

# PARENT HANDBOOK

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## CHILD DEVELOPMENT CENTER



MARINE CORPS COMMUNITY SERVICES  
MCAS CHERRY POINT  
FAMILY CARE PROGRAMS  
CHILD YOUTH PROGRAMS  
CHILD DEVELOPMENT CENTERS  
CHERRY POINT, NORTH CAROLINA

Revised January 2019

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Dear Parent(s):

MCAS Cherry Point Child Development Centers want to take this opportunity to welcome you to our family of dedicated childcare professionals. We appreciate the trust you have in our staff and look forward to providing a full spectrum of childcare, child development, and recreation services. The purpose of this handbook is to acquaint you with our policies and procedures for the Child Development Center in which you have enrolled your child. Once enrolled, the Center Director or designee will provide detailed orientation, information, and a tour. Our staff are prepared and happy to answer any questions you might have.

It's important to note that while this handbook summarizes expectations, it is not inclusive. We are happy to provide education on any of our protocols and procedures, should you need additional clarification. Please, read through this Parent Handbook carefully and rely on the content to support an understanding of our practices as you join our partnership for children. We suggest that you keep your handbook in a convenient location for reference.

We appreciate parent participation and feedback as we continuously strive for excellence. Please consider attending our Parent Advisory Board (PAB) meetings. Our programs are designed to meet the childcare needs of the military community and are always interested in your suggestions for improving or expanding our services. Our "open door" policy creates an atmosphere that invites you to visit a member of your center's management team at any time to discuss suggestions and concerns, or to simply say, "Hello!"

Again, welcome to the Children and Youth Program at MCAS Cherry Point! We trust that your family's experiences with our programs will be positive and rewarding.

Sincerely,  
CDC Management

## **CHILD DEVELOPMENT PROGRAMS (CDP) MISSION STATEMENT**

The Child and Youth Program (CYP) Child Development Centers (CDC) assist MCAS Cherry Point active duty and DoD personnel by providing a full spectrum of affordable, high quality childcare and recreation for children age 6 weeks to 12 years. We offer full and part-day care, weekday hourly care, parent education, special event and emergency care services. Because we understand the importance of balancing the competing demands of family life with mission accomplishment, our talented team is trained to address the developmental, unique, and special needs for intellectual, cognitive, physical, emotional, and social growth of every enrolled child.

### **PHILOSOPHY**

The Cherry Point Child and Youth Program is guided by a belief in a child-centered curriculum. We are committed to both high quality child care and recreational activities which respond to individual and group needs, provide evidence-based interactive experiences, and promote positive developmental and guidance strategies with a focus on success. Our programs strive to improve the economic viability of the family unit, unite with families and community, and provide exceptional care in a learning environment that is inclusive, safe and fun. Our unique programs excel by maintaining both Marine Corps and National standards of operation and practices, to include participation in a rigorous inspection resulting in accreditation through the National Association of Education of Young Children (NAEYC.) We believe that the early years of development are the greatest opportunity to teach and shape a child by affording them an opportunity to become effective citizens, capable workers, and loving parents of the next generation.

### **PROGRAM STATEMENT**

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

Children's learning occurs through experiences and interactions with the world around them, meaning the early years are truly learning years. Every moment is an opportunity to learn, practice social skills, and gain knowledge while creating a foundation for all later learning in life. Curriculum goals and plans are based on regular, documented observations and assessments of each child's level of development, strengths and interests while respecting the diversity of each child's culture and family values. Our Child Development Centers use the Creative Curriculum Gold as the basis for lesson planning. Lesson plans are posted in each child's classroom and are readily available on-site for parents to see.

Our program is center-based, child-initiated and caregiver supported, with an emphasis on active participation through individual and small group learning experiences. Classrooms support full inclusion for all children including environmental accommodations, materials, and equipment to support and maximize learning opportunities for all. Multicultural and non-sexist materials and experiences are available for enrolled children.

It has long been known that children's learning is the most meaningful when their play is self-directed. Child Development Center (CDC) Direct Care Staff offer activity centers/

learning areas that allow children the opportunity to explore, create, imagine and experience their environment. Direct Care Staff are readily available to facilitate learning and provide nurturing encouragement to each child. Each activity is designed with a goal that promotes further development and prepares your child for the next level of learning.

**CHILD DEVELOPMENT PROGRAM POINTS OF CONTACT**

Family Care Branch Manager	466-4584
Children & Youth Program Administrator	466-6181
Child Development Center Director Bldg. 4298	466-3781
Child Development Center Director Bldg. 4629	466-5856
Child Development Center Director Bldg. 4859	466-2883
Child Development Center Asst. Director Bldg. 4298	466-7874
Child Development Center Asst. Director Bldg. 4629	466-6886
Child Development Center Asst. Director Bldg. 4859	466-2917
Child Development Center 4298 Front Desk	466-3782/3783
Child Development Center 4629 Front Desk	466-3105
Child Development Center 4859 Front Desk	466-4176/3732
Resource and Referral	466-3595/5079/5605
USDA Food Program Manager	466-2621
Training and Curriculum Specialists	466-6824/2697/2249/6423

## **ADMISSIONS**

### **Eligibility:**

Enrollment is determined by the status of the sponsor. Eligible patrons (sponsors) are military personnel, DoD personnel paid from APF and NAF, active duty Coast Guard, reservists on active duty or during inactive duty training, and DoD contractors who are performing mission related duty on the installation. Retirees may be eligible when a waiting list does not exist, and space is available. We will evaluate the ability to enroll or maintain in care children with special needs on an individual basis through the Inclusion Action Team (IAT) process.

### **Central Registration:**

Central Registration is the first step in enrolling your child in full-day care. This is managed by creating an account and requesting care at the [www.militarychildcare.com](http://www.militarychildcare.com) website. Following registration, you will receive an offer for care, which you will need to accept. Registration can then be completed in the Resource and Referral (R&R) office located at CDC 4859. Registration must be renewed annually, free of charge.

R&R will assist you in completing the process and at the time of registration, you are required to provide or complete the following:

- Completed registration card,
- Current health screening,
- Up-to-date immunization,
- Proof of the annual flu vaccination,
- Signed payment policy,
- USDA and Parents Statement,
- Family Care Plan as needed,
- Financial information needed to complete DD-Form 2652, and
- Other necessary information as requested.

Forms may be found on the [mccscherrypoint.com](http://mccscherrypoint.com) website. Parents are responsible for keeping all registration information current.

### **Resource and Referral:**

Resource and Referral (R&R) assists with child care enrollment for the CDC and SAC programs, information and referral for the local area.

Resource and Referral is responsible for the placement and management of children into the Children and Youth Program aboard MCAS Cherry Point. They manage all requests for care through the Military Child Care ([MilitaryChildCare.com](http://MilitaryChildCare.com)) website.

Short Term Alternative Child Care (STACC) includes: Care provided after hours outside the regular CDC operating hours and should be coordinated through the Resource and Referral Manager. Provision of STACC during CDC hours of operation is contingent upon availability of staff.

R&R may provide information regarding off-base childcare availability.

For further information on these programs, contact the Resource and Referral Specialist at 466-3595/ 5079/5605. For your convenience, R&R is located in CDC 4859.

**Full Day Care:**

Is available for children ages six weeks through five years of age who are not currently enrolled in kindergarten.

**Waiting List:**

Once the center reaches capacity enrollment for any age group, we will maintain a waiting list. Vacancies are filled from the waiting list by age group based on the Priority of Access and MCO 1710.30. This waiting list is generated by the Military Child Care website (MilitaryChildCare.com). Placement is by registration date and DoD Priority Placement Guidelines, which are available through your R&R office. In all cases priority shall be given to families seeking full time child care in the following order:

Priority I: Single or active duty military service members, single or dual DoD civilians, wounded warriors, and surviving spouses of military members who died from a combat related incident. With the exception of combat related wounded warriors, ALL eligible parents or caregivers residing with the child are employed outside the home.

Priority II: Active duty military service members, DoD civilians wounded warriors, and surviving spouses of military members who died from a combat related incident with a spouse or same-sex domestic partner who is actively seeking employment outside the home. Status of seeking employment will be verified every 90 days.

Priority III: Active duty military service members, DoD civilians, wounded warriors, and surviving spouses of military members who died from a combat related incident with a spouse or same-sex domestic partner who is enrolled in an accredited post-secondary institution. Status of enrollment will be verified every 90 days.

Space Available: Active duty military service members with non-working spouses, DoD civilians with non-working spouses or same-sex domestic partners, eligible employees of DoD contractors, federal employees from non-DoD agencies and military retirees.

**Annual Renewal:**

Annually, you are required to update your registration and fee renewals. Failure to provide updated records, and complete the annual fee renewal on-time may impact continued enrollment or your current fee category.

**Exclusion:**

We reserve the right to cancel enrollment of a child from the Center when a parent does not adhere to Center policies, including the failure to pay user fees. Furthermore, if the individual needs of a child within group care cannot be reasonably met within operational abilities; we reserve the right to withdraw your child. When a situation is identified which could lead to withdrawal, parents will be included in the plan to overcome the

problem. Should withdrawal become necessary, our Resource and Referral Technician will be available to render assistance in locating alternative care choices.

**Late Pick-ups:**

Patrons who pick up their children late are charged a late fee of \$10.00 for each 15 minutes (or portion thereof). All late fees are payable at the time of pickup of the patron's child. **If you know you will be late, you may call the CDC and advise of your circumstances and estimated time of arrival.** The CDC Director will assess emergency situations on a case-by-case basis. A pattern of continued late pick up can result in denial of services and/or disenrollment. Failure to call or pick up your child, combined with failure to respond to calls from our center may result in a call to PMO and/ or child welfare services.

**Withdrawal Notification:**

A two-week written notice must be submitted prior to leaving the program. Sponsors who fail to disclose intent to withdraw the child from the program are responsible for any bills appearing on their account and will be billed for the next pay cycle. Notification of disenrollment may be done at the front desk of your child care facility. Please include child's name, facility, and anticipated last day of attendance.

**FINANCIAL POLICIES**

**Fee Determination:**

The Military Child Care Act, Public Law 101-189 mandates nine (9) income levels to determine DoD childcare fees. As mandated by DoD regulations, fees are based upon total family income using the service member's most recent Leave and Earnings Statement (LES) and/or pay stubs for use in computing total family income. Pay stubs, and/or the most recent copy of the spouse's W-2 or LES will be used to verify income for nonmilitary personnel. All fees are payable in advance and are due on the 1<sup>st</sup> and 15<sup>th</sup> of each month as outlined in our payment policy. Our Fee Policy and a current fee scale is available through the Resource and Referral Office.

The Department of Defense (DoD) mandates an annual across the board fee change which requires an annual Total Family Income verification. There are no exceptions, and failure to do so will result in fee placement in the highest category.

Patrons are encouraged to use the auto pay system to avoid having childcare denied. Any patron whose account shows a pattern of past due payments will be required to set up an auto pay account in order for the child to remain in care. Patrons can set up an auto pay account at any childcare location .

Should you have a change in your total family income, you are expected to bring verification of the change to Resource and Referral, located in CDC 4859. Fee changes will be effective for the fee period after documentation is provided and the Verification of Income is signed by the sponsor and spouse. Changes in income that result in higher or lower childcare fees are not retroactive. Patrons are requested to keep receipts for payments of child care services. Should you need assistance with your account, please call the Center Director in your child's building.



**New Enrollment:** Fees must be paid in advance of child care received. Fees are due on the 1<sup>st</sup> and 15<sup>th</sup> each month. Fees will be pro-rated as needed for enrollment or disenrollment in the middle of the pay period. Type of services utilized at the Child Development Center can be changed only once during the calendar year; for example, from full-time care to hourly.

**Payment due date:** Full Time and Part Day program payments will be due on the 1<sup>st</sup> and 15<sup>th</sup> of each month or the first business day after the 1<sup>st</sup> and 15<sup>th</sup> of the month if the 1<sup>st</sup> or 15<sup>th</sup> fall on a weekend or federal holiday. Payment by phone is available for parents on leave or unable to visit the centers on payment due date.

**Late Payment fees:** Payments not received on or before the due date will be assessed a \$5.00 late fee per day, until paid.

**Denial of services:** Delinquent accounts will be denied services beginning on the 3<sup>rd</sup> business day after the due date, until payment is made, or until an extension is approved by management. Delinquent accounts will be sent to MCCS Accounting for collection and may result in garnishment of wages.

**Extensions:**

See the Center Director to request an extension. Any extensions granted will include late fee charges for each day the payment is delayed. Extensions will not exceed the days within that pay period (approximately 2 weeks). Repeated requests for extensions may result in denial of the request and/or termination of services.

**Disenrollment due to non-payment:**

Delinquent accounts without approved extensions, will be submitted for disenrollment on the 4<sup>th</sup> business day that falls after the due date. Any accounts with outstanding balances will be forwarded to MCCS accounting for collection.

**Late pick-up fees:**

Failure to pick up your child by the closing time of the program in which your child is enrolled will result in a late charge of \$10.00 per child for every 15 minutes (or any portion thereof) until the child's escort arrives. Failure to pay late fees or continued late pick-ups may result in a loss of childcare privileges.

**Lost CYMS key fob/card (for swipe-in and out):** There is a \$5.00 charge to replace lost or damaged CYMS access cards or key fobs and can be purchased at Resource and Referral.

**Closures:**

Child & Youth Program facilities are closed on all federal holidays, the day after Thanksgiving, Christmas Eve and during base closures for weather or emergencies. Fees are **not** pro-rated for closures.

## **SERVICES and SUPPORT**

**Special Care:**

Care is often provided for special events such as the Marine Corps Ball or pre-deployment events which are advertised through different MCCS venues. For information please call Resource and Referral at 466-3595/ 5079/5605. Registration is always required.

### **Holiday Care:**

Holiday care is regular care provided during the two week period of Christmas and New Year's Day. Please note there is no hourly care during this time. Open dates for holiday care will be announced each year and requires advanced registration which is accepted during an open window period beginning 15 October and ending 1 November.

Announcements are posted in each building in multiple locations, and through our Black Board Connect notification system. **NO late registrations will be accepted.** It is your responsibility to register during the designated window. Holiday care may not be available to new patrons who register after 1 December and registration is based on staff availability.

### **Oversight:**

The Children and Youth Program is governed by Marine Corps Order 1710.30, Air Station Order 1745.1E, local sanitation, safety, and fire regulations, as well as food service guidelines provided by the USDA sponsored Child and Adult Care Food Program. Monthly/Quarterly inspections are conducted by Preventive Medicine Unit from the Naval Clinic Cherry Point, Joint Safety Department, and Cherry Point Fire Department. We prepare and respond to annual Comprehensive, Multidisciplinary, and Marine Corps Headquarters Inspections to maintain a constant state of compliance.

### **Open Door Policy:**

CYP maintains an open door policy. Family members of children enrolled in a program are encouraged to visit, observe, and participate in any program in which their child is enrolled. Please see the front desk staff at your Center for more information.

### **Communication:**

Communication and an open dialogue is at the core of your child's success and well-being. We have a responsibility to communicate with you regarding your child's experiences at the center, and you as the parent, have a responsibility to communicate changes or challenges that your child may be experiencing. Our caregivers are interested in working with you to understand your child's individual needs. There are a variety of ways that we will communicate with you, including daily verbal and written communications, monthly newsletters, parent bulletin board, and parent/caregiver conferences. Communication between parents, caregivers, and staff is vital to the well-being of your child.

### **Children with Special Needs:**

CYP's inclusion policy for children with special needs is in accordance with Department of Defense Directive (DoDD) 1020.1, Nondiscrimination on the Basis of Handicap in Programs and Activities Assisted or Conducted by the Department of Defense, which implements Section 504 of the Rehabilitation Act of 1973. CYP embraces inclusion as an attitude and philosophy and welcomes and supports the involvement of any child and strives to provide reasonable and respectful accommodations to promote individual success.

Children with special needs will be evaluated by the Inclusion Action Team (IAT) to ensure appropriate accommodations are available. The IAT consists of CYP Administrator (or designee), Director/Asst. Director and/or Training and Curriculum Specialist, R&R

Specialist, CYP Nurse, Behavior Specialist, EFMP Manager (or designee), and at times, community resources. The initial IAT screening is completed by reviewing the child's most current health screening (NAVMC 1750/4) and any other relevant information. The IAT meets, at a minimum, one time per month. A parent may request a meeting with the IAT at any time to discuss their child's special needs. Training specific to a child's special needs will be provided to CYP staff as needed.

### **Getting Involved:**

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

- **Parent Orientation and Tours:** Prospective or registered patrons may visit any CYP with an appointment and when escorted by Center personnel. Escorts are necessary to ensure protection of the children enrolled in the programs. All families who accept a space in our child development programs are encouraged to call their center directly to schedule an appointment to meet with their child's Direct Care Staff. Families will receive a welcome orientation specific to their child's classroom program and they will have the opportunity to share information about their child to help ensure a positive start.
- **Parent Advisory Board:** We have an advisory board made up of parent representatives from enrolled patrons who meet and provide recommendations to program staff and the Command for improving services and program operations. The PAB Coordinator is a volunteer active-duty parent who has a child or children enrolled in the program. All parents of enrolled children (active duty or civilian) are welcomed and encouraged to attend. This board also coordinates the parent participation program and helps with special events scheduled at the center. Meetings are held quarterly.
- **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 MCCA Children and Youth Programs, Coastal Community Action, Inc., the Craven County Partnership for Children, and Craven County Schools, just to mention a few.

### **Confidentiality:**

Confidentiality and privacy are important and governed by mandates. The information you share with us is used in a professional manner as a means to meet your child's needs.

If information is to be kept private or confidential, and doing so will not pose harm or threat to patrons, children, or staff, we will maintain an appropriate level of confidentiality.

**Customer Service:**

We strive to provide *World Class Customer Service* to you and your child. There may be instances that cause you to have a question or concern, or even a complaint. We respectfully request that you bring helpful comments, complaints, or even suggestions for improvement to the attention of your child's CDC Assistant Director/Director to ensure expeditious resolution. If resolution is not met to your satisfaction in a timely manner, please obtain a copy of the CYP Chain of Command and proceed to the next person in line. We welcome patron input and also encourage the use of I.C.E. (Interactive Customer Evaluation) for positive feedback and those issues that are unresolved at the local level upon initially going through the CDC Chain of Command. Visit the MCCS Cherry Point website (<http://www.mccscherrypoint.com/>) for more information.

**PROCEDURE FOR HANDLING UNACCEPTABLE BEHAVIOR**

Our direct care staff are trained and use policy and protocol designed to assist the child in developing self-control and self-respect, while fostering respect and consideration for the rights and property of others. At times, children will demonstrate unacceptable behavior that requires intervention.

Unacceptable behavior includes, but is not limited to hitting, kicking, spitting, profane language, aggressively throwing or destroying classroom property, and persistent disrespect for adults, classmates, and the property of the classroom and others. Any act of deliberate aggression, violence, or perceived threat by any child or patron toward another child or staff member, will be subject to immediate removal until the matter can be reviewed by management.

Interventions will occur on a continuum ranging from an attempt to assist the child to consider better choices and control their emotions in an effort to better communicate their needs, or in more severe cases, a parent may be called to pick the child up from care. If those attempts fail, the behavior persists, or the behavior has escalated to the point that the child is causing or could cause injury to other children or staff, additional steps will be taken up to and including the possibility of dis-enrollment.

Intervention steps may include:

The caregiver documents and reports to the Training and Curriculum Specialist any persistent unacceptable behavior demonstrated by the child along with any interventions that have been attempted to date. The Training and Curriculum Specialist will initiate collaboration with Management, Family Care Behavior Specialist, parents/guardians of participant, and any other relevant resource so that needed accommodations and appropriate teaching strategies can be identified to address the challenging behavior.

A conference will then be held to facilitate input from all participants and a behavior support plan will be developed to outline the appropriate accommodations and teaching

strategies agreed upon to support the child and the activity room. The behavior support plan will include a plan to follow up and assess progress.

Exclusion/Disenrollment of a child may occur at any time if:

1. When necessary for the safety of the child, safety of other children, and/or the safety of caregivers a suspension may be issued. Suspensions are determined on an individual basis.
2. Disenrollment may occur if there is not progress and/or parental support. Disenrollment will only be considered after review of the child's behavior support plan by the IAT.

The Center Director will discuss the intent to suspend, expel or dis-enroll the child with the parent. Such authorization will be made by upper management.

## **OPERATIONAL POLICIES**

### **Hours of Operation:**

- Full Day Program Monday through Friday 0600 to 1800 (6:00PM).
- Hourly Care Monday through Friday 0800 to 1700 (5:00PM).
- Part Day Preschool Monday through Friday 0800 to 1300 (1:00PM).

### **Holidays:**

The Child Development Center is closed in observation of all Federal Holidays, the Friday after Thanksgiving, Christmas Eve, and other special holiday closings in effect based on military designated leave periods. A list of closure dates will be furnished in August of each year prior to the start of the school year.

### **Arrival and Departure:**

Your child's safety is our priority. For your child's safety, we require that the adults escorting children to the Center complete the sign-in procedure as outlined below. Parents or authorized guardians must accompany children into their rooms. For your child's protection, only patrons authorized by the sponsor and listed on the Registration Card may take a child from the Center. Authorized individuals must be at least 16 years of age.

### **Child accountability:**

We take the safety and accountability of your children very seriously. Parents will receive key FOBS for the convenience of signing your children in and out of care. You are required to swipe the child's card (key FOB) as soon as you walk in with your child or return to retrieve your child. You may not advance to the classroom without this step. Failure to do so will be brought to the Center Director for review. Multiple failures may result in dis-enrollment of your child.

### **Classroom drop off and pick up:**

Parents must sign their child into the classroom and communicate any changes or concerns with the classroom staff. At pick up, parents will be required to show their ID to the classroom staff. This step is an added layer of insurance that the child is leaving with the correct parent, guardian, or designated pick up person. Repeated failure to complete the check in/out process may result in dis-enrollment of your child.

### **Fire Lane and Unattended, Running Vehicles:**

It is against Air Station Regulations to park in the fire lane, and at no time should a vehicle be left with the engine running. ASO 5560.3B prohibits children age 10 and under from being left unattended in a vehicle.

## **EMERGENCIES**

### **Emergencies:**

We take every precaution to prevent injury to your child, but in the event of an incident or medical emergency, we proceed as follows:

1. A staff member who is certified in CPR/First Aid/AED will administer emergency First Aid or CPR.
2. If the situation warrants, we will request emergency assistance by calling 911.
3. We notify you by telephone and provide a written incident report.
4. If you are not available, we notify the person you designated as your emergency contact.
5. If a parent or the emergency contact does not arrive before the emergency transport, if possible, a staff member accompanies the child to the hospital.

Additional information regarding medical response is outlined below in the section under Health and Wellness.

### **ATFP-SOP for Base Evacuation**

In the event of **Base Evacuation**, during hours of Operation Mon-Fri 0530-1930, the following action is to be taken in reference to the Child Development Centers, Buildings 4629, 4298 and 4859:

1. The Emergency Operations Center (EOC) communicated to the CDC that there is an installation evacuation. The EOC will tell the CDC personnel what area of the installation has been designated as the safe haven at the time of this communication.
2. The CDC employee receiving the EOC message immediately relays the message to the CDC Managers on duty.
3. The CDC Managers relay to all personnel to include caregivers that the CDC is in the emergency base evacuation process. A manager will be posted at the entrance of Building 4629, 4298, and 4859 until evacuation is complete. **ID checks will be performed.**

4. All caregivers and support staff are essential personnel and will remain on duty until instructed by a manager. **Caregivers and support personnel will immediately begin to prepare the children for evacuation.** Seasonal items such as coats/jackets should be put on the children. Diaper bags for infants should be packed and ready to go. Caregivers will take the sign-in roster and maintain that sheet throughout the process. An accurate count of the children is required at all times.
5. Bus transportation (eleven) and augmented staff (minimum 40) will arrive at the main parking lot of building 4298(two of which will go to building 4859's main parking lot). The doors between buildings 4298 and 4629 will be unlocked and monitored for quick entry and exit by children and staff.
6. **All caregivers, and support personnel will go to the designated safe haven.** The safe haven is established by the EOC. The CDC Managers will assemble all caregivers and children in one location at the safe haven and take attendance. The CDC Flag will be posted in an area that is visible for personnel and parents to see. This will mark the assembly spot at the safe haven for CDC personnel. The caregivers will have all parents sign out each child by signing the prepared attendance roster. A child not signed out by an authorized patron is still in the custody of the CDC. Each caregiver will turn in their classroom roster to the appropriate center manager after all of their assigned children have departed. The CDC Managers will ensure they have all the classroom attendance rosters before they depart the safe haven.
7. If there are still children under the care of the CDC when the "all clear" has been given by the EOC, the remaining children and staff will be transported back to the CDC.

#### **Destructive Weather:**

During extreme weather conditions, all facilities will remain open until directed by the Station Commander to close. During such conditions, **parents should maintain close contact** with the CDC in preparation for worsening of conditions and changes in operational status. **PARENTS MUST PROVIDE AN ACCURATE PHONE NUMBER WHERE THEY MAY BE REACHED. ONCE THE COMMANDER (OR HIS DESIGNEE) HAS DIRECTED CLOSURE, CHILDREN MUST BE PICKED UP IMMEDIATELY.** All emergency contacts should be within one hour of the station. After an hour of an announced closure late fees will go into effect. An automated message will be sent out to all patrons on the blackboard connect system. Parents may call the M CCS weather line automated information system at 466-6737. For information on suspected or impending destructive weather, patrons are urged to listen to Channel 12 television.

#### **Adverse Weather:**

During times of increased heat conditions outside, our centers will follow the US Marine Corps CYP Flag Conditions Chart.

Green Flag: All outdoor activities allowed for all age groups.

- Yellow Flag: Infants are not allowed outside, pre-toddlers allowed outside up to 15 minutes, toddlers and preschoolers allowed outside up to 20 minutes.
- Red Flag: Infants and pre-toddlers are not allowed outside, toddlers and preschoolers allowed outside for up to 15 minutes.
- Black Flag: Outdoor activities for all age groups are not allowed.

During times of cold weather conditions, CYP encourages participants to wear appropriate clothing and outer garments for outside play, such as hats, coats, gloves/mittens, for protection and warmth.

**DRILLS: Fire, tornado, bomb threat, lockdown:**

In an effort to be prepared for the unexpected, we participate in scheduled and unannounced drills to practice emergency preparedness.

- Fire drills are practiced monthly. If you are in the building when this is occurring, please exit the Center. In the event of a fire, everyone will be evacuated from the building as expeditiously as possible utilizing the posted evacuation plan and moving at least 75 feet from the building.
- Tornado drills are practiced at least twice a year with the children reporting to their designated safe zone and covering their heads with their hands and arms.
- In case of a bomb threat drill, the same evacuation procedure will apply. All children and adults will move at least 750 feet from the building.
- Lockdown drills are practiced monthly. If you are in the building during a lockdown drill you are to proceed to the nearest open room and follow the direction of the staff in that room. Parents are not to try and run your child to their room. The goal of this drill is to get out of sight as quickly as possible and remain quiet.

**CHILD SAFETY, HEALTH, and WELLNESS**

**Child Abuse or Neglect Identification and Reporting:**

All staff members at the Center are required by law and receive training to report any situation or condition where there is reasonable cause to suspect abuse or neglect of a child by anyone to include staff, parents, patrons, and visitors. This will include a report to the Provost Marshal Office (PMO), Family Advocacy Program (FAP), and Child Protective Services in the county where the child resides, as well as local authorities if required.

The center personnel will not notify parents when suspected child abuse is reported.

When Child abuse/neglect is alleged or suspected within a child development setting, it is a mandate to report the suspected/alleged child abuse immediately to the Family Advocacy Program Manager (FAPM) via their Chain of Command.

In the event that the alleged perpetrator is a CYP staff member, the employee will be promptly removed from the classroom during the review and/or investigation. The CDC Director will initiate personnel actions as appropriate based on the outcome of the review and/or investigation. The full and part-time employee will be assigned duties in which



contact with children is not possible until the review and /or investigation is finalized. The flex/intermittent employee be removed from the schedule until the review and/or investigation is finalized.

All staff members must satisfactorily complete a criminal history and background check. All CYP Personnel complete a Childcare-National Agency Check with Inquiries (CNACI) and are not allowed to be left alone with children until the check is fully adjudicated. All staff members receive annual training in prevention and identification of child abuse and neglect. **If you are concerned about the abuse or neglect of a child, please contact the DoD Child Abuse Hotline Number: 1-877-790-1197.**

### **CYP Nurses:**

Nurses are on site but do not perform their assigned duties as one might observe in traditional direct care. The CYP Nurses are highly qualified, but administrative in their role. The nurses are deployed as support billets and not required to have constant presence in each center, nor will they respond to routine requests that direct care staff have been trained to address (e.g. temperature checks). Nurses will respond to emergencies, and calls of an urgent nature if available, however, the primary emergency response will begin with the direct care staff. Nurses will also assist in the preparation of Individual Support Plans and participate in Inclusion Action Team meetings, and take a leading role in appropriate training, proper documentation of required health records, and provide consultation relative to children identified with special needs.

Our staff are trained to respond to concerns or call 911 if there is an imminent concern. It is incumbent on the parents to notify the child's caregiver of any injury or illness that your child is currently experiencing. CDC staff will observe each child upon arrival and have a dialogue with parents about the child's wellness and watch throughout the day for obvious signs of illness. Children who appear to be ill or show visible signs of illness which prevent him/her from participating in daily activities will be denied care for that day.

Ill/injured children who require care beyond the capabilities of CDC staff, or compromise the health and safety of other children in the CDC, will be denied care. In the event a child becomes ill/ injured at the Center, the parents will be notified to pick up the child immediately. If parents are unable to be reached, the Center staff will contact the child's emergency contacts for immediate pickup.

A child sent home because of illness may not return the next day unless he/she has a physician's statement indicating the child may return to the CDC and has been fever free for 24 hours. **In the case of conjunctivitis, the child may not return until the eyes are clear with no discharge and be out at least 24 hours or return with a physician's note if less than 24 hours.**

Parents of all children exposed to a communicable disease will be notified.

Criteria for exclusion of services are as follows (but not limited to):

- Infected skin or crusty patches
- Temperature of 100.4 degrees F axillary

- Severe coughing, difficulty in breathing
- Yellowish skin or eyes
- Eyes that are irritated, swollen, or with discharge
- Impetigo (skin infection with honey – colored crust)
- Scabies (contagious human itch mite that produces intense itching of skin)
- Ringworm (contagious fungal skin infection)
- Thrush (contagious yeast infection causing white patches in mouth)
- Chickenpox
- Head lice or Nits that are closer than 3mm from the scalp
- Strep throat
- Conjunctivitis
- Persistent diarrhea (2 or more watery stools, that cannot be contained and are causing “accidents” within 24 hours)
- Vomiting (2 or more episodes within 24 hours)
- Symptoms of contagious diseases such as the mumps or measles
- Nonparticipation in the program (unable to stay awake/ feeling sick and can’t participate)

Participants may be readmitted after treatment has begun and/or the contagious stage of the illness has passed and must have a signed physician’s note. Participants are readmitted after illness only when their presence no longer endangers the health of other participants. For more information on readmission, please refer to **ASO1745.1E**.

#### **Courtesy Temperature Checks:**

Children and Youth Programs temperature checks are performed as a courtesy and on a case-by-case basis. These checks are administered by the direct care staff. A CYP nurse may be consulted if a temp reads 100.4 axillary and only if the nurse is available. If a CYP team member is concerned about the wellness of a child, they will consult with management or the nurse when available, and always place a courtesy call to the child’s parent/guardian to advise them of the concern.

#### **Medication Administration:**

Non-emergent medication will be administered only within full day programs for enrolled children who are regularly scheduled. Emergent medication will be administered on an as needed basis. Medication will be administered only when prescribed by a physician and only when there is **no other reasonable alternative to the medical requirement for the child**. Written permission from the parent or guardian must be obtained before administering medication. Children will be on oral medication at least 24 hours before dosage is administered by the CDC personnel. Medication will be administered for no more than 30 days without a new prescription.

Administration of over the counter medication or “basic care” items will be limited to diaper ointment, sunscreen approved for use on children, lip balm, and topical creams and ointments on the approved list. These items must be clearly labeled with the contents, child’s name and date. A release of liability form must be signed by the parent.

Medications are kept under strict control by retaining in a locked or secured container, cabinet, or refrigerator out of reach of participants. Access is limited to CYP Management and trained and designated Professionals. CYP does not administer “as needed” medications unless the medications are part of accommodations made for a participant’s special need and included in an ISP.

### **Child Custody:**

We respect legal decisions regarding issues of child custody. In fairness to parents and children, we require documentation of the rights of each parent in order to restrict visitations. In the event of an attempt by an unauthorized parent to remove a child by force, Center staff will not endanger other children or staff to prevent the child from being taken. PMO will be notified immediately.

### **Meals and Snacks:**

**Please be advised, that our buildings are NUT FREE AND SHELLFISH FREE. See the front desk for details.**

CYP is required to participate in the Child and Adult Care Food Program (CACFP). A well-balanced breakfast, lunch, and afternoon snack are provided. An income eligibility application must be completed annually for each child. Menus are prepared using CACFP guidelines. A monthly menu is posted in each room and is available at the front desk to each family throughout the month. Nutritious meals and snacks are an important part of your child’s day. We serve meals family style in order to create a pleasant, home like atmosphere.

- Infants are served on demand. Children in the infant rooms are fed on their own individual schedule. Per the HQMC Health Promotion Protocol, “CYP does not allow any foods or beverages brought from home without written orders from a health care provider. Jarred baby food will be provided by the center and parents may bring in formula or breastmilk for infants who are not yet eating table food. For medically supported baby food provided by the parent, only unopened non-glass baby food containers labeled with the child’s name and date can be accepted. Bottles provided daily by parents must be prepared, labeled (with first, last name, and date of birth) and dated at home with the date that the food is to be served.
- CDC policy and practice, set forth by health and sanitation guidelines, directs that all infant bottles must be heated in a bottle warmer located within each infant room.
- According to the manufacturer, Playtex Ventaire Bottles are not designed to be heated in a bottle warmer. When heated in this manner the rubber disc located on the bottom of the bottle becomes misshapen causing the bottle to leak. The health and well-being of all children at the CDC is paramount. Due to their design and

manufacturer's recommendations, Playtex Ventaire Bottles are prohibited from use at the CDC.

- Only unopened, commercially prepared baby food with jars labeled to include the child's first and last name, date of birth, date to be served, and current date can be accepted. Sanitation regulations require staff to discard leftover food and formula after feeding. CDC will not store food, or milk/breast milk, etc. Parents of children above the age of 12 months who are unable to participate in family style dining must make prior arrangements with management.
- Pre-toddlers, Toddlers, and Preschoolers are served Breakfast at 8:00 a.m.; Lunch at 11:00 a.m.; and Afternoon snack at 2:30 p.m.
- If you want to eat lunch with your child, you must notify your front desk no later than 9:00 a.m. and there is a \$2 fee to eat CDC Food. If you bring in your own lunch, it must be nut and shellfish free. Staff members will not be responsible for heating up your food.
- Late arrivals - meals or snacks will not be held to accommodate late arrivals.
- Children eating table food must be at the center during meal service, as food may not be held for later consumption.
- **Food from home is not permitted.**
- All food served at the center meets the standards set by the U.S Department of Agriculture.
- To comply with licensing standards for the children on special Medical diets, we must have the physicians order stating a medical need and a copy of the diet meal plan in the child's records.
- Due to health and sanitation regulations, all foods, with the exception of infant's bottles, must be unopened, commercially packaged, processed in a nut free facility, and labeled with the child's first and last name, date of birth, date to be served, and current date. Whole fruits are also accepted.
- If your child has special dietary needs, an IAT meeting must be held, determining the plan of action required by the parent. Parents failing to comply with requirements could result in withdrawal of their child from the program.

### **Food Allergies:**

Child Nutrition Regulation 7 CFR 226.20 (g) 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 physician's statement of the child's food allergy(ies) and recommended substitution(s) noting the portion and frequency of each substitution. Upon receipt of this information, the center will provide alternate foods for the child.

Due to the large number of children who require special food due to allergies or are fed different types of formula, milk, or breast milk, the following procedures have been implemented:

- All bottles will be labeled by the parents, with the child’s first and last name, date of birth, and date the bottle is to be served.
- All children with food allergies or tolerance concerns will go through the IAT process before being admitted for care.
- Each child with food allergies or tolerance concerns will have a monthly menu annotated and signed by the parent with the foods they can consume for each meal period.

**Risk Management:** We make every effort to provide a safe and secure environment for children. The center has a central intercom system as well as a central fire alarm. Each activity room has exits leading directly out of the center. A fence surrounds the playgrounds. All areas accessible to children are monitored by a closed circuit TV recording system. Exterior doors, which do not open to a fenced area, are equipped with an alarm to alert staff of unauthorized entry or exit. All visitors are required to sign in and out of the facility and will be escorted by a staff member while on the premises. Routine inspectors and or maintenance staff will wear identification and be identified to the staff but may or may not be escorted while performing their duties. All staff members will wear nametags at all times, and visitors will wear a visitor pass.

## **PROGRAM POLICIES**

### **Staff/Child Ratios:**

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

<u>Age</u>	<u>Staff/Children</u>
6 Wks to 12 Mos	1:4
13 Mos to 24 Mos	1:5
25 Mos to 36 Mos	1:7
37 Mos to 5 Yrs	1:12

### **Discipline:**

CDC staff members are interested in promoting self-control and appropriate social behavior in children. We use positive methods to encourage development of these behaviors. We do not believe in, nor do we practice corporal punishment or other frightening/humiliating disciplinary techniques. Positive methods are used to redirect children’s inappropriate behaviors.

At no time will a parent or guardian discipline a child by striking, shaking, or any other form of physical or verbal punishment while on the premises of the CDC, to include the playground, the parking lot, and the surrounding grounds. When child abuse/neglect is

disclosed, suspected or has been observed by staff or parents, mandated reporting procedures will be followed.

**Guidance Techniques:**

The following techniques are examples used to guide children in developing self-discipline and self-control:

**WE DO:**

1. Praise, offer choices, and encourage the children.
2. Reason with and set limits for children.
3. Model appropriate behavior for children.
4. Modify the activity room environment in an attempt to prevent problems before they occur.
5. Listen to the children.
6. Provide children alternatives to inappropriate behavior.
7. Provide children with natural and logical consequences of their behaviors.
8. Treat children as people and respect their needs, desires, and feelings.
9. Ignore minor misbehaviors.
10. Explain things to children on their level.
11. Offer a safe place for children to regain self-control.
12. Stay consistent in our techniques while working with young children.

**WE DO NOT:**

1. Spank, shake, bite, pinch, push, pull, slap, or otherwise physically punish the children.
2. Make fun of, yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse children.
3. Shame or punish children when toileting accidents occur.
4. Deny food or rest as punishment.
5. Relate discipline to eating, resting, or sleeping.
6. Leave children unattended.
7. Place children in locked rooms, closets, or boxes as punishment.
8. Allow discipline of children by children.
9. Criticize, make fun of, or otherwise belittle children's parents, families, or ethnic groups.
10. Use cribs or high chairs for disciplinary purposes.
11. Bind or restrain movement of mouth or limb.

**Touch:**

Physical contact is important for a young child's development. Children's self-esteem grows when they are cared for in a loving manner. Hugs, holding hands, a pat on the back, a lap to sit on, and a reassuring back rub at nap time are all nurturing to young children. These expressions of affection are natural for adults who work with young children. Some obvious examples of inappropriate touch are: shoving, squeezing, head and/or arm twisting, fondling, pinching, corporal punishment, biting, etc.

**Biting:**

Children biting one another is the most common, most difficult situation in-group childcare, especially within the pre-toddler/toddler age group. Biting is a natural phenomenon that has little developmental significance. It is not something to blame on the children or parents (or caregivers). Children who bite at a young age are not on a path of becoming a discipline problem. It is a 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, limited speaking skills, excitement and over stimulation, or frustration.

**Interventions:**

- When a child begins biting behaviors, the caregiver will track behaviors that lead to biting incidents and help the child avoid such situations.
- The name of a child who bites will not be released to other parents, as it serves no useful purpose.
- Parents of children who bite will receive an incident/accident report as well as the child who is injured. In most instances, the biting will continue for a period of time and gradually lessen. Every effort will be made to help the biting child achieve socially acceptable behavior.
- If a child bites and breaks the skin they will be a mandatory pick up with a conference required to return to care.
- If a pattern of biting persists (usually 3 bites within a week) even without breaking the skin a conference will be required to develop a strategic plan to redirect these behaviors.
- In severe cases, it may be necessary to remove the biting child from the CDC for a period of time.
- Every effort will be made to assist the parent in finding a satisfactory childcare setting while away from the group setting.
- PUNISHMENT DOES NOT WORK TO CHANGE THE CHILD'S BEHAVIOR. BITING BACK IS PROHIBITED AND MAY CONFUSE THE CHILD OF WHAT IS ACCEPTABLE SOCIAL BEHAVIOR.

**Infant Back-To-Sleep:**

In accordance with the American Medical Academy for Pediatrics, the National Institute of Child Health and Human Development, and the National Association for the Education of Young Children, the Children and Youth Program at Cherry Point supports and adheres to the best practices to ensure infants are well cared for and safe. Research supports that the easiest practice to lower a baby's risk of Sudden Infant Death Syndrome (SIDS) is to put the infant on his/her back to sleep. We support the Back to Sleep Program and will place all young infants on their backs to sleep. Failure to follow this practice, with the exception of medical documentation and IAT review, will result in termination of services or disenrollment.

**Diapers and Toilet Learning:**

Only disposable diapers and wipes are permitted in the CDC. Should cloth diapers be needed, a physician's certification is required stating the period of time for which such diapers are necessary, and you are required to discuss requirements with the center staff.

Parents are responsible for supplying diapers for infants accordingly. Parents are also required to write the child's initial on each diaper. Direct Care Staff will notify parents of the need for additional diapers on the Daily Bulletin Sheet.

Baby powder is known to cause lung irritation and will not be used. Also, on 25 October 2005, under advisement by the NHCP, the American Academy of Pediatrics disapproved the use of cornstarch when diapering.

Diapering and toileting are teachable moments that provide wonderful opportunities for one-on-one time with the children. We follow health and safety regulations and use Universal Safety Precautions when diapering or assisting the children with developing their toileting skills.

We **assist** parents with toilet training efforts and will not start toilet training in the CDC until both the child's parents and caregivers feel the child is developmentally ready and only after it has been initiated in the home. The child must be able to realize the sensation of need to eliminate and be able to communicate the need for toileting to the caregiver. Parents should provide several (at a minimum 5) complete changes of clothing labeled with child's name. Direct Care Staff will encourage the child to toilet at regular intervals but will not restrain the child on the toilet. Please discuss training techniques and plans of action with your child's caregiver so that your child can experience continuity in adult expectations in this important area.

### **Universal Precautions/Hand Washing:**

To ensure the most sanitary conditions for your child, Child Development personnel receive annual sanitation and bloodborne pathogen training. All CDC personnel use Universal Precautions approach when dealing with all human blood and certain body fluids. All CDC personnel and children will comply with prescribed procedures for hand washing which are posted above the sinks. To help eliminate the spread of germs, hand washing should take place as soon as you enter the activity room, whenever hands are contaminated with bodily fluids, before and after eating meals or snacks, after toileting or changing diapers, before water play, when returning from outdoor play, etc. When visiting your child's room, we ask that you help eliminate the spread of germs by washing your hands as well.

### **Clothing:**

Dress your child in appropriate clothing that is comfortable for a variety of active and sometimes messy activities. Please provide a complete change of clothing appropriate for the season and remember to mark your child's name clearly on all articles of clothing. Please replace clothing articles if they are sent home soiled. Children in Pre-toddler, Toddler, and Preschool classrooms must have footwear and for your child's safety, close toed shoes are required and shoes without a back strap should not be worn. To promote self-help skills, we discourage you sending a child in clothing he/she would be unable to manage, such as snowsuit, belts or one-piece clothing. Precautions will be taken to safeguard clothing and/or personal belongings. However, we will not be responsible for lost or damaged articles.



### **Personal Belongings:**

Outside personal items are not allowed in the centers. There may be occasions when special circumstances allow for this however, that will need to be by the approval of the center staff. Please speak to your child's Direct Care Staff regarding any special considerations.

### **Technology and Toys:**

Children are not permitted to have wearable technology or any computer based device that is not medically necessary and approved by the IAT. This includes but is not limited to smart watches, hand-held computers, etc.

Toys are discouraged from being brought to the CDC unless the child's caregiver has requested something to be brought to the school, or the child has a "special friend" toy or stuffed animal for rest time. This must be discussed first with your child's caregiver.

### **Jewelry:**

Please do not put jewelry on your young child; **children under the age of two will not be allowed to wear jewelry (includes screw-on earrings) at the CDC**. Station Safety advises that jewelry can injure the wearer and poses a choke hazard for that child and others who may find the pieces. Under advisement of the Joint Safety Office, hair ribbons, bows, rubber bands, barrettes, etc. are prohibited due to the associated choking hazard for children 6 weeks - two years of age.

### **Celebrating Holidays:**

We view holidays as a special time to celebrate and an opportunity to teach 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 ideas, artifacts, etc., related to a specific holiday or cultural celebration, please let us know so these celebrations can be as enriching as possible. If you do not celebrate holidays, please discuss your wishes with your child's caregiver.

### **Birthdays:**

For children in each activity room who have a birthday during the given month, parents are welcome to bring in special napkins or decorations or share a special activity for the monthly birthday celebrations.

No outside food is allowed in the centers.

**Parents are not permitted to issue invitations to private parties through the center in order to protect the self-esteem of all children.**

### **Field Trips:**

Our program of activities include visits to special places within the community, for ages pre-toddler to pre-school. We take special precautions to ensure the safety of children on field trips. We will notify you in advance of planned field trips and will require your written permission. Parental participation as chaperones is encouraged and coordinated through your child's caregiver. Ratios remain the same as in the activity rooms. State regulations require children less than 8 years of age to be in an approved car/booster seat. As transportation is not available to accommodate car seats, field trips for CDC will be

limited to places the children can walk. Direct Care Staff plan for and invite special visitors to the activity rooms. Parents are encouraged to participate by assisting in planning or recommending particular persons or programs.

### **Outdoor Play:**

Your child's experiences on the Center's 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. **Children are required to be outside each day.** 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. Our centers do follow the US Marine Corps Flag Condition Chart that is outlined in the Adverse Weather Condition section. The staff and center directors will determine the appropriate amount of time allowed outside during periods of extreme or inclement weather conditions. Outdoor play keeps children physically healthy and mentally well. By playing outdoors, children will: clear nasal passages (which prevents colds); release pent-up energy; develop gross motor skills; discover different sounds and smells, etc.

### **Photographing Children:**

Parents will be notified in advance of any individual not associated with the MCAS Cherry Point Joint Public Affairs office and/or the center who wishes to photograph children or center activities. Should you choose not to have your child photographed at any time, please notify your child's CDC Director in writing.

### **CCTV Review Requests:**

CCTV surveillance systems provide parents a certain comfort level as it allows them to observe their children adjusting to childcare without interrupting or distracting from the child's daily routine and activities. Moreover, the digital storage of images (i.e., "video recordings") can protect staff from false allegations of child abuse or neglect, and can be used by management to observe behaviors of both staff and children for future training and development purposes.

Parents have primary responsibility for the health, safety, and well-being of their child(ren). In the spirit of providing "unrestricted access" to children, parents shall have access to their children while at the CDC, and are allowed to view their children interacting with other children and the staff by viewing their children through CCTV monitors. This is live real-time monitoring, not a video recorded account.

When CDC operations are memorialized in a video recording, the recordings become Government records, maintained by the Government for up to 30 days void of any technical difficulties, for the exclusive use of the Government. These video recordings are maintained for several reasons, including the training of CDC staff, monitoring the progress and development of children, deterring and preventing child abuse and neglect, and protecting the Governments interests in the event of a potential legal claim.

Consequently, parental requests to view all or a portion of a CCTV video recording of activities at the CDC, including requests for copies thereof, fall within the purview of

SECNAVINST 5720.42F. Parents desiring to view or obtain a copy of a recording must submit a written request, and should call the MCAS Cherry Point FOIA Coordinator at 252-466-6871 for information regarding how to properly submit a FOIA request. The rules and procedures governing release of official Government records set forth in SECNAVINST 5720.42F will determine whether any particular request to view a recording, or obtain a copy thereof, will be granted.

Unless required for internal management purposes, CDC CCTV video recordings shall be maintained for no longer than 30 days. Under no circumstances will anyone outside of MCCS Cherry Point be permitted to view any portion of a CCTV video recording without first consulting MCCS Counsel. Under no circumstances will CDC staff respond directly to a parent requesting to either view or obtain a copy of a CCTV video recording, except to direct the parent to the MCAS Cherry Point FOIA Coordinator.

### CURRICULUM

Learning in young children is the result of interaction between the child's thoughts and experiences with material, ideas, and people. Knowledge of child development is used with an understanding about individual children's growth patterns, strengths, interests, and experiences to design the most appropriate learning environment. Child-initiated, child-directed, caregiver supported play is an essential component in providing an age-appropriate and individually appropriate learning situation. The Child Development Program uses the Creative Curriculum to promote the individual interests and needs of our children. Creative Curriculum uses classroom observations and assessments performed by Direct Care Staff on each child to formulate schedules and lesson plans that promote the physical, intellectual, cognitive, and emotional development and growth in our children. A balance is created to include both active and quiet activities, as well as planned outdoor experiences.

Each activity room 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, nonsexist toys, equipment, and activities are available that will promote interaction between the children and the world which surrounds them. Direct Care Staff facilitate learning by guiding children to an activity/learning center and encouraging participation. Direct Care Staff prepare lesson plans for each learning center based on the particular interests of the children and established goals. The child is allowed to make choices when selecting an activity, thus learning valuable life skills. Learning centers available are:

- **Dramatic Play and Housekeeping** - helps children with:

Cooperative Play	Language Development
Creativity	Role Playing
Group Decision Making	Self-Concept
Interaction	Spontaneous Discussion
Encourage Ethnic Awareness	Family Roles
Conversation	Problem Solving

Responsibility

Family Chores/Events

- **Language Activities** - help children with:

- Acquaintance with symbols
- Conversation
- Memory
- Visual Discrimination
- Imagination
- Stories and Printed Materials

Comprehension

Listening

Reading

Writing

Expanding Awareness of books

- **Large Motor Activities** - help children with:

- Balance
- Exercise
- Motor Control
- Safety

Cooperative Play

Flexibility

Movements

Strength

- **Manipulatives** - help children with:

- Assembling
- Creativity
- Part/Whole
- Role Playing

Construction

Patterning

Problem Solving

Small Motor Control

- **Sand/Water Play** - helps children with:

- Construction
- Measuring
- Quantity
- Self-Confidence

Creativity

Motor Control

Relaxation

Tactile Stimulation

- **Science** - helps children with:

- Awareness
- Discovering
- Exploring
- Observing

Describing

Experiencing

Problem Solving

Questioning

- **Art** - helps children with:

- Awareness
- Exploring
- Relaxation
- Sense of color and Design

Creativity

Language Development

Self-Expression

Small Motor Control

Self-Confidence

- **Blocks** - help children with:
    - Balance
    - Cooperative Play
    - Patterning
    - Self-Confidence
  - **Books** - help children with:
    - Visual discrimination
    - Describing
    - Observing
    - Listening
    - Comprehension
    - Increased Ethnic Awareness
  - **Music** - helps children with:
    - Auditory Discrimination
    - Movement
    - Creativity
    - Self-Confidence
    - Awareness
  - **Computers** - help children with:
    - Fine Motor Control
    - Creativity
    - Reading
    - Memory
    - Motor Planning
    - Following Directions
  - **Family Style Dining** - helps children with:
    - Making Decisions
    - Increasing Motor Skills
    - Taking Turns
    - Increasing Language Skills
    - Increases Acceptance of different food
- |                          |
|--------------------------|
| Construction             |
| Creativity               |
| Problem Solving          |
| Shape and Size           |
| Creativity               |
| Language                 |
| Self-Confidence          |
| Memory                   |
| Writing                  |
| Writing                  |
| Rhythm                   |
| Expression               |
| Language                 |
| Listening                |
| Awareness of Differences |
| Left/Right Orientation   |
| Language                 |
| Symbols                  |
| Spatial Orientation      |
| Sequencing               |
| Self-Confidence          |
| Cooperating              |
| Improving Social Skills  |
| Sequencing               |
| Developing Self-Esteem   |
| Discriminating           |

## **DAILY SCHEDULE SAMPLES**

### **Infants:**

Each child has a unique schedule for eating, diapering, playing, and sleeping. A daily schedule will include times for the following: arrivals and departure; feeding/preparing and eating snacks and meals; diaper changing/toileting; indoor/outdoor play; sleeping/naptime.

### **Pre-Toddlers – Preschooler Sample:**

0600 - 0745	Welcome/Quiet Activities/Selected Centers
0745 - 0800	Prepare for breakfast/Self-help Skills
0800 - 0815	Breakfast
0815 - 0915	Self-Selected Activities/Centers/Music/Art
0915 - 0930	Prepare for Outside
0930 - 1000	Outside
1000 - 1010	Water break
1010 - 1100	Art/Centers/Group Time/Prepare for Lunch
1100 - 1130	Lunch
1130 - 1145	Children Clean Up/Self-help Skills/Prepare for Quiet Time
1145 - 1345	Quiet Time/Rest Time
1345 - 1400	Put Away Blankets/Self-help Skills/Prepare for Snack
1400 - 1430	Circle Time/Story Time/Finger plays/Discussion
1430 - 1500	Snack/Children Clean Up/Self-help Skills/Prepare for Circle Time
1500 - 1520	Music and Movement/Centers
1520 - 1530	Prepare for Outside
1530 - 1600	Outside
1600 - 1610	Water break
1610 - 1700	Art/Centers
1700 - 1800	Table Toys/Quiet Center/Clean Up/Prepare for Departure

### **Developmental Assessments:**

Each child is assigned a primary caregiver when he/she is enrolled in the CDC. The caregiver assesses growth using a list of developmentally sequenced behaviors and the “Creative Curriculum Gold Edition” by Teaching Strategies Inc. assessment system. Through this assessment system and knowledge of the children’s interests and needs, the caregivers develop activity plans that will promote individual growth and development.

### **Conferences:**

Daily sharing of information during drop off and pick up are encouraged and helpful in assisting the staff in meeting your child’s needs. Scheduled conferences offer the

opportunity for staff and parents to take the time to plan, assess, and set goals for your child's development and growth. Conferences will be held four times a year (Dec., Mar., Jun., Aug.) at each checkpoint, but may be scheduled at the request of the patrons or staff members at any time.

**Rest Periods:**

Rest periods are scheduled for all children enrolled in full-day programs. While infants are allowed to establish their own sleeping patterns, children in the pre-toddler through preschool full-day programs will have a scheduled rest period. Children are not required to sleep but must rest quietly during this time. Each child is assigned a crib or cot. Crib sheets are laundered daily and are provided by the center.

Parents of Pre-toddler – Preschool children must provide a blanket, a fitted crib sheet and they can also provide a small pillow (optional) for your child's comfort, labeled with the child's name. Blankets and sheets will be taken home at the end of the week, laundered, and returned with your child on Mondays.

**EMERGENCY TELEPHONE NUMBERS**

DoD Child Abuse Hotline	1-877-790-1197
Fire Department	911
Naval Clinic	466-0266
Military Police	466-3615
Family Advocacy	466-3264
Poison Control Center	1-800-222-1222