



Checklist for YoungStar Policies

Family Child Care Programs

Includes YoungStar Optional Points

C.2.2 PARENT HANDBOOK – required for 4 and 5 Stars

- Written Vacation policy
 - Where: _____ Page number: _____
- Written Holiday policy
 - Where: _____ Page number: _____
- Provider time off policy is written down, outlining how the Provider will give notice to families.
 - Where: _____ Page number: _____
- Written Procedures for Provider sick days
 - Where: _____ Page number: _____
- Provider's expectations of families related to sick children are written down.
 - Where: _____ Page number: _____
 - Tells families the steps to follow if they have to let the Provider know a child is not coming due to illness.
 - Tells families the steps the Provider will take if a child gets sick in the program, including how quickly the child must be picked up and any consequences if that expectation is not met.
- Family questions policy is written down.
 - Where: _____ Page number: _____
 - Tells families the Provider's expectations about handling parent questions about the program.
- Provider has written policy **and** contract/separate page with agreement for paid time off.
 - Where: _____ Page number: _____
 - Verification of contract/agreement page, which includes description of time off, includes date and signatures of parent.
 - Written policy that states families are given a copy of contract/agreement page.

C.2.3 WRITTEN POLICIES TO REDUCE RISK and PROGRAM FINANCIAL PLANNING – required for 5 Stars

REDUCING RISK

- Program policies which reduce risk to people and property are written down. Two required.
 - Where: _____
 - Risk policy **and** procedures regarding hazards verified. Page number: _____
 - Home and property are safe and free of hazards
 - Access to fire extinguisher
 - Working smoke alarms on each level of home
 - Spread of contagious disease minimized/universal precautions
 - Field trip risk policy verified Page number: _____
 - Field trip authorization forms verified
 - If transportation is used, transportation authorization verified
 - Person under the influence policy verified Page number: _____
 - Statement that Provider will request intoxicated person not take child
 - Statement that Provider will call local law enforcement as needed
 - Car seat/seat belt policy verified Page number: _____
 - Statement that discourages release of child to anyone with inappropriate or missing equipment (car seat/seat belt).
 - Statement that Provider will contact local child welfare office if education on the topic is refused and adult persists in behavior.
 - Emergency procedures are verified Page number: _____
 - Procedures for reducing the risk of child abuse or neglect are verified
Page number: _____
 - Provider receives yearly training OR
 - Written policies of Provider action if abuse is suspected
 - Program maintains open-door policy; written down

FINANCIAL PLANNING

- Intentional program planning policy written down sharing program's priorities and how the program plans to financially support those priorities.
 - Where: _____ Page number: _____
- Program policies which reduce financial risk to program are written down. Two required.
 - Where: _____ Page number: _____
 - Charging NSF fee for bounced check policy verified
 - Requirement to pay in cash after bounced check policy verified
 - Late tuition payment fee policy verified

- Payment before care provided policy verified
- Timely payment or loss of care policy verified
- Procedure for use of official payment form verified
- Late/missing tuition payment policy with repayment plan verified
- Procedure for direct deposit availability verified

**C.5.1-4 Family Engagement – required for 3, 4 and 5 Stars
(Policy/philosophy verification If item and the identified activity is selected)**

C.5.1 Communication

- C.5.1.1.b Written philosophy supporting communication as means of developing provider-family relationships is used
 - Which document: _____ Page number: _____
 - Document is on-site Location: _____
- C.5.1.2.a Program has a written family feedback procedure that informs how feedback will be collected and used in the program
 - Which document: _____ Page number: _____
 - Document is on-site Location: _____

C.5.4 Community Resources and Family Support

- C.5.4.1.a Community resource list developed and shared
 - Document is on-site Location: _____

D.1.1 Program supports healthy nutrition and/or physical activity policies and practices – Required for 3, 4 and 5 Star

- Written policy addresses children's allergies AND dietary restrictions
 - Which document: _____ Page number: _____
 - Document is on-site Location: _____
- Written procedures address children's allergies AND dietary restrictions
 - Which document: _____ Page number: _____
 - Document is on-site Location: _____
- Written policy addresses supplementing meals, snacks or beverages when brought from home.
 - Which document: _____ Page number: _____
 - Document is on-site Location: _____

OPTIONAL POINTS – these entries below support **portions** of indicators in YoungStar. Proof of policy does not ensure satisfactory completion of entire indicator.

B.2.2 Curriculum/Programming aligned with WMELS or SACF

- Program shares written information about WMELS to families in two ways.
 - Location: _____
 - Location: _____

B.3.1 Individual child portfolios

- Written policy describes portfolio process, including the regular practice of sending portfolios home, if this is the program's practice.
 - Where: _____ Page number: _____
 - Verification of support of practice: _____
 - This is NA if program does not regularly send portfolios home.

C.3.2 Professional development: Written copy of policies and procedures for employees, substitutes, and/or volunteers

- Written Job descriptions for all staff.
 - Where: _____ Page number: _____
- Hiring /volunteering process are written down.
 - Where: _____ Page number: _____
- Written Personnel Policies.
 - Where: _____ Page number: _____
 - Available to staff while at center. Location: _____
- Written Program policies.
 - Where: _____ Page number: _____
 - Available to staff while at center. Location: _____

C.4.2 Provider Benefits: Contract with families for 10 days off/5 of which are paid

- Provider has written policy **and** contract/separate page with agreement for paid time off, which states Provider has 10 days off, 5 of which are paid.
 - Where: _____ Page number: _____
 - Verification of contract/agreement page, which includes description of time off, includes date and signatures of parent.
 - Written policy that states families are given a copy of contract/agreement page.

- Page number: _____

D.1.2 Program supports physical skill development and healthy physical activity

- Written policy that addresses how screen time is used

- Which document: _____ Page number: _____

NOTE: THE FOLLOWING IS SUGGESTED TO ADD TO SUPPORT INDICATOR (**NOT REQUIRED** to earn point)

B.1.3 Developmentally Appropriate Environments

- Program has a written philosophy on developmentally appropriate practices and environment in the employee handbook and the parent handbook.

- Employee handbook page: _____

- Parent handbook page: _____