Vegetables are rarely or never prepared with meat fat, margarine, or butter. | • Adding meat fat, margarine, or butter to vegetables adds unhealthy fats, especially saturated fat and cholesterol, to the dish without adding many other micronutrients. While okay once and a while, these should not be added to vegetables regularly. |
| Beverages are always offered in an open, child-sized cup to children ages 1 year and older who are developmentally ready. | • Serving beverages to children in an open, child-sized cup helps them to transition from using sippy cups to regular cups. This takes time and patience, so it’s important to allow children time to practice drinking from an open cup as often as possible. |

### Practices – Preschoolers

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| Preschool children are allowed to choose and serve all foods themselves at meal and snack times. | • This type of serving is called family style. Family style dining allows children to learn about serving themselves appropriate-sized portions, practice social skills at mealtimes (e.g. manners, taking turns), and develop fine motor skills as they serve themselves.  
• Family style dining can also help a child accept new foods, particularly fruits and vegetables, that they see their peers and child care teachers eating and enjoying these new foods. |
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<tr>
<td>Teachers always praise children for trying new or less preferred foods.</td>
<td>• When children receive praise for trying new foods, they will likely have positive associations with eating those foods and be willing to eat them again. Offering praise to children can help them accept new foods more easily.</td>
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<td>When children eat less than half of a meal or snack, teachers always ask them if they are full before removing their plates.</td>
<td>• When either of these scenarios happen, it is important to help children figure out whether or not they are still full before either removing their plates or serving them seconds. Helping children listen to their internal hunger and fullness cues is important as children develop healthy eating habits during childhood.</td>
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<td>When children request seconds, teachers always ask them if they are still hungry before serving more food.</td>
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<td>Teachers remind children to drink water at least 1 time during each indoor or outdoor play period.</td>
<td>• Staying hydrated, especially during active playtime, is important for young children. They may forget about this or not recognize that they are thirsty because they are distracted play, so it is important for teachers to remind children to drink water.</td>
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<td>Teachers rarely or never use food to calm upset children or encourage appropriate behavior.</td>
<td>• Using food to calm upset children or to encourage good behavior can promote the development of unhealthy eating behaviors, as children may learn to link being upset or acting a certain way with food. Children should learn to cope with their emotions or act appropriately without relying on food.</td>
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<td>Teachers use an authoritative feeding style during every meal and snack time.</td>
<td>• An authoritative feeding style strikes a balance between encouraging children to eat healthy foods and allowing children to make their own food choices. To encourage children to eat their vegetables, caregivers may reason with them and talk about the importance of eating vegetables, rather than using bribes or threats.</td>
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<td>• Using an authoritative feeding style can help children decide for themselves that they want to eat healthy foods, which allows them to develop lasting healthy eating behaviors.</td>
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<td>Practices – Infants and Toddlers</td>
<td>Why is this important?</td>
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<td><strong>Best Practice</strong></td>
<td><strong>Why is this important?</strong></td>
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<tr>
<td>Teachers always feed infants on a flexible schedule, when they show they are hungry.</td>
<td>• Whenever possible and with permission from parents, teachers should only feed infants on a flexible schedule, where infants give physical signs that they are hungry instead of on a set schedule. This prevents overeating and promotes healthy eating behaviors and child growth.</td>
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<td>Teachers decide to end infant feedings based on infants showing signs that they are full.</td>
<td>• Teachers should stop feeding infants when the infant shows signs that they are full, as this also prevents an infant from overeating and promotes healthy eating behaviors.</td>
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| Teachers always use responsive feeding techniques when feeding infants. | • Responsive feeding techniques include making eye contact, talking, responding to infants’ reactions during feedings or their signs of hunger and fullness, not propping feeding bottles, and feeding only one infant at a time.  
• Using responsive feeding techniques allows providers to feed infants enough so that they are not hungry anymore but not so much that they overeat. |
| During meal and snack times, teachers always praise and give hands-on help to guide toddlers as they learn to feed themselves. | • Not only do infants and toddlers need praise, but they also will need hands-on help as they develop the physical skills to feed themselves. Offering this help allows children to naturally transition to feeding themselves more easily. |
| At meal times, teachers always praise and give hands-on help to guide older infants as they learn to feed themselves. |  |
Your Baby at 2 Months

Child’s Name

Child’s Age

Today’s Date

How your child plays, learns, speaks, and acts offers important clues about your child’s development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by the end of 2 months. Take this with you and talk with your child’s doctor at every visit about the milestones your child has reached and what to expect next.

What Most Babies Do at this Age:

Social/Emotional

☐ Begins to smile at people

☐ Can briefly calm himself

☐ (may bring hands to mouth and suck on hand)

☐ Tries to look at parent

Language/Communication

☐ Coos, makes gurgling sounds

☐ Turns head toward sounds

Cognitive (learning, thinking, problem-solving)

☐ Pays attention to faces

☐ Begins to follow things with eyes and recognize people at a distance

☐ Begins to get bored (cries, fusses) if activity doesn’t change

Movement/Physical Development

☐ Can hold head up and begins to push up when lying on tummy

☐ Makes smoother movements with arms and legs

Act Early by Talking to Your Child’s Doctor if Your Child:

☐ Doesn’t respond to loud sounds

☐ Doesn’t watch things as they move

☐ Doesn’t smile at people

☐ Doesn’t bring hands to mouth

☐ Can’t hold head up when pushing up when on tummy

Tell your child’s doctor or nurse if you notice any of these changes or if possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state’s public early intervention program. For more information, go to

www.cdc.gov/concerned or call 1-800-CDC-INFO.

Adapted from Caring FOR YOUR Baby AND Young Child, Ages 2 to 5, 7th Edition, 2011

Your Baby at 4 Months

Child's Name  Child's Age  Today's Date

How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age. Check the milestones your child has reached by the end of 4 months. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

What Most Babies Do at this Age:

Social/Emotional

☐ Smiles spontaneously, especially at people
☐ Likes to play with people and might cry when playing stops
☐ Copies some movements and facial expressions, like smiling or frowning

Language/Communication

☐ Begins to babble
☐ Babbling with expression and copies sounds he hears
☐ Cries in different ways to show hunger, pain, or being tired

Cognitive (learning, thinking, problem-solving)

☐ Lets you know if she is happy or sad
☐ Responds to affection
☐ Reaches for toy with one hand
☐ Uses hands and eyes together, such as seeing a toy and reaching for it
☐ Follows moving things with eyes from side to side
☐ Watches faces closely
☐ Recognizes familiar people and things at a distance

Movement/Physical Development

☐ Holds head steady, unsupervised
☐ Pushes down on legs when feet are on a hard surface
☐ May be able to roll over from tummy to back
☐ Can hold a toy and shake it and swing at dangling toys
☐ Brings hands to mouth
☐ When lying on stomach, pushes up to elbows

Act Early by Talking to Your Child's Doctor if Your Child:

☐ Doesn't watch things as they move
☐ Doesn't smile at people
☐ Can't hold head steady
☐ Doesn't coo or make sounds
☐ Doesn't bring things to mouth
☐ Doesn't push down with legs when feet are placed on a hard surface
☐ Has trouble moving one or both eyes in all directions

Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state's public early intervention program. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO.

### Your Baby at 6 Months

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<tr>
<th>Child's Name</th>
<th>Child's Age</th>
<th>Today's Date</th>
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How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by the end of 6 months. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

### What Most Babies Do at this Age:

#### Social/Emotional
- Knows familiar faces and begins to know if someone is a stranger
- Likes to play with others, especially parents
- Responds to other people's emotions and often seems happy
- Likes to look at self in a mirror

#### Language/Communication
- Responds to sounds by making sounds
- Strings vowels together when babbling (“ah,” “eh,” “oh”), and likes taking turns with parent while making sounds
- Responds to own name
- Makes sounds to show joy and displeasure
- Begins to say consonant sounds (babbling with “m,” “b”)

#### Cognitive (Learning, Thinking, Problem-solving)
- Looks around at things nearby
- Brings things to mouth
- Shows curiosity about things and tries to get things that are out of reach
- Begins to pass things from one hand to the other

#### Movement/Physical Development
- Rolls over in both directions (front to back, back to front)
- Begins to sit without support
- When standing, supports weight on legs and might bounce
- Rocks back and forth, sometimes crawling backward before moving forward

### Act Early by Talking to Your Child's Doctor if Your Child:

- Doesn't try to get things that are in reach
- Shows no affection for caregivers
- Doesn't respond to sounds around him
- Has difficulty getting things to mouth
- Doesn't make vowel sounds (“ah,” “eh,” “oh”)
- Doesn't roll over in either direction
- Doesn't laugh or make squealing sounds
- Seems very stiff, with tight muscles
- Seems very floppy, like a rag doll

Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state's public early intervention program. For more information, go to [www.cdc.gov/concerned](http://www.cdc.gov/concerned) or call 1-800-CDC-INFO.

Your Baby at 9 Months

Child's Name

How your child plays, learns, speaks, and acts offers important clues about your child’s development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by the end of 9 months. Take this with you and talk with your child’s doctor at every visit about the milestones your child has reached and what to expect next.

What Most Babies Do at this Age:

Social/Emotional
- May be afraid of strangers
- May be clingy with familiar adults
- Has favorite toys

Language/Communication
- Understands “no”
- Makes a lot of different sounds like “mamamama” and “babababa”
- Copies sounds and gestures of others
- Uses fingers to point at things

Cognitive (learning, thinking, problem-solving)
- Watches the path of something as it falls
- Looks for things he sees you hide
- Plays peek-a-boo
- Puts things in her mouth
- Moves things smoothly from one hand to the other
- Puts up things like cereal or between thumb and index finger

Movement/Physical Development
- Stands, holding on
- Can get into sitting position
- Sits without support
- Falls to stand
- Crawls

Act Early by Talking to Your Child’s Doctor if Your Child:

- Doesn’t bear weight on legs with support
- Doesn’t sit with help
- Doesn’t babble (“mama”, “baba”, “dada”)
- Doesn’t play any games involving back-and-forth play
- Doesn’t respond to own name
- Doesn’t seem to recognize familiar people
- Doesn’t look where you point
- Doesn’t transfer toys from one hand to the other

Tell your child’s doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state’s public early intervention program. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO.

The American Academy of Pediatrics recommends that children be screened for general development at the 9-month visit. Ask your child’s doctor about your child’s developmental screening.

Your Child at 1 Year

Child’s Name
Child’s Age
Today’s Date

How your child plays, learns, speaks, and acts offers important clues about your child’s development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by his or her 1st birthday. Take this with you and talk with your child’s doctor at every visit about the milestones your child has reached and what to expect next.

What Most Children Do at this Age:

Social/Emotional
- Is shy or nervous with strangers
- Cries when mom or dad leaves
- Has favorite things and people
- Shows fear in some situations
- Hugs you a book when he wants to hear a story
- Repeats sounds or actions to get attention
- Pets out arm or leg to help with dressing
- Plays games such as “peek-a-boo” and “pat-a-cake”

Language/Communication
- Responds to simple spoken requests
- Uses simple gestures like shaking head “no” or waving “bye-bye”
- Makes sounds with changes in tone (sounds more like speech)
- Says “mama” and “dada” and exclamations like “uh-oh”
- Tries to say words you say

Cognitive (learning, thinking, problem-solving)
- Explores things in different ways, like shaking, banging, throwing
- Finds hidden things easily
- Looks at the right picture or thing when it’s named
- Copies gestures
- Starts to use things correctly; for example, drinks from a cup, brushes hair
- Bangs two things together
- Pets things in a container, takes things out of a container
- Lets things go without help
- Point to a toy with index (pointer) finger
- Follows simple directions like “pick up the toy”

Movement/Physical Development
- Gets to a sitting position without help
- Pulls up to stand, walks holding on to furniture (“crusing”)
- May take a few steps without holding on
- May stand alone

Act Early by Talking to Your Child’s Doctor if Your Child:

- Doesn’t crawl
- Can’t stand when supported
- Doesn’t search for things that she sees you hide.
- Doesn’t say single words like “mama” or “dada”
- Doesn’t learn gestures like waving or shaking head
- Doesn’t point to things
- Loses skills he once had

Tell your child’s doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state’s public early intervention program. For more information, go to www.cdc.gov/ncbddd or call 1-800-CDC-INF0.
Your Child at 18 Months (1½ Yrs)

Child's Name

Child’s Age

Today’s Date

How your child plays, learns, speaks, and acts offers important clues about your child’s development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by the end of 18 months. Take this with you and talk with your child’s doctor at every visit about the milestones your child has reached and what to expect next.

What Most Children Do at this Age:

Social/Emotional

☐ Likes to hand things to others as play
☐ May have temper tantrums
☐ May be afraid of strangers
☐ Shows affection to familiar people
☐ Plays simple pretend, such as feeding a doll
☐ May cling to caregivers in new settings
☐ Points to show others something interesting
☐ Explores alone but with parent close by

Language/Communication

☐ Says several single words
☐ Says and shakes head “no”
☐ Points to show someone what he wants

Cognitive (learning, thinking, problem-solving)

☐ Knows what ordinary things are for; for example, telephone, brush, spoon
☐ Points to get the attention of others
☐ Shows interest in a doll or stuffed animal by pretending to feed
☐ Points to one body part
☐ Scribbles on his own
☐ Can follow 1-step verbal commands without any gestures; for example, tells when you say “sit down”

Movement/Physical Development

☐ Walks alone
☐ May walk up steps and run
☐ Pulls toys while walking
☐ Can help undress herself
☐ Drinks from a cup
☐ Eats with a spoon

Act Early by Talking to Your Child’s Doctor if Your Child:

☐ Doesn’t point to show things to others
☐ Can’t walk
☐ Doesn’t know what familiar things are for
☐ Doesn’t copy others
☐ Doesn’t gain new words
☐ Doesn’t have at least 6 words
☐ Doesn’t notice or mind when a caregiver leaves or returns
☐ Loses skills he once had

Tell your child’s doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state’s public early intervention program. For more information, go to www.cdc.gov/concealed or call 1-800-CDC-INFO.

The American Academy of Pediatrics recommends that children be screened for general development and autism at the 18-month visit. Ask your child’s doctor about your child’s developmental screening.


www.cdc.gov/actearly | 1-800-CDC-INFO
Your Child at 2 Years

Child's Name
Child's Age
Today's Date

How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by his or her 2nd birthday. Take this with you and talk with your child’s doctor at every visit about the milestones your child has reached and what to expect next.

What Most Children Do at this Age:

Social/Emotional
- Copies others, especially adults and older children
- Gets excited when with other children
- Shows more and more independence
- Shows defiant behavior (doing what he has been told not to)
- Plays mainly with other children, but is beginning to include other children, such as in chase games

Language/Communication
- Points to things or pictures when they are named
- Knows names of familiar people and body parts
- Says sentences with 2 to 4 words
- Follows simple instructions
- Repeats words overheard in conversation
- Points to things in a book

Cognitive (learning, thinking, problem-solving)
- Finds things even when hidden under two or three covers
- Begins to sort shapes and colors
- Completes sentences and rhymes in familiar books
- Plays simple make-believe games
- Builds towers of 4 or more blocks
- Might use one hand more than the other
- Follows two-step instructions such as “Pick up your shoes and put them in the closet.”
- Names items in a picture book such as a cat, bird, or dog

Movement/Physical Development
- Stands on tiptoe
- Kicks a ball
- Begins to run

Act Early by Talking to Your Child's Doctor if Your Child:

- Doesn't use 2-word phrases (for example, “drink milk”)
- Doesn't know what to do with common things, like a brush, phone, fork, spoon
- Doesn't copy actions and words
- Doesn't follow simple instructions
- Doesn't walk steadily
- Loses skills she once had

Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your state's public early intervention program. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO.

The American Academy of Pediatrics recommends that children be screened for general development and autism at the 24-month visit. Ask your child’s doctor about your child’s developmental screening.

Adapted from Caring for Your Baby and Young Child: Birth to Age 5. This Guide, edited by Nancy E. Smith and Sarah Johnson Atwell, is published by The American Academy of Pediatrics and the American Academy of Family Physicians. The American Academy of Pediatrics. This milestone checklist is not a substitute for a standardized, validated developmental screening tool.

www.cdc.gov/actearly | 1-800-CDC-INFO
Your Child at 3 Years

How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age. Check the milestones your child has reached by his or her 3rd birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

What Most Children Do at this Age:

Social/Emotional
- Copies adults and friends
- Shows affection for friends without prompting
- Takes turns in games
- Shows concern for a crying friend
- Understands the idea of “mine” and “his” or “her”
- Shows a wide range of emotions
- Separates easily from mom and dad
- May get upset with major changes in routine
- Dresses and undresses self

Language/Communication
- Follows instructions with 2 or 3 steps
- Can name most familiar things
- Understands words like “in,” “on,” and “under”
- Says first name, age, and sex
- Names a friend
- Says words like “I,” “me,” “we,” and “you” and some plurals (cars, dogs, cats)
- Talks well enough for strangers to understand most of the time
- Carries on a conversation using 2 to 3 sentences

Cognitive (learning, thinking, problem-solving)
- Can work toys with buttons, levers, and moving parts
- Plays make-believe with dolls, animals, and people
- Does puzzles with 3 or 4 pieces
- Understands what “two” means
- Copies a circle with pencil or crayon
- Turns book pages one at a time
- Builds towers of more than 6 blocks
- Screws and unscrews jars lids or turns doorknob

Movement/Physical Development
- Climbs well
- Hops easily
- Pedals a tricycle (3-wheel bike)
- Walks up and down stairs, one foot on each step

Act Early by Talking to Your Child’s Doctor if Your Child:

- Falls down a lot or has trouble with stairs
- Drools or has very unclear speech
- Can’t work simple toys (such as peg boards, simple puzzles, turning handle)
- Doesn’t speak in sentences
- Doesn’t understand simple instructions
- Doesn’t play pretend or make-believe
- Doesn’t want to play with other children or with toys
- Doesn’t make eye contact
- Loses skills he once had

Tell your child’s doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your local public school. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO.

Your Child at 4 Years

Child's Name

Child's Age

Today's Date

How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age. Check the milestones your child has reached by his or her 4th birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

What Most Children Do at this Age:

Social/Emotional
- Enjoys doing new things
- Plays "Mom" and "Dad"
- Is more and more creative with make-believe play
- Would rather play with other children than by himself
- Cooperates with other children
- Often can't tell what's real and what's make-believe
- Talks about what she likes and what she is interested in

Language/Communication
- Knows some basic rules of grammar, such as correctly using "he" and "she"
- Sings a song or says a poem from memory such as the "Twinkle, Twinkle, Little Star" or "The Wheels on the Bus"
- Tells stories
- Can say first and last name

Cognitive (learning, thinking, problem-solving)
- Names some colors and some numbers
- Understands the idea of counting
- Starts to understand time
- Remembers parts of a story
- Understands the idea of "same" and "different"
- Draws a person with 2 to 4 body parts
- Uses scissors
- Starts to copy some capital letters
- Plays board or card games
- Tells you what he thinks is going to happen next in a book

Movement/Physical Development
- Hops and stands on one foot up to 2 seconds
- Catches a bounced ball most of the time
- Pees, cuts with supervision, and washes own food

Act Early by Talking to Your Child's Doctor if Your Child:

- Can't jump in place
- Has trouble swallowing
- Shows no interest in interactive games or make-believe
- Ignores other children or doesn't respond to people outside the family
- Refuses dressing, sleeping, and using the toilet
- Can't tell a favorite story
- Doesn't follow 3-part commands
- Doesn't understand "same" and "different"
- Doesn't use "me" and "you" correctly
- Speaks unclearly
- Loses skills he once had

Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your local public school. For more information, go to www.cdc.gov/actearly or call 1-800-CDC-INFO.

Your Child at 5 Years

Child's Name
Child's Age
Today's Date

How your child plays, learns, speaks, and acts offers important clues about your child's development. Developmental milestones are things most children can do by a certain age.

Check the milestones your child has reached by his or her 5th birthday. Take this with you and talk with your child's doctor at every visit about the milestones your child has reached and what to expect next.

What Most Children Do at this Age:

Social/Emotional
- Wants to please friends
- Wants to be like friends
- More likely to agree with rules
- Likes to sing, dance, and act
- Is aware of gender
- Can tell what's real and what's make-believe
- Shows more independence (e.g., may visit a next-door neighbor by himself with adult supervision is still needed)
- Is sometimes demanding and sometimes very cooperative

Language/Communication
- Speaks very clearly
- Tells a simple story using full sentences
- Uses future tense, for example, "Grandma will be here.
- Says name and address

Cognitive (learning, thinking, problem-solving)
- Counts 10 or more things
- Can draw a person with at least 6 body parts
- Can print some letters or numbers
- Copies a triangle and other geometric shapes
- Knows about things used every day, like money and food

Movement/Physical Development
- Stands on one foot for 10 seconds or longer
- Hops; may be able to skip
- Can do a somersault
- Uses a fork and spoon and sometimes a table knife
- Can use the toilet on her own
- Swims and climbs

Act Early by Talking to Your Child's Doctor if Your Child:

- Doesn't show a wide range of emotions
- Shows extreme behavior (unusually fearful, aggressive, shy or sad)
- Unusually withdrawn and not active
- Is easily distracted, has trouble focusing on one activity for more than 5 minutes
- Doesn't respond to people, or responds only superficially
- Can't tell what's real and what's make-believe
- Doesn't play a variety of games and activities
- Can't give first and last name
- Doesn't use plurals or past tense properly
- Doesn't talk about daily activities or experiences
- Doesn't draw pictures
- Can't brush teeth, wash and dry hands, or get undressed without help
- Loses skills he once had

Tell your child's doctor or nurse if you notice any of these signs of possible developmental delay for this age, and talk with someone in your community who is familiar with services for young children in your area, such as your local public school. For more information, go to www.cdc.gov/concerned or call 1-800-CDC-INFO.

Fun Ideas for Using Play Things Indoor and Outdoors

**HULA HOOPS**

*Inside:*
- Use for target practice (wall, floor, held).
- Play musical hoops.
- Practice motor skills.
- Practice movement concepts.
- Use as personal space or “homebase”.
- Use as a steering wheel.
- Play partner games.

*Outside:*
- Roll and chase them.
- Spin them.
- Twirl them around body parts.
- Use as target practice (tree, fence, held).

**BILIBOS**

(dome shaped open-ended toy that encourages imagination and creativity)

*Inside:*
- Jump off of them.
- Spin them.
- Toss balls or other items into bilibo as a low target.
- Use as stepping stones.
- Use for scooting.

*Outside:*
- Use as stepping stones.
- Use as a carrying container (individual, partners, small group).
- Connect them to a rope to pull people.
- Connect them to a rope to carry loose parts, water or mud.
- Hang them from trees as a target.
- Do teamwork activities (holding hands, move the hoop around the circle without letting go of hands).
- Use as personal space or “homebase”

**2 PERSON PARACHUTE**

*Inside:*
- Create a tent, cave or fort.
- Use as a target or backstop.
- Use as a ball retriever/return.
- Pretend it is a popcorn maker or pan and make to make food.
- Define a space to perform locomotor movements around.
- Find out how many (stuffed animals, children...) can fit under, around or on the parachute.
- Experiment with light/heavy and big/little things to bounce on the parachute.
- Use it to practice movement concepts such as levels.

*Outside:*
- Use it as a sail on a ship.
- Use it to practice movements concepts such as levels.
- Use as a kite to catch the wind.
- Collect loose parts and carry them around.
- Use as a privacy barrier.
- Use as a target or backstop.
- Use it as a ball retriever/return.
- Use as a hammock.
- Use as a sled.
- Create a tent, cave or fort.

**JUMP ROPE**

*Inside:*
- Use to hang targets.
- Create shapes (letters, circles, square, body image, etc).
- Place one or more on floor and practice motor skills.
- Suspend off the ground and practice motor skills.
- Practice movement concepts.
- Use it to play limbo.
- Use to hang sheets over to create fort/tent/tunnel.

*Outside:*
- Practice individual or partner jumping.
- Pull other objects.
- Use to hang targets.
- Place one or more on floor to practice motor skills.
- Suspend off the ground and practice motor skills.
- Use it to play limbo.
- Use to hang sheets over to create fort/tent/tunnel.
Fun Ideas for Using Play Things Indoor and Outdoors

**FRISBEEs**

**Inside:**
- Create an obstacle course.
- Use for target practice.
- Secure to shoes and use as skates to practice sliding.
- Secure to hands and use as paddles.
- Secure to rope and use as moving target.
- Use as personal space or “homebase” markers.
- Use for treasure hunts or relays.
- Use as a steering wheel.
- Balance on body parts.
- Use as stepping stones, lily pads, etc.

**Outside:**
- Throw and chase.
- Hang from trees as targets (can add bells for auditory reinforcement).
- Carry water, sand or mud.
- Use as water skis.
- Use for treasure hunts or relays.
- Roll, spin or flip them.
- Use as steering wheel.
- Secure to sticks to use as long handled paddle.

**FOAM POOL NOODLES**

**Inside:**
- Secure to the ground and use as balance beams (may need to assist the children).
- Secure to the floor to practice motor skills.
- Suspend off the ground to practice motor skills.
- Practice movement concepts.
- Use to pull objects.
- Use as weights and lift them like you are exercising.
- Use it to play limbo.
- Cut them into small pieces and practice motor skills.
- Cut them in half and use them like drum sticks.
- Use them to hang sheets over to create fort/tent/tunnel.

**Outside:**
- Use them as hurdles to jump over.
- Use them to practice striking objects (stationary, suspended, tossed).
- Have a pirate sword battle.
- Use as paddles on a boat and row.
- Use to build forts.
- Use it to play limbo.
- Ride them like a horse.
- Throw them like a javelin in the Olympics.
- If hollow, use them like a hose to pour water.
- If hollow, put a rope through them and use as boundaries, hang sheets from, balance on and move.

**SCARVES**

**Inside:**
- Use them to practice motor skills.
- Suspend off ground and practice motor skills.
- Practice movement concept.
- Play peek-a-boo.
- Use as puppets.
- Use them for directed movement during storytime.
- Use as spot markers.
- Create a scarf rope.
- Play throw and chase.
- Use to practice rhythm.

**Outside:**
- Use them to practice motor skills.
- Practice movement concepts.
- Tie them to a pole or tree as a spot marker or target.
- Use them as a flag.
- Play tag with them.
- Use them for directed movement or as a signal.
- Collect and carry loose parts in them.
- Suspend off the ground and practice motor skills.
- Practice pre-juggling skills.
- Tie them to a tree or pole and have a scavenger hunt.
- Create a scarf rope with them.
- Tie them to a fence for art.

*Be cautious when using equipment as floor markers. Some will pose a trip hazard. Use proper supervision to ensure safety, but allow for creativity, risk and exploration.

*Movement concepts include body awareness, space awareness, effort awareness, and relationship (examples: directions, pathways, speeds, levels).

*Motor skills include locomotor, manipulative, non-locomotor skills (examples: throwing, catching, kicking, sticking, creeping, crawling, jumping, running).
### Understand the Weather

#### Wind-Chill
- **30°F** is chilly and generally uncomfortable
- **15°F to 30°F** is cold
- **0°F to 15°F** is very cold
- **-20°F to 0°F** is bitter cold with significant risk of frostbite
- **-20°F to -60°F** is extreme cold and frostbite is likely
- **-60°F** is frigid and exposed skin will freeze in 1 minute

#### Heat Index
- **80°F or below** is considered comfortable
- **90°F** beginning to feel uncomfortable
- **100°F** uncomfortable and may be hazardous
- **110°F** considered dangerous

All temperatures are in degrees Fahrenheit.

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### Child Care Weather Watch

#### Wind-Chill Factor Chart (in Fahrenheit)

<table>
<thead>
<tr>
<th>Air Temperature</th>
<th>Wind Speed in mph (Calm, 5, 10, 15, 20, 25, 30, 35, 40)</th>
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<tbody>
<tr>
<td>40</td>
<td>40 36 34 32 30 29 28 27</td>
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<td>0</td>
<td>0 -11 -16 -19 -22 -24 -26 -27 -29</td>
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- Green: Comfortable for outdoor play
- Yellow: Caution
- Red: Danger

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#### Heat Index Chart (in Fahrenheit %)

<table>
<thead>
<tr>
<th>Relative Humidity (Percent)</th>
<th>Air Temperature (°F)</th>
<th>40</th>
<th>45</th>
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<th>55</th>
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2010
Child Care Weather Watch

Watching the weather is part of a child care provider’s job. Planning for playtime, field trips, or weather safety is part of the daily routine. The changes in weather require the child care provider to monitor the health and safety of children. What clothing, beverages, and protections are appropriate? Clothing children to maintain a comfortable body temperature (warmer months - lightweight cotton, colder months - wear layers of clothing). Beverages help the body maintain a comfortable temperature. Water or fruit juices are best. Avoid high-sugar content beverages and soda pop. Sunscreen may be used year around. Use a sunscreen labeled as SPF-15 or higher. Read and follow all label instructions for the sunscreen product. Look for sunscreen with UVB and UVA ray protection. Sunscreen with UVB and UVA ray protection. Shaded play areas protect children from the sun.

Condition GREEN - Children may play outdoors and be comfortable. Watch for signs of children becoming uncomfortable while playing. Use precautions regarding clothing, sunscreen, and beverages for all child age groups.

INFANTS AND TODDLERS are unable to tell the child care provider if they are too hot or cold. Children become fussy when uncomfortable. Infants/toddlers will tolerate shorter periods of outdoor play. Dress infants/toddlers in lightweight cotton or cotton-like fabrics during the warmer months. In cooler or cold months dress infants in layers to keep them warm. Protect infants from the sun by limiting the amount of time outdoors and playing in shaded areas. Give beverages when playing outdoors.

YOUNG CHILDREN remind children to stop playing, drink a beverage, and apply more sunscreen. OLDER CHILDREN need a firm approach to wearing proper clothing for the weather (they may want to play without coats, hats or mittens). They may resist applying sunscreen and drinking beverages while outdoors.

Condition YELLOW - Use caution and closely observe the children for signs of being too hot or cold while outdoors. Clothing, sunscreen, and beverages are important. Shorten the length of outdoor time.

INFANTS AND TODDLERS use precautions outlined in Condition Green. Clothing, sunscreen, and beverages are important. Shorten the length of time for outdoor play.

YOUNG CHILDREN may insist they are not too hot or cold because they are enjoying playtime. Child care providers need to structure the length of time for outdoor play for the young child.

OLDER CHILDREN need a firm approach to wearing proper clothing for the weather (they may want to play without coats, hats or mittens), apply sunscreen and drinking liquids while playing outdoors.

Condition RED - Most children should not play outdoors due to the health risk.

INFANTS/TODDLERS should play indoors and have ample space for large motor play.

YOUNG CHILDREN may ask to play outside and do not understand the potential danger of weather conditions.

OLDER CHILDREN may play outdoors for very short periods of time if they are properly dressed, have plenty of fluids. Child care providers must be vigilant about maximum protection of children.

Understand the Weather

The weather forecast may be confusing unless you know the meaning of the words.

Blizzard Warning: There will be snow and strong winds that produce a blinding snow, deep drifts, and life threatening wind chills. Seek shelter immediately.

Heat Index Warning: How hot it feels to the body when the air temperature (in Fahrenheit) and relative humidity are combined.

Relative Humidity: The percent of moisture in the air.

Temperature: The temperature of the air in degrees Fahrenheit.

Wind: The speed of the wind in miles per hour.

Wind Chill Warning: There will be sub-zero temperatures with moderate to strong winds expected which may cause hypothermia and great danger to people, pets and livestock.

Winter Weather Advisory: Weather conditions may cause significant inconveniences and may be hazardous. If caution is exercised, these situations should not become life threatening.

Winter Storm Warning: Severe winter conditions have begun in your area.

Winter Storm Watch: Severe winter conditions, like heavy snow and ice are possible within the next day or two.
Outdoor Activity Handout

**Structured learning opportunities:** Planned lessons and activities including circle time, art projects, and reading time.

1. Look at Outdoor Play Setting Pictures and talk about what activities can be done and where

**Seasonal outdoor activities:** Activities that are unique to the season or the weather, including gardening, water play, collecting fallen leaves, and playing in the snow.

1. Mud Play
2. Leaf Play
3. Water Play
4. Pumpkin Play
5. Snow Play
6. Gardening

**Walking trips:** Activities, like nature walks and neighborhood tours, which let children explore the outdoors nearby your program, but beyond the regular play space.

**Outdoor field trips:** Opportunities for children to take part in outdoor activities around the community.

1. Farms
2. Gardens
3. Nature centers
4. Local parks
5. Creamery
# Nutrition and Physical Activity Curricula for Child care setting Use

<table>
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<tr>
<th><strong>Nutrition and Physical Activity Curricula</strong></th>
<th><strong>Description</strong></th>
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