DRAFT NATIONAL ECD STANDARDS
Including Guidelines and Procedures

Zimbabwe Network of Early Childhood Development Actors

Steering Committee
Nhaka Foundation
Child Protection Society
Child Resource Institute
Kapnek Trust
### DEFINITION OF KEY TERMS

<table>
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<th>Term</th>
<th>Definition</th>
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<tr>
<td>Authorising Officer</td>
<td>An employee of the Ministry or Council appointed and assigned to inspect, supervise or report on the program and services</td>
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<td>Baby</td>
<td>A child whose age ranges from birth to thirty months</td>
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<td>Baby Care Centre</td>
<td>Care and education service for the 0-3 years olds</td>
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<td>Caregiver/Child Minder</td>
<td>A person trained to teach, train and look after babies and young children in a ECD centre</td>
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<td>Child</td>
<td>A person who is from 3 to 8 years of age</td>
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<td>Council</td>
<td>City, town, district, sub-district authority</td>
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<td>Early Childhood Development Centre</td>
<td>A registered nursery school established independently or attached to a formal school</td>
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<td>Health facility</td>
<td>A place regularly used by a Medical Officer or Nurse for health or medical purposes</td>
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<td>Pre-primary centre</td>
<td>A care and education service centre for 4 to 8 year olds</td>
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<td>Inspector/Supervisor</td>
<td>An officer appointed by the Ministry of Education or local authority to co-ordinate and supervise ECD programmes.</td>
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<td>Teacher</td>
<td>A teacher at an early childhood development centre</td>
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<tr>
<td>Supervisor</td>
<td>A teacher appointed to supervise an ECD centre</td>
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<tr>
<td>Service Provider/Operator</td>
<td>A person licensed to provide ECD services</td>
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<td>Responsible authority</td>
<td>Owner or proprietor, or Director of an ECD Centre</td>
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BACKGROUND

The ZINECDA Steering Committee established provincial chapters for Early Childhood Development (ECD) non-state actors in 2012, which form the membership of ZINECDA as an organization. ZINECDA was registered as a Trust in 2012. The aim of the network was to mobilize non-state actors from the 10 provinces of the country to create a platform for championing ECD issues at the national, regional and international levels. Cognizant of other existing ECD networks, ZINECDA aims to close the gaps between grassroots organizations, local established organizations, international organizations and the Ministry of Education, Sports and Culture.

ZINECDA’s Goal

ZINECDA aims to create an enabling environment for strengthening the capacity of members to strategically engage in key policy and program development processes at all levels to influence the improvement of support for the holistic development of all infants and young children.

ZINECDA’s Objectives:

1. To establish a network of ECD actors in Zimbabwe
2. To promote and build the capacity of the network members to effectively advocate for the inclusion of marginalized children such as the visually impaired, physically challenged and deaf children in ECD programs
3. To take a leading role in influencing policies, guidelines and legislation that concerns the rights and development of young children through direct participation in these processes as well as through advocacy and lobbying.
4. To link with other networks involved in ECD at the sub-regional, regional and international levels.

In the first year of programming ZINECDA focused on the following activities; conducting a baseline survey on the status of ECD programming among non-state actors, establishment of regional chapters, provincial consultative meetings, and initial capacity building on advocacy. ZINECDA managed to implement these activities with financial support from OSISA.

The specific objectives of the desk review would be:

1. To identify the current ECD standards within the Ministry of Education Sport and Culture guiding the establishment and implementation of ECD activities in Zimbabwe
2. To identify the various existing standards being used by the non-state actors and private ECD Centres within the country
3. Compare the existing standards with the regional trends
INTRODUCTION

The education sector in Zimbabwe recognises that ECD education can contribute significantly to the nurture of young children at different levels that is physical, social, emotional, intellectual, cultural and spiritual. Prior to independence, few children in Zimbabwe had access to organised childcare and development programmes (The Commission, 1999). The Education Act 1987 amended in 1996 stipulates that every child has the right to education. The act is in line with the Millennium Development Goal (MDG) number 2, which aims to achieve universal primary education by 2015.

Although the country is on track in achieving the Millennium Development Goal number 2, Universal Primary Education, a number of challenges are slowing down the process, one of them is deteriorating infrastructure as a result of the economic hardships experienced in the country. The classroom space has been greatly reduced as some classrooms have ceased to be conducive and stimulating environments but death traps for children. This applies to staff accommodation as well and it’s a contributing factor to why qualified teachers shun rural schools.

National Policy can embrace ECD in concert with other policies across a wide range of issue areas. A comprehensive set of ECD Standards for Zimbabwe with a more holistic view of the child, (which can be used by state actors, non-state actors and private ECD centres), can exert pressure to go beyond existing national ECD standards. These Standards, along with the Guidelines and Procedures, are designed to assist, inspire, and guide the Ministry of Education and family and community members, in addition to ECD service providers. The Standards are necessary and required elements of a basic level of quality that every ECD Centre must have. They pertain to direct services to children and families. The Guidelines are recommendations that will make it easier to provide quality services. They pertain to procedures and processes - indirect services to children and families. The Procedures explain the process for Centres to register and be licensed by showing that their Centres are of acceptable quality according to the Standards.

The conditions of the centres range from very poor to very good. Some services are provided under trees without any play materials. In some instances children are congested in small rooms. The need for standards has now been identified so that all ECD programs will provide, at minimum, acceptable and adequate services. Such services go beyond merely keeping children safe and occupied; they help children to grow strong and healthy in every way – emotionally, physically, and cognitively.
PROGRAMMES THAT THE STANDARDS and GUIDELINES WOULD APPLY TO:

i. Play Centres
ii. Day care Centres / Creches
iii. Drop in Centres for children between 0-8 years
iv. Pre-primary school Centres either attached to schools or independent
v. Baby care services
THE STANDARDS

The following are set of standards are minimum standards required for a centre to provide adequate and acceptable services. Centres are strongly encouraged to exceed these standards in order to provide the highest quality services possible. The general categories of services covered by these standards include:

- Physical environment
- Curriculum, Schedule and Staffing
- Nutrition
- Health
- Transportation
- Staff Qualifications
- Connections with Families
- Operations and Administration

1. PHYSICAL ENVIRONMENT

1. PREMISES/STRUCTURE

A. Occupied residential premises cannot be used for purposes of a Centre
B. Not withstanding the above, a Centre that has boarding facilities like those for children with disabilities are allowed to have residential staff in the premises.
C. A Centre is constructed from stable materials that adequately protects its inhabitants from all forms of harsh weather.
D. Premises are free of toxic materials or substances and any hazards that may put the health and safety of children at risk.
E. A Centre must have no asbestos material in or on the walls, ceilings, and floor covers.
F. A Centre has at least two separate outside doors that allow easy exit in case of fire or emergency and are secure enough so that children cannot leave the Centre without the knowledge of a member of staff.
G. The premises comply with the requirements in the Public Health Act and Land Use requirements for public use.
H. The premises are accessible to children with special needs. Modifications are made as needed for any enrolled child with special needs so that the child can fully participate in all activities.

1.2 INDOOR ENVIRONMENT

A. A Centre has no less than 1.5 square meters of indoor floor space for every child in a room for the combined purposes of educational activities, playing, eating, and resting. (Floor space consists of net interior surfaces, excluding corridors, office facilities, kitchen, storage areas, toilets, and washing facilities.)
B. A Centre has separate care rooms or classes for children 0 – 2 1/2 years (baby-care), 2 1/2 – 4 years (childcare/nursery) and 4 – 6 years (pre-primary))
C. A Centre has adequate lighting, ventilation and, where necessary and possible, adequate acoustics to minimize noise.
D. To ensure cleanliness and safety for children, the floor of a Centre is constructed from or covered by materials that can be swept and washed, or can be re-coated in the case of mud houses
E. The structure of the Centre, the equipment, and materials are kept clean and maintained in a good state of repair.
F. A Centre has clean water, washing facilities, and, where possible, electricity and telephone.
G. A play area is available and adequate for use by children.

1.3 FURNITURE, MATERIALS and EQUIPMENT
A. A Centre has adequate, age and size appropriate furniture for all age groups in the Centre.
B. A Centre has individual storage spaces for children, and cupboards and shelves for different uses that are suitably placed within reach of children.
C. A Centre is adequately supplied (for the number of children enrolled) with developmental and educational materials and equipment for all areas of development and curriculum - large motor/physical, fine motor/math, literacy, science, music, dramatic play - suitable and appropriate for all age groups in the Centre.
D. Materials and equipment reflect the local culture of the families and the community
E. All equipment and material to be used by the children are non-toxic.

1.4 TOILETS and WASHING FACILITIES
A. A Centre has standard junior toilets that are clearly separated from other activities and the kitchen but within short and easy access to the centre of activity.
B. There is a minimum of one toilet for 15 children per gender, with adjacent wash facilities.
C. A Centre has at least one general facility for washing clothes, blankets and towels and any other linen used in the centre.

1.5 KITCHEN
A. A Centre has a kitchen that is physically separated from the children’s activity areas for preparation of children’s meals / milk and or to keep their own packed food.
B. The walls of the kitchen are painted or tiled up to 1.5 meters from the floor in materials that can be easily washed. Where mud is used, the walls are clean and regularly recovered.
C. The kitchen contains separate storage spaces for food and eating utensils. The storage spaces are placed above ground level.

1.6 OUTSIDE ENVIRONMENT
A. A Centre has an outside play area, preferable adjoining its buildings, with a minimum of 1.5 square meters per child.
B. The outside play area is large enough for the number of children in the centre to run about safely.
C. The area is free of hazards such as sharp objects, harmful plants, trash, and discarded material and equipment
D. The area is fenced on all sides and be provided with gates securely fastened to ensure that children are not able to leave the centre without the knowledge of a member of staff.
E. If there is climbing equipment, a swing set and/or similar equipment, they are permanently fixed, safe, and age-appropriate, with a base covered with sand or a soft/cushioned surface.
F. The outdoor play area contains, at least:
   - A shaded area
   - A collection of movable equipment such as pull-and-push toys and balls that are kept in good condition and have a designated storage area.
   - An education garden for growing vegetables and other edible plants whose products are used by the centre’s kitchen (where possible)

2. CURRICULUM, SCHEDULE, and STAFFING

2.1 SOURCES OF THE CURRICULUM
   A. The curriculum in Pre-primary Centres is drawn from a framework designed by Ministry of Education.
   B. The curriculum in Baby Care Centres is drawn from a framework designed by the Pre-school Development Committee.

2.2 GENERAL NATURE OF THE CURRICULUM
   A. The curriculum is child-centred
   B. The curriculum is holistic promoting children’s physical, cognitive, language, emotional and social development.

2.2 CURRICULUM ACTIVITIES
   A. Children are active and interact with each other and the teacher during most curriculum activities.
   B. Activities are culturally appropriate.
   C. Activities are age appropriate. Meaningful, and enjoyable to the children.
   D. Activities encourage children to think, reason, solve-problems, and be creative.

2.3 DAILY SCHEDULE
   A. A Centre has a daily schedule of varied activities. The schedule is the same each day to provide consistency, but is flexible when necessary.
   B. The schedule alternates quieter/more sedentary activities (such as story-telling) with more active ones (such as playing outside).
   C. A Centre that serves children for five hours a day or more shall ensure that all children have a common rest period of not less than an hour each afternoon. Children who do not wish to sleep during this period shall not be forced to do so but are engaged in restful activities.

2.4 STAFFING
   A. A Centre has a maximum of 25 children of ages 21/2 – 4 years per class and a maximum of 30 children of ages 4 – 6 years per class.
   B. In a Baby Care Centre, there is a ratio of at least one caregiver for every 5 babies per room and no more than 10 babies per room.
C. When more than five babies are placed in a room, a caregiver is required to have an assistant. Any extra intake of children shall take cognizance of the prescribed staff child – adult ratio and the 1.5 square meters floor space per child for eating, resting and playing.

F. A caregiver does not have more than two children less than 2 1/2 years of her own to take care of.

G. Each class has a minimum of one qualified teacher and one teaching assistant.

3. NUTRITION

3.1 MEALS

A. A Centre has a meal plan approved by health practitioner and is displayed at all times.

B. A Centre that operates up to 5 1/2 hours a day shall give children one snack or formula at an appropriate time. A centre that operates more than 51/2 hours a day shall give children at least one cooked meal.

C. A meal is provided for children at least once a day either by parents or the Centre as per agreement.

D. A record is made of every meal served to children at a centre, showing the type and quantity of food provided. All such records are kept and made available for inspection.

3.2 FOOD

A. All food prepared at a Centre are served at such times and in such variety, quantity and quality to meet the nutritional needs of the children.

B. Eating utensils are of a size and shape that can be easily handled by children.

C. A Centre observes the children’s family’s food preferences (religious, dietary, etc.) and arranges with parents alternative foods for children who cannot eat what is offered at the centre.

D. For babies on formula, parents have the option to bring their own formula.

E. Children are given nutritional food according to their needs and in the quantity they require or, if they bring their own food, to ensure that it meets their nutritional needs.

4. HEALTH

4.1 CHILDREN’S PHYSICAL HEALTH

A. Children wash their hands with running water and soap upon arrival at a Centre and before any meal.

B. Staff members do not administer to a child a patent or prescribed medication, apart from what is available in the First Aid Kit, without the consent of the child’s parent/guardian.

C. At least one member of staff in a centre is trained in First Aid.

D. The First Aid Kit, toxic substances and any medication are inaccessible to children.

E. A Centre keeps records for each child for inspection, that includes particulars of every accident or illness occurring to every child while at the Centre and the action taken on behalf of the child.

F. There is a safe, quiet, comfortable place where a child who is ill can rest away from other children.
G. A child who has or is suspected to have a contagious disease is temporarily excluded from the centre until certified by a health facility that he/she is not a threat to other children.

H. A government health facility is used to provide emergency health care. Details of this arrangement are made known to the parents and to the Centre’s staff.

I. A Centre closes when there is a threat of an outbreak of an epidemic through the advice of the nearest health facility. A report is made immediately to the supervising authorities concerning the outbreak.

4.2 CHILDREN’S MENTAL HEALTH
A. Children are respected as valuable, unique individuals
B. Children’s needs are responded to in a timely manner.
C. Children receive more positive comments than negative ones.
D. Children who “misbehave” are helped, not punished.
E. Children are never humiliated or verbally abused.
F. Children are never subjected to any form of physical punishment

4.3 STAFF MEMBERS’ HEALTH
A. If a caregiver/teacher is ill and unable to provide the service for some time, a substitute caregiver/teacher, approved by the supervisor, takes his/her place for the duration of the illness in line with labour laws.
B. Upon returning for duty after a significant illness, the staff member provides a medical report declaring him/her fit and not a risk to the health of others.
C. If a member of the staff is ill for a long period of time or has a disease that may endanger children, the contract may be terminated for the duration of illness in line with labour laws.

5. TRANSPORTATION

5.1 VEHICLES
A. All vehicles that will be used to ferry children have current requirements of the laws of the country pertaining; registration, licensing, insurance, roadworthiness and safety.
B. All drivers have undergone health checks and police clearance. It is desirable that they have a defensive driving certificate.
C. No open vehicles are used to ferry children
D. Children are not overloaded in a vehicle
E. If the driver is male, children have a female attendant at all times

5.2 CONSENT FOR TOURS/TRIPS
A. Notice of any planned tour or trips are given to each parent or guardian in writing at least 7 days prior to the trip.
B. The notice outlines the purpose of the trip
C. All visits and trips have the consent of each child’s parent of guardian

5.3 TOURS OUTSIDE THE COUNTRY
A. Any visits outside the country are approved by the supervising officer depending with the age of the children. The applicant attaches signatures of parents or guardians consenting to the trip, names of all children, their passport numbers, places and dates of visits.

B. The application shows the places and country to be visited, proposed accommodation, transport mode, and particulars of the accompanying adults.

C. There is a clear justification for the trip describing how the purposes of the trip cannot be attained from a local trip.

6. STAFF QUALIFICATIONS

6.1 FITNESS
   A. All persons employed in a Centre have medical reports from a health facility declaring them fit for duty and free of any communicable or contagious diseases.
   B. No person can be employed in a Centre if he or she has a mental illness, or is known by the police to be a sex offender. Should it be discovered later, the person has to cease being an employee of such a centre.
   C. All teachers/caregivers are able to be physically active with children and lift children if necessary.

2. QUALIFICATIONS OF TEACHERS/CAREGIVERS
   All teachers/caregivers:
   A. Are capable and competent in the area and age group(s) with whom they work.
   B. Have training or be receiving training in holistic early childhood education and development.
   C. Have the dispositions to work with young children: compassion, patience, creativity, flexibility, joy, and confidence.
   D. Know how to use positive guidance to help children and manage the classroom.

7. CONNECTIONS with FAMILIES

1. COMMUNICATION AND EXPECTATIONS
   A. A Centre communicates regularly and often with the parents of the children.
   B. A Centre has an agreement with the parents/guardians of each child. As part of the agreement, a parent shall agree to provide children with sufficient clothing for the day and, in the case of a baby, a rug measuring at least 3.5m by 4.5m must be standard.
   C. A Centre reminds parents to dress children appropriately to meet the prevailing weather conditions.

7.2 RELIGION
   A. A Centre declares its religious beliefs, affiliation or inclinations, if any, to the potential parent before admission.
   B. Parents consent in writing to the exposure of the child to the stated religious beliefs on admission.
   C. All teachers/caregivers declare their religion affiliations.
   D. No child is exposed to any religious procedures and teachings without the knowledge and approval of his or her parent/guardian.
E. No staff member exposes children to their personal religious procedures or teachings other than that declared by the Centre and agreed to by the parents/guardians.

8. OPERATIONS and ADMINISTRATION

8.1 DATES and TIMES of OPERATION

A. A Centre operates from January to December of that year. Parents are informed of the exact dates of business including breaks during the year.
B. A Centre operates only between the hours of 7:00 and 17:00 on weekdays. Hours outside these require a permit from the supervisor/Coordinator for caring purposes only. The supervisor/coordinate assesses the purpose and benefit of the duration of care and or education and decide if extended hours of operation will be granted.

8.2 CENTRE MANAGEMENT and SUPERVISION

A. A Center has in-house policies that do not contravene Council by-laws and policies in order to ease its operations.
B. Administrative systems and procedures are in place to ensure effective management and supervision of the facility, staff, and activities.
C. There are clear lines of authority and responsibility.
D. Everyone knows and understands their own roles and job tasks as well as the roles and job tasks of all co-workers.
E. There is a community advisory board, 50% of which is comprised of parents or family members of children in the program. The advisory board meets regularly and approves all major decisions and provides suggestions for improving services.
GUIDELINES

ADMISSION of CHILDREN AND RECORDS
☐ No child shall be admitted to a centre on less favourable terms and conditions that would otherwise be made available and not child shall have restricted access to any benefits or services provided by the centre.
☐ Notwithstanding the above, this condition does not apply to a centre that is maintained wholly or principally for children of one sex or for children with a particular disability or of a specific age group. Likewise, it does not apply if a child requires special services or facilities that in the circumstances, cannot reasonable be made available by the centre.
☐ To be accepted to a centre, a parent/guardian shall produce, in addition to an application from a medical report or clinic card from a health facility indicating that the child can stay in a centre and does not have a communicable or contagious disease to put other children at risk. The report also contains medical information the health facility believes the centre requires to look after the child’s health at the time he or she is accepted in the centre.
☐ A parent/guardian of a child with special medical needs shall sign an agreement with the centre to be jointly responsible for the child with the centre and provide all information to the centre of the care of the child’s medical condition.
☐ Registration of children shall be done at the Centre through appropriate forms.
☐ Parents seeking to place a child in day care/nursery, baby care or pre-primary facility shall submit their applications to the head of the Centre.

ROLES AND RESPONSIBILITIES OF STAKEHOLDERS and the GOVERNMENT
The following recommendations serve as guidance to those not directly involved in the daily operation of the Centre so that they can support the Centre to meet, and exceed, the standards. These recommendations will also help the staff of the Centre to reach out to stakeholders and government workers for support and can facilitate positive communication among them.

PARENTS and GUARDIANS
☐ Parents/guardians should notify the school on any issues affecting the child’s welfare.
☐ Parents/guardians play an active role in the pastoral care system of the school.
☐ Parents/guardians cooperate with and assist the school in the best interest of the child

COMMUNITY
☐ In rural communities, in case where traditional chiefs and other cultural leaders often preside over cases of incest and other related offences a system of accountability through these channels has not been identified.
☐ Therefore schools are required to follow the Victim friendly referral system
☐ However, if parents pursue their complaint through the kraal health and inform the school, the outcome should be communicated to the Regional Director, District Education Officer and the Principal Educational Psychologist.
☐ This traditional system should complement rather than circumvent the formal processing channel. Parental compliance is not required for a report to Social Welfare or the Police and anonymous reports are permissible in the best interests of the child.
GOVERNMENT LINE MINISTRIES

- Ensure that centres use a holistic approach in developing the total child.
- Closely monitor ECD centres around their areas and provide necessary professional and administrative advice and support.
- Assist applicants to meet registration criteria and facilitate registration of the centres.
- Assist centres to have adequate and appropriate resources
- An inspector shall require the centre to produce any book, records or to other documents or the centre to examine or make copies for purposes of inspection reporting.
- Other officers who require inspection for any other purposes related to government laws like employment, immigration, health, labour and others shall liaise with the supervising office to visit centres. An exception is where such inspection is related to corruption, security or matters of law and order.
PROCEDURES

REGISTRATION
Any person, company or organization intending to operate a centre shall make application to
the Council, on the appropriate form, giving details about:
☐ The premises intended to be used for the Centre
☐ The enrolment and maximum number of children to be accommodated in the Centre
☐ The positions of the staff, their major responsibilities, qualifications and experience
required of each position
☐ Short outline of proposed programme (not more than two pages) that meets the
developmental needs of the children, learning principles and basic life skills.
☐ The indoor and outdoor physical and educational equipment.
☐ An operator of a pre-primary Centre shall register himself/herself and all teachers with
the Ministry of Education through the Council. An operator of a Day-Care/Baby-care
Centre shall register himself/herself and all caregivers with the Council: The Centre has
to update the office of any changes.

LICENSING
☐ On making an application for a license to operate a service centre, the person or
organization intending to operate the centre shall attach to the application the following
documentation from appropriate departments of the Council:
  ✓ A permit or authority of land use.
  ✓ Fire inspection report where possible
  ✓ Environmental health inspection report
  ✓ Certificate of company (where applicable)
☐ On considering an application to operate, the council may:
  ✓ Issue a license on payment of an annual fee as set by the Council
  ✓ Issue a conditional license on payment of a fee as set by the Council, or
  ✓ Refuse to issue a license
☐ A license issued under these standards is not transferable since it is issued in respect of
a specific operator, facility and location. If any of these elements change, a new license
is required.
☐ The license are displayed in a prominent place in the centre for parents to ensure that
the centre is legal
  ☐ The license shall show the name of centre, owner, the type of program being
offered, period of validity and hours of operation.
  ☐ The expiry date of a license are at the end of the school year and is renewed
annually.

APPEALS
☐ A centre wishing to appeal against Council regarding action taken against it may apply in
writing to the permanent secretaries in Education or Local government depending on
type of service affected providing reasons for the appeal.