



Lesson Planning Indicators Tip Sheet

Note: The development of a Lesson Plan need to at minimum meet Wisconsin Child Care Regulations. The following tips are taken from the YoungStar Group Child Care Evaluation Criteria.

Indicators under Learning Environment and Curriculum

Quality Indicator: Wisconsin Model Early Learning Standards (WMELS) Used

The center uses a curriculum aligned with the Wisconsin Model Early Learning Standards -

- Child care programs can demonstrate how their curriculum aligns with the Wisconsin Model Early Learning Standards (WMELS) and how the program utilizes the curriculum to individualize for all children in the program. This can be achieved through planned activities and routines that cross all domains of early learning within the WMELS.
- Along with curriculum alignment WMELS is also used to provide information to parents and staff: WMELS can be shared with parents and incorporated into program materials, including a parent handbook. Documentation from staff meetings, parent meetings, support group meetings and/or other events where the WMELS are reviewed and discussed with parents and other interested parties should be maintained.
- Child care programs can identify how the appropriate expectations for children's experiences are established, using their programs developmental curriculum and assessment tools and the WMELS five domains of early learning and development.
- Head Start Programs and Early Head Start programs may choose to demonstrate curriculum alignment with Head Start Performance Outcome Standards.

NOTE: Verification will be completed through review of lesson plans to ensure that planned activities and routines cross all domains of early learning within the WMELS.

Quality Indicator: Child Outcomes: Program Uses Individual Child Portfolios

Program uses individual child portfolios to document individual children’s progress over time.

Portfolios are records of the child’s process of learning including:

- What the child has learned and how the child has gone about learning;
- How the child thinks, questions, analyzes, synthesizes, produces, create;
- How the child interacts – intellectually, emotionally and socially – with others;
- Goals for child’s outcomes are included; and
- Artifacts or samples of the child’s work.

Centers establish program areas where they aim to improve child outcomes. An authentic child care assessment tool is used by staff in each classroom that have received specialized training on the assessment tool to inform teacher practice and individualize instruction and demonstrate that they are developing individual portfolios for children.

Quality Indicator: Child Outcomes: Teacher Uses Intentional Planning to Improve Child Outcomes

Teacher uses intentional planning to improve child outcomes. Assessment and evaluation are used to ascertain individual strengths, plan potential learning goals, and make knowledgeable instructional decisions.

Quality Indicator: Child Outcomes: Individual Child Outcomes Tracked

Teacher tracks individual child outcomes to demonstrate that teacher training and child interactions improve children’s individual outcomes.

Child outcomes describe the knowledge and skills children should acquire. Comprehensive child outcome standards encompass:

- Content Standards that define the range of knowledge and skills that children should master. This can also extend beyond knowledge and skills, and include describing the kinds of habits, attitudes, and dispositions children are expected to develop as a result of classroom experiences.
- Performance Standards describe how outcomes can be demonstrated that children have met the content standards.

Programs should use a cycle of:

1. Assessment of children to learn where children are;
2. Planning of goals for child outcomes;
3. Implementation of those plans; and
4. Review of child outcomes after implementation to learn which strategies worked to further the children’s development.

Indicators under Health and Wellness

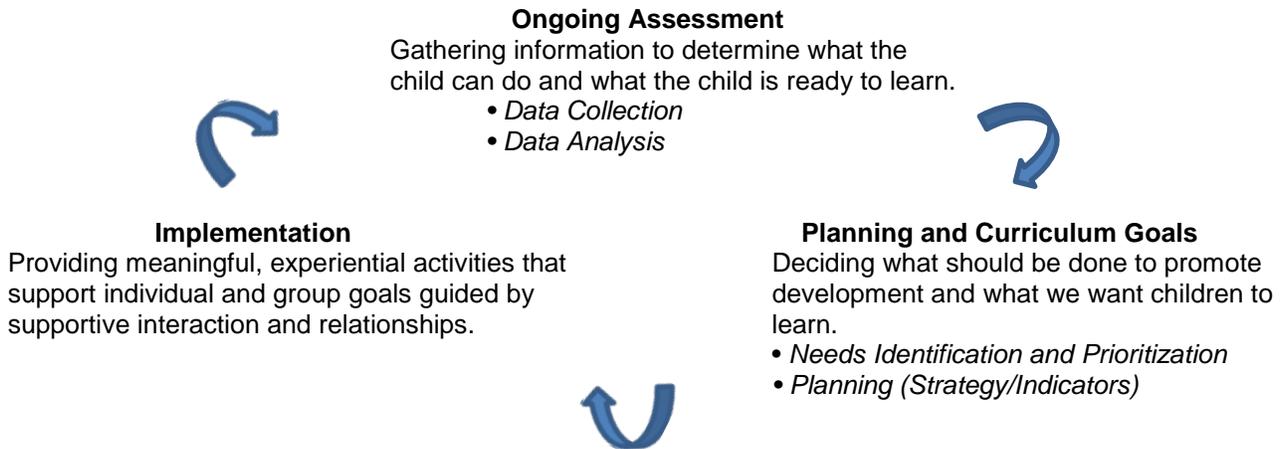
Quality Indicator: Physical Activity

Program provides at least sixty minutes of physical activity for 2 – 5 year olds as documented in lesson plans and verified by Rating Observer. Basic daily schedule exists that is familiar to the children and the schedule provides balance of structure and flexibility.

- The program will provide children with outdoor play at least two times a day with a minimum of 15 minutes of teacher-led activity each time. The activity time will be in 15 minute increments. If inclement weather prohibits outside time, equivalent time indoors for physical activity will be available.
- Children will be provided with physical activities at the moderate level of intensity during transitions from one activity to another in a least half of the daily transitions taking place during the classroom schedule (e.g., hopping to the next space, follow the leader to another space in the classroom).
- Program provides physical activity for infant and one year olds – infants having the opportunity to move around in their environment with no more than 15 minutes at a time of placement in swing, bouncy seat, or play pen.
- The program will provide infants and one year olds with outdoor play at least two times a day with opportunities for infants to explore and one year olds to have active (free) play.
- If inclement weather prohibits outside time, equivalent time indoors for physical activity will be available.
- One year olds will be provided with physical activities at the moderate level of intensity during the day for at least 30 minutes (teacher-led) in 5 – 10 minute increments.
- The program's daily schedule must include teacher-led music and movement for at least 10 minutes each day.

The Teaching Cycle

(from the Wisconsin Model Early Learning Standards)



Ongoing Assessment:

This would include the use of documented observations; Child Portfolio's; screening or assessment tools.

The items used would then be reviewed and an analysis of the material would occur to identify learning goals.

Planning and Curriculum Goals: (Once individual learning goals are identified)

Goals would be reviewed to determine the following: Whole group goals, small group goals, and individual goals.

The program would then be looked at to determine the best place to implement the development of the goals. This might include strategies being used in:

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|---|---|---|
| <input type="checkbox"/> Daily routines | <input type="checkbox"/> Whole group gatherings | <input type="checkbox"/> Environmental changes |
| <input type="checkbox"/> Small group gatherings | <input type="checkbox"/> One-on-one | <input type="checkbox"/> Teacher/Adult interactions |
| | <input type="checkbox"/> Transition activities | |

Strategies would then be identified to support the goals. Strategies could include:

- Adult Interaction styles/techniques
- Specific materials and the high-lighted use of the materials
- Selection of activities to specifically support the goals
- Identifying specific communication styles/phrases/words to highlight
- Modifications to the environment to support the goals

Strategies would be able to be implanted throughout the day and during each routine.

These identified strategies would become the lesson plan.

Implementation:

The plan would be implemented in accordance with regulatory guidelines and quality indicators. This would include being implemented in a context of meaning experiences guided by interactions that are supportive and relationship-based.

During the implementation phase, the teacher is collecting information for the next planning process.

The teaching cycle is on-going. Strategies are adjusted in response to the child's development.

Notes for Parent Conferences

Child Portfolios are continually developed as documentation is collected. The materials within the Portfolio are reviewed when conference time approaches. A summary of the child's progress for a determined time-frame is reported to the parents at the conference.

Information about the child's progress is collected and reviewed routinely. Parents are informed if development appears outside of the typical norm when first noticed. The child's provider and parents together determine the appropriate response.