



**ASEAN EARLY CHILDHOOD CARE,  
DEVELOPMENT AND EDUCATION  
QUALITY STANDARDS**

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## ANNEX 14

ASEAN EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION (ECCDE)  
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## **1.0 PREAMBLE**

All ASEAN Member States (AMS) have ratified the Convention on the Rights of the Child (CRC) which has 54 articles covering four major categories of child rights, namely, the right to life, the right to protection, the right to development and the right to participation. Education is one of the major vehicles through which children develop. With knowledge, skills, attitudes and values acquired through education, children are equipped to survive in their adulthood through ability to work, and enjoy quality of life as well as they are empowered to protect themselves from ill harm and danger, which include discrimination and violence, through knowing their rights.

Early child care, development and education has in recent years been increasingly acknowledged by experts, policy makers, governments and parents as a critical foundation for children's development. This acknowledgement is due to the scientific findings of neuro-scientists that reveal the importance of experiences in the first five years of the child's life, especially their interactions with people and the environment. Psychologists coined the term, "formative years", to describe these early years.

The brain of young children needs good experiences, such as loving care, breast milk, nutritious food, proper healthcare, safe, healthy environment and good curriculum activities, to develop. Negative experiences such as unmet needs (e.g. unattended cries due to hunger, thirst and discomfort), rough handling, abuse and any form of violence may have an adverse impact on the developing brain. These experiences release stress hormones or cortisol. Stresses can be beneficial, tolerable or harmful, depending on how much of a bodily stress the environment provokes and for how long. Toxic stresses, that are frequent and sustained, can alter the brain architecture leading to impairment of memory and learning, health problems and even psychopathology in later years.

All ASEAN Member States (AMS) are cognizant of the importance of the early years, especially the first five years, of a child's life. But, early childhood care, development and education (ECCDE) and access to ECCDE are not at the same stage of development in all the AMS.

## **2.0 WHY IS QUALITY EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION NECESSARY FOR ASEAN MEMBER STATES**

Research findings of psychologists, economists, neuro-scientists and educationalists found that, for ECCDE to benefit children, experiences provided have to be of quality. Several decades of relevant research have shown that early childhood care and education of good quality has consistent and positive short-term and long-term effects on children's development in low-, middle-, and high-income countries (Yoshikawa & Kabay, 2015). The Report on Early Childhood Education and Care submitted to the European Commission Directorate General for Education and Culture (2011) stated that "Early childhood education and care is only good investment if it is of high quality. Poor care may do more harm than good for the most vulnerable children." (p.31). It went on to elaborate, "There is a consensus across a wide range of child development research in several countries that good quality ECEC provision produces good outcomes, and conversely poor provision leads to worrying

outcomes, including negative and aggressive behaviour and poor language development. This is especially the case for very young children”.

With the overwhelming evidences of the need for quality early childhood care and education (ECCE), AMS have to ensure that childcare and preschool or kindergarten services are of quality. If not, the services of early childhood care and education can harm children’s development instead of promoting it.

### **3.0 WHY IS QUALITY STANDARDS IMPORTANT IN EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION?**

Besides the need for the brain to have experiences in the form of interactions with people and environment to develop, it is developing rapidly. The developing brain reaches 80% of the adult size by age 3 and 90% by age 5. During this rapidly developing period, the brain is most sensitive to environmental influences which can be positive or negative. The probability of exposing to harmful environment influences or experiences is high. Therefore, there is a need for quality standards to provide guideline to assure children are exposed to not only minimum harmful environmental influences but also to loving care and meaningful learning.

Early childhood learning and development can be an irreversible process, implying that detrimental effects on a child’s development may not be able to be undone. The presence of toxic stress in a child’s brain must be avoided at all costs because it can alter the brain’s architecture which have lifelong consequences. Therefore, it is not only essential for children to have access to early childhood care, development and education but it is also critical for them to have access to quality early childhood care, development and education. Early childhood care, development and education has to be of a minimum standard which should be a regulatory requirement to assure children are not subject to harmful practices.

### **4.0 WHAT ARE QUALITY STANDARDS?**

Early childhood care, development and education standards, like other quality standards, such as the ISO International Standards, are to ensure the product and services are safe, reliable and of good quality. A standard is a document that provides requirements, specifications, guidelines or characteristics that can be used consistently to ensure that materials, products, processes and services are fit for their purpose.

More specifically, quality standards are a set of concise statements of expectations or benchmarks to assure clients that the services they are purchasing are high quality. Quality standards also serve other purposes. The minimum quality standards are not just benchmarks of quality care, development and education. They provide a structure for early childhood care and education practitioners/service providers to systematically evaluate themselves and improve their services besides enabling them to make decisions about care and educational practices based on the latest evidence and good practice. The standards also provide a framework to monitor compliance with regulatory requirements. Furthermore, quality standards provide parents/clients with information about the quality of care and educational services they should expect from the programme or organization. Lastly, quality

standards create a common understanding of quality early childhood care, development and education.

## **5.0 ASEAN EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION (ECCDE) QUALITY STANDARDS**

Though minimum standards are relative and what is considered to be of minimum standard in one country, may be of high quality in another, it is nevertheless needful for ASEAN to set a baseline for quality early childhood care, development and education. This baseline specifies the basic ingredients for quality assurance of early childhood care, development and education in AMS. In short, minimum ECCDE quality standards specify the basics of early childhood care, development and education services to assure children's safety, adequate physical, mental and health care, age appropriate learning and development.

The ASEAN ECCDE Quality Standards consists of two ECCDE quality standard tools – one quality standards tool for childcare services for children of 4 years of age and below while the other is quality standards tool for preschool/kindergarten for children of 4-6 years of age. Each of these quality standard tools has 9 components – Relationships; Curriculum; Teaching and Learning; Assessment of Child Progress; Safety, Health and Nutrition; Physical Environment; Staff; Partnership with Families and Community; and Management and Leadership. For each of the components, there are Indicators. Each indicator specifies the requirements, specifications and/or characteristics of the process, product and/or service. These two tools are in Addendum A for Quality Standards for Childcare Services and Addendum B for Quality Standards for Preschool Services.

Some ASEAN Member States may have quality standards that have exceeded the ASEAN ECCDE Quality Standards. But this does not invalidate the ASEAN ECCDE Quality Standards. These AMS can continue to strive for better and better quality ECCDE. As the quality of ECCDE improves in AMS, the ASEAN ECCDE Quality Standards should also increase in its demand for quality. In short, the ASEAN ECCDE Quality Standards should be an evolving tool for judging and demanding for quality early childhood care, development and education services for the young ones to give them a sure and right start in life.

## **6.0 RATING SYSTEM**

A quality rating system is also needed to indicate whether the service is exceeding, meeting or not meeting the quality standards. The rating system should give clear and precise information not only to parents but also to service providers for the rating imparts information of their standing on the quality scale. In addition, the rating system provides a mechanism for the government to judge and monitor the quality of the services of the early childhood practitioners/service providers.

To get a score for each of the components and the total score for the whole quality standards tool, a rating scale is needed. It can be a 3-, 5- or more point scale. If it is a 3-point scale, the categories, for example, can be "All the Times", "Sometimes" and "Never" with score of 2 for "All the times", 1 for "Sometimes" and 0 for "Never". However, instead of using a rating scale to score the quality of the services, the quality standards tool can be a

checklist with a score of 1 if it present and 0 if it is not. For instance, for the indicator, “Teachers recognize children’s efforts and work through listening, praising, encouraging and displaying their work” a score of 1 is given as long as the teachers acknowledge children’s efforts and work whether it is all the times or sometimes while a score of 0 is given if this behaviour is not observed at all in the teachers.

The ASEAN ECCDE Quality Standards does not specify the rating system for ASEAN Member States; it provides only the indicators for minimum quality standards for childcare and preschool services. It will be the prerogative of the individual ASEAN Member States to select the rating system. The rating system can be a checklist or of rating scale format which can range from a simple 3-point to a very sophisticated scale. The individual ASEAN Member States will also have to determine their expectations of quality of the childcare or preschool services – whether the service providers have to achieve 50%, 70% or whatever percentage of the total score of the quality standards tool to qualify for attainment of the minimum quality.

## **7.0 GUIDELINES FOR IMPLEMENTATION OF ASEAN EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION (ECCDE) QUALITY STANDARDS**

Owing to the importance of experiences on the developing brain of children in their formative years, it is critical that the care, development and education services provided to children during this period have the basics of quality care, development and education. The ASEAN ECCDE Quality Standards serves as a guide to AMS for judging whether the services provided by the public and private sectors meet the basics of quality care, development and education. However, this guide does not restrict AMS to the indicators in the nine (9) components of the ASEAN ECCDE Quality Standards. AMS have the freedom to add more indicators and even more components or may omit some indicators which are not relevant to their situations. AMS can have higher quality standards but hopefully not below the basic requirements of quality care, development and education. In some cases, early childhood care, development and education, especially childcare services, are in the early stages of development. In such cases, the ASEAN ECCDE Quality Standards serve as standards to attain.

In addition to the flexibility in the usage of the ASEAN ECCDE Quality Standards, the following principles are suggested:

### **7.1 *Contextualizing ASEAN ECCDE Quality Standards***

Though all 10 AMS participate in the development of the ASEAN ECCDE Quality Standards (which may be referred to as Quality Standards), the ASEAN ECCDE Quality Standards need to be contextualized, especially the terms and examples. For example, E3.4 in the Quality Standards for Childcare Services: List of children with chronic health problems (the examples given may not be common in a Member State while those which are common, are not listed. In such a case, the examples can be changed). E3.8 in the Quality Standards for Preschools: “Compulsory immunisation (e.g. typhoid and hepatitis) for all staff handling food in compliance with regulatory requirement.” If this is not a regulatory requirement in the AMS, then this indicator can be removed though this precautionary measure is important.

However, there are indicators which are highly recommended to be retained even though the practices may not be common in the childcare or preschool services in the AMS. For instance, in D2.1, “Teachers use a variety of authentic assessment methods in various settings to obtain information regarding children’s growth, development and progress in all domains” should be retained, although this method is generally not practised in preschools in the Member State. On the other hand, workbooks and tests, the traditional methods of testing, may be the normal practices in preschools in the AMS. But, these methods can be an unfair way of assessing learning and progress of children in their formative years, especially children from disadvantaged backgrounds. In addition, labelling them at this young age can affect adversely their potential. (Please refer to Glossary for “authentic method”).

## **7.2 Field Testing**

When the ASEAN ECCDE Quality Standards have been translated into the national language or the languages used in the childcare and preschool services, it is highly advisable to field test to ensure the end users understand the indicators, especially when technical terms are used. Any misunderstanding of the meaning or intent of the indicators will affect the assessment of the quality of the services. Certain technical terms, in many cases, are unavoidable. In such cases, a glossary may be necessary. Back translation (that is, from the translated version to English) to ascertain the accuracy of the translation can also be conducted.

The field testing should be conducted in a variety of settings such as urban and rural settings and in the different languages used in the childcare and preschool services, if applicable. If there is substantial editing, another field test may be necessary.

## **7.3 Quality Improvement**

The ASEAN ECCDE Quality Standards are for benchmarking the quality of the childcare and preschool services. However, a more important purpose of the Quality Standards is for improvement of the quality of care, development and education of children because their developing brains are most vulnerable to the quality of their experiences during this period. Children whose parents are not able to give them the quality of care will benefit most from quality care, development and education services. Hence, childcare and preschool services need to continuously strive to improve their quality.

It is important to impress upon childcare and preschool service providers that the implementation of quality standards is not only for benchmarking their services but also, more importantly, for them to upgrade or upscale the quality of their services. The service providers, whether they are public or private, have to be cognizant of the impact their services have on children’s development and they could morally be accountable for the compromised development of the child which can result in life-long hardships.

Campaigns may be necessary to inform early childhood practitioners, early childhood entrepreneurs, parents/families, employers, politicians and the society at large the importance of experiences on the developing brain of children in the first five years of their lives. The buy-in of stakeholders may be necessary to ensure the successful implementation of quality standards.

#### **7.4 Implementation Mechanism**

The ASEAN ECCDE Quality Standards can be self-assessment or assessment conducted by authorised personnel. The former format is preferred as the onus is on the service providers to judge the quality of their own services. However, for self-assessment, verification by authorised personnel is essential. For both formats, the results of the assessment have to be discussed with the principal or person-in-charge, especially areas which are of concern and need immediate attention (for example, practices of discrimination, abusive interactions, poorly designed programmes, compromised safety and health care). The Quality Standards also provide data on who need help, and where assistance is needed.

Secondly, the implementation of the quality standards can be on a compulsory or voluntary basis. If compulsory, all childcare and preschool services – whether public or private – will have to be assessed using the self-assessment format or assessment by authorised personnel. If it is on a voluntary basis, then incentives (such as certification, star ratings and awards) will have to be part of the implementation plan.

The implementation of Quality Standards should not only be a means to identify childcare and preschool services which need help but also those giving exemplary services. High quality childcare and preschool services can be found in any setting such as public, private, urban, rural, serving minorities, serving low socioeconomic families, and serving affluent families.

A mechanism to help childcare and preschool services, especially those which are unsatisfactory, would facilitate the improvement in quality of these services. Those who are providing exemplary services as well as lecturers in early childhood care, development and education can be mobilized to render or volunteer their assistance. The help services can impose a fee on the services rendered. This assistance mechanism needs to be developed together with the implementation of the ASEAN ECCDE Quality Standards

#### **7.5 Quality Early Childhood Practitioners**

Undoubtedly, the provision of childcare and preschool services, especially child care for children below 3 years of age, can be expensive. The cost is primarily due to the low carer to children ratio. For children below 3 years of age, the ratio of carer to children may range from 1:3 to 1:5. To reduce the cost of child care, non-professional carers with low academic qualifications are employed. The quality of child care is consequently compromised and the effect of poor care is discernible much later in life such as negative impact on cognitive development (e.g. poor memory; hence learning problem) detectable in late childhood; socio-emotional or relational difficulties, dropping out of school, conflict with the law and psychopathology during adolescence; and personality disorder and physical health problems, including heart diseases, diabetes, substance abuse, and depression during adulthood. Employing poorly qualified carers is also based on the belief that caring babies does not require much knowledge and skills. Quality preschool teachers, while not as critical as carers for children in their first three years of life, are nevertheless needed for quality preschool education.

AMS do not need to ensure **all** early childhood practitioners, whether they are carers or preschool teachers, are trained and possess the knowledge and skills to facilitate young children's learning and development before implementing the ASEAN ECCDE Quality Standards. Nonetheless, the AMS's ECCDE policy, legislation or regulations should include professional qualifications of early childhood practitioners as well as the ratio of carers/preschool teachers to children in the different age groups when the ASEAN ECCDE Quality Standards are implemented, if such requirements are not in the existing policy/legislation/regulations pertaining to ECCDE.

#### **7.6 Training of Early Childhood Practitioners**

The legislation of the qualifications of early childhood practitioners should go hand-in-hand with training facilities. Before specifying the qualifications of early childhood practitioners, whether they are carers in childcare services or preschool teachers, the authorities (which can be ministries, agency or ECCDE Council) tasked with the responsibilities of the care, development and education of children from birth to six years of age, should ensure there are adequate facilities and feasible mechanisms for the early childhood practitioners to obtain the required qualification and/or training. A framework for training of early childhood practitioners should be also part of the plan for implementation of the Quality Standards.

Early childhood practitioners need to know that quality child care, development and education does not need expensive or commercially produced equipment, tools and materials. For children to enjoy learning and to be able to use knowledge, learning has to be meaningful. This means that learning must be related to their experiences and their environments. The environment, especially in rural areas, is very rich in resources for learning colours, vocabulary, early mathematics, science and so forth while the recyclables are ideal for developing creativity in children. Musical instruments can be handmade. In making them, children are exposed to rich experiences for science learning. Therefore, the training should wean early childhood practitioners from reliance on commercially produced materials.

#### **7.7 Financial Commitments**

The implementation of the ASEAN ECCDE Quality Standards will need financial commitments of the government. The amount needed can vary from Member States to Member States. But, it need not necessarily be a heavy financial burden on the government. The financial commitment may depend on the stage of development of early childhood care, development and education in the ASEAN Member States; the more advanced the stage of its development the lower the cost as many of the machineries such as training are in place. It can also depend on how creatively the government utilizes its existing human and non-human resources.

The involvement or collaboration of the community, provincial authorities, civil society organizations and the private sector can ease the government's financial commitments. Civil society organizations can be a significant player in assisting the government in its implementation of the Quality Standards if these organizations have the human resources to provide training and personnel to prepare materials. In certain cases, they can even provide financial assistance. Civil Society Organizations such as Chamber of Commerce, Bankers Club, Women's Union and Alumnus can be the sources of financial and human resources if the government can convince them of the

importance of ECCDE and the role they can play to raise a generation of quality citizens. Employers can also contribute to the alleviation of cost as childcare services are needed by women in the workforce.

### **7.8 Capacity Building**

For the successful implementation of the ASEAN ECCDE Quality Standards, capacity building at the various levels may be needed. For some AMS, capacity building may be needed for officers who will be responsible for the implementation of the Quality Standards, from planning for the implementation to the launching of the Quality Standards. Hence, before implementing the Quality Standards, the AMS need to assess the knowledge and skills needed for its successful implementation.

Capacity building is probably needed for those who are assessing the quality of the childcare and preschool services using the Quality Standards. For childcare and preschool service providers using self-assessment and verifiers, capacity building is vital.

Capacity building is probably important to stakeholders, in particular community leaders and parents, to enable them to collaborate and contribute more effectively towards the successful implementation of the Quality Standards.

### **7.9 Regional and International Cooperation**

AMS should tap on the experiences and expertise of the other ASEAN State Members who should also, on their own accord, offer their assistance. The sharing of experiences and expertise among AMS will contribute significantly to children's right to a sure start in life, especially children in vulnerable situations.

There are also many international organizations whose expertise is in early childhood and promoting quality early childhood care, development and education is one of their core business. However, the first international organization AMS should approach for assistance – whether financial or technical – is UNICEF in their respective countries. All AMS, except for Brunei and Singapore, have UNICEF office in their capital. The other international organizations that can offer assistance include UNECSO, Asia Pacific Regional Network of Early Childhood (ARNEC), Save the Children, Bernard van Leer Foundation, Open Society and Plan International.

### **7.10 Equity in Access to Quality ECCDE**

Acknowledging that it is the right of all children to have the right to development of their potential to the highest possible, access to quality early childhood care, development and education is one of the best assurance for them to achieve it. Therefore, the purpose of implementing the ASEAN ECCDE Quality Standards is to ensure that all children, irrespective of gender, ethnicity, religious belief, socio-economic status, geographical residence and capabilities, have equal access to quality ECCDE. Hence, the ASEAN ECCDE Quality Standards will be used by or for all childcare and preschool services in all types of settings (such as public, private, urban, rural, services for children with disabilities, and services for the poor and needy).

## **8.0 GLOSSARY**

**Active listening** is listening carefully or paying full attention to what the speaker is saying and responding. The listener may use verbal and non-verbal language (e.g. using eye-contact, nodding, saying “yes’ or just “mmm, hmm) to indicate his/her attentiveness or interest. Often when people talk to each other, they do not listen attentively; they may be half listening, thinking about something else, are distracted or have made up their mind what they want to hear.

**Assessment** is an ongoing process of collecting, recording, documenting, reflecting on information data by using formal and informal strategies over a period of time to measure specific characteristics of growth, development and learning. Data can be obtained from multiple and diverse sources such as observation of the way children learn, their physical, intellectual, socio-emotional, self-help skills and development and standardized tests (such as readiness tests, developmental screening and diagnostic tests). Portfolio is another way of collecting data on children as well as a method of documenting children’s data to track children’s development and achievement (see definition of portfolio below). Assessment is necessary to get a deeper or better understanding of what children know to make important and accurate decisions about their developmental and educational needs, in order to support and enhance their future development and learning.

**Authentic method of assessing** young children is a system of observation, documentation, and analysis. It involves regular collection of information about each child’s behaviours and skills in the context of everyday activities and in a child’s natural setting through direct observation and recording, checklist and/or rating scales, interviews and work samples of children. Authentic assessments require the data to be collected from multiple sources, including family members.

**Carer** refers to a provider of childcare services whose responsibilities are the care and development of children in their formative years. Legislation may stipulate the minimum age, minimum training, physical and mental health of anyone wishing to be a carer in a childcare service.

**Childcare services** refer to alternative care provided outside the home for children especially those whose parents are in the workforce. The age groups can vary from babies and toddlers to children of preschool age.

**Curriculum** refers to intentional experiences that allow children to acquire and construct knowledge, concepts, skills, attitudes and dispositions. The experiences are gained through interactions with adults and other children and through selected materials and thoughtfully planned activities in the context of respect for cultural diversity and individual differences.

**Developmentally appropriate practice**, often abbreviated as DAP, is an approach to teaching grounded in the research on how young children develop and learn and in what is known about effective early education. In applying DAP in planning and implementing programmes or activities, teachers meet children where they are (by stage of development), as an individual and as part of a group and help each child meet challenging and achievable learning goals. In making the decision, teachers have to consider three areas of knowledge:

- a) What is known about child development and learning

This refers to knowledge of age-related characteristics that permits teachers to make general predictions about what experiences are likely to best promote children's learning and development. This helps teachers plan challenging yet achievable goals.

b) What is known about each child as an individual

This refers to what teachers learn about each child that has implications for how best to adapt and be responsive to that individual differences. This implies teachers know the strengths, interests, preferences, personalities, learning style and so forth of each child as well as his/her knowledge, skills, and abilities based on prior experiences.

c) What is known about the social and cultural contexts in which children live

This refers to the values, expectations, and behavioural and linguistic conventions that shape children's lives at home and in their communities that teachers must strive to understand so that the learning experiences in the programme or activities are meaningful, relevant, and respectful for each child and family.

**Early childhood practitioner** refers to any professional working with children, of ages 6 years and below, in early learning and development programmes such as childcare centres, preschools, kindergartens or other educational settings. Practitioners can be carers, childcare providers or preschool/ kindergarten teachers.

**Legislation refers to** law which has been enacted by a legislature or other governing bodies to ensure the service provided is of a certain standard. Legislation pertaining to early childhood care, development and education prescribes regulations which define minimum standards for any organization providing a programme for the care, development and education of children. Among others, regulations may provide procedures or guidelines for childcare or preschool/kindergarten services for planning and implementing programmes for the care, growth, development and education of children under their care, space ratio per child, ratio of staff to children, training of staff, health and safety measures (e.g. food preparation and menu), play equipment, parental involvement and mandatory requirements of other relevant government agencies. As such, regulatory requirements are those requirements imposed by the government, which can include approvals and restrictions applicable to setting up, as well as operational aspects of childcare or preschool/kindergarten services.

The regulations on facilities in childcare or preschool/kindergarten services, and carers or preschools/kindergartens can vary from ASEAN Member States to ASEAN Member States.

**Nutritious** food refers to food that is wholesome, fresh and unprocessed, which provides the necessary nutrients for optimal growth and development of the child. Children need a balanced diet with food from all four food groups – vegetables and fruit, grains, milk or alternatives, and meat or alternatives.

**Parents** is a term which includes biological parents, guardians and foster parents.

**Preschool or kindergarten** generally refers to an educational establishment offering early childhood education to children from three to six years of age prior to the commencement of formal primary school. They may be privately operated or government run, and the costs may be subsidized. In the context of the ASEAN ECCDE Quality Standards, preschool refers

to an educational institution, in the public or private sector, offering early childhood education to children from four to six years of age prior to commencement of formal primary school.

**Portfolio** is a record of the child's process of learning and development through purposeful collection of the child's work to track the child's physical, psycho-motor, intellectual, social and emotional development and achievement. It can include work samples, records of various forms of systematic observation, and screening tests, if available. Collection of work samples is important as teachers and parents can follow children's progress by reviewing their writings, drawings, videos or photographs of their projects, tape recordings of their reading and/or storytelling and so forth. The portfolio does not only track children's progress but also provides a basis for evaluating the quality of individual children's overall performance. The portfolio record the child's achievement rather than failure by keeping the best of the children's work.

**Reciprocal interaction** refers to an exchange in which individuals or objects exhibit similar behaviour, either at the same time or in a back-and-forth manner. In the context of early childhood, reciprocal communication/interaction is a type of communication in which children use verbal and nonverbal behaviours to engage in mutual, interactive dialogue which facilitates development in all domains in all ages of children in all early childhood settings.

**Self-care** means looking after oneself through carrying out everyday life activities such as feeding oneself, using the toilet, dressing and undressing, washing (including hand washing), grooming (including teeth and hair brushing), and taking care of belongings. Children are taught these skills to help them to care for themselves/look after themselves.

A **standard** is a document that provides requirements, specifications, guidelines or characteristics that can be used consistently to ensure that materials, products, processes and services are fit for their purpose

**Quality standards** for early childhood care and education are a set of concise statements of expectations or benchmarks to assure clients that the services they are purchasing are of high quality. They provide a structure for early childhood care and education practitioners/service providers to systematically evaluate themselves, make decisions and improve their services. The standards also provide a framework to monitor compliance with regulatory requirements.

**Teacher refers to a** professionally trained person working in a preschool or kindergarten whose main responsibility is to effectively provide warm, positive interactions and high quality learning environments to optimally promote children's learning and development as well as to inculcate values in children (such as respect for others irrespective of age, gender, ability, social standing, religion and culture; care or the environment; and problem solving through peaceful negotiations) through class activities and modelling.

A **vulnerable** child is defined as being under the age of 18 years and currently at high risk of lacking adequate care and protection. By nature, all children, compared to adults, are vulnerable but some are more critically vulnerable than others. These include orphans; children abandoned by parents or living in poverty; children with disabilities; children from broken or drug/alcohol addicted families; children belonging to minority/indigenous group;

and marginalized/stigmatized and abused children. These children need special care, support or protection.

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# **ANNEX**

**ASEAN EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION (ECCDE)  
QUALITY STANDARDS: ASEAN QUALITY STANDARDS FOR CHILDCARE SERVICES  
(For Children from Birth to 4 Years of Age)**

**PREAMBLE**

The ASEAN Quality Standards for children of four years of age and below is part of the ASEAN Early Childhood Care, Development and Education (ECCDE) Quality Standards. This Quality Standards is for assessing the services offered for the care, development and education of children in ASEAN aged four and below. For convenience, these services shall henceforth be referred to as “childcare services”

The Quality Standards consists of nine quality areas known as components, each of them containing sub-components and indicators. The nine components and their sub-components are as follows:

- A. Relationships
  - A1 Building Positive Relationships between Staff and Children
  - A2 Building Positive Relationships between Children and Children
  - A3 Building Positive Relationships between Staff and Families
  - A4 Building Positive Relationships between Staff and Colleagues
  
- B. Curriculum
  - B1 Essential Characteristics of the Curriculum
  - B2 Area of Development: Physical Development
  - B3 Area of Development: Language Development
  - B4 Area of Development: Prewriting and Writing
  - B5 Area of Development: Cognitive Development
  - B6 Area of Cognitive Development: Creative Expressions
  - B7 Area of Development: Socio-emotional Development
  - B8 Values, Cultures and Humanities
  - B9 Learning Difficulties
  
- C. Teaching and Learning
  - C1 Planning for a Responsive Curriculum
  - C2 Establishing a Caring and Supportive Learning Environment
  - C3 Implementing Meaningful Learning Experiences
  - C4 Promoting Positive Behaviour of Young Children
  
- D. Assessment of Child Progress
  - D1 Evaluating Children’s Learning and Development
  - D2 Methods of Assessment and Documentation
  - D3 Communicating Assessment Outcomes to Parents
  
- E. Safety, Health and Nutrition
  - E1 Managing Indoor and Outdoor Safety
  - E2 Child Safety Practices

- E3 Managing Illnesses and Emergencies
- E4 Personal Hygiene
- E5 Monitoring of Child Health
- E6 Nutritional Needs and Child Well-being
  
- F. Physical Environment
  - F1 Location and Infrastructure
  - F2 Indoor and Outdoor Spaces
  
- G. Staff
  - G1 Staff Qualification
  - G2 Knowledge, Skills and Values
  - G3 Professionalism
  
- H. Partnership with Families and Community
  - H1 Collaborating with Families and Communities
  - H2. Collaborating with the Community
  
- I. Management and Leadership
  - I1 Management and Policies
  - I2 Staff Management and Welfare
  - I3. Leadership Roles and Responsibilities

ITEM	INDICATOR
<b>A.</b>	<p><b>RELATIONSHIPS</b></p> <p>During the formative years, interactions with people and the environment are needed for the neurons or brain cells to connect to form neural pathways. Building positive relationships is fundamental to quality early childhood care, development and education. The relationship between staff and children is critical because warm, loving relationships of the staff with all children under their care affect the environment in the centre and, hence, children’s learning and development. Without respecting all children and practising non-discrimination, a warm, loving relationship cannot be developed between staff and children. The other important relationships in the centre which influence the centre’s climate are relationship between children and children, relationship of the centre with families and relationship among the staff. Therefore building positive relationships of all these four types of relationships is vital to quality ECCDE.</p>
<b>A1</b>	<b>Building Positive Relationships between Staff and Children</b>
A1.1	Staff treat children with warmth and respect at all times regardless of background, personalities and abilities
A1.2	Staff provide opportunities for children to interact with them at all times
A1.3	Staff recognize children’s efforts and work through listening, praising, encouraging and display of their work

A1.4	Staff respond promptly in developmentally appropriate ways to children’s basic needs (such as curiosity, learning needs, hunger, physical discomfort and distress) without the use of any form of violence (such as display of displeasure, aggressiveness, and anger)
<b>A2</b>	<b>Building Positive Relationships Between Children and Children</b>
A2.1	Children are provided with opportunities to develop skills for:
	a) helping others
	b) pro-social behaviour (e.g. sharing and taking turns)
<b>A3</b>	<b>Building Positive Relationships Between Staff and Families</b>
A3.1	Centre has a centre policy on:
	a) staff–parent communication
	b) family/parent participation in centre activities
A3.2	Staff communicate with parents on child progress and exchange information
<b>A4</b>	<b>Building Positive Relations Between Staff and Colleagues</b>
A4.1	Staff act professionally and ethically towards all colleagues, irrespective of background, personality and position
A4.2	Staff support one another through:
	a) sharing of information and resources
	b) teamwork
A4.3	Staff are friendly and warm towards their colleagues

## **B. CURRICULUM**

Curriculum refers to intentional experiences that allow children to acquire and construct knowledge, concepts, skills, attitudes and dispositions. The experiences are gained through interactions with adults and other children and through selected materials and thoughtfully planned activities in the context of respect for cultural diversity and individual differences. The design, contents and implementation of an early childhood curriculum is a significant contributor to the quality in childcare services. Implementation of the curriculum that (a) is sensitive to the developmental capabilities and backgrounds of the individual children, (b) addresses all the domains of children’s development, and (c) promotes children’s active participation in the learning process, contributes to children’s development and positive long-term achievements in academic settings. The curriculum component consists of Essential Characteristics of the Curriculum; Developmental Domains of Children (such as Physical, Language, Cognitive, Creative Expression and Socio-emotional Development); Values, Culture and Humanities; and Learning Difficulties.

<b>B1</b>	<b>Essential Characteristics of the Curriculum</b>
B1.1	Centre has a written statement on: a) philosophy for inclusive, holistic development and developmentally appropriate practices
	b) goals and objectives of its programme to support and promote children's learning and development
B1.2	Centre has yearly, weekly and daily schedules comprising routines and activities which are age appropriate and flexible to accommodate individual needs. These activities encompass: a) indoor and outdoor play
	b) a balance of active and sedentary activities
	c) creative activities
	d) large and small group and individual work
	e) child-initiated activities
	f) assessment of children's learning, growth and development
B.1.3	The curriculum promotes and shows acceptance of diversity (such as ethnicity, culture, age, ability and gender)
<b>B2</b>	<b>Area of Development: Physical Development</b>
B2.1	Children are provided with suitable and safe materials, equipment and hands-on activities for development of: a) visual tracking for infants
	b) physical strength and gross motor skills (e.g. throwing a ball, kicking a ball, jumping with both legs, and climbing outdoor play equipment)
	c) fine motor skills and hand-eye coordination (e.g. colouring with crayons, finger printing, threading, picking and arranging small items in the environment and using a pair of scissors to cut)
<b>B3</b>	<b>Area of Development: Language Development</b>
B3.1	Children are provided with opportunities to develop verbal and non-verbal communication and comprehension through: a) listening to conversations, rhymes, songs and stories
	b) listening and responding to instructions
	c) communicating needs, experiences and thoughts
	d) asking questions
	e) engaging in conversation

B3.2	Children participate in daily literacy activities such as storytelling, singing, rhyming, and finger play
B3.3	Children have access to a variety of age-appropriate books and materials that promote reading, sharing and discussion
<b>B4</b>	<b>Area of Development: Pre-Writing and Writing</b>
B4.1	Children have opportunities to develop pre-writing (e.g. scribbling, drawing lines and circles) and writing skills using suitable materials (such as sand, paints, crayons, pencil and paper)
<b>B5</b>	<b>Area of Development: Cognitive Development</b>
B5.1	Children are provided with a variety of hands-on materials and activities to acquire thinking and learning skills in numeracy such as:
	a) pre-numeracy (sorting, classifying and ordering)
	b) early numbers
	c) counting
B5.2	Children are provided with a variety of hands-on materials and activities to acquire basic concepts so as to make sense of the environment such as:
	a) observe objects and natural phenomena
	b) question and reason about their environment
	c) appreciate and care for the environment
<b>B6</b>	<b>Area of Cognitive Development: Creative Expressions</b>
B6.1	Children are provided with opportunities to explore and express themselves creatively through body movement, songs, dance, storytelling, drama, simple musical instruments (including improvised musical instruments), etc.
B6.2	Children are provided with a variety of materials (including recyclables) to foster creativity
B6.3	Children have opportunities to engage in pretend, role and imaginative play
<b>B7</b>	<b>Area of Development: Socio-emotional Development</b>
B7.1	Children are provided with opportunities to engage and interact in group activities to develop:
	a) basic trust through reciprocal interactions with carers in the centre
	b) positive self-concept
	c) social competence through interactions with adults and peers
	d) self-help
	e) patience

	f) self-regulation
B7.2	Children through interactions, have opportunities to learn and practise:
	a) turn-taking
	b) sharing
	c) empathy
	d) problem-solving through negotiation
<b>B8</b>	<b>Values, Cultures and Humanities</b>
B8.1	Children are provided with opportunities to know and respect each other's religion and beliefs
B8.2	Children are provided with a variety of hands-on activities to value and care for the environment
B8.3	Children have opportunities to participate in activities that reflect respect for cultural diversity
<b>B9</b>	<b>Learning Difficulties</b>
B9.1	Staff can recognize obvious signs of delayed development and learning difficulties
B9.2	Appropriate actions are taken for intervention (e.g. remedial activities/programmes, referral to professionals) for children with delayed development and learning difficulties

### **C. Teaching and Learning**

In any early childhood programme, teaching and learning approaches and strategies that guide children's learning, behavior and development and support the holistic development of young children are needed to provide children with a right start in their formative years. Effective strategies involve (a) planning and implementing developmentally appropriate experiences that enhance children's growth in all developmental domains; (b) creating a learning environment that promotes exploration, play, individual, small and large group activities, and appropriately challenging experiences in the context of respect for diversity in culture and background, and for special developmental needs of children; (c) providing meaningful learning that is relevant to life experiences and is focused on the here and now; and (d) responding to children's interests and needs (e.g. attending to baby's cries and need for attention). Using positive, non-violent approaches and techniques to guide children to elicit socially acceptable behaviour is another critical teaching-learning strategy.

<b>C1</b>	<b>Planning for a Responsive Curriculum</b>
C1.1	Staff have a written weekly plan for learning activities and routines taking into account children's interests

C1.2	Staff have written daily lesson plans that include clear growth and developmental milestones, date, time, objectives/learning outcomes, materials and equipment, activities, conduct of the lesson and reflection
C1.3	Staff have written plans for monitoring and assessing children's growth and development
<b>C2</b>	<b>Establishing a Caring and Supportive Learning Environment</b>
C2.1	Staff provide children with a variety of developmentally appropriate materials, toys, tools and equipment that: <ul style="list-style-type: none"> <li>a) meet safety and health standards</li> </ul>
	<ul style="list-style-type: none"> <li>b) encourage sensory stimulation</li> </ul>
	<ul style="list-style-type: none"> <li>c) engage children's interest and foster exploration and initiative</li> </ul>
C2.2	Staff organize space and materials for activities to: <ul style="list-style-type: none"> <li>a) encourage exploration and discovery</li> </ul>
	<ul style="list-style-type: none"> <li>b) allow for individual and group work</li> </ul>
	<ul style="list-style-type: none"> <li>c) reduce conflict</li> </ul>
	<ul style="list-style-type: none"> <li>d) allow easy access to materials</li> </ul>
C2.3	Staff are sensitive to developmental delays and problems, and are able to respond appropriately
C2.4	Staff provide positive support and guidance to children individually
<b>C3</b>	<b>Implementing Meaningful Learning Experiences</b>
C3.1	Staff prepare, organize and implement activities that are relevant to or based on children's experiences and/or real life situations
C3.2	Staff use a variety of teaching-learning approaches such as demonstrating, modelling, scaffolding, questioning, exploring, discovering and experimenting
C3.3	Staff provide positive feedback to build confidence, promote learning and develop thinking skills
C3.4	Staff arrange visits to places for meaningful and experiential learning such as markets, gardens, parks, playgrounds, farms, beaches, libraries, etc., in compliance with health and safety regulations and procedures
C3.5	Staff foster self-help skills in children using daily routines (e.g. dressing themselves, tidying up, putting away toys, setting and clearing of tables)
C3.6	Staff foster independence by providing opportunities for making choices and participating in decision making
C3.7	Staff provide socializing and learning experiences during caregiving routines such as feeding and meal times, diapering, bathing and napping

C3.8	Staff respond to baby's early communication by showing interest and positive reinforcement through: a) facial expression and body language
	b) using adult language and avoiding baby talk
<b>C4</b>	<b>Promoting Positive Behaviour of Young Children</b>
C4.1	Staff implement rules and expectations fairly and consistently
C4.2	Staff comfort and reassure children in stressful situations
C4.3	Staff provide support and guidance for children who: a) have special needs
	b) use violence against others and who are victims of violence (e.g. bully or are bullied)
C4.4	Staff use positive, non-violent approaches to guide behaviour/discipline children
C4.5	Staff model socially acceptable behaviour such as saying "please" and "thank you"
<b>D.</b>	<b>ASSESSMENT OF CHILD PROGRESS</b>  Assessment encompasses procedures used to obtain valid and reliable information about the individual child's development. The procedures include observing and children in a variety of settings to obtain information about their growth, achievement levels, levels of acquired knowledge, skills, interests, understanding and dispositions, and documenting the information in portfolios. Assessment procedures also comprise evaluating the assessment information and communicating the information to parents or guardians.  Assessment also provides information needed for appropriate curriculum planning as well as for decisions about the strategies for fostering development and learning of children, especially those who are not achieving developmental milestones.
<b>D.1</b>	<b>Assessing Children's Learning and Development</b>
D1.1	Staff observe and document children's responses to the caring and learning activities and make recommendations for improvement
<b>D2</b>	<b>Methods of Assessment and Documentation</b>
D2.1	Staff use a variety of authentic assessment methods (including work samples) in various natural settings to obtain information regarding children's growth, development and progress.
D2.2	Staff use portfolios to document children's efforts, progress and achievement (this may include developmental milestones, records of observations, photographs and work samples of children in various settings)
D2.3	For children of 18 months and below, observation and documentation include developmental progress and daily routines (such as feeding, naps and bowel

	movement)
<b>D3</b>	<b>Communicating Assessment Outcomes to Parents</b>
D3.1	Staff communicate with parents on the assessment outcomes, follow-up activities (including recommendations for further action) and any concerns in verbal and written forms, on a daily, monthly, or termly basis when necessary

<b>E. SAFETY, HEALTH &amp; NUTRITION</b>	
<p>Good health, safety and proper nutrition are basic elements for young children’s growth, development and learning. They are more able to fully develop physically, cognitively, socially, and emotionally when their health and nutritional needs are met and when they are safe and secure. Children learn best when they are healthy, safe and secure. To achieve high quality learning settings, the environment has to be stimulating as well as clean and safe from potential injuries for them to explore and learn with confidence. Safeguarding policy, procedures and practices, such as daily physical check on arrival to detect abuse and signs of not being well, and teaching children permissible touch, are important. Safety also includes procedures for all kinds of emergencies, especially for those pertinent to the location/area.</p> <p>Good health and nutritional practices lay a foundation for future healthy life style. Food may present hazards according to age, meals and abilities (e.g. choking hazards, allergies and feeding hazards due to health conditions). The correct procedures for handling of food and for handling food-related emergencies are important.</p> <p>Children have to be protected from communicable diseases through comprehensive premise sanitation and implementation of appropriate health and nutrition policies and procedures. Carers can be active partners with parents and health professionals in primary prevention, early detection and prompt treatment of illnesses and diseases.</p>	
<b>E1</b>	<b>Managing Indoor and Outdoor Safety</b>
E1.1.	Centre has procedures for inspection of outdoor equipment and activity areas for children`
E1.2	All gates, entrances and door/window grilles are locked at all times and keys are placed in designated areas easily accessible to authorized staff
E1.3	Outdoor play areas are securely fenced off from hazards such as driveways, drains and bodies of water
E1.4	Indoor and outdoor safety requirements are complied with for the following: <ul style="list-style-type: none"> <li>a) child-proof safety measures are implemented for hazardous indoor fixtures (e.g. doors, windows, latches, hinges, electrical outlets)</li> <li>b) child-proof and age-appropriate barriers are set or provided for unsafe areas (e.g. stairs, kitchen, water areas and garden)</li> </ul>

	c) hazards to safety are attended to (e. g. drains are covered, poisonous plants are removed)
	d) safe and prompt disposal of waste, garbage and mosquito breeding grounds
	e) cleanliness of indoor and outdoor environment (including play areas), furniture, equipment, materials and toys is maintained at all times
	f) hazardous materials, tools and equipment are stored out of children's reach
<b>E2</b>	<b>Child Safety Practices</b>
E2.1	Daily physical and health check on arrival and departure
E2.2	Children are monitored/supervised in all activities at all times
E2.3	Children are released only to authorized persons at all times
E2.4	Staff provide opportunities for children to learn about personal safety (such as safe touch) and wariness of strangers
<b>E3</b>	<b>Managing Illnesses and Emergencies</b>
E3.1	Centre has Standard Operating Procedures for physical health examination for children
E3.2	All staff are knowledgeable of the centre's Standard Operating Procedures for prevention and effective management of illnesses, injuries and emergencies
E3.3	Centre has procedures to prevent communicable diseases and the implementation includes:
	a) temporary isolation of sick children until parents pick them up
	b) all materials in the classroom used by the sick child are disinfected
	c) notification to all parents/relevant authorities of the illness and the precautionary measures
	d) checking immunisation records
E3.4	Records of medication administered to children are systematically filed together with written authorization from parents
E3.5	List of children with chronic health problems such as asthma, epilepsy, diabetes, allergies and their relevant information is systematically filed for easy access
E3.6	Records of accidents, injuries and illnesses occurring in the centre are updated and systematically filed together with notification to parents
E3.7	Centre has at least one staff with First Aid Certificate at all times
E3.8	Centre has at least one complete first aid kit with its contents within expiry date, easily accessible to staff but out of children's reach

E3.9	Compulsory immunization for all staff handling food (e.g. typhoid and/or hepatitis) in compliance with regulatory requirements
E3.10	Fire drills, disaster and emergency evacuation practices are carried out with all children and staff in compliance with regulatory requirements
E3.11	Emergency telephone numbers, if available, are easily accessible
E3.12	Staff have easy access to parents in case of emergency
<b>E4</b>	<b>Personal Hygiene</b>
E4.1	Every child has his /her own set of personal items (e.g. comb, toothbrush and towels) which are labelled and stored in individual containers
E4.2	Children are encouraged:
	a) to brush their teeth after each meal
	b) wash their hands correctly before and after eating or when necessary
	c) dry their hands after washing them with or without supervision
E4.3	Babies' gums and teeth are cleaned with a damp face cloth or cotton gauze to remove plaque and traces of milk
E4.4	Proper procedures for cleaning, storing and disposing soiled nappies are practised
<b>E5</b>	<b>Monitoring of Child Health</b>
E5.1	Special attention to children who have just recovered from illness
E5.2	Regular monitoring of child growth and development in all domains, including behaviour competence
<b>E6</b>	<b>Nutritional Needs and Child Well-being</b>
E6.1	Centre encourages breastfeeding
E6.2	Procedures for safe food preparation and handling are complied for the following:
	a) proper storage and preparation of expressed breast milk
	b) proper preparation of infant formula for children who are not breastfed
	c) a designated area for food preparation, storage, and serving
	d) cooked and uncooked food being stored in separate refrigerator compartments
	e) cooks in the centre having basic training in food safety and nutrition
E6.3	Each child at the centre is provided with food that is:
	a) nutritious/balanced
	b) quantity appropriate to child's developmental needs

	c) meals provided by the centre or brought in from home must be varied and nutritionally balanced
E6.4	Centre takes precautionary measures to ensure children with food allergies, medical conditions or special dietary needs do not come in contact with food, utensils, cutlery etc. to heed medical requirements or cultural/religious practices
E6.5	Food and drinks served by the centre are free from artificial preservatives, colouring and flavouring

<b>F. PHYSICAL ENVIRONMENT</b>	
<p>The physical environment includes location of the childcare centre, space, furnishing, materials and equipment. However, it goes beyond the building, physical space or room, equipment and materials. It sets the stage and creates the context for the children's experiences in the centre where relationships are developed; skills are learned; abilities are enhanced; attitudes towards learning, attitudes towards cultural and religious diversity are formed; and routines are practised. A high-quality environment promotes children's interest in exploration and learning; engages children in a variety of activities; provides space for individual, small-group and large-group activities; and supports the centre's philosophy and goals. A high-quality physical environment also needs safe and comfortable structures and fittings such as child-size toilets and easy-to-supervise indoor and outdoor spaces.</p>	
<b>F.1</b>	<b>Location and Infrastructure</b>
F1.1	The location of the centre is in compliance with regulatory requirements of the ASEAN Member State
F1.2	Centre has appropriate structure, furnishing, fittings (e.g. toilet bowls, wash basins and taps), and space (e.g. space for breastfeeding and pantry) as stipulated by the authorities
<b>F.2</b>	<b>Indoor and Outdoor Spaces</b>
F2.1	Children are provided with safe, clean and accessible indoor and outdoor spaces (which are easy to supervise and monitor at all times) to promote exploration and learning
F2.2	Outdoor play area, in particular natural environment for exploration, is designed for motor development and learning experiences
F2.3	The centre has well-defined spaces for routine and planned activities (e.g. quiet play, group work and active exploration), which are easy to supervise and monitor
F2.4	If there are children with special needs in the centre, the environment is adapted to allow these children to participate fully in the activities
F2.5	Children's work are creatively and prominently displayed in the centre to promote learning and to appreciate their work
<b>G. STAFF</b>	

<p>Staff are significant contributors to the quality of early childhood care, development and education. The daily experiences of children in their early years, in particular the quality of care, depends on appropriate qualifications, training, knowledge and skills. Properly trained professional carers provide children with experiences that are nurturing, developmentally appropriate and responsive. However, while knowledge and skills are important, professionalism, attitudes towards children and the values they hold also affect the quality in their services. Therefore, both educational qualifications and professional commitments are essential to effectively provide warm, positive interactions and high quality learning environments to optimally promote children’s learning and development. Staff’s continual upgrading of their knowledge and skills reflects their professional commitments to improve their capabilities and responsibilities as professional early childhood practitioners.</p>	
<b>G1</b>	<b>Staff Qualifications</b>
G1.1	Staff meet the qualifications in compliance with regulatory requirements of the ASEAN Member State
<b>G2</b>	<b>Knowledge, Skills and Values</b>
G2.1	Staff : a) respect children’s rights
	b) demonstrate knowledge of child development in their planning and implementation of activities
	c) communicate respectfully and effectively with the children
	d) use positive, non-violent approaches to guide children’s behaviour
G2.2	Staff are flexible and innovative in modifying the planned lessons, routines and schedules on encountering unexpected situations and events
G2.3	Staff encourage and support children’s learning and development through: a) asking open-ended questions
	b) active listening
	c) responding to their questions
	d) providing opportunities for children to express their feelings and ideas
	e) providing opportunities for active exploration and experimentation
<b>G3</b>	<b>Professionalism</b>
G3.1	Staff display professionalism in performing their duties and routines: a) respect all children and adults irrespective of gender, ethnicity, religion, position and socio-economic status
	b) respect cultural and religious sensitivities

G3.2	Staff maintain strict confidentiality on all matters relating to children (except with parents' consent), families and colleagues
G3.3	All staff adhere to the guidelines of ethical conduct as staff members of the centre
G3.4	Staff regularly upgrade their knowledge and skills
<p><b>H. PARTNERSHIP WITH FAMILIES AND COMMUNITY</b></p> <p>Establishing partnership with families and community will contribute significantly to the quality of early childhood programmes.</p> <p>Families do not only influence their own children's growth and development but also that of the other children in the centre through their relationships with the administrative and caring/teaching staff. They have observed and interacted with their children from the earliest moments of their lives. Furthermore, children bring the experiences from interactions with their family members and home environment to the centre. Through communication and collaboration, staff in the centre can establish a working relationship with families which will support children's efforts to grow and learn, thus maximizing the quality of children's experiences.</p> <p>The resources in the community can be an effective strategy for enriching the children's experiences and well-being. By developing linkages with the community as well as establishing relationships with the community, the quality of the centre's services can be enhanced.</p>	
<b>H1.</b>	<b>Collaborating with Families and Communities</b>
H1.1	Centre has a systematic and regular channel for communication with parents/families such as through conversation, dialogue, communication books, newsletters, circulars, social media and parent staff committee
H1.2	Centre pays regular home visits where applicable and in compliance with regulatory requirements and procedures
H1.3	Centre has Standard Operation Procedures on response to feedback of parents and families
<b>H2</b>	<b>Collaborating with the Community</b>
H2.1	Centre has an up-to-date list of child and family support services comprising the following: <ul style="list-style-type: none"> <li>a) government child and family agencies such as Department of Social Welfare and maternal and child health services</li> <li>b) professionals such as doctors, dentists, social workers, psychologists and counsellors</li> <li>c) non-government child and family organisations</li> <li>d) community leaders</li> </ul>
H2.2	Centre has community involvement programmes through participating in the community's events and activities

H2.3	Centre organizes activities to involve parents/families and the community
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<b>I. MANAGEMENT AND LEADERSHIP</b>	
<p>To run a high-quality early childhood programme, the leader or administrator has to possess a wide variety of skills. The job is complex and demanding because it requires a combination of knowledge, skills and talents to organize, direct, guide and manage the programme and staff. To provide a comprehensive quality service and to meet the needs of children and their families who come to them for care, development and education, strong leadership and management is crucial. Among many other abilities, the leader has to have intellectual and interpersonal skills to build consensus; create, change and meet the needs of the children, staff, families and the profession; mentor their staff's professional and personal needs; maintain positive professional and personal relationships with staff; and collaborate with families and the community. In addition, the administrator or leader has to have a sound understanding of the philosophy of the centre and a clear vision and mission to develop and carry out policies and procedures that support the centre's mission and programme operations. The leader's commitment to continuing professional development enhances growth in the quality of the centre and staff.</p>	
<b>I1</b>	<b>Management and Policies</b>
I1.1	Centre has clear written philosophy, vision, and mission statements with short- and long-term goals to guide its operation
I1.2	Centre has a proper and updated data and information management system on children, parents, authorized persons, staff and centre records
I1.3	Centre has clear written statements on the following policies available to all stakeholders :
	a) centre program and approaches to learning
	b) child protection
	c) child arrival and dismissal
	d) health and safety
	e) sick child
	f) accidents and emergency
	g) food and nutrition (including allergies)
	h) non-violent discipline
	i) confidentiality of information on child and family
	j) staff
	k) visitors

I1.4	Centre has a copy of relevant legal documents (e.g. Acts and Regulations) for easy reference
<b>I2</b>	<b>Staff Management and Welfare</b>
I2.1	Centre has a clear written employment policy covering:
	a) qualifications for staff including head of centre administrators, supervisors, carers and cook
	b) compulsory written declaration of non-criminal record and non-abuse of children
	c) compulsory health clearance
	d) work experience
	e) job descriptions and terms of employment
	f) performance appraisal by authorized personnel
	g) continuous professional development
	h) non-discrimination on grounds of gender, ethnicity, religion and political beliefs
<b>I3</b>	<b>Leadership Roles and Responsibilities</b>
I3.1	Leader-communicates clearly on how the centre will realize its goals and objectives
I3.2	Leader has a system to monitor and evaluate caring and learning in the centre through:
	a) regular recorded observation of staff and children
	b) checking relevant documentation of children's progress (e.g. children's portfolios, progress reports, and health records) and also developmental surveillance and screening if applicable
	c) periodical feedback from parents on the quality of caring and learning
I3.3	Leader implements professional development programmes for the continuous upgrading of knowledge, skills and qualifications for self and staff through in-service formal and informal training
I3.4	Leader provides opportunities for open communication with children, staff, parents and the community
I3.5	Leader
	a) encourages staff to share and optimize the usage of all available resources
	b) supports innovations

**ASEAN EARLY CHILDHOOD CARE, DEVELOPMENT AND EDUCATION (ECCDE)  
QUALITY STANDARDS: ASEAN QUALITY STANDARDS FOR PRESCHOOL &  
KINDERGARTEN SERVICES  
(For Children of 4-6 Years of Age)**

**PREAMBLE**

The ASEAN Quality Standards for Preschool Services is part of the ASEAN Early Childhood Care, Development and Education (ECCDE) Quality Standards. This Quality Standards is for assessing services offered by preschools and kindergartens or care, development and education services for 4-6 year-olds in ASEAN which shall henceforth be referred to as “preschools”

The Quality Standards consists of nine quality areas known as components, each of them containing sub-components and indicators. The nine components and their sub-components are as follows:

- A. Relationships
  - A1 Building Positive Relationships between Teachers and Children
  - A2 Building Positive Relationships between Children and Children
  - A3 Building Positive Relationships between Teachers and Families
  - A4 Building Positive Relationships between Teachers and Colleagues
  
- B. Curriculum
  - B1 Essential Characteristics of the Curriculum
  - B2 Area of Development: Physical Development
  - B3 Area of Development: Language Development
  - B4 Area of Development: Writing
  - B5 Area of Cognitive Development: Early Mathematics and Early Science & Nature
  - B6 Area of Cognitive Development: Creative Expressions
  - B7 Area of Development: Socio-emotional Development
  - B8 Values, Cultures and Humanities
  - B9 Learning Difficulties
  
- C. Teaching and Learning
  - C1 Planning for Teaching and Learning
  - C2 Establishing a Supportive Learning Environment
  - C3 Implementing Meaningful Learning Experiences
  - C4 Promoting Positive Behaviour of Young Children
  
- D. Assessment of Child Progress
  - D1 Evaluating Children’s Learning
  - D2 Methods of Assessment and Documentation
  - D3 Communicating Assessment Outcomes to Parents
  
- E. Safety, Health and Nutrition
  - E1 Managing Indoor and Outdoor Safety
  - E2 Child Safety Practices

- E3 Managing Illnesses and Emergencies
- E4 Personal Hygiene
- E5 Nutritional Needs and Child Well-being

F. Physical Environment

- F1 Location and Infrastructure
- F2 Indoor and Outdoor Spaces

G. Teachers & Staff

- G1 Staff Qualifications
- G2 Knowledge, Skills and Values
- G3 Professionalism

H. Partnership with Families and Community

- H1 Communication between Preschool with Families
- H2. Collaborating with the Community

I. Management and Leadership

- I1 Management and Policies
- I2 Staff Management and Welfare
- I3. Leadership Roles and Responsibilities

ITEM	INDICATOR
<b>A. RELATIONSHIPS</b>	<p>During the formative years, interactions with people and the environment are needed for the neurons or brain cells to connect to form neural pathways. Building positive relationships is fundamental to quality early childhood care, development and education. The relationship between teachers and children is critical because warm, loving relationships of the teachers with all children under their care affect the preschool's environment and, hence, children's learning and development. Without respecting all children and practising non-discrimination, a warm, loving relationship cannot be developed between teachers and children. The other important relationships in preschools which influence the preschool climate are relationship between children and children, relationship of the preschool with families, and relationship among the staff. Therefore building positive relationships of all these four types of relationships is vital to quality ECCDE.</p>
<b>A1</b>	<b>Building Positive Relationships Between Teachers and Children</b>
A1.1	Teachers interact with children with warmth and respect at all times regardless of background, personalities and abilities
A1.2	Teachers and staff provide opportunities for children to interact with them at all times
A1.3	Teachers recognize children's efforts and work through active listening, praising, encouraging and displaying of their work
A1.4	Teachers respond promptly in developmentally appropriate ways to children's basic needs (such as curiosity, learning needs, hunger, physical discomfort and distress)

	without the use of any form of violence (such as display of displeasure, aggressiveness, and anger)
<b>A2</b>	<b>Building Positive Relationships Between Children and Children</b>
A2.1	Children are provided with opportunities to develop skills for:
	a) helping others (e.g. empathy, generosity, being more other-centred than self-centred)
	b) pro-social behaviour (e.g. sharing, empathy and taking turns)
<b>A3</b>	<b>Building Positive Relationships Between Teachers and Families</b>
A3.1	Preschool has a school policy on:
	a) teacher-parent communication
	b) family/parent participation in preschool activities (e.g. meeting between teachers and families)
A3.2	Teachers communicate with parents on child progress and exchange information (e.g. participation in community activities, current communicable diseases and preschool programme)
<b>A4</b>	<b>Building Positive Relationships between Teachers and Colleagues</b>
A4.1	Teachers act professionally and ethically towards all colleagues regardless of background, personality and position
A4.2	Teachers support one another through:
	a) sharing of information and resources
	b) teamwork (e.g. working collaboratively on projects)
A4.3	Teachers are friendly and warm towards their colleagues

## **B. CURRICULUM**

Curriculum refers to intentional experiences that allow children to acquire and construct knowledge, concepts, skills, attitudes and dispositions. The experiences are gained through interactions with adults and other children and through selected materials and thoughtfully planned activities in the context of respect for cultural diversity and individual differences. The design, contents and implementation of an early childhood curriculum is a significant contributor to the quality in preschools and kindergartens. Implementation of the curriculum that (a) is sensitive to the developmental capabilities and backgrounds of the individual children, (b) addresses all the domains of children's development, and (c) promotes children's active participation in the learning process, contributes to children's development and positive long-term achievements in academic settings. The curriculum component consists of Essential Characteristics of the Curriculum; Developmental Domains of Children (such as Physical, Language, Cognitive, Creative Expression and Socio-emotional Development); Values, Culture and Humanities; and Learning Difficulties.

<b>B1</b>	<b>Essential Characteristics of the Curriculum</b>
B1.1	Preschool has a written statement on: a) the goals and objectives of its programme
	b) holistic development of children
	c) learning based on developmentally appropriate practices
	d) flexibility (e.g.in implementing planned activities to accommodate children's interest in further exploration of a topic)
	e) inclusive education
	f) family involvement
	g) teacher professional development
B1.2	Preschool has yearly, weekly and daily schedules comprising routines and activities which encompass: a) indoor and outdoor play
	b) a balance of active and quiet activities
	c) creative activities
	d) large group, small group and individual work
	e) child-initiated activities
	f) assessment of children's learning
B1.3	The curriculum promotes and shows appreciation and acceptance of diversity (such as ethnicity, culture, age, ability and gender)
<b>B2</b>	<b>Area of Development: Physical Development</b>
B2.1	Children are provided with suitable materials, equipment and hands-on activities for development of: a) physical strength and gross motor skills (e.g. throwing a ball, kicking a ball, hopping on one foot and climbing outdoor play equipment)
	b) fine motor skills and hand-eye coordination (e.g. drawing a circle, using a pair of scissors to cut paper, threading, drawing and basic self-care)
<b>B3</b>	<b>Area of Development: Language Development</b>
B3.1	Children are provided with opportunities to develop verbal, non-verbal communication and comprehension through: a) engaging in rhymes, songs and stories
	b) listening and responding to instructions

	c) communicating needs, experiences and thoughts
	d) asking questions
	e) listening, speaking and conversing with others
B3.2	Children participate in daily literacy activities such as reading, storytelling, singing, rhyming and finger play
B3.3	Children have access to a variety of age appropriate books and materials that promote reading, sharing and discussion
B3.4	Children have opportunities to develop reading skills through being read to individually and in group
<b>B4</b>	<b>Area of Development: Writing</b>
B4.1	Children have opportunities to develop pre-writing skills and writing skills (alphabets and numerals) using traditional and non-traditional materials such as crayons, paints, pencil and paper
<b>B5</b>	<b>Area of Cognitive Development: Early Mathematics, Early Science &amp; Nature</b>
B5.1	Children are provided with a variety of hands-on materials and activities to learn:
	a) pre-numeracy (sorting, classification, ordering and patterning)
	b) early numbers
	c) counting
	d) basic mathematic operations
	e) simple measurement
	f) early geometry (e.g. shapes and dimensions)
	g) money
	h) time
	i) distance & space
	j) season
B5.2	Children are given opportunities to apply basic mathematical concepts in meaningful real-life situations
B5.3	Children are provided with a variety of materials and hands-on activities that promote basic science process skills pertaining to their environment and natural phenomena such as:
	a) observing
	b) classifying

	c) predicting
	d) making inferences
	e) recording
	f) problem solving
<b>B6</b>	<b>Area of Cognitive Development: Creative Expression</b>
B6.1	Children are provided with opportunities to explore and express themselves creatively through songs, dance, body movement, storytelling, drama, musical instruments etc.
B6.2	Children are provided with a variety of materials (including recyclables) to foster creativity
B6.3	Children have opportunities to engage in pretend, role and imaginative play.
<b>B7</b>	<b>Area of Development: Socio-emotional Development</b>
B7.1	Children are provided with opportunity to engage and interact in group activities to develop:
	a) positive self-concept
	b) social competence
	c) self-help
	d) patience
	e) self-regulation
B7.2	Children through interactions have opportunities to learn and practise:
	a) turn taking
	b) sharing
	c) empathy
<b>B8</b>	<b>Values, Cultures and Humanities</b>
B8.1	Children are provided with opportunities to know and respect each other's religion and beliefs
B8.2	Children are provided with a variety of hands-on activities to value and care for the environment
B8.3	Children have opportunities to participate in activities that reflect respect for cultural diversity
B8.4	Children are provided with a variety of hands-on activities to value and care for the environment
<b>B9</b>	<b>Learning Difficulties</b>

B9.1	Teachers recognise obvious signs of delayed development and learning difficulties
B9.2	Appropriate action are taken for intervention (e.g. remedial activities/programmes, referral to professionals) for children with delayed development and learning difficulties

### **C. TEACHING AND LEARNING**

In any early childhood programme, teaching and learning approaches and strategies that guide children's learning, behavior and development, and support the holistic development of young children are needed to provide children with a right start in their formative years. Effective strategies include (a) planning and implementing developmentally appropriate experiences that enhance children's growth in all developmental domains; (b) creating a learning environment that promotes exploration, play, individual, small and large group activities, and appropriately challenging experiences in the context of respect for diversity in culture and background, and for special developmental needs of children; (c) providing meaningful learning that is relevant to life experiences and is focused on the here and now; and (d) responding to children's interests and needs. Using positive, non-violent approaches and techniques to guide children to elicit socially acceptable behaviour is another critical teaching-learning strategy.

<b>C1</b>	<b>Planning for Teaching and Learning</b>
C1.1	Teachers have a written teaching and learning plan for the whole year
C1.2	Teachers have weekly time schedule for learning activities and routines
C1.3	Teachers have written daily lesson plans with the necessary information such as date, time, objectives, required materials and equipment, developmentally appropriate activities, conduct of the lesson, assessment, evaluation and reflection
C1.4	Teachers have a written assessment plan
<b>C2</b>	<b>Establishing a Supportive Learning Environment</b>
C2.1	Teachers organize time, space and materials for carrying out activities to: a) encourage exploration and discovery b) accommodate individual and group work
<b>C3</b>	<b>Implementing Meaningful Learning Experiences</b>
C3.1	Teachers prepare and organize materials and tools for planned lesson and activities
C3.2	Teachers use a variety of teaching and learning approaches such as demonstrating, modelling, scaffolding, questioning, exploring, discovery and experimenting
C3.3	Teachers support and guide children in carrying out their activities

C3.4	Teachers provide positive feedback to build confidence, promote learning and develop thinking skills
C3.5	Teachers arrange visits to places to extend experiential learning such as markets, gardens, parks, playgrounds, farms, beaches and public library
C3.6	Teachers foster self-help skills in children using daily routine (e.g. setting and clearing of tables, tidying up and putting away toys and materials)
C3.7	Teachers foster independence by providing opportunities for making free choices and participating in decision making
<b>C4</b>	<b>Promoting Positive Behaviour of Young Children</b>
C4.1	Teachers implement rules and expectation fairly and consistently
C4.2	Teachers comfort and reassure children in stressful situations
C4.3	Teachers provide support and guidance to children who:
	a) have specific needs b) use violence against others and who are victims of violent e.g. bully or are bullied
C4.4	Teachers use positive, non-violent approaches to guide behaviour of children/discipline children
C4.5	Teachers model socially acceptable behaviour such as saying 'please' and 'thank you'
C4.6	Teachers model and guide children to use conflict resolution and reconciliation to solve problems

#### **D. ASSESSMENT OF CHILD PROGRESS**

Assessment encompasses procedures used to obtain valid and reliable information about the individual child's development. The procedures include observing children in a variety of settings to obtain information about their growth, achievement levels, levels of acquired knowledge, skills, interests, understanding and dispositions, and documenting the information in portfolios. Assessment procedures also comprise evaluating the assessment information and communicating the information to parents or guardians.

Assessment also provides information needed for appropriate curriculum planning as well as for decisions about the strategies for fostering development and learning of children, especially those who are not achieving developmental milestones.

<b>D1</b>	<b>Assessing Children's Learning and Development</b>
D1.1	Teachers observe and document children's responses to the learning activities

	and make recommendations for improvement
<b>D2</b>	<b>Methods of Assessment and Documentation</b>
D2.1	Teachers use a variety of authentic assessment methods in various settings to obtain information regarding children’s growth, development and progress in all domains
D2.2	Teachers use portfolios to document children’s efforts, progress and achievement (this may include achievement milestones, records of observation, photographs and work samples of children in various settings)
<b>D3</b>	<b>Communicating Assessment Outcomes to Parents</b>
D3.1	Teachers communicate with parents on the assessment outcomes, follow-up activities and any concerns in verbal and written forms monthly, termly or when necessary

## **E. SAFETY, HEALTH AND NUTRITION**

Good health, safety and proper nutrition are basic elements for young children’s growth, development and learning. They are more able to fully develop physically, cognitively, socially, and emotionally when their health and nutritional needs are met and when they are safe and secure. Children learn best when they are healthy, safe and secure. To achieve high quality learning settings, the environment has to be stimulating as well as clean and safe from potential injuries for them to explore and learn with confidence. Safeguarding policy, procedures and practices, such as daily physical check on arrival to detect abuse and signs of not being well, and teaching children permissible touch, are important. Safety also includes procedures for all kinds of emergencies, especially for those pertinent to the location/area.

Good health and nutritional practices lay a foundation for future healthy life style. Food may present hazards according to age, meals and abilities (e.g. choking hazards, allergies and feeding hazards due to health conditions). The correct procedures for handling of food and for handling food-related emergencies are important.

Children have to be protected from communicable diseases through comprehensive premise sanitation and implementation of appropriate health and nutrition policies and procedures. Teachers and staff can be active partners with parents and health professionals in primary prevention, early detection and prompt treatment of illnesses and diseases.

<b>E 1</b>	<b>Managing Indoor and Outdoor Safety</b>
E1.1	Preschool has procedures for inspection of outdoor equipment and activity areas for children
E1.2	All gates, entrances and door/window grills are locked at all times and keys

	placed at designated area, easily accessible to authorized staff
E1.3	Outdoor play areas are securely fenced off from hazards such as driveways, drains and bodies of water
E1.4	Indoor and outdoor safety requirements are complied with for the following:
	a) child-proof safety measures are implemented for hazardous indoor fixtures (e.g. door hinges, covered electrical outlets and electrical appliances)
	b) child-proof and age-appropriate barriers are set up or provided to unsafe areas (e.g. staircase, kitchen, water areas and garden.
	c) hazards to safety are attended to (e.g. drains are covered, poisonous plants are removed)
	d) safe and prompt disposal of waste, garbage and mosquito breeding grounds
	e) cleanliness of indoor and outdoor environment (including play areas), furniture, equipment, materials and toys is maintained at all times
	f) hazardous materials, tools and equipment are stored out of children's reach
<b>E2</b>	<b>Child Safety Practices</b>
E2.1	Daily physical and health check upon arrival
E2.2	Children are supervised and monitored on all activities including upon arrival
E2.3	Children are released only to authorised persons at all time
E2.4	Preschool staff provides opportunity for children to learn personal safety such as wariness of strangers and safe touch
<b>E3</b>	<b>Managing Illnesses and Emergencies</b>
E3.1	Preschool has standard operating procedures for physical health examination for children
E3.2	All teachers are knowledgeable of the preschool standard operating procedures for prevention and effective management of illnesses and injuries and emergencies
E3.3	Preschool has procedures to prevent communicable diseases and the implementation includes:
	a) temporary isolation of sick children until parents pick them up
	b) all materials in the classroom used by the sick child are disinfected
	c) notification to all parents of the illness and the precautionary measures
	d) checking immunisation records
E3.4	Records of medication administered to children together with written authorization from parents are systematically filed for easy access

E3.5	List of children with chronic health problem such as asthma, epilepsy, diabetes, allergies, and their relevant information is systematically filed for easy access
E3.6	Records of accidents, injuries and illnesses occurring in the preschool are updated and systematically filed together with the notification to parents
E3.7	Preschool has at least one staff with First Aid certificate at all times.
E3.8	Compulsory immunisation for all staff handling food (e.g. typhoid and hepatitis) in compliance with regulatory requirement
E3.9	Preschool has at least one complete first aid kit with its contents within expiry date, easily accessible to staff but out of children's reach
E3.10	Fire drills, disaster and emergency evacuation practices are carried out with all children and staff in compliance with the regulatory requirement
E3.11	Emergency telephone numbers, if available, are easily accessible
E3.12	Staff have easy access to parents in case of emergency
<b>E4</b>	<b>Personal Hygiene</b>
E4.1	Every child has his own set of personal items (e.g. comb, tooth brush and towel) which are labelled and stored in individual containers
E4.2	Children are encouraged to:
	a) brush their teeth after each meal
	b) wash their hands correctly before and after eating or when necessary
	c) dry their hands after washing them with or without supervision
<b>E5</b>	<b>Nutritional Needs and Child Well-being</b>
E5.1	Procedures for safe handling of food /catered or brought from home include:
	a) meeting health regulations (including those who handle food, whether they cook, prepare or serve food)
	b) proper labelling and storage
	c) meal/snack served in a clean, designated area
E5.2	Clean drinking water is available to children at all times
E5.3	Meals served correspond to the written menu and any deviations is recorded
E5.4	Snack or meal prepared on site or brought from home/catered are varied and nutritionally balanced with appropriate amounts of carbohydrates, proteins, fats, vitamins, minerals, fibres and micro nutrients
E5.5	Preschool takes precautionary measures to ensure children with food allergies or medical condition or special dietary needs do not come in contact with food, utensils, cutlery etc. to heed medical requirements or cultural/religious practices

E5.6	Food and drinks served by the preschool are free from artificial preservatives, colouring and flavouring
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<b>F PHYSICAL ENVIRONMENT</b>	
<p>The physical environment includes location of the preschool, space, furnishing, materials and equipment. However, it goes beyond the building, physical space or room, equipment and materials. It sets the stage and creates the context for the children's experiences in the preschool where relationships are developed; skills are learned; abilities are enhanced; attitudes towards learning, attitudes towards cultural and religious diversity are formed; and routines are practised. A high-quality environment promotes children's interest in exploration and learning; engages children in a variety of activities; provides space for individual, small-group and large-group activities; and supports the preschool's philosophy and goals. A high-quality physical environment also needs safe and comfortable structures and fittings such as child-size toilets and easy-to-supervise indoor and outdoor spaces.</p>	
<b>F1</b>	<b>Location and Infrastructure</b>
F1.1	The location of the preschool is in compliance with regulatory requirements of the ASEAN Member State
F1.2	Preschool has classroom structure, furnishing, fittings (e.g. toilet bowls, wash basins and taps), and space as stipulated by the authorities
<b>F2</b>	<b>Indoor and Outdoor Spaces</b>
F2.1	Children are provided with safe, clean and accessible indoor and outdoor spaces (which are easy to supervise and monitor at all times) to promote exploration and learning
F2.2	Outdoor play area, in particular natural environments for exploration, is designed for motor development and learning experiences
F2.3	The classroom has well-defined spaces for routine and planned activities (e.g. quiet play, group work and active exploration) which are easy to supervise and monitor
F2.4	If there are children with special needs in the preschool, the environment is adapted to allow these children to participate fully in the activities (e.g. ramps and handrails)
F2.5	Children's work are creatively and prominently displayed in the classrooms and common areas to promote learning and to appreciate their work
<b>F3</b>	<b>Materials and Manipulatives</b>
F3.1	Children are provided with materials and manipulatives in all domains that are developmentally appropriate and safe

F3.2	Materials that support learning in the different domains are provided
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<b>G. TEACHERS &amp; STAFF</b>	
<p>Teachers and staff are significant contributors to the quality in early childhood education. The daily experiences of children in their early years depend on the teachers and staff's appropriate qualifications, training, knowledge and skills. Properly trained professional teachers and staff provide children with experiences that are nurturing, developmentally appropriate and responsive. However, while knowledge and skills are important, professionalism, attitudes towards children and the values they hold also affect the quality in their services. Therefore, both educational qualifications and professional commitments are essential to effectively provide warm, positive interactions and high quality learning environments to optimally promote children's learning and development. Teachers and staff's continual upgrading of their knowledge and skills reflects their professional commitments to improve their capabilities and their responsibilities as professional early childhood practitioners.</p>	
<b>G1</b>	<b>Staff Qualifications</b>
G1.1	Teachers and staff meet the qualification in compliance with regulatory requirements of ASEAN Member States
<b>G2</b>	<b>Knowledge, Skills and Values</b>
G2.1	Teachers and staff
	a) respect children's rights
	b) demonstrates knowledge of child development in their planning and implementation of activities
	c) communicate respectfully and effectively with the children
	d) use positive, non-violent approaches to guide children's behaviour
G2.2	Teachers are flexible and innovative in modifying the planned lessons and schedules on encountering unexpected situations and events
G2.3	Teachers encourage and support children's learning and development through:
	a) asking open-ended questions
	b) active listening
	c) responding to their questions
	d) providing opportunities for children to express their feelings and ideas
e) providing opportunities for active exploration and experimentation	

<b>G3</b>	<b>Professionalism</b>
G3.1	Teachers display professionalism in their duties and routines: a) respect all children and adults irrespective of gender, ethnicity, religion, position and socio-economic status b) respect children with special needs (including children with developmental delay) c) respect cultural and religious sensitivities
G3.2	Teachers maintain strict confidentiality on all matters relating to children, families (except with parents' consent) and colleagues
G3.3	All staff adheres to the guidelines of ethical conduct as staff members of the preschool
G3.4	Teachers upgrade regularly their knowledge and skills

## **H. PARTNERSHIP WITH FAMILIES AND COMMUNITY**

Establishing partnership with families and community will contribute significantly to the quality of early childhood programme.

Families do not only influence their own children's growth and development but also that of the other children in the preschool through their relationships with the administrative and teaching staff. They have observed and interacted with their children from the earliest moments of their lives. Furthermore, children bring their experiences from interactions with their family members and home environment to the preschool. Through communication and collaboration, staff in the centre can establish a working relationship with families which will support children's efforts to grow and learn, thus maximizing the quality of children's experiences.

The resources in the community can be an effective strategy for enriching the children's experiences and well-being. By developing linkages with the community as well as establishing relationships with the community, the quality of the preschool's services can be enhanced.

<b>H1</b>	<b>Communication between Pre-school and Families</b>
H1.1	Preschool has a systematic and regular channel for communication with parents/families such as through conversation, dialogue, communication books, newsletters, circulars and Parents Teachers Association
H1.2	Preschool has Standard Operation Procedure on response to feedback of parents/families
<b>H2</b>	<b>Collaborating with the Community</b>
H2.1	Preschool has an up-to-date list of child and family support services in the community comprising the following: a) government child and family agencies such as Department of Education,

	maternal and child health services
	b) professionals such as doctor, dentist and social workers, psychologist and counsellors
	c) non-government child and family organizations
	d) community leaders
	e) partners in the private sector
H2.2	Preschool has community involvement through participating in the community's events and activities
H2.3	Preschool organizes activities to involve parents/ families and the community

<b>I MANAGEMENT AND LEADERSHIP</b>	
<p>To run a high-quality early childhood programme, the leader or administrator has to possess a wide variety of skills. The job is complex and demanding because it requires a combination of knowledge, skills and talents to organize, direct, guide and manage the programme and staff. To provide a comprehensive quality service and to meet the needs of children and their families who come to them for care, development and education, strong leadership and management is crucial. Among many other abilities, the leader has to have intellectual and interpersonal skills to build consensus, create, change and meet the needs of the children, staff, families and the profession; mentor their staff's professional and personal needs; maintain positive professional and personal relationships with staff; and collaborate with families and the community. In addition, the administrator or leader has to have a sound understanding of the philosophy of the centre and a clear vision and mission to develop and carry out policies and procedures that support the preschool's mission and programme operations. The leader's commitment to continuing professional development enhances growth in the quality of the preschool and staff.</p>	
<b>I1</b>	<b>Management and Policies</b>
11.1	Preschool has clear written philosophy, vision and mission statements with short- and long-term goals to guide its operation
11.2	Preschool has a proper and updated data and information management system on child, parent, authorized persons, staff and school records
11.3	Preschool has clear written statements on the following policies and procedures available to all stakeholders:
	a) preschool programmes and approaches to learning
	b) child protection

	c) child arrival and dismissal
	d) health and safety
	e) sick child
	f) accident and emergency
	g) food and nutrition including allergies
	h) non-violent discipline
	l) confidentiality of information on child and family
	j) staff
	k) visitors
11.4	Preschool has a copy of relevant legal documents (e.g. Acts and Regulations) for easy reference
<b>I2</b>	<b>Staff Management and Welfare</b>
12.1	Preschool has a clear written employment policy covering:
	a) academic and professional qualification for staff, including head of school, administrators, supervisors, teachers and teacher assistants and other employees
	b) a compulsory written declaration of non-criminal record and non-abuse of children
	c) compulsory health clearance
	d) work experience
	e) job descriptions and terms of employment
	f) appraisal system comprising self-appraisal and performance appraisal by authorised personnel
	g) continuous professional development (CPD)
	h) non-discrimination on grounds of gender, ethnicity, socio-economic status, religion and political beliefs
<b>I3</b>	<b>Leadership Roles and Responsibilities</b>
13.1	Leader communicates clearly and regularly on how the preschool will realize its goals and objectives
13.2	Leader has a systematic programme to monitor and evaluate teaching and learning in the classroom through:
	a) regular recorded classroom observation
	b) checking relevant documentation of children's progress (e.g. portfolios and

	progress record and children work samples) and also developmental surveillance and screening if applicable
	c) periodical feedback from parents on the quality of teaching and learning
I3.3	Leader implements professional development programmes for the continuous upgrading of knowledge, skills and qualifications for self and staff through in-service, formal and informal training
I3.4	Leader provides opportunities for open communication with children, staff, families and the community
I3.5	Leader:
	a) encourages staff to share and optimise the usage of all available resources
	b) supports innovations
	c) collaborates with a primary schools in the vicinity to promote smooth transition from preschool to primary school