



Moving Up to the Young Toddler Room

Your baby is officially a toddler. Here is what changes, what they are learning, and how our room runs.

CHILD & MOVE-UP DETAILS

Child's Name _____ Date of Birth _____
Move-Up Date _____ Classroom # _____ New Teachers _____

HOW THE MOVE HAPPENS

This is a big, happy step, and we take it gently. Children move rooms based on development, group fit and space in the next room, not age alone, so the timing is about your child rather than a birthday. We always tell you before it happens, and when scheduling allows we bring your child over for a few short visits first so the room already feels like theirs. A teacher they know helps them settle in. Expect a week or two of extra tiredness and a few more tears at drop off. That is completely normal, and it settles.

OUR DAILY RHYTHM

7:30 to 8:30 AM	Arrival, breakfast, quiet free play
8:30 to 9:30 AM	Outside time
9:30 to 10:00 AM	Morning circle, songs, art and sensory play
10:00 to 10:30 AM	Morning snack and clean up
10:30 to 11:30 AM	Gym time
11:30 AM to 12:00 PM	Quiet show while we diaper and wash up for lunch
12:00 PM	Lunch at the table
12:30 to 3:00 PM	Nap and quiet hours · no drop offs or pick ups
3:00 PM	Afternoon snack
3:15 to 6:30 PM	Outside or gym, crafts, free play, books, wind down for pickup

Quiet hours are 12:30 to 3:00 PM.

To protect our little ones' sleep, we do not allow drop offs or pick ups in napping rooms during these hours. Please plan to arrive before 12:30 PM or after 3:00 PM. If an appointment falls inside that window, talk with the office ahead of time.

Why it matters: children ages 1 to 2 need 11 to 14 hours of sleep in a 24 hour day including naps, and most switch from two naps to one between 12 and 18 months. One door opening at 1:15 PM can wake a whole room. (American Academy of Sleep Medicine consensus statement, 2016)

Moving Up to the Young Toddler Room

GUIDELINES & LEARNING

A FEW ROOM GUIDELINES

- **Arrive before 12:30 PM or after 3:00 PM.** No drop offs or pick ups during nap.
- **Sleep.** Your child naps in a Pack 'n Play crib and we provide the sheet. Once they are ready, we sometimes move them to a mat, which they usually find very exciting. Send a small blanket and a comfort item from home if you would like.
- **Bottles.** Your child can absolutely keep their bottle, including one at naptime if that is what you would like. What changes is what goes in it. At this age we move to whole milk, in line with pediatric guidance for children over 12 months, and we offer a cup at meals so they get plenty of practice.
- **Clothes they can play hard in.** Art is messy, meals are messy, and so is learning. Send two full changes, and please send shoes, since we are outside or in the gym every single day.
- **Label everything.** Bottles, coats, blankets, stuffies, shoes, all of it.
- **Tell us about the night before.** Rough sleep, teething, or anything new at home helps us give your child the kind of day they need.

WHAT YOUR ONE YEAR OLD IS WORKING ON

Words and communication. Your child understands far more than they can say. Most children go from a handful of words at 12 months to fifty or more words, plus simple two word phrases, by 24 months. We narrate the whole day out loud, read, sing, and give children the words for what they want, so they have a way to be understood before they can say it themselves.

Big bodies. Walking turns into running, climbing, carrying, pushing, and kicking. This is why we go outside first thing every morning and into the gym before lunch, rather than only on nice days. National early care and education health standards call for toddlers to get outdoors two to three times daily and to have 60 to 90 minutes of active play across a full day.

Caring for Our Children: National Health and Safety Performance Standards, 4th ed. (American Academy of Pediatrics)

Hands and art. Chunky crayons, dot markers, sponge painting, sticky collage, playdough, and taste safe sensory bins. Our art is *process art*. We care about what your child does with the materials, not what the finished piece looks like, so expect abstract masterpieces and paint on the hands. Every material is non toxic and too large to choke on, because mouthing is still how a one year old explores.

Playing alongside friends. One year olds mostly play *near* each other rather than *with* each other. This is called parallel play and it is exactly right for the age. They watch, copy, and take toys, and they are not being unkind. Real sharing and turn taking generally do not arrive until around age three. We stay close, coach with words, and keep duplicates of the favorite toys.

Parten, Social Participation Among Preschool Children, 1932, still the standard description of play stages.

Doing it themselves. Self feeding with a spoon, drinking from a cup, pushing arms into a coat, putting toys in a bin, washing hands, and choosing what to play. We build the day so children can do real things on their own, and then we let them, even when it is slower and messier than doing it for them. That independence is the whole point of this room.

Thinking and problem solving. Filling and dumping, stacking, sorting, opening and closing, and figuring out cause and effect. You will also see the first pretend play, like feeding a baby doll or holding a block to their ear like a phone. These look like small things. They are early math, science, and imagination.

Feelings and routines. Big feelings show up long before the words to handle them. The same songs, the same order of the day, and the same faces are what make a one year old feel safe enough to explore. We name feelings out loud, offer small choices, and stay calm through the hard moments.

Moving Up to the Young Toddler Room



DROP OFFS, BUMPS & BRUISES

DROP OFFS COME IN PHASES

Some weeks your child will run into the room without a backward glance. Other weeks they will hold onto your leg like it is the last thing on earth. Both are completely normal, and the swing between them usually has nothing to do with the room, the teachers, or anything you did. We see it in brand new little ones and we see it in children who have been with us for years. A hard week does not mean something is wrong.

What helps most is a goodbye that never changes. The same words, in the same spot, at about the same time, and then off you go. Short, warm, and confident. Predictable daily routines are consistently linked to stronger emotional regulation in young children, and research following infants through their first weeks in child care found that steady, predictable transitions were tied to a smaller stress response than uncertain ones.

Spagnola & Fiese, Infants & Young Children, 2007 · Ahnert, Gunnar, Lamb & Barthel, Child Development, 2004

One small thing that makes a big difference.

If you can, try not to leave, come back, and then take your child home because they are crying. We understand that impulse completely, and it comes straight from love. But when crying works some days and not others, a little one learns that enough crying *might* get them home, and an outcome that happens unpredictably is much harder to let go of than one that happens every time. It is one of the most established findings in how we all learn, and it is usually why a few uncertain goodbyes turn into weeks of harder mornings.

Here is the good news: most children settle within a few minutes of a goodbye. We are always happy to send a photo or a quick message once they do, and you are welcome to call and check on them any time at all.

Ferster & Skinner, Schedules of Reinforcement, 1957, on why unpredictable outcomes make a behavior more persistent.

BUMPS & BRUISES ARE PART OF IT

A one year old who is learning to walk, climb, run, and carry three things at once is going to fall. That is not carelessness, it is the job description. In one study of toddlers at free play, children between 12 and 19 months took roughly 2,400 steps and fell about 17 times in a single hour. Bruises follow the same happy pattern: they are rare in babies who are not yet moving and common once a child is up and going, most often on shins, knees, and foreheads.

Adolph et al., Psychological Science, 2012 · Sugar, Taylor & Feldman, Archives of Pediatrics & Adolescent Medicine, 1999

What we do. We keep the room and the equipment safe, we stay down low and close to the children, and we treat every bump with ice, a cuddle, and a written incident report that goes home the same day. Any bump to the head gets a report and a message, even a small one, so you always hear it from us first.

What you can expect. Most weeks your child will come home with something. A scraped knee, a red mark, a bruise on a shin. More often than not, it means they had a wonderful day. And if we ever see an injury we cannot explain, or one that concerns us, we will tell you directly and right away.

Moving Up to the Young Toddler Room

ABOUT BITING

BITING IS NORMAL AT THIS AGE

We like to say this plainly and early, so it is never a surprise: biting is one of the most common things that happens in a room full of one year olds. It is a developmental stage, not a sign of a behavior problem, a mean child, or anything wrong at home. Nearly every toddler room in the country works through it, and nearly every child grows right out of it.

Why it happens: teething and sore gums, exploring the world with the mouth, testing cause and effect, excitement that boils over, feeling crowded or overstimulated, being tired or hungry, and most often of all, not yet having the words for a very big feeling.

IT OFTEN LOOKS DIFFERENT AT HOME

One of the most common things we hear is *"but he never does that at home."* We believe you, and honestly, it does not surprise us one bit. It is not that something is wrong at home, and it is not that something is wrong here. The two settings are simply different, and they ask different things of a one year old.

At home, a child usually has the toys, the space, and the grown ups all to themselves. Here they share all three with a group of friends who want exactly what they want at exactly the same moment, plus more noise, more waiting, and a schedule they do not control. That is a wonderful thing, it is how children learn to be with other people, but it does ask more of a toddler than home does. So a child who never bites at home can absolutely bite here, and it says nothing about your parenting or our room. It simply tells us the setting is different, and we work on it here, where it happens.

WHAT THE RESEARCH SHOWS

It is normal and it fades. Physical aggression such as hitting and biting appears in the first two years of life, is common, and declines on its own for the large majority as language and self control grow. (*Tremblay et al., Pediatrics, 2004*)

It is frequent, not occasional. Rooms of one and two year olds see far more biting than any other age group in a center, and a single child can go through a stretch of biting several times in one week. Leading early childhood organizations describe it as one of the most common behaviors of this age in group care. (*NAEYC; Zero to Three*)

Words are the real fix. Toddlers with smaller vocabularies at 19 months are more likely to use physical aggression, which is why building language works far better than punishment. (*Dionne et al., Developmental Psychology, 2003*)

The timeline. Biting typically begins around 12 months, peaks in the second year, and has usually resolved by about age three as speech takes over the job.

HOW WE RESPOND

- 1 We go to the child who was bitten first. A cuddle, wash the area, ice it, and an incident report.
- 2 We speak to the child who bit calmly and briefly: *"Teeth are for biting food. Carrots and apples."* Long lectures do not work at this age, and shaming makes it worse.
- 3 We redirect them to something else, and we give them the words for what they wanted.
- 4 We offer a teether if the biting is about sore gums or mouthing.
- 5 We watch for the pattern. Time of day, the child involved, the space, hunger, tiredness. Then we adjust the room, the schedule, or where a teacher stands to try to prevent the next one.
- 6 If it repeats, we sit down with the parents of the child who is biting and build a plan together.

Moving Up to the Young Toddler Room



SCREENS, PACKING & QUESTIONS

A few promises about biting.

We never bite back or let a child be bitten back, we never shame or punish harshly, and we never share the names of the children involved with either family. Both families get an incident report the same day, so no one is ever left wondering.

How you can help at home. Use the same calm words we use, give your child language for their feelings, and keep sleep and routines steady, since tired and hungry are the two biggest triggers. One kind ask: please try not to bring up a bite at pickup that happened hours earlier. At this age little ones truly cannot connect the two, and it only makes the next morning harder.

ABOUT SCREEN TIME

We use one short, gentle show for up to 30 minutes a day, in the half hour before lunch, while we work through diapering and hand washing. It is the only screen time in our day, and nothing is ever left on in the background.

WHAT TO PACK

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| ☐ Two full changes of clothes, including socks | ☐ Shoes, since we go outside every day |
| ☐ Bottles, labeled, if your child still takes one | ☐ A small blanket for nap, labeled |
| ☐ One comfort item for nap, such as a stuffy | ☐ Weather ready coat, hat, and boots |
| ☐ Everything labeled with your child's name | ☐ Updated emergency contacts on file |

We provide: crib sheets, diapers and wipes, cups, sunblock, and all meals and snacks. If you would rather we use your own sunblock, diaper cream, or diapers, send them labeled and we will use those instead.

A FEW THINGS FAMILIES ASK

Will my child still get a bottle? Yes. Your child can keep their bottle, including one at naptime if that is what you would like. What changes is what is in it. At this age we switch to whole milk, and we offer a cup at meals so your child gets practice.

What if my child will not nap in the crib? Almost every child settles within a week or two, and most of them come to love it. We keep the room dim, play the same quiet music every day, and rub backs. Quiet hours are a real rest for the whole room, and once the routine is familiar, nearly every child sleeps right through.

What if my child seems more tired or clingy? That is the most common thing families notice in the first two weeks, and it passes. More movement, more stimulation, and one nap instead of two is a real adjustment. Earlier bedtimes help a lot.

How will I know how the day went? The same daily updates you are used to, with photos, meals, naps, diapering, and activities. And you are always welcome to stop in and see the room for yourself.

Questions about the move?

Talk with your child's teacher any time, or give the office a call at **208-650-7529**. You can also reach us at office@stoneycourtplaycare.com. Come see the room whenever you like. We are so glad your little one is growing up with us.