

# PARENT HANDBOOK



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UNITED STATES MARINE CORPS  
Marine Corps Community Services  
Children, Youth and Teen Programs  
Marine Corps Air Station, New River  
Jacksonville, NC 28545-1001

Dear Parent(s):

Welcome to the Marine Corps Air Station New River Children, Youth and Teen Programs (CYTP). Our goal is to provide you with the best in recreation and childcare. This handbook is designed to acquaint you with the policies and procedures for the program in which you have enrolled your child. Please read and refer to it as needed.

CYTP encompasses all aspects of childcare and provides high quality developmental and recreational programs for children ages six weeks to eighteen years. These programs include: resource and referral services; center based full day care, hourly care, part day preschool programs; before and after school programming; summer camp programs; child care for special functions/events; and a family child care program. All of our programs are designed to assist active duty, MCCS and DoD personnel in balancing the competing demands of family life and the accomplishment of the mission and to improve the economic viability of the family unit. United with families and community, the New River Children, Youth and Teen Program's mission is to provide safe, affordable, quality childcare programs in full support of our families and the military mission.

We have an open door policy and invite you to visit our programs any time. We are here to serve you. Feel free to contact us concerning how we can improve or expand our services.

We look forward to working with you and your family and hope that your experience with our programs will be positive and rewarding.

Tim Cook  
Administrator

## **MISSION STATEMENT**

New River Children, Youth & Teen Programs (CYTP) supports military readiness by contributing to the well-being of families with children through quality, affordable childcare in center and home-based settings and recreational programs for youth and teens. Full-day programs are designed to meet the needs of working parents. Part-day preschool programs, parent education, child care for unit functions and special events, weekday hourly care, respite care services, enhanced extended childcare, and recreational activities are available to meet the varying needs of a diverse military population. All programs are developmentally appropriate and designed to provide for the social, emotional, physical, intellectual and cognitive growth of children regardless of age.

## **POINTS OF CONTACT**

CYTP Administrator	449-5637
Resource & Referral (R&R) Office	449-5633/4300
Child Development Center (CDC)	449-6712/6713
Family Child Care (FCC)	449-5636
USDA Food Program Manager	449-4451
Training & Curriculum Specialist	449-4746/4850
Youth Activities/School Age Care Program	449-6711/4699
CYTP Nurse	449-4299

## **INFORMATION LINE - (449-6822)**

The Children, Youth & Teen Program has set up an information line that provides information on the programs offered, special activities/events, hours of operation, etc., within all of our programs. This line also serves as an information line during times that programs are closed due to emergencies or destructive weather. Please feel free to call this number for program updates and information.

## **CYTP WEBSITE**

By way of Marine Corps Community Services, the Children, Youth & Teen Program maintains an updated list of services, Parent Handbook, Registration and other forms, events/activities, and a variety of other useful information at

[http://www.mccsnr.com/chilyouth\\_teen.html](http://www.mccsnr.com/chilyouth_teen.html)

## **CHILDREN YOUTH & TEEN PROGRAMS PHILOSOPHY**

Children, Youth & Teen Programs (CYTP) is fully committed to providing the highest level of quality childcare and recreational activities for children ages 6 weeks to 18 years. CYTP strongly believes quality programs promote a safe and nurturing environment that enhances the social, emotional, physical, language and cognitive development of all participants while responding to the diverse needs of the military and DoD families in our community.

### **CHILDREN SIX WEEKS THROUGH 5 YEARS OF AGE:**

Children's learning does not occur in narrowly defined subject areas, but rather with realistic meaning and understanding of the world they are exposed to. Curriculum goals and plans are based on regular assessments of each child's developmental needs, strengths and interests while respecting the diversity of each child's culture, family values and community perspectives.

It has long been known that children's learning occurs when their play is self-directed. Child Development Center (CDC) classroom staff and Family Child Care (FCC) Providers offer activity centers/learning areas that allow children the opportunity to explore, create, imagine and experience their environment. Caregivers are readily available to facilitate learning and provide nurturing encouragement to each child. Individual activities are child-centered, process-oriented, provide concrete, hands-on experiences and are designed to promote further development and prepare your child for the next level of learning.

### **SCHOOL AGE CHILDREN AND RECREATIONAL ACTIVITIES:**

The Youth Activities Center (YC) participates in the Boys & Girls Club to promote a safe place for children. Programs are designed to provide leisure activities for youth members to 18 years of age. Crafts, games, food experiences, homework assistance, and field trips are a brief example of the activities your child will encounter. All programming is developed with consideration of the desires of the participants and with respect to the cultural diversity and familial values of each member.

CYTP promote the belief that all children are winners, all children can learn and self-esteem and respect for others is continually fostered.

# INTRODUCTION

## PROGRAM GOAL

Our goal is to provide a safe and nurturing environment that promotes the physical, social, emotional and cognitive development of children while responding to the needs of families.

## OPEN DOOR POLICY

CYTP has an open door policy. Parents are encouraged to visit, observe and participate in any program in which their child is enrolled. Communication between parents, teachers and staff is vital to the well-being of your child.

## PARENT ORIENTATION/TOURS

Prospective patrons may visit any CYTP when escorted by center personnel. Parents are encouraged to phone the center for an appointment to ensure an available escort. Escorts are necessary to ensure protection for the children enrolled in the programs.

## OVERSIGHT

The Children, Youth and Teen Programs are governed by Marine Corps Order 1710.30E, ASO 1710.1A, local sanitation, safety, and fire regulations, and food service guidelines provided by the USDA sponsored Child and Adult Care Food Program. Monthly/Quarterly inspections are conducted by the Preventive Medicine Unit from the Naval Hospital Camp Lejeune, New River Safety and Standardization, and the Camp Lejeune Fire Department. In addition, there are annual Comprehensive, Multidisciplinary, and Marine Corps Headquarters Inspections.

## DESCRIPTION OF SERVICES

### **RESOURCE & REFERRAL (449-5633)**

Serves as a "one stop" shop for meeting your childcare needs. Resource and Referral (R&R) provides childcare information, referrals and assistance in locating appropriate, affordable and accessible childcare and recreational programs in the local area, both on and off base. Contact this office for program information and registration. This office is located in the Child Development Center, Bldg. AS1000.

### **CHILD DEVELOPMENT CENTER (449-6712/6713)**

The Child Development Center (CDC) offers the following programs:

**\*FULL DAY CHILDCARE:** Full day childcare is available for children six weeks to five years of age. The Child Development Center hours are 0600 - 1800, Monday thru Friday.

**\*HOURLY CHILDCARE:** Hourly childcare services are available daily from 0800-1700 hours for children one to five years of age. Hourly care for infants, ages 6 weeks to one year, is available on a limited basis. Services are offered on a space available basis, with reservations being accepted up to two weeks in advance.

**\*SPECIAL FUNCTION CHILDCARE:** Units and organizations aboard MCAS New River may request childcare services for special events/functions, etc. To set up special function childcare, contact the Resource and Referral Office or the Child Development Center Director. The following options are available:

*\*Short Term Alternative Child Care (STACC): Childcare provided after hours at the Child Development Center or at an approved on site location when parents are in participating in an event at the same location. (Providing STACC services during CDC hours of operation is contingent upon availability of staff)*

*\*Support for Child Care in Unit Settings (CCUS): Provides units with equipment and supplies when they are utilizing volunteers to provide childcare for their function/brief.*

*\*Special Function Child Care: Childcare contracted by a unit/organization that is provided within the Child Development Center after the normal hours of operation.*

The Child Development Center contracts directly with units/organizations/squadrons, etc., for special function childcare. All staffing costs incurred will be billed to the unit/organization/squadron.

### **FAMILY CHILD CARE (449-5636)**

Parents who wish to contract for in-home care for their child(ren) may opt to utilize our Family Child Care Program. Family child care is provided in a government family housing unit, other than the child's home, for one or more unrelated children for more than 10 childcare hours per week. A childcare hour is defined as the care of one child for one hour. Child Care services are permitted in all housing units. Providers are authorized by the Commanding Officer after completing a number of program compliance requirements. Each Family Child Care Home is a small business operated by the spouse of a military service member. Group sizes, determined by the age and development of the children served, are as follows:

- **MIXED AGE GROUP HOME** - limited to six (6) children, including the FCC Provider's own children under the age of 8 years. FCC's will be limited to no more than two (2) infants under two (2) years of age (with only one child under two (2) months, with the exception of twins).
- **INFANT/PRE-TODDLER HOME** - limited to three (3) children, all of which must be under 24 months of age. A provider's own children must be under 24 months and counted in the three (3) children present or over eight (8) years of age and will not count in the ratio.
- **SCHOOL-AGE HOME** - limited to eight (8) children all of which have begun kindergarten and older. The provider's own children must be of the same age range or older and will count in the ratio up to 12 years of age.

If you are interested in utilizing this program or becoming a certified family child care provider, the Resource and Referral office or Family Child Care Office can provide more detailed information.

### **YOUTH ACTIVITIES CENTER (449-6711)**

The Youth Activities Center offers the following programs:

**SCHOOL AGE CARE:** The School Age Care Program (SAC) is for children ages six to twelve (grades K-6). This program is held at the Youth Activities Center (YC) and provides care before school, beginning at 0600, after school, until 1800, and on teacher workdays and school breaks from 0600 - 1800. Children can be dropped off at the YC in the mornings and the bus will take them to school. The bus will bring them back to the YC in the afternoon until their parents pick them up (Bus transportation is only provided for DeLalio Elementary School only). Three care options are available for this program: 1) Before School care only and care during scheduled workdays 2) After School Care only and care during scheduled workdays 3) Before and After School care and care during school holidays. Care for Winter and Spring Breaks are charged separately.

**SUMMER EXPLOSION:** Summer Explosion occurs when school is dismissed for summer break. This program is for children ages six to twelve (grades K-6; must have already completed Kindergarten to be eligible), and operates Monday - Friday 0600 - 1800. Bus transportation is provided as part of the program fees for the various field trips and activities. *SAC program participants require a separate registration to participate in Summer Explosion.*

**OPEN RECREATION:** The YC is open Monday through Saturday, offering recreational programs to children ages six to eighteen. Open Rec offers different time frames for older and younger youth and provides a variety of recreational equipment to include video games, arts and crafts, pool tables, air hockey, computers, ping-pong tables, and board games. Open Rec Monday through Friday for ages 10-18 are from 1800-2000. On Saturdays, Open Rec occurs from 1000-1200 for ages 6-9, 1200-1500 for ages 10-12, and 1530-2000 for ages 13-18.

**BOYS AND GIRLS CLUB PROGRAMMING:** The YC is an affiliate of the Boys and Girls Clubs of America. For more details of the Boys and Girls Club programming offered at the YC, visit [www.bgca.org](http://www.bgca.org).

**SPECIAL PROGRAMS/EVENTS:** The YC holds special events throughout the year. These events include dances, lock-ins, parties, instructional classes and educational classes.

### **SPECIAL NEEDS**

The CYTP promote the placement of children with special needs in an appropriate, least restrictive environment. In order to ensure that the child is placed in an environment in which he/she can succeed, the CYTP Administrator will call a meeting of the Special Needs Evaluation Review Team (SNERT) prior to placing a child with special needs. This team will meet with the parents, staff and other professionals designated by the parents or staff to define the specific needs, determine placement and ways to meet those needs.

Needs requiring review include medical diagnoses, allergies, and other health impairments listed on the health assessment by the physician. The two exceptions are medication and seasonal allergies. While these should be listed on the health assessment, they do not necessarily require a SNERT. Some medical and educational needs require enrollment in the Exceptional Family Member Program (EFMP). During the SNERT, a determination will be made as to whether EFMP enrollment is required. For all needs requiring EFMP enrollment, patrons will have 14 days to begin the enrollment process and an additional 60 days to complete the process. Failure to adhere to these deadlines may result in termination of services.

## **ELIGIBILITY/REGISTRATION/FEEES**

### **PATRON ELIGIBILITY**

The status of the sponsor determines the eligibility of children enrolled. Eligible patrons (sponsors) include military personnel, DOD civilian personnel, and reservists on active duty or during inactive personnel training and DOD contractors.

### **REGISTRATION DOCUMENTS**

Families requesting childcare services meet with Resource & Referral (R&R) to discuss their specific needs and available program options. Families must provide:

- completed registration package
- signed payment policy
- power of attorney (if military sponsor is deployed)
- family care plan, if single (parent) or dual military
- sponsor/spouse/child's Social Security Numbers
- up to date shot record
- health assessment
- sponsor's current LES/pay stub
- Copy of NAVMC 10922 (Application for BAQ)
- family member's current LES/pay stub, or college schedule
- Two local escort/emergency contacts.
- Signed "Back to Sleep Policy" (infants only.)

NOTES: Either parent may register child (ren), however, SPONSOR must sign forms to complete registration. Also, FCC homes may require additional documentation to include Hold Harmless agreement.

### **RE-REGISTRATION/ANNUAL UPDATES**

Re-registration/Annual Updates require all previously submitted information to be verified for accuracy, updated (as needed), initialed and dated by either the spouse or the sponsor. Updated shot records, annual health assessments, and new USDA Child and Adult Care Food Program forms are required. Re-registration requires an appointment with R&R.

### **WAITING LIST**

When Child Development Programs are at maximum capacity, a waiting list will be maintained. To be placed on the waiting list the sponsor must meet with R&R and complete a Request for Care form. A priority placement system has been established that is supportive of operational readiness, mission accomplishment and retention. Vacancies will be filled from the waiting list based on the following priority placement system:

Priority 1:

- ❖ Children of dual military members assigned to this installation
- ❖ Children of single military members
- ❖ Children of single DoD civilian personnel
- ❖ Children of military or DoD civilian personnel assigned to this installation whose spouse is employed on a full-time basis or is a full-time student

Priority II:

- ❖ Children of military members assigned to this installation with one parent not working
- ❖ Children of DoD civilian personnel assigned to this installation with one parent not working
- ❖ Children of Reservists on active duty or during inactive personnel training if assigned to this installation

Priority III:

- ❖ Children of other eligible patrons (military and DoD civilians) not assigned to this installation and DoD contractors

\*Once an available space has been offered, the sponsor will have 24 hours to accept or deny the space and pay the applicable registration fee.

\*If an available space is offered and refused, the request for care will be deleted from the waiting list.

\*To remain active on the waiting list, current information and confirmation of continued need must be updated every three months. It is up to the sponsor to provide accurate information so that when a space is available, the Resource and Referral Office can contact you.

\*Expectant parents may place their unborn child on the waiting list. After birth, parents must notify the Resource and Referral Office with up-dated information. At that time, the child's name will be placed in the appropriate priority using the date that the parents first contacted the Resource and Referral office. **PLACING AN UNBORN CHILD ON THE WAITING LIST IS HIGHLY RECOMMENDED**, but does not guarantee a space will be available when care is needed.

When there is no waiting list, vacancies are filled on a first come, first served basis by age group.

### **ADMISSION REQUIREMENTS**

- 1) All parents must complete an enrollment package and provide a copy of their child's immunization record and current health assessment in order to register their child in any CYTP. Packets may be picked up or filled out online in advance. If the sponsor is

divorced or separated, a copy of the legal documentation supporting this status must be provided at the time of registration.

- 2) Single active duty military and dual active duty military parents must furnish a copy of their individual **Family Care Plan** at the time of registration, as per MCO 1740.13A Sections 6.5.1.2 and OPNAVIST 1740.4. A Special Power of Attorney may be provided for families with deployed service members.

### **FEES AND CHARGES**

- 1) **Registration Deposit** - A \$25.00 nonrefundable, one time registration deposit per child is due upon enrollment in Children, Youth and Teen Programs, except for FCC homes (however, some providers may charge an "in-home" registration fee.) This deposit will be credited toward payment of the first payment due. Once this registration deposit is paid, the payment policy is signed, and all applicable documents have been turned in, the sponsor's child(ren) is/are considered enrolled in the Children, Youth and Teen Programs for the registration year. The sponsor is responsible for adhering to the guidelines outlined in the policy.
- 2) **Total Family Income** - As mandated by DOD regulations, fees are based upon total family income, using the sponsor's most recent Leave and Earning Statement (LES) and the spouse's most recent LES, W-2 form or pay stub (all active duty must present their most recent LES). In order to provide a consistency in programming among all of our activities, a "family" is defined as the following, "**a group of related or non-related individuals, who are not residents of an institution or boarding house, but who are living as one economic unit.**"
- 3) **Fee Payment** - As outlined in the payment policy, fees are due in advance of services according to the following:
  - a. Full-time fees to include CDC and Before & After School are due on the 1<sup>st</sup> and 15<sup>th</sup> of each month by 1730 hours. There is a 1 day grace period for payment of full-time fees, before late fees are assessed.
  - b. Spring & Winter Break and Summer Explosion fees are prior to the beginning of each session.
  - c. Additional fees for YC programs, classes, trips, and events may be charged.
  - d. Hourly childcare fees are due at drop-off the day services are rendered, based on the time reserved.
- 4) **Meals and Snacks** - Fees for all programs include meals and snacks that are provided.
- 5) **Holidays, Program Closures, Vacations and Illness** - Adjustments for holidays and scheduled closures are made when program fees are established. Before & After School and Full-time CDC patrons are authorized 1 fee-free vacation week after being

enrolled in the program for 3 months. However, the vacation week may not be taken in conjunction with termination/disenrollment and must be taken over 5 consecutive work days. Fees will not be prorated for holidays, early closure days, training day closures, base closure, additional vacation days, illness or emergencies.

- 6) Fee Categories and Subsidies - Parents are assigned a fee category, according to a sliding scale based on their income, at the time of enrollment. All fee categories are subsidized by the Department of Defense (DOD). Fees are re-evaluated and adjustments made annually in accordance with DOD guidance. This is the only time that fees are evaluated.
- 7) Fee Adjustments - Military installations are not obligated to adjust patrons' fees during the year as a result to changes in family income. However, if you feel that your childcare fees should be re-evaluated due to a permanent change in family income, you may submit a written request with supporting documentation to the Children, Youth and Teen Program Administrator requesting an adjustment in fees (this is no guarantee). Parents who are gainfully employed will be required to show proof of employment bi-annually and those who are full time students will be required to show full time status each semester. Spouses who are no longer employed or a full time student have 30 days to show proof of employment or a college registration form showing full time enrollment status or their child(ren) may be disenrolled from the program and placed on the waiting list and assigned a priority two status.
- 8) Family Child Care Fees - Fees for Family Child Care homes are not regulated by the Department of Defense with the exception of those providers receiving direct cash payments for childcare spaces. Family Child Care providers operate their own small business and it is up to the providers to establish and collect their program fees. Hours of availability, fees, specific duties and other requests for care will be resolved between the care provider and the patron. Each parent will read and sign the Parent/Provider Agreement Form, stating payment policies and agree to comply. **Providers reserve the right to establish/include penalties for late payment of fees, failure to pick up the child before closing time and disenrollment without notice.**
- 9) Late Payment Policy - If program fees are not paid on time a late fee of \$6.00 per day will be charged to your account. Additionally, if five days of late fees are charged to the account and arrangements have not been made with the Director to bring the account up to date, childcare services will be terminated and your command will be notified. Please ensure that your account is kept current to avoid additional charges. Remember, fees are due whether your child is in attendance or not.

10) Late Pick-up Fees and Procedures - Please ensure that you are aware of the opening and closing times of the program in which your child is enrolled. Parents who pick their child(ren) up after program closing times will be charged a late fee as follows:

- \$6.00 per child for any portion of the first fifteen minutes

- \$1.00 per child for each additional minute after the first fifteen minutes

Late fees are due prior to dropping off your child(ren) the following business day

If a child is left more than 30 minutes after closing, the Provost Marshall's Office will be contacted for assistance in locating the parents. This policy also applies to hourly care patrons.

## OPERATIONAL POLICIES

### ORGANIZATIONAL STRUCTURE

The Children, Youth and Teen Program is part of Marine Corps Community Services aboard Marine Corps Air Station New River. If at any time you have a question or concern, please bring it to our attention. We adhere to the philosophy that problems should be resolved and suggestions reviewed at the lowest level possible. So that we can expeditiously address your concerns and recommendations for improvement, please follow the chain of command listed below:

1. Caregiver/Program Assistant/Provider
2. Center/FCC Director/Assistant Director
3. CYTP Administrator - 449-5637  
*(Located at the Marine and Family Programs Bldg. AS-232)*
4. Marine and Family Programs Director - 449-4895  
*(Located at the Marine and Family Programs Bldg. AS-232)*
5. Marine Corps Community Services Director/Assistant Director - 449-6704  
*(Located at the Marine Corps Community Service Center Bldg. AS-208)*

### STAFF/CHILD RATIOS

DoD mandated staff to child ratios are maintained at all times in order to provide adequate supervision and ensure expeditious evacuation of all children in the event of a fire or other emergency. The following staff/child ratios are in effect at all times in the CDC programs:

STAFF/CHILD RATIOS	
6 WEEKS - 1 YEAR	1:4
1 YEAR - 2 YEARS	1:5
2 YEARS - 3 YEARS	1:7
3 YEARS - 5 YEARS	1:12
SCHOOL AGE CARE	1:15
OPEN RECREATION	1:20

### DISENROLLMENT

We respect a parent's right to disenroll their child from any CYTP. Disenrollment notices will be accepted for each program as follows:

**Full Day Child Care/Before & After School Care:** Notices of disenrollment will be accepted on or prior to the 1<sup>st</sup> business day of the month for the last day of attendance to be the 14<sup>th</sup> and on or prior to the 15<sup>th</sup> (or the first business day thereafter if the 15<sup>th</sup> falls on a weekend/holiday) of the month for the last day of attendance to be the 30<sup>th</sup>/31<sup>st</sup>. Anyone needing accommodations other than this must

Speak with the Director. If proper notice is not given, or arrangements are not made, you will be charged through the next payment period whether your child is in attendance or not.

**\*\*\*For more information on Fees/Charges and Disenrollment,  
Please refer to your payment policy\*\*\***

We reserve the right to cancel enrollment of a child within the program when a parent does not adhere to policies, including failure to pay user fees. Further, if we cannot meet the individual needs of a child within the group care; we reserve the right to withdraw your child. When we identify a situation, which could lead to withdrawal, we will work with the parents to overcome the problem. Should withdrawal become necessary, R&R will be available to assist with finding alternate care.

### **ARRIVAL AND DEPARTURE/DAILY REQUIREMENTS**

**Signing in/out** - Parents/Escorts must sign children in and out at the front desk/FCC home, prior to dropping off/picking up children, and in the child's classroom daily. Parents are responsible for the safe arrival to and departure from any CYTP. Children must be escorted to their room by their parent/escort and parents must leave an emergency contact number where they can be reached during the day. **IDs will be verified daily at pick-up.**

For the safety of your younger children, we request that older children be dropped off before younger children and the older children be picked up last.

Also, note that children in the CDC/YC will **not be allowed** to be **signed in or out during fire drills or emergency situations** before children return to the classroom and all are accounted for.

### **ESCORT AUTHORIZATION/EMERGENCY CONTACT**

Parents must list at least two escort/emergency contact for their child(ren). They must be in the local area and will be contacted only if the program is unable to contact the parent in the event of an emergency, illness, etc.

Persons authorized to pick your child up must be listed as an escort/emergency contact on your child's enrollment form and will be required to produce identification before your child is released into their care.

Please ensure that you update your escort/emergency contact information as needed. In the event that parents are unable to pick up their child and no designated escort is available, the Provost's Marshal's Office will be notified.

### **CUSTODY DISPUTES**

CYTP staff will not become involved in custody disputes. Parents who have legal custody of a child must provide a copy of the court order for our files. In the event that the other

parent attempts to take the child from the center, the Provost Marshall's Office and the sponsor will be notified. The program staff will not endanger the other children or staff members to prevent the parent from taking the child from the premises.

### **UPDATED INFORMATION**

Parents/guardians are responsible for keeping their child(ren)s information up to date. Please inform the administrative staff of any changes in address, phone numbers, emergency contacts etc.

### **COMMITMENT TO CONFIDENTIALITY**

We appreciate you trusting us to take care of your child/ren. Please know that we respect the information you share with us and will use that information in a professional manner as a means to meet your child's needs. MCO 1710.30E Chapter 2, 2013, mandates Confidentiality. "All information about children, youth, teens, families, and staff shall be kept confidential. Program managers shall be familiar with and comply with the Privacy Act." Access to children's files will be granted only to CYTP staff, medical personnel as needed, and individuals assigned as part of our required inspections.

### **FIRE ARMS**

Fire arms are strictly prohibited from being brought into any CYTP facility or FCC home, except for official business being performed by a station authorized law enforcement agency.

### **COMPLAINT PROCEDURES**

Any concerns, comments, or suggestions for improvement should be brought to the attention of the appropriate Assistant Director/Program Director to ensure expeditious resolution. We welcome parent input and encourage use of the Child Development Center's Comment/Suggestion Box located in the lobby or contact the Program Director. We have a commitment to continuous improvement of the services we provide.

## **DEVELOPMENTAL PROGRAM**

### **PROGRAM STATEMENT**

The early years are truly the learning years. Every moment is an opportunity to learn more about the world, practice social skills and gain critical thinking skills and knowledge. The early years lay the foundation for all later learning and shape whether children succeed in school and later life. If we care about our children, then we must ensure that all young children enjoy an early childhood that prepares them to take full advantage of their educational opportunities and to become effective citizens, capable workers and loving parents of the next generation. Our program is based on teacher's observations and recordings of each child's special interest and developmental progress. Programs provide for a wide range of developmental interests and abilities. Adults provide opportunities for children to choose from a variety of activities, materials and equipment and time to explore through active involvement.

### **CURRICULUM**

Children are born natural learners whose curiosity about the world around them motivates them to acquire knowledge and develop skills. Children are learning and exploring their environment every minute of the day. Play, whether at home or in a group care setting, becomes the means through which education occurs. Through play, children develop a foundation of skills needed to participate in formal academic learning. Our program is designed to promote child-initiated learning with hands-on experiences that encourage responsibility, decision-making, problem solving, self reliance, the building of self-esteem and respect for another person's ideas, cultural values and interests.

The CDC uses the Creative Curriculum to promote the individual interests and needs of children. The YC uses both the Creative Curriculum and the Emerging Curriculum. The Creative Curriculum uses classroom observations and assessments performed by teachers on each child to formulate a lesson plan promoting emotional, physical, intellectual, cognitive and physical growth. A balance is created to include both active and quiet activities. Outdoor experiences are planned for children of all ages as well.

Each classroom is designed to meet the needs of the age and developmental level of the children enrolled while respecting each child's unique style of learning. A variety of multi-cultural, non-sexist toys, equipment and activities, that will promote interaction between the children and the world which surrounds them, are available. Teachers facilitate learning by guiding children to an activity/learning center and encouraging participation. Teachers prepare lesson plans for each learning center based on the particular interests of the children and the established goals. The child is allowed to make choices when selecting an activity, thus learning valuable life lessons that will have long lasting effects. Learning

centers generally consist of the following area: science, blocks, music, art, books, table top toys, sand/water table, dramatic play, and in some age groups computers.

### **DEVELOPMENTAL ASSESSMENTS**

Each child is assigned a primary caregiver when they are assigned to a classroom. The caregiver assesses growth using a list of developmentally sequenced behaviors in five different skill areas; socialization, self-help, language, cognitive and motor skills. Using this checklist and knowledge of the children's interests, the caregivers develop activity plans that will promote individual growth and development. Parent conferences will be scheduled on a semi-annual basis, typically May and October, to discuss these assessments, however, conferences may be scheduled at any time at the request of the parent or caregiver.

### **CLASSROOM PLACEMENT/TRANSITIONING TO A NEW CLASSROOM**

As a general rule children will be placed in the CDC according to their age and will move to the next classroom around the time of their birthday. However, since children develop at different rates, the CDC staff may recommend that children stay in a classroom past their birthday or move to the next age group earlier than their birthday dependent on their development readiness. When it is time for a child to move to a new classroom, parents will be given the option of moving their child with or without a transition period.

Children will be placed in classrooms based on where spaces are available. Parents may request a space in a particular classroom, however, requests can only be granted when there is available space. Children will not be moved once they have been assigned to a classroom unless there are extenuating circumstances.

### **PERSONAL BELONGINGS**

**\*Clothing:** Parents should make sure that children are dressed in clothes that are appropriate for the weather and durable for play both indoors and outdoors. To prevent injuries, sandals and open toed shoes are discouraged and flip flops/thong type sandals are not permitted. Rubber soled shoes are most effective for young children when climbing on playground equipment or participating in gross motor activities.

A complete change of clothes for each child must be kept at the center for emergencies. Additional sets of clothes may be requested for infants, pre-toddlers, toddlers and for children who are potty training. Soiled clothing will be sent home and the parent will be responsible for returning a clean change of clothes. Should all available clothing be soiled, the parents will be contacted to bring additional clothing. Precautions will be taken to safeguard clothing and/or personal belonging, however, the center will not be responsible for lost or damaged items.

**\*Diapers/Wipes:** Only disposable diapers are permitted in CYTP. Parents are encouraged to leave a supply of diapers at the center/FCC home. Children will need enough diapers and

wipes to cover one diaper change per hour that the child is in the center due to the fact that staff checks children for signs that diapers or pull-ups are wet or contain feces at least every hour when children are awake and when children awaken. As a courtesy, staff members remind parents when they need to supply more diapers and/or wipes, however, it is the parent's responsibility to check daily to ensure that they have enough.

**\*Jewelry:** Please do not allow your child to wear jewelry. Jewelry can be easily lost and can be a safety issue. Jewelry includes items such as beads, bracelets, watches, necklaces and earrings (except for small posts for pierced ears). Under no circumstances may children wear hoop-style earrings or necklaces due to the likelihood of getting them caught on playground equipment, furniture, clothing, etc.

**\*Items from home:** Food, toys and other items from home may not be brought into the center. This policy ensures that items are not lost, misplaced or cause injury to others. This does not include security items such as a blanket that a child may need for comfort at naptime or items that are part of a learning activity in your child's classroom. Please monitor your children to ensure that they do not bring prohibited items into the program.

## **OUTDOOR PLAY**

Your child's experiences on the playground are an important part of our program and his/her development. We view the playground as an extension of the activity room. It combines opportunities for exploration, creativity and play. We allow children to be outside each day, weather permitting. Please send children dressed appropriately for outside play. Due to staffing demands, we are unable to allow children to stay inside while their group is outside. If your child is too ill to participate in the daily schedule of activities, which includes outdoor play, he/she should remain at home.

- During the summer months, the flag conditions, as used by MCAS New River to determine safe training environments, are used for determining outdoor play times.
  - When appropriate, children will have the opportunity to play in shaded areas.
  - On sunny days, parents should provide children with sun protective clothing and skin protection.
  - Parents will provide sunscreen protection (not containing DEET) in a separate plastic bag.
  - Parents must apply skin protection (either sunscreen or sun block with UVB and UVA protection of SPF 15 or higher) first, then staff will re-apply prior to outside play in the afternoon.
  - Sunscreen will be applied only with written permission on the Topical Ointments form.
  - When public health authorities recommend the use of insect repellents due to high-risk of insect-borne disease, only repellents containing DEET are used, and these are applied only on children older than two months.

- Staff apply insect repellent no more than once a day and only with written parental permission.
- During the winter months, children will be taken outdoors daily for short periods based on the weather conditions.

### **FIELD TRIPS**

Occasionally, our program of activities will include field trips. We will notify you in advance of planned field trips. All staff-to-child ratios will be increased to ensure better supervision and safety of the children.

- Parents of children/youth participating in on base trips for YC Summer Explosion will sign a "blanket" permission form with the specific activities listed for each day. Summer Explosion and Winter/Spring Break care may include field trips off base that require permission for the specified trip.
- CDC field trips will only be to locations within walking distance, but require individual permission for the specified trip. When entering crosswalks, teachers will position themselves to keep all children within the crosswalks until every child has safely crossed the street.
- Parents' participation as chaperones will be encouraged and coordinated through your child's/youth's caregiver. However, we ask that siblings not attend.

### **TRANSPORTING CHILDREN**

Children making arrivals/ departures to/from the CDC and Delalio Elementary School during the day program are accompanied by a teacher/teacher aide (with completed National Agency Background Checks). Children are then signed into/out of the CDC program and escorted to the bus when making arrivals/departures from the program during the day. Upon their return, children are escorted from the bus by the teacher/teacher aide and into the CDC and signed back into the program and escorted to their classroom. Teachers/teacher aides without completed National Agency Background Check (NAC) are not permitted to escort children during the program day. Otherwise, CDC children will not be transported, except by emergency vehicles, should the situation warrant. Parental permission is required.

YC children are transported to and from the base school in a MCCS school bus. The driver of the bus will have a CDL license. YC children participating in Summer Explosion and Winter/Spring Break care may be transported for field trips.

### **PHOTOGRAPHY**

On occasion, children are video taped/photographed during daily activities, events, etc. These video tapes/photographs may be used for advertisement and promotion for the CYTP or may be taken by other parents/staff during parties and special activities. It is the parent's option to allow their child to be video taped/photographed or not. A permission to photograph form, which will allow parents to indicate their preference, will be made available in the enrollment package.

## TOILET TRAINING

We are happy to assist and support parents' toilet training efforts. We will not start toilet training until both the child's parents and caregivers feel the child is ready and after toilet training has been initiated in the home. Children must be able to communicate the need for toileting to their caregivers. Parents should provide several complete changes of clothes while their child is toilet training. Please discuss training techniques with your child's caregiver so that your child can experience continuity of adult expectations in this important milestone.

Due to lack of diaper changing facilities, children must be toilet trained prior to entering the preschool classrooms. Exceptions will be made for children with special needs.

## BIRTHDAYS

On the last Friday of every month birthday cake will be served for snack. Our full time program will be served birthday cake for their afternoon snack. This is the time that children who have had a birthday during the given month can celebrate at the CDC. Parents are welcome to join their child during this time and may donate party plates, cups, and napkins if they would like. Parents may also provide goody bags for the children as long as they do not contain food/candy items or balloons; and they are placed in each child's cubby so that they may take them home and open them with their parent. **Outside food items or balloons may not be brought in for birthday celebrations.**

## HOLIDAY CELEBRATIONS

We view holidays as special times to celebrate and as opportunities to teach the children about different traditions and cultures. We will discuss different holidays in order to help the children understand and gain an appreciation of various traditions and cultures. If you have any ideas, artifacts, etc. related to a specific holiday or cultural celebrations, please let us know so these celebrations can be as enriching as possible.

We ask that parents not send in any items for holidays unless it has been requested by your child's caregiver or it is being used as a learning activity. If you do not celebrate holidays, please discuss your wishes with your child's caregiver or the center director.

## INCIDENT/ACCIDENT FORM

An incident/accident form will be filled out by CYTP staff after any mishap which leaves a mark on a child whether it is self-inflicted, inflicted by another or the result of an accident. This form will also be filled out for any child who exhibits aggressive behavior. The parent/guardian must sign this form acknowledging that they have been informed about the incident/accident.

## **DESTRUCTIVE WEATHER/DISASTER PLAN**

In the event of destructive weather, CYTP will remain open until directed by the station Commanding Officer to close. During such conditions, parents should maintain close contact with their child's program in preparation for worsening of conditions and changes in operational status. For information on openings/closings during destructive/inclement weather conditions call the CYTP information line at 449-6822. A recording will provide information on the status of all CYTP.

In the event of a fire, bomb threat, or other emergency situations etc. everyone will be evacuated from the facility and will follow additional instructions provided by responding emergency personnel.

## **COMMITMENT TO COMMUNICATE**

We believe it is our responsibility to communicate with you regarding your child's experiences at the Center. Our caregivers are interested in working with you in meeting your child's individual needs. There are a variety of ways that we will communicate with you, including daily communications, periodic newsletters, parent bulletin board, and parent/caregiver conferences. Communication between parents, teachers, and staff is vital to the well-being of your child.

## **PARENTS AS PARTNERS**

We believe that involving parents in activities is important for both you and your child. When parents are involved in the program, it strengthens the continuity between a child's experiences at home and the program. There are a variety of ways you can become involved in the Center.

**\*Parent Advisory Board (PAB):** We have an advisory board made up of parent representatives from all military ranks and civilian support personnel that provide recommendations to program staff and the Command for improving services and program operations. This Board also coordinates the parent participation program and helps with special events scheduled for the Program. Be a part of the Parent Advisory Board; ask at any of our centers for more information.

**\*After School Quality Committee (ASQ):** The Marine Corps recognizes that parents have the primary responsibility for the health, safety and well being of their children. In an effort to facilitate a parent-CYTP partnership for the welfare of the children, an ASQ has been established. The ASQ acts in an advisory capacity, providing recommendations for expanding and improving services and continuing improvement. ASQ does not engage in the management and operation of the CYTP. The board meets at least quarterly and parents are encouraged to attend. Announcements regarding upcoming meetings are generally published in the monthly newsletters and posted on the parent boards in the centers.

**\*Parent Participation Program:** Parents are encouraged to participate in our program in a variety of ways. Upon enrollment into the program, parents are expected to visit the center for an orientation and tour of the facility and programs. Other opportunities include, but are not limited to, conferences, visitation, being a parent volunteer, participation in special events and projects, and daily communication with your child's caregiver. We also strive to involve parents by offering them the opportunity to broaden their knowledge of child development and parenting skills through resources such as lending library, in-service training, parent seminars, and other community activities. Many of the opportunities offered are provided through a cooperative effort of the CYTP, Coastal Community Action, Inc., the Onslow County Partnership for Children, and the Onslow County Schools, just to mention a few.

## HEALTH AND MEDICAL

### HEALTH ASSESSMENTS

Upon enrollment, and annually thereafter, children are required to have a completed health assessment. Health assessment forms will be provided with your enrollment package.

### HAND WASHING

Hand washing is the single most effective way to prevent the spread of germs.

- Children and adults wash their hands:
  - upon arrival for the day;
  - after diapering or using the toilet (use of wet wipes is acceptable for infants);
  - after handling body fluids (e.g., blowing or wiping a nose, coughing on a hand, or touching any mucus, blood, or vomit);
  - before meals and snacks, before preparing or serving food, or after handling any raw food that requires cooking (e.g., meat, eggs, poultry);
  - before and after playing in water that is shared by two or more people;
  - after outdoor play, handling pets and other animals or any materials such as sand, dirt, or surfaces that might be contaminated by contact with animals; and
  - when moving from one group to another
- Adults also wash their hands:
  - before and after feeding a child,
  - before and after administering medication,
  - after assisting a child with toileting, and
  - after handling garbage or cleaning.
- Proper hand-washing procedures are followed by adults and children and include:
  - using liquid soap and running water;
  - rubbing hands vigorously for at least 10 seconds, including back of hands, wrists, between fingers, under and around any jewelry, and under fingernails; rinsing well; drying hands with a paper towel, a single-use towel, or a dryer; and avoiding touching the faucet with just-washed hands (e.g., by using a paper towel to turn off water).

Hand washing sinks are not to be used for bathing and removing smeared fecal material from children.

### IMMUNIZATION REQUIREMENTS

Each child before admittance to the CYTP must meet the following immunization requirements:

2 months: 2<sup>nd</sup> HepB, 1<sup>st</sup> Dtap, 1<sup>st</sup> Hib, 1<sup>st</sup> OPV/IPV  
4 months: 2<sup>nd</sup> Dtap, 2<sup>nd</sup> Hib, 2<sup>nd</sup> OPV/IPV  
6 months: 3<sup>rd</sup> HepB, 3<sup>rd</sup> Dtap, 3<sup>rd</sup> Hib, 3<sup>rd</sup> OPV/IPV  
12 months: 4<sup>th</sup> Hib, 1<sup>st</sup> MMR

Recommended: 1<sup>st</sup> PCV, 1<sup>st</sup> RV  
Recommended: 2<sup>nd</sup> PCV, 2<sup>nd</sup> RV  
Recommended: 3<sup>rd</sup> PCV, 3<sup>rd</sup> RV  
Recommended: 4<sup>th</sup> PCV

15 months: 4<sup>th</sup> Dtap, 1<sup>st</sup> Varicella  
 24 months: nothing required  
 4-6 years: 5<sup>th</sup> Dtap, 4<sup>th</sup> IPV/OPV, 2<sup>nd</sup> MMR, 2<sup>nd</sup> varicella  
 10 years: Tdap

Recommended: 1<sup>st</sup> Hep A  
 Recommended: 2<sup>nd</sup> Hep A

**Abbreviations:**

HepB (3 doses) - hepatitis B	DtaP (5doses)- diphtheria, tetanus, pertussis
Hib (5 doses)- Haemophilus Influenza type B	IPV/OPV (4 doses)- polio
PCV(4 doses)- pneumococcal	RV(3 doses)- rotavirus
MMR(2 doses)- measles, mumps, rubella	Varicella(2 doses)- chickenpox
Hep A(2 doses)-hepatitis A	Tdap- diphtheria, tetanus, pertussis booster

**SIGNS OF ILLNESS**



It is the CYTP's policy to take all precautions to offer a healthy environment for children. These procedures may at times inconvenience you, but are for the benefit of the children. Children are screened upon arrival for any signs of illness. In many instances, it is necessary to remove the sick child from care. It is important to have a contingency plan when your child has a contagious illness or simply requires a quiet environment to recuperate. Children who attend the center must be well enough to participate in all activities. Specific exclusion criteria are provided below.

**CRITERIA FOR DENIAL OF SERVICE**

Children/youth who appear ill or show visible signs will be denied admission or excluded from care based upon the following symptoms:

- ⇒ Temperature in excess of 100.5<sup>0</sup> F. axillary (armpit.)
- ⇒ Inability to participate in daily activities.
- ⇒ Illnesses such as:
  - Impetigo--red oozing erosion capped with a golden yellow crust that appears stuck on.
  - Scabies--crusty wavy ridges and tunnels in the webs of fingers, hand, wrist and trunk.
  - Ringworm--flat, spreading ring-shaped lesions.
  - Chicken pox--crops of small blisters on a red base that become cloudy and crusted in 2-4 days.
  - Head lice or nits (whitish-gray dots) attached to hair shafts.
  - Culture-proven strep infections that have not been under treatment for at least 24 hours.
  - Conjunctivitis (pink eye)--red, watery eyes with thick yellowish discharge.
  - Persistent cough--cough that produces phlegm and lasts longer than 10 days.
  - Severe diarrhea--Two or more predominately watery stools in a four hour period.

- Vomiting--Any projectile (forceful) or after more than two feedings.
- Meningitis - Fever, stiff neck, lethargic.
- Thrush - "Cotton candy" appearing patches.
- Hand, Foot & Mouth - Grayish lesions on cheek and tongue, raised blister-like rash on palms, fingers and soles.
- Strep throat - Fever, sore throat, red/white patches on tonsils.
- Scarlet Fever - Fine, sandpaper-like rash on neck, chest and in skin folds, strawberry tongue.
- Symptoms of other contagious diseases, such as measles, mumps and hepatitis.
- Pinworm infestation.

### **NOTIFICATION OF CONTAGIOUS DISEASES**

If your child is diagnosed as having any contagious illness, such as measles, mumps, chicken pox or conjunctivitis, you **MUST** notify the center/FCC home so that we can alert other parents whose child may have been exposed to the illness.

### **RETURNING TO THE CENTER AFTER ILLNESS**

Your child may return to the center after an illness when he/she feels well enough to participate in usual daily activities, when his/her presence will not endanger the health of the other children/youth and when the criteria below are met. Note: A statement from an authorized health care professional may be required for readmission of a child/youth following a communicable disease. The Program Director will contact the Preventive Medicine Department at Naval Hospital Camp Lejeune for advice and approval to readmit the child/youth if any questions arise.

### **CRITERIA FOR READMISSION**

- ⇒ Fever has been absent for 24 hours.
- ⇒ Nausea, vomiting or diarrhea has subsided for 24 hours.
- ⇒ Appropriate number of doses of antibiotics (when prescribed) has been given over a 24 hour period for known strep or other bacterial infections and the child's physician has approved readmission.
- ⇒ Chicken pox lesions are all crusted and dry and the child/youth has been fever free for 24 hours, usually 5-7 days after onset.
- ⇒ Scabies are under treatment and lesions are covered.
- ⇒ Lice - After completion of medical treatment and environmental treatment.
- ⇒ Pinworm is under treatment.
- ⇒ Lesions from impetigo are no longer weeping and the child/youth has been on antibiotics for 24 hours.
- ⇒ Ringworm lesions are under treatment and lesions are covered. Ringworm lesions in hard to cover areas (face, head, etc) are under treatment for 48 hours and an attempt to cover the lesions is still made to avoid further spreading of the fungus. If ringworm is not improved in 4 weeks, then the child must return to the physician for re-examination.

- ⇒ Conjunctivitis has diminished to the point that eyes are no longer discharging (draining/oozing) and the child/youth has been on antibiotics for 24 hours.
- ⇒ Meningitis - physician clearance.
- ⇒ Thrush has been under treatment with an anti-fungal for 24 hours.
- ⇒ Hand, Foot & Mouth - Child/youth has been fever free for 24 hours
- ⇒ Strep throat - fever free for 24 hours and on antibiotics for at least 24 hours.
- ⇒ Scarlet fever - fever free for 24 hours and on antibiotics for at least 24 hours.
- ⇒ Children still in diapers with positive cultures for salmonella have two stool cultures, one week apart, that are negative. Older children (toilet trained) shedding salmonella may be readmitted providing strict adherence of hand washing policies for care providers and child following use of the toilet.
- ⇒ Children still in diapers with positive cultures for shigellosis must be under treatment for 5 days and diarrhea free for at least 24 hours. Stool cultures must be obtained 48 hours after completion of antibiotic therapy and a second specimen no sooner than 24 hours after the first specimen.
- ⇒ Children/youth suffering from illnesses that are contagious may be readmitted once the communicable stage is past.
- ⇒ The child does not require specialized care/attention beyond program services provided.

### **MEDICATION POLICY**

The medication policy is as follows:



1. Prescription medications that must be dosed 3-4 times daily will be administered to children enrolled in the full day childcare program. Medications, which are dosed once or twice daily, should be administered by the parent.
2. Medications and special therapeutic procedures will be administered only when prescribed by a physician and only when there is no reasonable alternative to the medical requirement for the child.
3. The physician or parents will administer the first dosage of medication. Children will be on oral medication at least 24 hours before dosage is administered by CYTP personnel.
4. All medication in the CDC will be administered in the Isolation Room, directly behind the front desk.
5. The health care provider and the parent must complete the Release of Liability to Administer Medication form prior to the staff assuming responsibility for administering medications.
6. Medication will be in the original container with a childproof cap; dated with physician's name, child's name, name of medication, dosage strength and instructions for use and storage.
7. No "over the counter" medications will be administered unless ordered by prescription.

8. Designated personnel are authorized to administer medication to the physician's instructions. Individuals administering medication will have received prior specialized training.
9. All medication will be checked in and out at the front desk and all doses given will be recorded on a medication log.
10. Parents will bring medication and measuring syringe, cup or spoon to the facility in a Ziploc bag.
11. Anticonvulsants, Asthma medications and injectable Epinephrine (Epi-pens) require review by the SNERT prior to acceptance of the medication. Also, due to contamination risk in tubes and connections, nebulizers will not be used to dispense Asthma medication. Inhaled asthma medications require a metered-dose inhaler, and a spacer device for young children.

\*\*\*Note: FCC providers may or may not accept medications. Please consult the individual provider prior to dropping off medications

### **MEDICAL/DENTAL EMERGENCIES**

Every precaution will be taken to prevent injury to children, but in the event of accident or medical/dental emergency, procedures are as follows:

1. A certified staff member will administer First Aid/CPR.
2. CYTP personnel will call 911 when a medical or dental emergency occurs that requires immediate and/or definitive care. This may include such things as very high fevers, seizures, asthma attacks, suspected broken bones, injuries that would require stitches, severe chest pains, respiratory distress, dislodged or broken tooth, severely bleeding mouth or tongue.
3. After the call is placed to 911, staff will attempt to contact immediate family members or emergency contacts. If someone is unable to be reached and the injured/ill person is less than 18 years of age, or the person contacted does not arrive before EMS, then a staff member will accompany the injured/ill child/youth to the hospital, when possible.
4. An injured/ill person who is 18 years of age or over the person may refuse transport via EMS; however, he/she will be required to sign a statement stating he/she refused.
5. If transport occurs, the cost of the transport is the responsibility of the patient and/or insurance, not of the program. Since no emergency medical facility exists on MCAS New River, staff and children will be transported for the following hospitals via emergency personnel:

a. Dependent children or staff will be transported to: Naval Hospital Camp Lejeune, 100 Brewster Blvd. Camp Lejeune, NC

b. Civilian children or staff will be transported to: Onslow Memorial Hospital, 317 Western Blvd. Jacksonville, NC.

### **INFANT SLEEP POLICY**

In addition to the following, CYTP personnel will be required to read and sign the Statement of Understanding - NAEYC Accreditation Criterion for Supervision of Sleeping Infants policy contained in the Enclosures.

- Infants will be placed on only their backs to sleep. If another sleep position is needed, then a doctor's note, with a documented medical reason, is needed.
- Blanket will be tucked into the sides and bottom of crib mattress. Blanket will be pulled up no higher than the middle of the infant's chest.
- Infant will be placed with their feet at the foot of the bed.
- No heavy, quilted or knitted blankets or other items will be allowed in the crib. If families want to bring a blanket from home, they must bring a lightweight blanket that is an appropriate size for tucking under the mattress.
- If the infant can roll over on his/her own, then he/she will be allowed to maintain that position. Staff will post a sign on the crib to notify staff and visitors that he/she is capable of rolling.
- Staff will visually and physically check on sleeping infant every 5 minutes.

### **SUPERVISED REST PERIODS**

Supervised rest periods will occur daily from approximately 1200-1400 hours for children preschool age and younger who attend the CDC on a full-time basis or on a drop-in basis during these hours. Children who do not sleep must have a quiet time with materials or activities that do not disturb the children who are resting. Children may bring from home a blanket and a small soft toy used to help them feel more comfortable while resting. Blankets must be taken home weekly, laundered, and returned with your child on Mondays. We ask that you please be mindful that cubbies have limited space and are shared with other children, for this reason Pillow Pets are highly discouraged.

### **PETS**

Due to allergies and other health related concerns, our centers are free of pets that produce dander or salmonella. Our FCC homes may have family pets, but the family pets are prohibited from being in the space where care is being provided and interacting with the children in care while the home is open.

### **PROHIBITED USES**

The facility and outdoor play areas are entirely smoke free; no smoking is permitted in the presence of children in these areas. Tobacco products may be used in privately owned vehicles or in designated areas. Use of alcohol and illegal drugs is prohibited.

## NUTRITION

### MEALS

Nutritious meal and snacks are an important part of your child's day. All food served within the CYTP meet the standards set by the United States Department of Agriculture Child and Adult Care Food Program. Food from home may not be brought to the center. However, drinking water may be brought from home, but must be in a clear, non-commercial, sports-type container. The container must be labeled with the child's name and date. Once the container is empty, then facility water will be used. The container will not be refrigerated. The parents may put ice in it at home. The program is not responsible for lost or misplaced containers. Water containers must be taken home and cleaned daily. Children requiring a special diet for medical or religious reasons must present a written statement signed by a physician in order that substitutions can be provided.

Meal and snack times are as follows:

Breakfast:	0800
Lunch:	1100
Snack:	1400

Meals and snacks will be served for a period of thirty minutes. If you wish for your child to participate, please ensure that your child arrives within this time frame.

### FAMILY STYLE DINING

Family style dining is conducted in each classroom. Caregivers sit and eat with the children to enhance social interaction and promote healthy eating habits. Children are encouraged to sample all foods, but are not forced to eat. Children participate in setting the tables, serving and clean up.

### INFANT MEALS

Infants are fed on their own individual schedule.

The CDC provides powdered formula for the parents to prepare at home. Based on USDA requirements, enough formula is provided for (3) - 6oz bottles daily. However, according to each child's individual development, more bottles may be required. When infants become developmentally ready, we will also provide baby cereal (rice or oatmeal), baby food, and fruits and vegetables for their breakfast and lunchtime. Parents who do not wish to utilize the formula provided by the CDC may opt to bring in their own formula or breast milk. Formula, breast milk and juice must be pre-mixed daily and come to the CDC in plastic bottles, with the cap on, that are labeled with the child's name and date. In accordance with Naval Hospital Camp Lejeune recommendations, leftover contents that have been outside the refrigerator for more than 1 hour shall be disposed of appropriately.

### **FOOD ALLERGIES**

Child Nutrition Regulation 7 CFR 226.20 (h) of the Child and Adult Care Food Program states: "Substitutions because of medical needs shall be made only when supported by a statement from a recognized medical authority which includes recommended alternate foods." Parents are required to provide a doctor's statement of the child's food allergy and recommended substitutions noting portion and frequency of each substitution. Upon receipt of this information, the center may be able to provide alternate foods for the child.

Additionally, children who have allergies will be given an armband to wear while they are at the CDC and YC. The armband alerts the caregivers that the child has an allergy in an effort to prevent the child from receiving items that he/she is allergic to.

### **FOOD EXCEPTIONS BASED ON RELIGIOUS BELIEF**

Child Nutrition Regulation (CNR) 7 CFR 226.20 (i) provides for variations in the food components where there is evidence that such variations are nutritionally sound and are necessary to meet ethnic, religious, economic or physical needs. CNR 7 CFR 226.20 (h) requires "a statement from a recognized medical authority that includes recommended alternate foods when food substitutions are requested." Parents are asked to provide a doctors' statement specifying, based on religious beliefs, the food or food component for which a substitute is required and the recommended alternate foods.

## CHILD GUIDANCE/DISCIPLINE

### GUIDANCE TECHNIQUES

The Centers/FCC homes use guidance techniques designed to help children develop self-control, self-esteem and respect for the rights of others. Below is a list of acceptable guidance techniques that Program Staff will employ when working with your child.

Redirection: Directing the child to more constructive activity

Monitoring: Making frequent checks on the child to make sure they follow through; being physically near.

Ignoring: Not responding to inappropriate behavior.

Rewarding: Praising the child for appropriate behavior.

Encouraging: Complimenting and reinforcing acceptable behavior.

Anticipating Trouble: Attempting to avoid situations which may lead to inappropriate behavior.

Reminding: Giving verbal and nonverbal cues to appropriate behavior

Setting Rules and Limits: Establishing realistic standards for behavior.

Offering Choices: Providing several acceptable alternatives to inappropriate behavior.

Renewal Time: Providing the child with a short period of time away from the group/activity.

Some unacceptable guidance techniques, which will not be tolerated in any of our programs, include, but are not limited to, striking, screaming, shoving, squeezing, biting, shaming and abandoning a child.

### UNACCEPTABLE/AGGRESSIVE BEHAVIOR

Aggressive/Unacceptable behavior is a serious problem in a group environment. Staff have a responsibility to try to change aggressive/unacceptable behaviors through a partnership with parents. Every child is different, having different needs and expectations. There is no one model which will apply to every situation and/or solve every problem. Plans and interventions to correct aggressive/unacceptable behaviors must be unique to the child.

The following behaviors are considered aggressive/unacceptable in the Center/FCC home:

\*Causing physical harm to children, staff or other adults by hitting, kicking, throwing or any other physical action.

\*Use of inappropriate language, spitting or other forms of verbal abuse or degradation.

\*Repeated refusal to comply with center and/or classroom rules and/or failure to listen to instructions by caregivers.

\*Behavior that is potentially harmful to himself/herself.

The following steps will be taken in handling aggressive/unacceptable behavior:

- 1) Caregivers will notify parents of any aggressive/unacceptable behaviors exhibited by the child.
- 2) Caregivers will inform management when there is a pattern of behavior and will discuss incidents as well as attempted interventions to improve the behavior.
- 3) Parents will be called in for a conference to discuss the behavior and provide input on how to correct the behavior. With input from caregivers, management and parents, an intervention plan can be developed as well as a reasonable time frame based on the individual needs of the child.
- 4) Children may be disenrolled from the program if they fail to make progress or if there is a lack of parental support and involvement. Children may also be disenrolled if the behavior is deemed detrimental to the child, other children and/or staff members. No notice will be required if it is necessary to disenroll a child due to aggressive/unacceptable behavior.

### **BITING**

Children biting one another is the most common, most difficult situations in group childcare, especially with pretoddlers/toddlers. Biting is a natural phenomenon that has little developmental significance. It is not something to blame on children, parents or caregivers. A child who bites at a young age is not on the path to becoming a discipline problem. It is an antisocial behavior of a child not yet able to participate fully in social situations. Children may bite for any number of reasons such as teething, impulsiveness, lack of self-control, excitement, over stimulation or frustration. When a child begins biting behaviors, the caregivers will track behaviors that lead to biting incidents and help the child avoid such situations. In most instances, biting will continue for a period of time and gradually lessen. Every effort will be made to help a biting child achieve socially acceptable behavior, however, in severe cases it may be necessary to remove the child from the center. In cases where a biting child is removed from the center, the Resource and Referral office will assist parents in locating a satisfactory childcare setting.

The following procedures will be followed in handling biting:

- 1) When a child bites an incident/accident form will be filled out on the child who bit as well as the child who was injured. Parents will be notified if a bite requires medical attention beyond first aid treatment.
- 2) Immediate attention will be given to the child who has been bitten. This will let the biting child know that the negative behavior will not be reinforced.
- 3) If a child continues to exhibit biting behaviors every effort will be made to help the child. A parent conference will be scheduled with caregivers and management to discuss the behavior and develop strategies to extinguish it. Parents and caregivers will communicate daily on the child's progress. Additional conferences to discuss the progress of the behavior will be scheduled as necessary.
- 4) Center/FCC home staff will continue to work with the child and parents as long as progress is being made in correcting the biting behavior. If it appears that no progress is being made or the behavior becomes more severe, the biting child will be removed from the Center/FCC home.

#### **CHILD ABUSE PREVENTION AND REPORTING**

All staff receive annual training in prevention and identification of child abuse. It is the legal obligation of the Program staff to refer any suspected case of child abuse or neglect to the Family Advocacy Program (FAP) Manager or Department of Social Services (DSS). The appropriate local and USMC reporting procedures will be followed. CYTP staff will report as follows:

1. Staff will report any incident/concern to the FAP Manager or DSS. As a courtesy, staff is requested to inform the assistant director/program director. The assistant director/program director will inform the CYTP Administrator.
2. If the information is passed to the assistant director/program director, staff will complete the appropriate Child Abuse/Neglect Reporting Form. Once the report is complete, the form is given to the assistant director/program director and forwarded to the FAP Manager or appropriate case worker.
3. Once the above procedures have been followed, the FAP Manager will ensure that the incident is reported to the appropriate agencies/authorities. The FAP Manager will maintain documentation of the reported incident as well as any actions taken.
4. If the incident occurs after hours or on the weekend, staff will contact the Provost Marshal's Office (PMO) and request that the FAP representative or Victim Advocate be contacted.

Should the DSS or Guardian ad Litem Program need to visit a child in one of our programs, the program director will consult with the FAP Manager to determine the interaction that will take place. The CYTP will cooperate with these outside agencies.

The Department of Defense also operates a Child Abuse/Safety Violation Hotline. The telephone number for this hotline is 1-800-336-4592

### **TOUCH POLICY**

It is the belief of the CYTP that physical contact is important for children's development, their nurturing and their guidance. Expression of affection, such as hugs, holding hands, back rubs at naptime, and lap-sitting, help to build children's self-esteem and is considered appropriate touch in our CDC. It is our belief that appropriate touch takes into consideration respect for the personal privacy and personal space of the child. Caregivers, as well as parents serve as role models by exhibiting appropriate touch for the child. Some examples of inappropriate touch, which will not be tolerated in any of our programs, include, but are not limited to, striking, shoving, squeezing and any type of sexual abuse of a child.

### **STAFF REQUIREMENTS/TRAINING**

All personnel must meet minimum requirements mandated by the Department of Defense to include successfully completing a background check. Direct care staff who do not possess a degree in early childhood education or a Child Development Associate credential must complete the Department of the Navy standardized training program. All personnel are required to complete training in child abuse identification and reporting. Direct care staff are CPR/First Aid certified.