Authors and Contributors

These Guidelines were developed through the collaborative efforts of a Reference Group comprising of parents of children in market-based day care centres at Makola and Ga East, representatives of informal trade organisations, Child Care Workers, Department of Social Welfare officials from the Accra Metropolitan Assembly and Ga East Assembly, official from the Department of Children under the Ministry of Gender, Children and Social Protection, an urban planning specialist, an ECCD expert and a legal consultant.
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Key Concepts and Terminology

- **Accountability**: Being responsible for (able to account for) one's actions

- **Active feeding**: Feeding practices related to the interaction between the Childcare Worker and the child which helps to ensure that the child gets enough food and is able to eat it in relative calm and security. Active feeding techniques include making and maintaining eye contact, encouraging the child to eat and showing warmth and affection.

- **Active learning**: Learning within the context of interactions with people, objects and materials. It involves exploration, problem-solving, play, group interactions and use of materials in expressive ways.

- **Attachment**: The psychological process of bonding with significant Caregivers that is important for young infants in the promotion of emotional security.

- **Brain development**: The process of evolution the human brain goes through. The importance of the early years in terms of brain development in the short term is one of the key reasons for investing in very young children's programmes.

- **Care**: Refers to all the support a young child requires in order to thrive, including appropriate nutrition, healthy active feeding, stimulation, communication, affection, safety and protection, appropriate modelling and time to assimilate and grow.

- **Caregivers**: People who take primary responsibility for the care of young children. Caregivers can be parents, siblings, extended family members, or members of the community.

- **Child**: A child is a person below the age of eighteen years according to the Children’s Act of Ghana.

- **Childcare worker**: An individual who works in a Day Care Centre or facility – may or may not have received training and may be paid or unpaid.

- **Child-centred**: Activities provided for children that are based on an understanding of the developmental needs and interests of the child.

- **Cognitive development**: A term used to refer to mental development and inclusive of references to the ability to learn, reason, reflect, plan, use language, think and form mental constructs. In other words, it is the process of acquiring intelligence and increasingly advanced thought and problem-solving ability from infancy to adulthood.

- **Cost-effective**: A cost effective programme is one in which the returns/results are high enough to make the cost worthwhile.

- **Creches**: Centre-based, generally full day childcare programmes provided for children from a few months after birth to about four years of age. When operated by the government they generally fall within the mandate of the health ministry, or a ministry concerned with social welfare. NGOs, businesses and entrepreneurs can also develop creches.

- **Child Development**: This is defined as the process of change in which the child comes to master more and more complex levels of moving, thinking, feeling and interacting with people and objects in the environment. Child development involves both a gradual unfolding of biologically determined characteristics and traits that arise as the child learns from experiences.

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1 Terminologies are drawn from Early Childhood Counts-A programming Guide on Early Childhood Care for Development (Judith L. Evans et all, 2000; and Early Childhood Care and Development Standards (0-3), 2018
- **Day Care Centre**: Places where children are cared for in groups. Some centres have a curriculum that guides the development of activities. Childcare centres can be purpose-built, or can be created in non-formal settings for example in the home, market, community centre, in a church or even under trees.

- **Early Childhood**: Early childhood is defined as the period of a child’s life from conception to age eight. This time frame is consistent with the understanding within developmental psychology of the ways in which children learn. While the definition also includes 6 to 8 years of age, the focus of these guidelines is on the earlier years up to school entry.

- **Early Childhood Care and Development (ECCD)**: This is the holistic development of children including physical, cognitive, language, social and emotional development from conception to age eight. The field of Early Childhood Care and Development combines elements from the areas of infant stimulation, health and nutrition, early childhood education, community development, women’s development, psychology, sociology, anthropology, child development and economics among others.

- **Early Childhood Education**: This refers to programmes for young children with emphasis on education inputs.

- **Emotional Development**: The development of feelings and the ability to express them in socially acceptable ways. In other words, it involves the child’s responses to the different feelings they experience and how well they handle these feelings as they grow.

- **Equity**: Fair and impartial treatment or opportunities especially for the poor and vulnerable in society. This term is used often in relation to efforts to decrease gender differences. Equity is sought in access to food and nutrients, use of health facilities, being receivers of social support, access to education and other services.

- **Social Development**: The learning of values, skills and knowledge to relate to others effectively and later in life to contribute in positive ways to family, school and the community.

- **Integrated Programming**: Programming that addresses the child’s diverse developmental needs in a holistic way. Integrated programming means addressing the child’s multiple needs within the context of a single programme or through complementary programming efforts. This is in contrast to monofocal attention that provides food only without attention for other domains of the child’s development.

- **Ownership**: When participants, staff, or community members, see the programme as being theirs. People take ownership when they feel they have invested something of themselves in the programme, when it reflects their will, and when it provides them with a service they need. This ensures sustainability of such programmes.

- **Parental Support Programme**: Programme designed to provide parents with information, skills and support in their parenting.

- **Special Needs**: Children with special needs are those for one reason or the other are unlikely to progress “normally”. The special need might have a biological basis, or it may be the result of environmental forces. Early intervention can help alleviate some of the potential disabilities that children may develop.

- **Standards**: These are approved or agreed upon ideals or benchmarks against which outcomes are measured. In the ECCD context, standards are benchmarks that measure quality practices of care for the child, the context and environment for the delivery of care and the required competences and attitudes of the caregiver.
SECTION I:
Introduction and rationale

Infants are precious and vulnerable and therefore need quality care services wherever they find themselves. Parents have known this instinctively for centuries and research continues to confirm that “a human infant cannot survive without someone providing food, protection and affection. Because of this, human babies are born with a very strong instinct and need to bond with a caregiver”2. Numerous studies have demonstrated that the first five years of a child’s life are the most important for brain development especially within the first three years when the brain’s architecture is formed3. This period constitutes their early years and children learn more quickly at this stage than at any other time of their lives. Throughout the initial three (3) year period, a child develops physically, socio-emotionally and cognitively (mentally). The child also learns to communicate with others and establishes the basis for his or her future life in school and thereafter. It is therefore imperative that during these early years of their lives, children are supported to receive careful nurturing, love and attention as well as good nutrition, all in a stimulating and safe environment.

Ghana’s obligation to the development of the child is enshrined in the 1992 constitution (Article 28) which directly aligns with the United Nation’s Commission on the Rights of the Child (1990)’s principles and welfare provisions for all children in Ghana. Ghana has demonstrated commitment directly or indirectly to early childhood development through its numerous legal frameworks, policies and programmes across sectors over the last two decades and which also align with global development frameworks such as the Millennium Development Goals (2000-2015) and the Sustainable Development Goals (2015-2030) for human development and protection. Early Childhood Care Development (ECCD) policies play a very important role in the provision of developmental opportunities for children and in providing knowledge on what young children need from caregivers. Ghana’s 2004 ECCD Policy content laid a foundation for significant advances in ECCD in Ghana while opening up the environment for children’s development in general. Since the adoption of the 2004 Policy Framework, other programmes, strategy documents and frameworks have been developed to complement the Policy across sectors. They include Policy and Strategies for Improving the Health of Children under 5 years, Early Learning Standards and Indicators for 4-5 years old, Early childhood care and development standards (0-3 years), as well as the Nurturing Care for Early Childhood Development Framework which focuses on the period from pregnancy to age 3. In 2007, Ghana introduced two years of pre-primary education (Kindergarten) as part of its commitment to Free and CompulsoryBasic Education, placing it ahead of the curve compared to other countries in sub-Saharan Africa. Additional interventions have included birth registration and specified targets related to child and maternal health and nutrition.

The policy’s evaluation4 after sixteen years of its implementation established that it was compliant with law and law enforcement, prioritized community norms change, institutional capacity development and assigned roles to relevant institutions. It further established that the policy made provision for mainstreaming ECCD into planning processes, established mechanisms for collaboration, and provided guidelines and standards for ECCD service provision, professional capacity development of ECCD service providers, financing and ensuring the affordability of ECCD services, generating data to monitor and improve the effectiveness of ECCD services, and empowering parents with information, parenting skills, and economic strengthening interventions.

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2 Family Court Services, 2013 as cited in Early Childhood Care and Development
3 Family Court Services, 2013
The policy, however according to the summative evaluation\(^5\) was inexpressive of services for children with disabilities and their caregivers; weak in provisions to mitigate inequitable demands imposed on female Caregivers; and lacked adequate mechanisms to address the obstacles households with limited means faced in accessing services. The assessment observes that the policy content is highly formal sector-focused and only makes generic provision for services in the informal sector, thus affecting the obvious need for differentiated services for vulnerable populations especially in the informal space.

The policy formulation process was also found to lack the necessary needs assessment, robust enough to capture the fundamental needs of early care in the Ghanaian setting and especially the equity issues generated by economic and gender concerns. It is noteworthy that such downplay for gender and economic considerations in the ECCD policy affected the broad issues of the informal economy so far as ECCD services are concerned and which also adversely affected policy implementation for the same domains.

Subsequent child related programmes and guidelines inspired by the policy were a tangent off the informal economy since the mother policy was weak at its projection. Further consequences of this gap were the absence of provision for the mitigation of economic cost of the inequitable demands imposed on female Caregivers especially vulnerable ones in the informal sector and the failure to address obstacles to accessing ECCD services by households with limited means. The intersection between mothers/Caregivers in informal micro level business and early childhood care is a missing but significant domain because of the potential adverse repercussions for the development of the child\(^6\).

Another gap identified by the evaluation that has direct implication for market setting ECCD service is the policy’s lack of appreciation of the complicated service environment that District Assemblies must navigate and the associated lack of clarity regarding resources for activities at local level. The policy therefore did not adequately account for the local government service need to navigate a complicated service delivery environment in which it was required to implement policy on behalf of Ministries with sub-national level departments, while collaborating with national-level Ministries, to deliver on cross-sectoral obligations of the ECCD Policy.

Markets operate in communities and have tax obligations directly under the local government administration. The policy tasks the Metropolitan, Municipal and District Assemblies (MMDA) to allocate resources to support ECCD interventions within their jurisdictions. Thus the “District Assemblies shall allocate a percentage of their total budget expenditure to ECCD programmes, including provisions of incentives to district ECCD committees. Where appropriate, the District Assemblies shall also be responsible for the payment of salaries of Caregivers under their jurisdiction” (ECCD Policy 2004). This provision could be an enabler for market space ECCD delivery but for the lack of workable guide in a financial maze where ECCD services appear to be out of the radar at that level. It is obvious that the most significant challenge to efficient policy implementation was the completely inadequate conceptualization of the role of the local government service in contributing to delivery and the realization of ECCD outcomes.

Ahead of the revision of Ghana’s ECCD policy, which is expected to take on board assessment recommendations as articulated above, these guidelines for market space ECCD services make a modest attempt to address some of the identified gaps in policy content and programmatic direction to ensure qualitative broad inclusion of the informal sector economy beneficiary concerns in ECCD service delivery. Lessons and information that will be generated from the guideline formulation process and actual implementation could be an invaluable resource for the policy revision process.

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5 Undertaken under the auspices of the Ministry of Gender, Children and Social Protection. (A copy of the report is not available online but can be shared with WIEGO)
SECTION II: How the Guidelines were developed

These Guidelines were developed through the collaborative efforts of a Reference Group comprising of parents of children in market-based day care centres at Makola and Ga East, representatives of informal trade organisations, Child Care Workers, Department of Social Welfare officials from the Accra Metropolitan Assembly and Ga East Assembly, the Department of Children under the Ministry of Gender, Children and Social Protection, an urban planning specialist and an ECCD expert.

The Guidelines draw on laws, policies, and standards issued by governments, non-governmental and international organizations, and as well as inputs generated through broader consultations with women informal traders, ECCD practitioners, urban planning officials, municipality officials and specialists with expertise in informal sector economy.

A list of stakeholders consulted is provided in the Annex 1.0

SECTION III: Purpose/Function and scope of the Guidelines

a) To develop and enhance the quality of ECCD services in Day Care Centres in and around markets.

b) Define the expectations of stakeholders – parents, childcare workers and oversight institutions, and provide a framework and benchmarks to assess delivery of ECCD services provided by Day Care Centres in and around markets.

c) To increase access to ECCD services for urban informal sector workers, especially women traders working in and around markets.

These Guidelines seek to complement applicable ECCD standards, laws, policies, and principles. Where such standards, laws, policies, and principles are absent or where the Guidelines set higher standards, stakeholders are encouraged to follow these Guidelines.

SECTION IV: Values and Principles

These Guidelines are guided by the principles of the Early Childhood Care and Development (ECCD) Policy (2004) and best practices for quality, inclusive and gender sensitive ECCD services:

PRINCIPLE 1 – The best interest of the child is paramount: in all situations, the interest and well-being of the child should supersede all other considerations. All programmes, activities and decision making should consider the well-being of the child presently and in the long-term, in line with the concept of sustainable development. All choices and actions should be taken with earnest consideration on how they impact children presently, and future generations.
PRINCIPLE 2 - **Equality and non-discrimination**: ECCD service providers must adhere to the requirements of equality legislation and non-discrimination principles in defining admission criteria, the treatment of children and their parents, and the employment and training of staff of Day Care Centres. ECCD services should be accessible to all, irrespective of gender, religion, disability or income.

PRINCIPLE 3 – **Recognize and prioritize childcare needs of workers in the informal economy**: ECCD services providers will endeavour at all times to provide services which are accessible and supportive of the working schedules of workers in the informal economy especially women traders.

PRINCIPLE 4 – **Holistic/ All-Inclusive service provision**: all the development needs of a child from early learning, physical, psycho-social, emotional and cognitive development, are interconnected in a child’s life and need to be developed simultaneously since progress in one area affects progress in others.

PRINCIPLE 5 – **Working in partnership with parents**: children’s well-being and development is best promoted through childcare workers and parents collaborating together in the interest of a child’s development.

PRINCIPLE 6 – **Parents have ultimate responsibility for their wards**: parents are to be encouraged to take full responsibility for the wellbeing of their children. There is no substitute for parents so as much as possible parents (biological or foster parents) must cater for their children in a family setting so that the social, moral, and spiritual development must be catered for by the parents.

PRINCIPLE 7 – **Bridging the equity gap**: all children must be supported as they grow and develop, all stakeholders must prioritize and urgently attend to children in conditions that put them at increased risk of delayed development (e.g., children living in extreme poverty, children with special needs).

PRINCIPLE 8 – **Children in institutional care**: children in their early years sometimes find themselves under institutional care, however, loving families provide a better environment for children to develop than institutions. Institutional care should be considered as a last resort when the child is suffering from abuse, neglect, harm, never receiving responsive care. Children living in institutions and patronise day care centres must be monitored closely for signs of neglect and abuse.

PRINCIPLE 9 – **Recognition and appreciation of the uniqueness of every child**: every child is different in their own ways. They develop differently and at different pace and exhibit different capabilities even though they may be of the same age. Caregivers must endeavour to explore, identify, promote and facilitate the development of the child’s potential.

PRINCIPLE 10 – **Ensuring love and care**: every child should always be given attention at all times since it forms the foundation for the development of the child.

PRINCIPLE 11 – **Confidentiality of the child must be upheld**: information about all children should be protected and kept private. Where there is the need for such information to be made public, the identity of the child should be preserved to avoid doing harm to the child’s image and reputation in the future.
SECTION V: Standards and best practices for quality, inclusive and gender sensitive ECCD services in and around markets

Standards within the Guidelines are informed by the Nurturing Care Framework which embraces:

- Good Health,
- Adequate Nutrition,
- Responsive Care Giving,
- Security And Safety,
- Opportunities For Early Learning.

These domains are directly administered by parents, families and other primary Caregivers and require support by well-defined policy environment, programmes and services.

The standards within the guidelines have been selected across the five components above bearing in mind the rather low baseline values for ECCD services in Ghana. A progressive system with the most critical standards will be followed along the line to make it as practical as possible.

Services for children

ECCD services should actively promote equality of opportunity and anti-discriminatory practices for all children including those with special educational needs and disabilities. Day Care Centres should therefore take into consideration the need to provide **equal opportunities for all children including children with special needs and disabilities** when providing the following services:

A) CARE, LEARNING AND PLAY (0-3 YEARS)

A Day Care Centre:

1. Should endeavour to meet a child’s individual needs and promote the child’s welfare.
   - Day Care Centres should plan and provide activities and play opportunities to develop children’s emotional, physical, social and intellectual capabilities.

2. Should endeavour to create opportunities for the children to interact consistently with an adult at frequent intervals.

3. Should endeavour to provide activities, toys and equipment which are appropriate for the child’s age and provide varied sensory opportunities and experiences.
   - Adequate recreational space should be provided for the children of the centre where feasible. Alternatively other safe spaces may be converted for recreational use.
   - Playthings made of wood or nontoxic materials should be used.
   - Day Care Centre may provide swings, climbing frames and other playground equipment but should ensure that the equipment is safe and maintained at all times.
   - Management of a Day Care Centre is responsible for regulating the number of children using the playground equipment to ensure the safety of the children.

4. Should train Childcare Workers to offer support to children in the activities they choose. Childcare Workers should listen to children and talk with them about what they are doing.
5. Should provide opportunities for children to rest as needed, and children’s individual sleeping routines should be respected.

6. Should liaise with relevant stakeholders to ensure the child has completed the basic immunisation schedules as determined by the National Immunisation Programme.

7. Should liaise with relevant stakeholders to ensure every child is registered with the Birth Registry.

B) ECCD CURRICULUM AND PEDAGOGY (0-3 YEARS)

A Day Care Centre:

1. Should not subject a child to written examinations and interviews for admission.
   • Admission of the child should be based solely on a request by the parent.

2. Should use an approved ECCD syllabus for the Centre.
   • Day Care Centres may liaise with the Department of Social Welfare/School of Social Work for teaching and learning resources.
   • KG I & II curriculum should not be used in a Day Care Centre.

3. Should endeavour to provide holistic learning in the Centre.
   - The Day Care Centre should plan and provide activities and play opportunities to develop children’s emotional, physical, social and intellectual capabilities.

4. Should develop half day (8.00 a.m. to 12 noon) and full day (8.00 a.m. to 5p.m.) programmes for children in the Centre.
   • Parents and Management of the Centre may agree on alternative times which suit the working hours of parents and the Centre.

5. Should ensure learning in the Centre is activity-based. Learning should be taught through play.
   • No subjects will be taught.

6. Should ensure Childcare Workers develop supportive learning environments, adopt creative approaches and develop strategies to support the learning of every individual child.
   • Day Care Centres may liaise with the Department of Social Welfare/School of Social Work for teaching and learning resources.

C) PRE-SCHOOL CHILDREN (3-6 YEARS)

A Day Care Centre:

1. Should endeavour to provide services that encourage creativity. E.g. reading and imaginative plays.
   - Imaginative play is when children are role playing and are acting out various experiences they may have had.

2. Should engage children in activities that develop fine motor skills including writing, painting, drawing etc.

3. Should engage children in activities that experiment with pre-literacy, and pre-numeracy concepts.

4. Should engage children in activities that encourage language development for example, talking, being read to, singing should be used.

5. Should endeavour to provide children with opportunities to express themselves and listened to.

6. Should liaise with relevant stakeholders to ensure every child has completed the basic immunisation schedules as determined by the National Immunisation Programme.

7. Should liaise with relevant stakeholders to ensure every child is registered with the Birth Registry.
Standards of Service

A) HEALTH AND SAFETY

1. Safety – Management of a Day Care Centre must ensure that the children are under constant adult supervision and adequately protected against fires, hot water installations, electrical fittings and appliances, heating appliances and any other object or thing which may be dangerous or cause injury to the child;
   • *Bushes and pools of water should be cleared to avoid possibility of harbouring snakes or breeding mosquitoes.*
   • *There should be adequate facilities for disposal of waste.*
   • *A Centre must take any reasonable measures which in the opinion of the authorised official, may be necessary to protect the child from any physical danger.*
   • *All hazardous materials should be kept out of reach of children (e.g., petrol, gas, bowls of water etc)*
   • *Where the ECCD centre has electricity, there should be use of covered sockets to protect children from electric shock. No electric cables should be left loose.*
   • *Where necessary, a facility being used as a Day Care Centre should be fenced with a lockable gate that the children cannot open.*

2. Emergency health care – a Day Care Centre must establish arrangements with the nearest health facility and contact the facility to provide emergency health care.
   • *Details of the arrangements with the health facility should be communicated by the Day Care Centre to the parents.*
   • *A Day Care Centre must keep updated contact records of parents and outline procedures to notify parents or guardians of illness or injury in emergency and non-emergency situations.*

3. Sickbay – everyday Care Centre should have an area set aside as a sickbay for the treatment and care of any child who becomes ill or who is injured during the hours of operation of the centre until such time as the child is collected by the child’s parent or guardian.
   • *The sickbay should be equipped with – lockable and fully equipped first-aid unit suitable for children, which should be kept out of the children’s reach, and a bed or a mattress.*

4. First Aid – a Day Care Centre must ensure all Childcare Workers are trained on how to use the contents of the First Aid box and on how to deal with accidents.
   • *A Day Care Centre may adopt an improvised First Aid box. A specimen of which is provided as Annex 2.*
   • *Contents of the first aid box should be checked regularly and replaced whenever necessary. A list of contents of a First Aid box is provided as Annex 3.*

5. Medicines – a Day Care Centre may only allow medication to be administered to a child with the consent of the child’s parents.
   • *Medicine should be clearly labelled, dosage specified and frequency and duration for which the medication should be administered.*
   • *A specimen Medicine Administration Chart provided as Annex 4 may be adopted for this purpose.*

6. Public health – a Day Care Centre must handle any threat or actual public health issue promptly.
   • *Childcare Workers should be trained periodically by the Centre on public health issues and common symptoms related to children.*
   • *A report should promptly be made to both the Manager of the Day Care Centre and parents or guardians of the children in case of a suspected or actual public health issue.*
   • *A Day Care Centre must liaise with the Ghana Health Service and follows advice as directed by health officials.*
• Childcare Workers, children, parent or guardian must be instructed to stay home if they are sick and visit a health facility.
• A Day Care Centre must establish procedures for dealing with a public health emergency, educate and inform parents where it becomes necessary to use the procedures.

7. The Day Care Centre Childcare Workers should be informed and made aware about the importance of good hygiene practices to prevent the spread of infections.
   • Childcare Workers should promote hygiene practices to children including the Covid-19 care and hygiene protocols as provided in these Guidelines.

B) FOOD AND WATER

1. Meals – the child should be provided with regular food and water in adequate quantities for their needs.
   • Meals should be properly prepared, nutritious and comply with dietary requirements recommended by the Ghana Health Service.
   • Children attending a Day Care Centre all day should be offered a midday meal or a packed lunch, which may be provided by parents. Parents should be advised about what can be stored safely.
   • A Day Care Centre should request for information from the parent about any special dietary requirements, preferences or food allergies a child may have if meals are provided by the centre.

2. Water – safe drinking water should be available to the child always.

3. Food handlers – persons cooking or handling meals for children in a Day Care Centre should adhere to food safety and personal hygiene standards or bylaws of the Municipality including – washing of their hands before food preparation and after using the toilets/latrines, use of wholesome ingredients and maintaining a clean environment.

4. Feeding – children should always be supervised by an adult during mealtimes.
   • Normally, babies should be held whilst bottle feeding, preferably by the same Childcare Worker.
   • Facilities for the hygienic preparation of babies’ foods should be available.
   • Suitable sterilisation equipment should be used for babies’ feeding equipment before and after meals.
   • Childcare Workers should identify and document any child with feeding difficulties and/or neglect and direct parents/guardians to seek medical attention.

C) CHILD PROTECTION

1. A Day Care Centre must ensure Childcare Workers receive basic training in child protection and comply with child protection laws to ensure that these laws are observed to prevent abuse of the children under their care.

2. Childcare Workers should be trained by the Day Care Centre to manage a wide range of children’s behaviour in a way which promotes the child’s welfare and development.

3. A Day Care Centre must ensure corporal punishment is not used as a corrective measure in the Centre.

4. Childcare Workers should be aware of child protection issues and should be able to implement the Centre’s policies and procedures.

5. Childcare Workers should be aware of the possible signs and symptoms of children at risk and should be aware of their responsibility to report or take action.
D) STANDARDS FOR CHILDCARE WORKERS/STAFF

1. Childcare Workers of a Day Care Centre should be above 18 years old, physically clean and in a state of good health.

2. Childcare Workers should be trained by a Day Care Centre in Early Childhood Care and Development concept and practices.

3. Childcare Workers should demonstrate positive values and respect for children in their respective community.

4. Childcare Workers should be made aware that some children may have special needs and therefore require special treatment.
   - Childcare Workers should be proactive in ensuring that appropriate action can be taken when a special needs child is identified or admitted to the facility.
   - Childcare Workers must take steps to promote the welfare and development of special needs child within the Centre, in partnership with the parents and other relevant stakeholders.

5. Childcare Workers should not smoke, take alcohol, use any illicit drugs or engage in inappropriate behaviour when working with children.

6. A Day Care Centre must undertake criminal clearance checks with the Ghana Police Service and take-up reference checks before employing a Childcare Worker at a Day Care Centre.
   - Childcare Workers must not have any history of child molestation or other conduct which may be deemed harmful to a child.

7. Childcare Workers must never use any form corporal punishment or psychological torture when working with children.

8. Based on good ECCD practise the ratio of Childcare Worker to children of different age groups should be as follows:
   - Below 2 years – 1:5
   - 2 – 3 years – 1:10
   - 3 – 4 years – 1:15

E) PHYSICAL ENVIRONMENT STANDARDS

1. The premises being used as a Day Care Centre should be safe, secure and suitable for that purpose.
   - A Day Care Centre should have adequate space, be in an appropriate location and have facilities for a range of activities which promote the development of children.

2. The premises of a Day Care Centre should be made welcoming and friendly to children and parents.

3. A premises being used as a Day Care Centre should be disability friendly.

4. A Day Care Centre should be clean, well lit, adequately ventilated and all structures and equipment maintained in good repair, and in a clean and tidy condition.

5. The surface or outdoor play areas of a Day Care Centre should be free of sharp objects, harmful plants and discarded materials and equipment.
**SECTION VI:**
Indicators for monitoring responsive caregiving

These indicators provide the areas for Day Care Centres and stakeholders to undertake periodic assessments of services to highlight successes, identify gaps and adopt an action plan to improve on performance where necessary.

<table>
<thead>
<tr>
<th>INDICATORS</th>
<th>Frequency, intensity, and quality of interaction and experience of the children during a 3-hour period - (except #14)</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Childcare Workers recognize and respond appropriately to children’s individualized cue</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Childcare Workers use daily routines and interactions to form the basis for learning</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Childcare Workers use joint attention with children during normally occurring routines and activities to demonstrate being responsive to the child’s interests</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Childcare Workers narrate what is happening to children during routines and activities.</td>
<td></td>
<td></td>
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<tr>
<td>5</td>
<td>Childcare Workers verbally help children anticipate familiar routines and events.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Childcare Workers encourage positive peer interactions through modelling and arrangement of the environment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Childcare Workers help children identify and express and manage their emotions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Childcare Workers encourage children to notice when their peers are expressing emotion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Childcare Workers model empathy or assist children in showing empathy towards their peers.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10</td>
<td>Childcare Workers support children’s sense of competence by encouraging them to do things for themselves as they are developmentally ready.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>11</td>
<td>Childcare Workers encourage children to solve their own problems.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Childcare Workers provide children with a variety of opportunities to develop their gross motor skills.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Childcare Workers provide children with a variety of opportunities to develop their fine motor skills</td>
<td></td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Throughout daily interactions and naturally occurring experiences, Childcare Workers encourage children to explore developmentally appropriate concepts, such as:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Comparing Quantities</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• One-to-one Correspondence</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Volume</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Cause and Effect</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Object Permanence</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Compare and Contrast Opposites</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><em>(Must observe a minimum of 4 different concepts being introduced and the children present should be involved)</em></td>
<td></td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Childcare Workers engage in language play (songs, rhymes, games) with children that introduce listening and responding</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
SECTION VII: Covid 19 precautionary measures

Day Care Centres must continue to raise awareness on Covid-19 prevention and implement precautionary measures for the Centre as follows:

A) ADHERE TO PHYSICAL DISTANCING INSTRUCTIONS
   1. A Day Care Centre must implement a property-specific capacity limit for children that ensures appropriate social distancing based on the size of the Centre.
   2. Visitors to the Day Care Centre must maintain a distance of at least six feet while interacting with Childcare Workers and children.

B) REPORT SYMPTOMS OF OR EXPOSURE TO COVID-19
   1. A report should promptly be made to both the Manager of the Day Care Centre and parent’s or guardian of the child.
   2. Childcare Workers, children, parent or guardian must be instructed to stay home if they or any member of their household are sick or show any symptoms of Covid-19.
   3. If symptoms feel worse call Ghana Health Service hotline: 311 or visit the nearest health facility.

C) FOLLOW HAND HYGIENE AND CLEANING AND DISINFECTION GUIDELINES
   1. Childcare Workers should encourage frequent and thorough hand hygiene for both Childcare Workers and children including when they arrive at the Centre, between all program activities, after using the toilet; before eating; and, before departing the Centre.
   2. A Day Care Centre should ensure regular cleaning and disinfection of restrooms, toys, surfaces etc. in the Centre.

D) FOLLOW APPROPRIATE RESPIRATORY HYGIENE AND COUGH ETIQUETTE.
   1. Childcare Workers should encourage children aged 2 and older to wear face coverings except when eating, drinking, showering, or sleeping/resting.
      - Face coverings should never be worn by children under age 2, or by a child unable to medically tolerate a face covering.

E) ALL ESSENTIAL VISITORS INCLUDING SOCIAL WELFARE OR HEALTH OFFICIALS WHO MUST VISIT THE DAY CARE CENTRE MUST ADHERE TO ALL COVID-19 PREVENTION PROTOCOLS.
SECTION VIII: Governance structure of ECCD services provider (Day Care Centres)

The delivery of quality childcare services requires effective and accountable management structures committed to institutionalized structures that ensure compliance with applicable law and practices coupled with sound management and administrative processes. To improve quality and preserve ECCD services, all Day Care Centres should endeavour to establish the following:

A) MANAGEMENT STRUCTURE

1. A Day Care Centre operating in a market directed at Kayayei, street vendors and market traders’ children must have a clear governance structure in place which operates within the ethos of the Centre.
   • Management must ensure the following are represented on “the Board” or similar highest organ within the governance structure of the Day Care Centre:
     - parent(s) or guardian(s) from the two main occupations practised in the market with children currently enrolled at the Centre or the authorised nominee of such parents.
     - Market-based organisation representative(s);
     - Department of Social Welfare

2. “The Board” or similar organ of a Day Care Centre has overall responsibility and accountability for the operation and general administration of the Centre.
   • “The Board” or similar organ shall ensure it holds not less than two meetings in a year. Notice of a meeting, the agenda and any other relevant information should be communicated to all representatives in advance to enable them to attend the meeting.
   • “The Board” or similar organ may establish committees, where necessary, to oversee specific aspects of the Centre’s operations.

3. In addition to being represented on "the Board" or similar organ, Management should at all times consult parent(s) or guardians and take their views into consideration on issues through the agreed meeting platforms.
   • Management should endeavour to engage parents or guardians on issues relating to the feeding, health, and care of the children, and the operations of the Day Care Centre or any other issues which may be proposed by either parents or Management.
   • Such engagement with parents must be held not less than once every three months.

4. A person designated as "the Head" or similar position of the Day Care Centre must have the necessary and required national qualifications, skills and competencies to fulfil their role.
   • A person appointed as “the Head” or similar position of a Day Care Centre should be trained in ECCD domains and be able to under tasks including the following:
     - apply basic skills in management and operations within an ECCD centre and use leadership skills to advocate for quality education in ECCD centre.
     - exhibit sound knowledge of both global and national early childhood education policies, practices and regulations.
     - develop curriculum, set educational standards and monitor the same.
     - possess knowledge about different kinds of disabilities and liaise with relevant agencies to support children with disabilities.

5. "The Board" or similar organ of a Day Care Centre should ensure financial management systems are in place to ensure good financial practises for the Centre.

6. All stakeholders should be made aware of a Day Care Centre’s management structure.
B) STAKEHOLDER ENGAGEMENT PROCEDURES

1. The Management of a Day Care Centre should endeavour to develop procedures for the efficient and safe management of the Centre.
   • Management should have a policy which outlines its procedures on the following:
     - When, and how the Centre will engage parents;
     - When and how the Centre will engage other external stakeholders;
     - When and how the Centre will engage management & staff.

C) STAFF RECRUITMENT AND DEVELOPMENT

1. A Day Care Centre should ensure that all Childcare Workers employed have appropriate values, attitudes and dispositions for working in the area of pre-school age childcare.

2. A Day Care Centre should equip Childcare Workers with the necessary skills, knowledge and qualifications to carry out their role and responsibilities.

3. A Day Care Centre must quarterly appraise and manage the performance of Childcare Workers, provide individual development plans to support Childcare Workers with self-evaluation and reflection, ongoing professional development and continuous improvement.

4. A Day Care Centre should not prohibit Childcare Workers from joining or forming a union or negotiating a collective bargaining agreement at their place of work.

D) STAFF SUPPORT

1. A Day Care Centre must proactively support Childcare Workers to:
   • create a safe, caring, interesting and fun environment for children,
   • develop and promote warm, respectful relationships with the children, parents or guardian, staff, management and other stakeholders as appropriate.

2. A Day Care Centre should have a system in place to ensure that each individual who begins work at the Centre has a clear understanding of their role and what is expected of them.

3. A Day Care Centre should have a code of behaviour in place for Childcare Workers and staff.

E) QUALITY DEVELOPMENT AND IMPROVEMENT

1. A Day Care Centre should have a system in place to ensure quality development and improvement of the services at the Day Care Centre.
   • Standards provided in this Guideline for childcare, Childcare Workers and institutional governance should be used in assessing quality in addition to any other relevant best practices. The specimen provided as Annex 5 can be used as an additional guide.

2. Children, parents, staff and relevant stakeholders should endeavour to improve quality of ECCD services by actively participating and engaging the Day Care Centre in a constructive manner.
   • Stakeholders should periodically provide or contribute to the evaluation and review of the services by the Centre using the standards provided in this Guideline for childcare, Childcare Workers and institutional governance. The specimen provided as Annex 5 can be used as an additional guide.
F) GRIEVANCES AND COMPLAINTS

1. A Day Care Centre should establish a system to receive and address any grievance or complaint.
   - A grievance or complaint must be resolved in a timely matter, investigated fairly and consistently, responded to and documented in accordance with the Centre’s procedures.

2. The Day Care Centre must have clear information, readily available and displayed in a prominent place within the Centre for all stakeholders on:
   - How to raise a grievance or complaint, and how they are managed by the Centre;
   - Whom to make a complaint to;
   - Response time;
   - Process for investigation;
   - Process for sharing response/outcome;
   - Appeals process if complainant is unhappy with the outcome
SECTION IX:
Administrative procedures for Day Care Centres

ECCD service providers should aim to implement sound administrative procedures that foster openness by outlining procedures and establishing controls among others. To achieve this aim, a Day Care Centre should adhere to the following:

A) APPLYING FOR ADMISSION

1. A Day Care Centre should assist a parent/guardian to complete an application form for the child to attend the Centre.

2. Every application for admission to a Day Care Centre must include the following minimum information:
   - child’s personal details - full name, date of birth, age, sex, birth certificate if available, immunisation information or records if available and medical report as specified below.
   - parent or guardian’s details - name of parent or guardian; residential address, telephone numbers parent or guardian, place of work and location, membership of market association
   - emergency contact details - name, address and telephone numbers of a responsible person, other than a parent or guardian, who may be consulted in an emergency.

3. An application should include the parent’s or guardian’s consent for the Day Care Centre to seek medical assistance for the child in emergency situations.

4. A Day Care Centre should ensure that the date on which the child is admitted to the Centre and the date on which the child ceases to be cared for at the facility are recorded on the application form.

B) MEDICAL REPORT

1. The following information should be provided by the parent or guardian to the Day Care Centre at the time applying for admission for a child:
   - the child’s general state of health and physical condition
   - the nature and dates of any operations that the child has undergone;
   - the nature and dates of any illnesses or communicable diseases that the child has suffered from;
   - the details of allergies that the child suffers from;
   - information about any medical treatment that the child is undergoing or has undergone; and
   - immunization records or the details of any immunization that the child has received.

2. Any changes to the medical information listed above should be filed together in the same file.

C) REGISTERS

1. The Day Care Centre must keep a general register in which it records the personal details, parent or guardian’s details, emergency contact details, and medical details of every child admitted at the facility;

2. The Day Care Centre should have an attendance register in which it records on a daily basis the presence or absence of each child and, in the case of absence, the reasons for the absence.
D) PERSONAL FILE

Each child presently admitted at the Day Care Centre should have a file where all records concerning the child are kept.

E) INCIDENT REPORTING AND RECORDS

1. A Day Care Centre must keep a book in which important or significant events relating to the Centre and the children, including illnesses and accidents, and the details of medications administered, are recorded.

2. Details of incidents should be recorded in triplicate. One copy should be provided to the parent, one copy filed in the child’s Personal File, and one copy filed in the accident file.
   • A specimen incident reporting form provided as Annex 6 can be adopted for this purpose.

F) VISITOR’S REGISTER

A Day Care Centre must keep a book in which any visitor to the Centre should provide the following details:
   • The date, sign-in time, name of visitor, organisation, person visiting and purpose of visit, sign-out time, visitor’s signature.
   • The Day Care should counter sign the register to confirm the departure of the visitor.

G) RETENTION OF RECORDS

1. A Day Care Centre must keep a child’s personal file records for a minimum of 3 years after the date on which the child ceases to be cared for at the Centre.

2. General registers, attendance registers and incident books should be kept for a minimum of 3 years after the date of the last entry in each of those documents.

3. All records must be retained in a safe place allowing ready access by relevant government authorities.
   • Reasonable steps must be taken to prevent damage to or destruction of the records.
SECTION X: Collaborative partnerships with parents, families, and communities

Collaborative and respectful partnerships with children, parents, market associations, government institutions and relevant stakeholders are key in fostering strong and positive linkages which can be leveraged for the benefit of a Day Care Centre. To achieve this aim Day Care Centres must build and strengthen partnership links as follows:

A) PARTNERSHIPS WITH PARENTS AND FAMILIES

1. The Management of the Day Care Centre providers should have a system in place to engage families to promote positive parenting skills; work closely with parents/guardians; value and encourage parental involvement.

2. Management should have a system in place to provide information to parents/guardians on their child’s learning, development and well-being, etc.

3. Ensure parents or guardians contribute to, and are aware of and understand key policies, procedures and information about the Day Care Centre’s service.

4. Information on policies and procedures is translated into different languages for all parents or guardians.

B) PARTNERSHIPS WITH OTHER STAKEHOLDERS

1. Partnerships should be developed with local community groups, community services and key people from the community that can enhance the Centre’s programme of activities, such as the Department of Births and Deaths, market associations, public health nurse.

2. Have a close collaboration with the nearest health centre to attend to children’s health.

3. Work together as far as possible with schools, to provide children with smooth transitions between both settings.

SECTION XI: Cost and Financing of Day Care Centre operations

Market space ECCD service provider should recognise that their services will be assessed mainly by low income and vulnerable women informal workers. Private Day Care Centre operators, in particular, should endeavour to balance the desire of making a return on its investment against the need to provide affordable and accessible ECCD services to a predominantly vulnerable group. Costing and financing of ECCD services should consider the following:

Costing of ECCD services

- Both private and public funded Day Care Centres should profile parents or guardians to assess their financial capability before fixing fees for childcare services.
- In determining the cost of ECCD services, a Day Care Centre should take into consideration resources and inputs to operate the Centre such as cost of personnel, teaching and learning materials, feeding, facilities and equipment etc bearing in mind cost effective options.

A) ALLOCATED FUNDS

A Day Care Centre should endeavour to use its funds and resources efficiently, effectively and equitably.

B) FINANCING MECHANISMS

1. ECCD service providers should endeavour to leverage all funding opportunities including:
   - direct and indirect funding from government, NGOs, Development Partners.
   - in-kind contributions, volunteer contributions from parents, caregivers, market-based associations or community members

2. ECCD service providers should work with relevant government sectors such as health, education and social protection to map out existing ECCD-related activities and identify gaps.

3. ECCD service providers should endeavour to identify new sources of funding (e.g., public-private partnerships, innovative financing).

4. MMDA's with the responsibility to provide financial, material resources and services for ECCD programmes and Day Care Centres within their jurisdiction should discharge their obligations timeously.

5. MMDA's should ensure provision is made in their annual budgets to fund operational and investment related expenses of Day Care Centres including the following:
   - Childcare Workers’ and administrative staff’s salaries and benefits
   - Food (nutrition components)
   - Health care: supplies, facilities
   - General administration costs (overhead)
   - Training: in-service training
   - Communication, other supplies
   - Maintenance: facility costs, electricity, telephone, and insurance
   - Contingency: fund for unexpected costs

C) ADVOCACY AND PARTICIPATION IN BUDGET PLANNING AND FORMULATION

Public funded Day Care Centres should explore opportunities to:
- understand the political economy and fiscal space around ECCD to identify entry opportunities.
- participate in budget planning and formulation within the national and local level budget processes.
- build strategic relationships at the political and technical levels to go beyond ECCD advocates, and reach other national decision makers and influencers, including parliamentarians, donors, think tanks, and civil society organisations.
SECTION XII: Day Care Centre siting and building considerations

Siting provisions for Day Care Centres will ensure that current and potential site for ECCD services is conducive for children and are progressive to accommodate innovative ECCD services within the constrained urban setting hosting markets. New and existing Day Care Centre should proactively engage urban planners for the Municipality in meeting the following requirements:

A) LOCATION OF DAY CARE CENTRE

1. The location of a Day Care Centre should be away from anything which may pose a health or safety hazard to children.

2. Drawings for every structure or premises to be used as a Day Care Centre should be approved by the Municipal Assembly.

3. A Day Care situated in and around a market should have an Evacuation Plan to be used in case of an emergency.
   - The Evacuation Plan should be easy to follow, rapid and integrated into the market’s plan.
   - Management, Childcare Workers and staff of a Day Care Centre should be familiar with the Evacuation Plan procedures.
   - The Management of a Day Care Centre should Liaise with relevant stakeholders to organise periodic mock evacuation exercise.

B) BUILDING SPECIFICATION

1. A structure to be used as a Day Care Centre should be of material which is:
   - stable;
   - waterproof;
   - sufficiently ventilated;
   - constructed of materials which are safe.

2. The structure should be planned and built to accommodate children with disability.

3. The structure should not contain any physical features which present or might present a risk to children; and complies with any other additional requirements determined by the Municipality from time to time.

4. A Day Care Centre located in a premises above ground floor should install the necessary safeguards to protect the child.

5. A Day Care Centre should be enclosed with approved fencing so as to prevent
   - a child from leaving the premises on his or her own accord;
   - the entry of domestic animals onto the premises; or
   - unauthorised access or entry.

C) BASIC FACILITIES TO BE PROVIDED

1. Classroom & play area – should be well ventilated classroom with adequate play aids and indoor and outdoor playing space and materials. Day Care Centres should consider the following minimum spatial guidelines:
   - Consider 2m² per child indoors for babies.
   - 1.4 – 1.8m² per child for both indoor and outdoor areas for 2–6-year-olds.
• Where space is limited due to situational factors a Day Care Centre may engage municipal planning officials with a plan to demonstrate how such space can be optimised (e.g., rotating children’s outside play time, providing suitable play equipment).

2. **Toilet** - nappy-changing area and adequate number of toilets should be provided on the Day Care Centre premises or immediately adjacent to the premises; or other acceptable alternative that is hygienic and safe for children.
   • At least one of the toilets should be specifically designed for children with special needs.
   • Where feasible toilet facilities for boys and girls should be separated.
   • Staff toilet and handwashing or bathroom facilities should be separate from the facilities used by children.

3. **Washing area** - there should be adequate washing or handwashing facilities supplied with clean water and placed at a height convenient for children.

4. **Kitchen** - a Day Care Centre which provides meals to children from a kitchen on its premises should have a separate approved area set aside, with due regard for the safety of children, as a kitchen for the preparation of food and the washing up and rinsing of crockery, cutlery, pots, pans and other kitchen utensils.
   • Where there is no formal kitchen, an area should be demarcated and set aside for the above activities to take place.
   • Persons cooking or handling meals for children in a Day Care Centre should adhere to food safety and hygiene standards of the Municipality.
   • A kitchen should have adequate lighting and ventilation.

5. **Storage** – storage space and facilities should be provided in a Day Care Centre. Storage must be lockable and not accessible to children.
   • Suitable storage space and facilities should be provided for food, crockery, cutlery and kitchen utensils if a kitchen is provided, and for the personal belongings of each child and Childcare Worker.

6. **Seating and resting** – suitable and safe seating should be provided to ensure that each child sits or rests comfortably at the Day Care Centre.
   • Reasonable steps should be taken to ensure that a child does not share sleeping mat, mattress, blanket or other personal items with another child.
SECTION XIII:  
Registration requirements for ECCD services provider

An applicant intending to provide ECCD services must register with the Social Welfare Department of the Municipality. The registration requirements are as follows:

1. Completed application form addressed to the Department of Social Welfare, (Accra Metropolitan Assembly) for approval to establish a Day Care Centre. Details required by the form are as follows:

   a) Details of the Day Care Centre
      • Name of proposed Day Care Centre
      • Region, District, City/Town/Village
      • Number of days of the week to be operated
      • Number of children to be enrolled – particulars on Female, males
      • List of classes, number of children, number of Childcare Workers

   b) Particulars of owner
      • Name
      • Address
      • Qualifications
      • Occupation

   c) Staff
      • Particulars of persons in charge of the Centre – name, qualification
      • Is there person trained in first aid

   d) Other staff
      • Name and qualifications (indicate whether first aid certified)

SECTION XIV:  
Guideline’s review

The Guidelines are intended to be a living, adaptive document, responsive to the demands of ECCD. To foster ownership of these Guidelines by the relevant stakeholders including parents, Day Care Centre operators, market-based associations, government agencies etc, the Guidelines will be reviewed periodically by a working group comprising of the stakeholders familiar with the implementation of the Guidelines.
References

1. Extending childcare services to workers in the informal economy: Policy lessons from country experiences ILO and WIEGO Policy Brief No. 3

2. Nurturing Care Framework for Early Childhood Development


4. National Gender and Children Policy, 2001

5. Policy and Strategies for Improving the Health of Children under 5 years,

6. Promotion and Extension of Pre-School Education

7. The Children's Act,1998 (Act 560)


10. Early Learning Standards and Indicators for 4-5 years old – Ghana Education Service (2016).

11. The Early Childhood Care and Development (ECCD) Policy (2014)


14. Urban planning regulations and relevant municipal by-laws.
Annex 1

Stakeholders consulted

List of Government Departments and Organisations represented on the Reference Group

1. Department of Children of the Ministry of Gender, Children and Social Protection
2. Accra Metropolitan Assembly - Social Welfare Directorate
3. ECCD Expert - Susan Sabaa
4. Legal Consultant - Dela Quarshie-Twum
5. Greater Accra Market Association
6. Informal Hawkers and Vendors Association
7. Ga East Traders Association
8. Makola Day Care Centre Management
9. Madina Day Care Centre Management
10. Parent Representative of 2 Day Care Centres
Annex 2

Improvised First Aid Box

1. 2 litre ice-cream containers
2. Scrap cotton for dressings
3. Scrap cotton for bandages
4. Scrap cotton triangular bandages
5. Scrap small pieces of material for nose wipes
6. Scrap material for face cloths
7. Plastic bags to substitute for rubber gloves
8. Litre container (to make re-hydration drink)
9. Cardboard & padding for rigid splints

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Annex 3

Suggested Contents of a First Aid Box

The first aid box must be clearly marked as such and stored out of the reach of children. Every Childcare Worker must know where the first aid box is stored.

- A list of emergency numbers must be placed (stuck) inside the first aid box.
- Inside the first aid box must be a list of the contents of the box.

<table>
<thead>
<tr>
<th>ITEM</th>
<th>USE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 pairs Latex Gloves (or a supply of plastic bags)</td>
<td>For incidents involving blood or body fluids</td>
</tr>
<tr>
<td>1 pair of household gloves</td>
<td>For cleaning after blood spills</td>
</tr>
<tr>
<td>A small plastic bowl</td>
<td>To hold water and Savlon while cleaning and washing wounds</td>
</tr>
<tr>
<td>50 ml Savlon</td>
<td>For cleaning and washing wounds</td>
</tr>
<tr>
<td>100 ml household bleach (to dilute with 10 litres of water)</td>
<td>For blood spills</td>
</tr>
<tr>
<td>1 packet gauze swabs (20)</td>
<td>For covering larger wounds and eye injuries</td>
</tr>
<tr>
<td>1 packet cotton wool (or a roll of toilet paper)</td>
<td>For cleaning out wounds and covering or compressing wounds</td>
</tr>
<tr>
<td>Waterproof plasters (20)</td>
<td>For protecting cuts and scrapes or other breaks in the skin.</td>
</tr>
<tr>
<td></td>
<td>Waterproof dressings must be used if a worker works with food or drinks.</td>
</tr>
<tr>
<td>Safety pins</td>
<td>To secure bandages, dressings and slings</td>
</tr>
<tr>
<td>Micropore (or cellotape)</td>
<td>For securing a dressing</td>
</tr>
<tr>
<td>75 mm bandage (or a long strip of material)</td>
<td>For stopping bleeding, covering wounds, or making a sling</td>
</tr>
<tr>
<td>One-way resuscitator (or an airway)</td>
<td>To keep airways open</td>
</tr>
<tr>
<td>Plastic bags</td>
<td>For refuse disposal</td>
</tr>
<tr>
<td>Scissors</td>
<td>For cutting plasters, bandages and material</td>
</tr>
<tr>
<td>Tweezers</td>
<td>For extracting splinters and bee stings</td>
</tr>
<tr>
<td>Tissues</td>
<td>For general absorption of liquids</td>
</tr>
</tbody>
</table>
Annex 4

Example of a Medicine Administration Chart

Name of child: ................................................................................................................................................................................

Name of medicine: ........................................................................................................................................................ .

Instruction of parent or guardian: *(Frequency, dosage/volume)*

......................................................................................................................................................................................................
......................................................................................................................................................................................................
......................................................................................................................................................................................................
......................................................................................................................................................................................................

Signature of parent: .

................................................................................................................................................................................

Date: ..........................................................................................

Signature of staff member who administer the medicine: .

................................................................................................................................................................................

Date: ..........................................................................................
## Annex 5

### The Quality Assurance Review

The review can be administered by the representative of Department of Social Welfare as well as internally by the Management of the Day Care Centre

Name of Department of Social Welfare official: .................................................................................................................................................................................................................................................................

Date of visit/administered: .................................................................................................................................................................................................................................................................................................

### CENTRE DETAILS

Name of ECD Centre: .................................................................................................................................................................................................................................................................................................................................

Date opened: ..................................................................................................................................................................................................................................................................................................................................................

Postal Address: ..................................................................................................................................................................................................................................................................................................................................................

Physical Address: ..................................................................................................................................................................................................................................................................................................................................................

Telephone number (if available): .................................................................................................................................................................................................................................................................................................

Hours of opening: ..................................................................................................................................................................................................................................................................................................................................................

### STAFF

Supervisor: ..................................................................................................................................................................................................................................................................................................................................................

ECD Qualifications: ..................................................................................................................................................................................................................................................................................................................................................

Other relevant qualifications: ..................................................................................................................................................................................................................................................................................................................................................

Number of other Childcare Workers: ..................................................................................................................................................................................................................................................................................................................................

ECCD Qualifications of Childcare Workers: ..................................................................................................................................................................................................................................................................................................................................

Other relevant qualifications: ..................................................................................................................................................................................................................................................................................................................................................

Number of other staff: ..................................................................................................................................................................................................................................................................................................................................................

Kitchen workers: ..................................................................................................................................................................................................................................................................................................................................................

Gardeners: ..................................................................................................................................................................................................................................................................................................................................................

Caretakers/security: ..................................................................................................................................................................................................................................................................................................................................................

Cleaners: ..................................................................................................................................................................................................................................................................................................................................................

Other (specify): ..................................................................................................................................................................................................................................................................................................................................................
**CHILDREN**

Number of children registered: ................................................................................................................................................................................

Number of children present on day of review: ...........................................................................................................................................................

<table>
<thead>
<tr>
<th>Age</th>
<th>Girls</th>
<th>Boys</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 - 2 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2 - 3 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3 - 5 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Admission / Registration forms available: Yes/No

Are the Admission / Registration forms up to date? Yes/No

Are there job descriptions for all staff? Yes/No

Is there a Staff Development Plan? Yes/No

Menus Yes/No

Admission policy Yes/No

Admission policy of children with disabilities Yes/No

Other policies Yes/No

Specify: ........................................................................................................................................................................................................

................................................................................................................................................................................................................

................................................................................................................................................................................................................

Complaint’s procedure: ..............................................................................................................................................................................

Emergency plan: ...................................................................................................................................................................................

First Aid kit: .....................................................................................................................................................................................

Attendance Register: .........................................................................................................................................................................

Incident register: ..............................................................................................................................................................................
Annex 6

Specimen Incident Report Form

(Complete in triplicate)
One copy to parent, one copy to child’s file and one copy to the accident file.

Name of the child: ................................................................. Date of the incident: .........................................................

Description of accident / injury / incident: ............................................................................................................................
......................................................................................................................................................................................
......................................................................................................................................................................................

Where did it occur? ........................................................................................................................................................................

When did it occur? ........................................................................................................................................................................

Who witnessed the accident / injury / incident? ........................................................................................................................

What injuries or symptoms resulted (describe part of the body)? ..........................................................................................
......................................................................................................................................................................................
......................................................................................................................................................................................

Was any blood present? ...................................................................................................................................................................

How much blood? ...........................................................................................................................................................................

Where was the blood? .................................................................................................................................................................

What was done for the child (first aid treatment)? ..................................................................................................................
......................................................................................................................................................................................
......................................................................................................................................................................................

Is any further medical attention required? .....................................................................................................................................

When was the parent notified? ....................................................................................................................................................

When did the parent collect the child? ........................................................................................................................................

What advice was given to the parent? ........................................................................................................................................

Who was in charge when the incident occurred? .....................................................................................................................

What measures are necessary to prevent such an incident in the future? ..................................................................................
......................................................................................................................................................................................
......................................................................................................................................................................................

Signature of staff member: .......................................................................................................................... Date: ............................................................

Signature of parent: .......................................................................................................................... Date: ............................................................
ABOUT WIEGO

Women in Informal Employment: Globalizing and Organizing (WIEGO) is a global network focused on empowering the working poor, especially women, in the informal economy to secure their livelihoods. We believe all workers should have equal economic opportunities, rights, protection and voice. WIEGO promotes change by improving statistics and expanding knowledge on the informal economy, building networks and capacity among informal worker organizations and, jointly with the networks and organizations, influencing local, national and international policies. Visit www.wiego.org