

## Additional Notes for Clarification for the FCCERS-3

Be sure to replace older notes with newer notes. **Most recent changes are in green:**

Release Date	
02-2020	Item 1, 2, 5, 6, 7, 14, 15, 17, 18, 20, 25, 27, 30, 33
08-2020	Item 2, 20
01-2021	Item 2, 17, 20, 25
02-2022	Item 22, 25
03-2022	Item 24
04-2022	Item 23
07-2022	Item 22, 24
09-2022	Item 4
10-2022	Item 15, 18
02-2024	Item 5, 6, 7, 20, 22
10-2024	Explanation of terms, Item 7, 13
<b>10-2025</b>	<b>Item 20</b>

### Explanation of Terms Used throughout the Scale:

**Disinfecting sinks between uses for different purposes:** According to Caring for Our Children (CFOC), to avoid the spread of disease, separate sinks should be used for food preparation/service, another should be used for toileting/diapering and one more should be used for all other purposes. However, it is unusual for early childhood program classrooms to be equipped with multiple sinks reserved for different uses.

New information from CFOC shows that touching sink faucets after handwashing does not add to a substantial amount of contamination. Therefore, it is no longer required that faucets be turned off with a paper towel. In addition, if sinks are observed to be used for multiple purposes, and only the faucets are touched during handwashing (e.g., no food washed in sink, no touching sink surfaces occurs), it is no longer necessary to disinfect the sinks between different uses, except when soiled or during regular cleaning. Therefore, if a shared sink is used without disinfecting, consider the relative contamination that is observed, and if minimal, consider this a minor problem when scoring the handwashing/sanitation indicators.

<b>1. Indoor space</b>	3.2	If a home has windows with dark shades or blinds on all windows that are closed throughout the observation, credit is not given since children do not experience natural light.
<b>2. Furnishings for care, play, and learning</b>	5.1	The additional note for 1.1 and 3.1 also applies to indicator 5.1.
	3.1, 5.1	If a smaller diapering table or other diapering surface is used, but it is not long and/or wide enough to accommodate the child's whole body, give credit for 3.1 but not for 5.1.
	5.2, 7.1	Child sized tables/chairs are not required for either of these indicators. For Indicator 5.2, credit can be given even if the tables/chairs must be adapted in some way to the children's size, for example, adult furniture is used with booster seats. For 7.1, a "child appropriate table with chairs" means that it is furniture purchased for young children to use. It does not necessarily meet the child-sized definition, found in the ITERS-3 or ECERS-3, meaning that the child's feet rest on the floor, knees fit comfortably under the table and elbows rest comfortably on the top of the table without having to raise the arms. Instead, as long as the furniture requires no adaptation and is comfortable/safe for toddlers/preschoolers to use, based on abilities of children, it can be considered child-appropriate.
	5.3	Older children are required to have access to their personal storage in this indicator. This access is not required in indicators 1.1 and 3.1.
	5.4	Several means at least two areas.
<b>4. Display for Children</b>	7.3	More than 1 example is required
<b>5. Meals/snacks</b>		<p>Based on new guidance from the resource Caring for Our Children (CFOC), updated 09/2023, it is no longer required that the faucet be turned off with a paper towel. According to CFOC's updated notes, programs may turn off the faucet during handwashing to save water. Programs do not need to leave the water running because data has not shown that a significant number of germs are transferred between hands and the faucet. At the end of the procedure, faucets may be turned off with or without a paper towel depending on program requirements. Research has shown that using a paper towel to turn off the faucet does not improve health. A handout, Diapering and Handwashing Procedure, is available on the ERSI website, <a href="http://www.ersi.info">www.ersi.info</a> and contains the complete handwashing procedure.</p> <p>If a mealtime is not observed during the 3 hours, indicators 1.1 and 1.2 should be scored, "yes." All other indicators related to nutrition, interactions and schedule should be scored, "no." Score indicators related to sanitation based on other observed sanitary practices if no sanitary practices related to meals take place during the 3-hour observation.</p> <p>1.2, 3.1, 5.2 When deciding whether foods observed being served at meals may be choking hazards, consider all foods offered. To score 1.2 Yes, most foods must be inappropriate, with many problems. For 3.1, generally appropriate means there may be a minor problem observed, but the children are not observed being affected. For example, there may be a food that might cause choking but children eat the food with no problems. To score 5.2 Yes, there can be no safety issues with the appropriateness of the food.</p> <p>3.4 To score No, an extremely negative interaction, or many mildly negative interactions must be observed.</p>

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6. Diapering/toileting	<p>Based on new guidance from the resource Caring for Our Children (CFOC), updated 09/2023, it is no longer required that the faucet be turned off with a paper towel. According to CFOC's updated notes, programs may turn off the faucet during handwashing to save water. Programs do not need to leave the water running because data has not shown that a significant number of germs are transferred between hands and the faucet. At the end of the procedure, faucets may be turned off with or without a paper towel depending on program requirements. Research has shown that using a paper towel to turn off the faucet does not improve health. A handout, Diapering and Handwashing Procedure, is available on the ERSI website, <a href="http://www.ersi.info">www.ersi.info</a> and contains the complete handwashing procedure.</p> <p>3.2, 5.2 When older four-year-olds or school-aged children are present, they have no toileting accidents, and the toilet is clearly freely accessible to them, it is not necessary to observe they have used the toilet.</p> <p>3.4 To score No, an extremely negative interaction, or many mildly negative interactions must be observed.</p>
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7. Health practices	<p>Based on new guidance from the resource Caring for Our Children (CFOC), updated 09/2023, it is no longer required that the faucet be turned off with a paper towel. According to CFOC's updated notes, programs may turn off the faucet during handwashing to save water. Programs do not need to leave the water running because data has not shown that a significant number of germs are transferred between hands and the faucet. At the end of the procedure, faucets may be turned off with or without a paper towel depending on program requirements. Research has shown that using a paper towel to turn off the faucet does not improve health. A handout, Diapering and Handwashing Procedure, is available on the ERSI website, <a href="http://www.ersi.info">www.ersi.info</a> and contains the complete handwashing procedure.</p> <p>1.3 To score Yes, the observed environmental risk must present an extreme hazard to the children and be likely to cause a major health risk. For example, if many cigarette butts are observed within easy reach and supervision is lax, or obvious animal excrement is widespread in actively used play spaces, score Yes. However, if any environmental problems do not create a high risk, and supervision decreases the risk, score No.</p> <p>Replace original note for 3.3, 3.4, 5.3, 5.4 with the following:</p> <p>3.3, 5.3 Nap/rest may not be observed within the 3-hour observation. The observer may decide to remain after the observation to see how sleeping equipment is placed but this is not required. Score these indicators NA if no nap related evidence is observed, such as cots or bedding storage, placement of cribs/cots. Score 3.3 No if any major problem is observed (e.g., substantial touching of children's bedding), even if crib/cot/mat placement is not seen. Score indicator 5.3 NA if placement of sleeping equipment is not observed unless there are other sanitary nap-related issues that require a score of No. To score 3.3 and 5.3 Yes, placement of sleeping equipment must be observed.</p> <p>3.4, 5.4 Score NA if children show no signs of having sleep/rest problems during the observation and nap/rest is not observed during the 3-hour observation. However, if evidence is observed of children being tired and not having sleep needs met, or if children are not tired when expected to sleep, score as evidence required.</p>
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<b>13. Provider use of books with children</b>	5.1	This indicator requires that the provider reads a complete book, unless the child(ren) clearly lose interest before the book is finished. The observed book reading should be long enough to be a meaningful and engaging experience for child(ren) to be counted. Singing the text of a book can count as “reading aloud.” In addition, reading picture labels in picture-word books can be counted as “reading aloud” to infants and toddlers.
<b>14. Encouraging children’s use of books</b>	5.3, 7.2	NA permitted applies only to infants who are unable to sit unsupported.
<b>15. Fine motor</b>	3.1	The fine motor materials must be accessible to score 3.1 Yes.
	1.3, 3.3	If no fine motor materials are observed to be accessible, score No. If materials are accessible but children do not choose to use them, then the provider must be observed encouraging their use at least once to score 1.3 No and 3.3 Yes.
<b>17. Music and movement</b>	1.2	Change the word “day” to “observation” in the indicator text.
	3.4	The intention of this indicator is that the provider offers the children a music experience that is not informal singing. Therefore, even if informal singing is not observed, credit can be given if another type of music activity is observed.
		This indicator requires <i>one staff-initiated</i> music or movement activity that is not counted as informal singing. <i>Either</i> a “music activity” can be observed such as a formal singing time, finger plays, listening to recorded music or playing music instruments. Movement is a type of music activity that requires use of large muscles when moving/dancing to music. The staff may initiate such activity with one child or in a group.
	3.5, 5.3	If only one child is present, then a provider-led music activity is acceptable with just that one child participating.
	3.4	The intention of this indicator is that the provider offers the children a music experience that is not informal singing. Therefore, even if informal singing is not observed, credit can be given if another type of music activity is observed.
<b>18. Blocks</b>		Alphabet blocks can be considered blocks for children birth to age 3. However, larger blocks that older children can use to build sizable structures are required. (The book indicates the note below is for 1.1, it is for 1.2.)
		If no child plays with blocks and the provider does not encourage block play in any way, then score Yes.

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**20. Nature/science**

***Kinetic sand can count as an appropriate sand/water substitute but should not be used with children under 3 years of age or with children who tend to mouth materials because it poses a safety hazard if ingested.***

- 1.3 If the only observed nature/science staff involvement is negative, such as stepping on a cockroach indoors, killing a mosquito, or telling a child about her fear of snakes, then score this indicator Yes. However, if there are also positive instances observed, such as showing interest in plants, animals or the weather, and these outnumber the negative, score No.
- 3.1 Change the current note to: This indicator specifies “at least 5 pictures, books, games or toys” that represent nature realistically.” Even if other appropriate nature/science materials are accessible, credit should not be given here since the item refers specifically to pictures, books, games, or toys that represent nature realistically.
- 5.1 The ten materials, representing two categories, do not include sand/water, which is considered separately in this indicator. For sand and /or water to be counted as accessible, children must be able to reach and use them during the observation for a reasonable amount of time that allows satisfying productive play, but not necessarily for the amount of time to meet “accessibility” at the 5 level of quality for other materials. If weather does not permit outdoor use, then sand and/or water must be made accessible indoors.

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**22. Appropriate Use of Screen Time**

In some settings computer screen savers are used on monitors as a constant part of the environment. If children are not using the technology, or being made to watch it as an activity and are not observed to be attracted to it in any way then do not consider this in scoring.

If a child spends a very brief time using screen time (less than 5 minutes) and this is a rare occurrence during the observation, mark the item NA.

- 1.2 If the use of screen time with children is very short and engaging to the children, no other activity is required to be accessible, and a score of NA can be given.
- 3.2 Remove "24 months and older" in the original Notes for Clarification in the actual scale.
- 5.1 Remove "24 months and older" in the original Notes for Clarification in the actual scale.

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**23. Promoting acceptance of diversity**

- 7.1 To give credit for 7.1, 5.1 must be scored Yes, indicating the required diversity in materials is observed in addition to the diversity in the learning activities.

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**24. Gross Motor**

- 3.2, 5.1 Because of possible timing error, a two-minute exception is allowed because it is so difficult to track time to the second. However, no more than two minutes can be lacking to meet the time requirements in these indicators.
- 5.2 This indicator must be scored Yes or No. A score of NA is not permitted, even if only infants are present on the day of the observation.

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<b>25. Supervision of gross motor play</b>	3.1, 5.1	To give credit for these indicators, some outdoor gross motor play must be observed for children 12 months and older, weather permitting. There is no specific time requirement for outdoor gross motor play, but it must be enough time to be a satisfying experience for the children.
	7.1, 7.2	Evidence for both indicators must be observed during the observation.
	7.2	<del>Only one example is required. If either helping a child to develop a new skill or use more challenging equipment is observed, score Yes.</del> The indicator requires that the provider helps children develop a new gross motor skill and/or to use more challenging equipment. Only one of these needs to be observed. (Replaced previous note for clarification)
<b>27. Provider-child interactions</b>	3.3, 7.2	In some cases, a provider may show mild negativity with a child. If this happens very infrequently and other responses are overwhelmingly positive, 3.3 can still be scored Yes. However, if mild negativity is observed more often, score No.
<b>30. Interactions among children</b>	7.3	The intent of this indicator is for the provider to “teach” children how to work or play together in a satisfying way. It requires more than just making materials accessible and telling children to use them at the same time. For example, putting out a bin of interlocking toys and having children build independently with them is not enough to give credit. The provider must actively encourage children to work or play together, so they coordinate and cooperate in what they are doing in a way that is appropriate based on their abilities.
<b>33. Group time</b>	5.3	Delete the note that says to see the definition of accessible at beginning of scale. It does not apply here. The alternate materials should be accessible during the group time.

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