# If actions speak louder than words, what do my actions say?!

Instructions: Complete this Best Practices checklist to assess your own practices as a role model for children in your care.

| | Best Practices – How am I doing? | Seldom 1 | Some times 2 | Usually 3 | Always 4 | Does not apply |
|---|---|---|---|---|---|---|
| | **Best Practice: Plan appropriate activities to enhance the nutrition and physical activity environment.** | | | | | |
| 1 | I follow written policies that include foods offered, the food environment, staff behaviors and education. | | | | | |
| 2 | I plan the day to include a variety of physical activities…indoor and outdoor. | | | | | |
| 3 | I teach children about healthy foods and the pleasure of eating using formal circle time lessons. | | | | | |
| 4 | I use many opportunities during the day to teach children about physical activity. | | | | | |
| 5 | I teach and engage children in self help skills such as setting the table, serving food, and cleaning up. | | | | | |
| 6 | I consider the nutrition and physical requirements of children with special needs in planning meals and activities. | | | | | |
| 7 | I do not use food or physical activity as an incentive or punishment. | | | | | |
| | **Best Practice: Maintain a safe and clean environment for snacks, meals and physical activities**. | | | | | |
| 8 | I maintain a safe, clean environment for snacks and meals as well as for physical activities | | | | | |
| 9 | I teach and practice safety rules for children, such as not using utensils as toys, not walking with knives or scissors, and following adult instructions at all times. | | | | | |

| | Best Practice: Teach and model health promoting behavior. | Seldom 1 | Some times 2 | Usually 3 | Always 4 | Does not apply |
|---|---|---|---|---|---|---|
| 10 | I teach children good health practices such as handwashing, teeth brushing, using napkins and tissues. | | | | | |
| 11 | I practice proper procedures for handwashing. | | | | | |
| 12 | I model frequent drinking of water instead of drinking other fluids such as soft drinks or coffee. | | | | | |
| 13 | I prompt children to drink water during indoor and outdoor play. | | | | | |
| 14 | I set an example by making healthy food choices. | | | | | |
| 15 | I set an example by engaging in regular physical fitness. | | | | | |
| 16 | I have a positive attitude and enjoy being with children. | | | | | |
| 17 | I follow written policies regarding smoking. | | | | | |
| | Best Practice: Provide regular meals and snacks. | | | | | |
| 18 | I present healthful foods to children and in serving sizes appropriate for their age. | | | | | |
| 19 | I provide regular meals and snacks at times children can rely on. | | | | | |
| 20 | I serve new as well as familiar foods to children. | | | | | |
| 21 | I allow children to decide how much and which foods they will eat. | | | | | |
| 22 | I plan meals and snacks to meet the requirements of the Child and Adult Care Food Program and based on the Dietary Guidelines for Americans. | | | | | |
| | Best Practice: Provide a pleasant mealtime environment that encourages healthy eating. | | | | | |
| 23 | I sit with children and eat the same foods as they do. | | | | | |
| 24 | I encourage and model good table manners at mealtime in a relaxed setting. | | | | | |
| 25 | I talk informally about trying and enjoying healthy foods. | | | | | |
| 26 | I prepare questions/topics ahead of time to generate pleasant conversations (eg conversation cards). | | | | | |

| | Best Practice: Join in physical activities. | Seldom 1 | Some times 2 | Usually 3 | Always 4 | Does not apply |
|---|---|---|---|---|---|---|
| 27 | I join in physical activities with children while providing adequate supervision. | | | | | |
| 28 | I encourage children to be active and join in active play. | | | | | |
| | Best Practice: Work with parents to promote and support healthy eating practices. | | | | | |
| 29 | I support parents so they are healthy role models for their children. | | | | | |
| 30 | I provide information to parents about how to foster healthy eating and physical activity at home. | | | | | |
| | Add up the total checks in each column: | | | | | |
| | Multiply total checks by: | x 1 | x 2 | x 3 | x 4 | |
| | Total score in each column | | | | | |
| | **TOTAL SCORE** | | | | | |

**Scoring**: Count the number of checks in each box. Multiply the number of checks by the points for each column. Add them together for a total 'score'. How did you do?

**91-120**          **Super Star – way to go!**

**61-90**          **Good job – you're on the way!**

**31-60**          **Keep up the good work!**

**10-30**          **Hmm, work a little harder!**

**Are there areas where you can improve? Set a few mini goals – include a date by when you want to accomplish this.**

Mini Goal _____ When/How often?

Mini Goal _____ When/How often?

Mini Goal _____ When/How often?