# Good Standards Improve the Quality of Child Care

BY REECE YANDLE

In practically every worthwhile endeavor, standards are important. Meeting those standards becomes essential for the practitioner. A recent publication by the American Academy of Pediatrics (Article 1/8/2005) shows that, if meeting only 99 percent of standards was good enough, there would be no phone service for 15 minutes each day, 1.7 million pieces of first class mail would be lost each day, 35,000 newborn babies would be dropped by doctors or nurses each year, 200,000 people would get the wrong drug prescriptions each year, unsafe drinking water would come from our taps for three days a year, there would be three misspelled words on the average page of type, and two million people would die from food poisoning every year. Striving to meet good standards is important.

# **Standards**

A standard is a statement that defines a goal of practice. It is not the same as a recommendation, or guideline, or even a regulation, because the word "standard" implies the urgent need for universal compliance. However, compliance to a standard is not always required for legal operation, although compliance is always highly desired. Standards are normally set by a particular industry and designed to ensure the quality of the performance or product of that industry. Our performance is that of caring for and training children in a Christian atmosphere. Can standards be set for itself by a specific entity, such as an individual church child care center? Yes, that is possible, but the setting of standards is normally done by the larger body of like entities or centers, with the common goal of a set of agreeable standards that enhance and improve the operation of a center, helping it achieve its goal of providing quality care for children.

Regulations may be imposed by government, based on standards that some government unit has designed. Adhering to those regulations is often required for continued legal operation. Sometimes those standards and their ensuing regulations are in direct conflict with Bible principles. Therefore, it would seem logical and sensible for church centers to ban together to develop standards that, not only include Bible principles, but employ those principles as the motivating force for all standards.

The supposition that "standards drive quality child care" is a fact that is both desired and demanded. It is desired by parents seeking care for their most precious possessions, their children. It is desired, although perhaps unknowingly, by those children who are left in child care centers of all kinds in our country. High standards that produce quality child care are demanded by parents who entrust their children to others. It is further demanded through regulations by state and federal governments that have a compelling interest to protect those, who, for the most part cannot speak for themselves, the children. Society itself expects more than mediocrity in child care. The

Lord also demands high quality standards, Colossians 3:23 states, "And whatsoever ye do, do it heartily, as to the Lord, and not unto men. . . ." The founder of Bob Jones University once said, "It is a sin to do less than your best." For the believer that applies to all endeavors. For those who would provide care for children it is an absolute imperative.

Those who desire to operate child care centers are no more endowed with all knowledge and wisdom when it comes to providing quality care than someone desiring to fly has innate abilities to design, fly, and repair airplanes.

## **Indicators of Process Quality**

Some undeniable statistics were discovered in a recent survey by our federal government showing that today nearly 60 percent of all children five years or younger are in child care on a regular basis, and 44 percent of infants are in child care for more than 30 hours per week (Fiene, *Executive Summary*, 2002) understandably, parents are searching for quality care for their children.

The quality of child care may be measured in two primary ways. First, quality may be calculated by observing what actually happens in a child care center. This is seen in the children's "interaction with caregivers and other children, in particular activities such as language stimulation, and in health and safety measures." These features are "... indicators of process quality...." (Fiene, *Indicators of Quality Child Care*, 2002).

The second set of indicators determined by Fiene (*Executive Summary*, 2002) includes the "structural characteristics . . . in the center and the quality of the caregivers." For this information one would look at the child/adult ratio, the group sizes, and the formal level of education and training of the caregivers. Research by Vandell and Wolfe (2000), in the relationship of these two primary indicators conclusively shows the following:

- When child/adult ratios are lower, children generally appear less apathetic and distressed; caregivers spend less time in managing their classrooms and offer more stimulating, supportive care.
- 2. When staff is more highly trained and better compensated, children's activities are of higher quality, and caregivers are more responsive and less restrictive.
- 3. When a center employs better health and safety practices, it results in fewer respiratory and other infections among the children, and there are fewer playground injuries.

# Regulation by Government Agencies

During the last fifteen years I have had the privilege of working closely with operators of licensed for-profit centers, registered church centers, public school centers, military centers, and publicly run centers and staff of a number of state agencies. My work on the South Carolina Advisory Committee for the Regulation of Child Day Care Facilities has also allowed me to interact with many members of the South Carolina General Assembly and their staff. Proper regulations for child care are like the laws governing the flow of traffic on our roads. Traffic laws are there to keep people from driving on the wrong side of the road, because some people actually don't know on which side they should be. Traffic laws in our state say that one may turn right on a red light only after a full stop, unless a sign directs differently. Our laws or regulations ensure absolute safety at our crossings, which is our standard or goal. Those laws or regulations simply help us reach that goal or standard.

Likewise, our child care regulations say one should abide by specific child/staff ratios, that workers must have a certain number of training hours per year, that someone should be present at all times who is proficient in CPR and first aid, that training must be given in bloodborne pathogens to all employees each year, etc. These regulations and others are necessary to ensure the quality of care in South Carolina centers, because not all people who operate or work in centers are endowed by the Creator with all knowledge, skill, and wisdom in caring for children.

Herein lies the dilemma. How much should church child care centers be regulated, or should they be regulated at all? It is my firm belief that churches operating centers need to be at the table of the legislative and regulatory process in their states to ensure that the laws and regulations do not exceed the authority of the state over a church-operated ministry.

At the same time, one has to recognize that government does have the responsibility to ensure the safety of its citizens . . . even the little citizens. The National Research Council found that ". . . children who attend well-planned, high-quality early childhood programs in which curriculum aims are specified and integrated across domains tend to learn more and are better prepared to master the complex demands of formal schooling." (Bowman, Donovan, and Burns, 2000).

## Thirteen Indicators of Quality Child Care

According to *The Daily Parent*, a newsletter of the National Association of Child Care Resource and Referral Agencies, "Choosing child care is an important decision. Good child care arrangements can improve the daily lives of children and parents. In addition, children in high quality care have higher levels of success when they enter school" (Retrieved October 27, 2005, from http://www.childcareaware.org/en/dailyparent/vol8/).

The University of Colorado Health Sciences Center at Fitzsimons, Aurora, Colorado recently published a synopsis of child care research that identifies thirteen indicators of quality care. The University suggests that parents should use the indicators

as a guide in helping them select a quality child care center for their children. According to the research, centers that follow the guidelines of the thirteen indicators are more likely to have a center that is safe and healthy. The thirteen indicators are: supervision, hand washing and diapering, director qualifications, lead teacher qualifications, child/staff ratios and group size, immunizations, toxic substances, emergency plan, fire drills, child abuse, medications, staff training/first aid and playgrounds (Retrieved October 27, 2005, from <a href="http://www.childcareaware.org/en/tools/parentsguide/">http://www.childcareaware.org/en/tools/parentsguide/</a>). Many states are now actively pursuing regulations that will emphasize attention to these indicators. More information on the research of Dr. Richard Fiene that supports these health and safety guidelines is available at http://nrc.uchsc.edu or and http://aspe.hhs.gov. The research paper, "Thirteen Indicators of Quality Child Care: Research Update," is available on the Web at <a href="http://aspe.hhs.gov/hsp/ccquality-">http://aspe.hhs.gov/hsp/ccquality-</a> ind02. This Parent's Guide can be downloaded from http://aspe.hhs.gov or http://nrc.uchsc.edu. By following even the most basic of the guidelines on the thirteen indicators, centers will find they are providing a happier, safer place for children. In addition, parents will feel more satisfied that their children are being cared for in a professional and loving manner. When parents place their most precious possessions, their children, in a child care center, it is absolutely necessary that they feel confident and comfortable about their decision.

The general public is also becoming increasingly aware of the research statistics now available concerning quality child care. The media and state and private agencies are all publishing more and more findings. Additionally, state legislatures are beginning to respond by drafting new regulations emphasizing higher standards.

The requirement by a state government for a church child care center to be licensed in order to operate is abhorrent to many fundamental, Bible-believing Christians. Nevertheless, some states do require licensure, some allow registration, and some allow the church center to opt out of the process altogether. However, there is no denying that good standards do produce better quality child care.

### Accreditation

The American Association of Christian Schools (AACS) has now developed an accreditation instrument for child care that is rapidly becoming recognized as a leader in its area. It is already accepted by at least two state governments as an alternative to National Association for the Education of Young Children (NAEYC) accreditation. A modified version by the South Carolina Association of Christian Schools has already been adopted by the licensed and registered centers in South Carolina as their instrument of choice.

The time has come for church centers to move ahead with confidence and purpose and become the recognized leaders in providing quality child care through the implementation of high standards. This can be accomplished by voluntarily increasing standards to acceptable levels through accreditation programs such as the one offered by the AACS or by a few state Christian school organizations. Failure to recognize that

high standards do, indeed, drive quality child care, may invite disaster through state governments requiring of church centers what they would not voluntarily require of themselves.

Attention is being drawn more and more to high standards for child care. If church centers do not rise to the challenge facing them to develop high standards, they will probably see a decrease in the opportunity to minister to the general public through child care institutions. Mediocrity for the church child care center is just not an option. If they are to offer genuine, quality child care, they simply must employ high, acceptable standards for the operation of those centers.

There can be no doubt; high standards not only drive quality child care, they are absolutely essential to our stated purpose of providing quality child care in a Christian atmosphere.

Reverend Reece Yandle has recently retired as the Executive Director of the South Carolina Association of Christian Schools and the Church Child Care Network

#### References

- Bowman, B., Donovan, S. & Burns, M.S. (2000). *Eager to learn*. Washington, DC, National Research Council, Executive Summary, p. 6.
- The *Daily parent*, (2004). Washington, DC, National Association of Child Care Resource and Referral Agencies, p. 5.
- Fiene, R. Ph. D. (2002). *Child care quality: Does it matter and does it need to be improved?* Executive Summary, p. 1.
- Fiene, R. Ph. D. (2002), *Child care quality: Does it matter and does it need to be improved?* Executive Summary, p. 4-5.
- Fiene, R. Ph.D. (2002). *Indicators of quality child care: Research update*, Washington, DC, U.S. Department of Health and Human Services.
- A Parent's guide for choosing safe and healthy child care. (2004). Aurora, Colorado: University of Colorado, Health Sciences Center at Fitzsimons.
- Vandell, D. L. & Wolfe, B. (2000). *Child care quality: Does it matter and does it need to be improved? Full Report*, University of Wisconsin-Madison, Institute for Research on Poverty, p. 6.