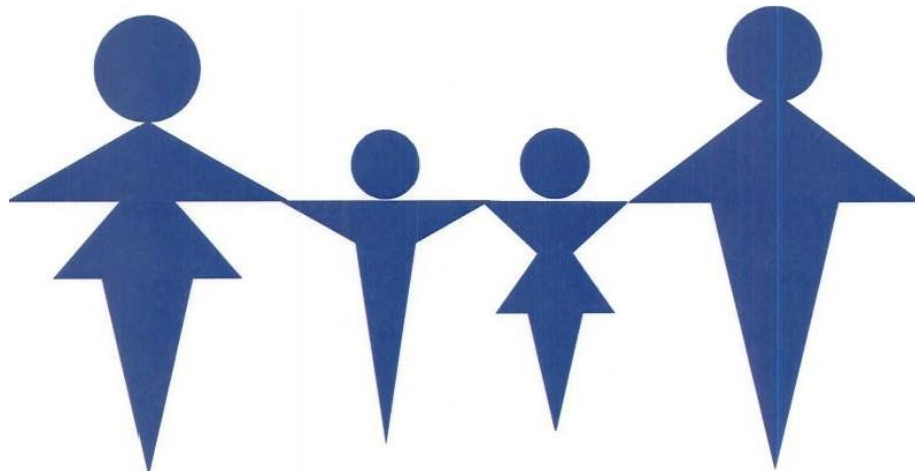


Eielson  
Child Development Center

# Parent Handbook



EIELSON AIR FORCE BASE, ALASKA



March 2017

## **WELCOME**

Welcome to the Eielson Air Force Base Child Development Center. We operate within the guidelines of DOD and AF Instructions (AFI 34-144) and policies/checklists, accreditation standards of the National Association for the Education of Young Children. We also use *Caring for Our Children* (third edition) and *Managing Infectious Diseases in Child Care and Schools* (American Academy of Pediatrics publications, third edition, 2011). This handbook should answer the majority of your questions about our services and inform you of our policies and procedures. The Child Development Center is not meant to substitute, compete, or diminish the role of the parents, but act as a support system to the family. Our program is designed to provide a meaningful service by creating a stimulating, enjoyable and safe environment for children. Our aim is to make both you and your child happy, comfortable, and encourage involvement in the various aspects of your child's program. We look forward to seeing you! You are a welcomed visitor at all times.

## **MISSION STATEMENT**

To assist DoD military and civilian personnel in balancing the competing demands of the accomplishment of the DoD mission and family life by managing and delivering a system of quality, available, and affordable programs and services for eligible children and youth birth through 18 years of age.

## **PHILOSOPHY**

We believe in the development of the "whole child." Our program acknowledges that children learn through active, hands-on involvement with their environment, peers, and caring adults. We respect each child's unique interests, experiences, abilities, and needs, thus allowing us to be responsive to and appropriate for each child. Children are valued as individuals, as well as part of a group. Likewise, our program respects and supports the ideals, cultures, and values of families in their task of nurturing children. We advocate for children, families, and early childhood professionals within our programs.

Child Development Center staff members believe children learn through active participation with their environment. Infants, toddlers, and preschoolers learn about their environment through meaningful "hands-on" experiences, which promote active thinking and reasoning. Developmentally age appropriate activities and practices are implemented at the Child Development Center.

## **GOALS**

Our goal is for our programs to provide:

- Positive, warm interactions among adults and children
- A healthy and safe environment for children
- Opportunities to enhance social skills
- Encourage children to think, reason, question, and experiment
- Language and literacy development
- Appreciation and respectful cultural diversity
- Developmental initiatives and decision-making skills
- Opportunities for physical development and skills

- Encourage and demonstrate sound health, safety, and nutritional habits
- Encouragement of creative expression, representation, and appreciation for the arts and music
- Nutritious meals and snacks that meet United States Department of Agriculture (USDA) Adult and Child Care Food Program standards
- Regular communication with parents
- Promotion of each child's self-esteem and a desire to reach his/her fullest potential

## **ELIGIBILITY**

Children of all active duty military, DOD civilian personnel (APF/NAF), DOD contractors, and Air National Guard (ANG)/Reservists are eligible to use the Child Development Center (CDC), School-age (SAP)/Youth Center (YC), and Family Child Care (FCC) programs. Single/dual active duty, ANG/Reservists on active duty, and DOD civilians whose spouse is employed or in school are given a higher priority than other groups for enrollment. Enrollment of children when a spouse is no longer employed or attending school full time may be terminated within 30 days when there is a list of priority eligible children waiting to enroll in a full time program. Children six weeks through five years old are eligible to use the Child Development Center. Decisions regarding eligibility in special circumstances will be handled on a case-by-case basis.

**Priority 1** – The highest priority for full-time care shall be given to qualifying children from six weeks through 12 years of age of combat related wounded warriors, child development direct care staff, single or dual active duty military service members, single or dual DoD civilian employees paid from APF and NAF, surviving spouses of military members who died from a combat related incident, and those acting in loco parentis on behalf of the aforementioned eligible patrons. With the exception of combat related wounded warriors, ALL eligible parents or care givers residing with the child are employed outside the home.

**Priority 2** – The second priority for full-time care shall be given equally to qualifying children from six weeks to 12 years of age of active duty military service members, DoD civilian employees paid from APF and NAF, surviving spouses of military members who died from a combat related incident and those acting in loco parentis on behalf of the aforementioned eligible patrons, where a non-working spouse, or in the case of a DoD civilian employee with a same-sex domestic partner, is actively seeking employment. The status of actively seeking must be verified every 90 days.

**Priority 3** – The third priority for full-time care shall be given equally to qualifying children from six weeks to 12 years of age of active duty military service members DoD civilian employees paid from APF or NAF, surviving spouses of military members who died from a combat related incident, and those acting in loco parentis on behalf of the aforementioned eligible patrons, where a non-working spouse, or in the case of a DoD civilian employee with a same-sex domestic partner, is enrolled in an accredited post-secondary institution. The status of the post-secondary enrollment must be verified every 90 days.

**Priority 4** – Eligible DoD Contractors assigned to Eielson AFB.

Space Available – After meeting the needs of parents in priorities 1, 2, and 3, CDCs shall support the need for full-time care for other eligible patrons such as active duty military service members with non-working spouses or same-sex domestic partners, DoD civilian employees paid from APF or NAF with non-working spouses or same-sex domestic partners, eligible employees of DoD contractors, federal employees from non-DoD agencies, and military retirees on a space available basis. In this category, CDCs may also authorize otherwise

ineligible patrons in accordance with 10 U.S.C. 1783, 1791 through 1800, 2809, and 2812 to enroll in the CDC to make more efficient use of DoD facilities and resources.

**Deployed Military/DoD Civilian** – If an individual withdraws his/her child from the CDC due to a deployment, the child’s name will be placed at the top of the waiting list for their age group and remain there until the parent returns. When parent returns, assistance will be provided to make temporary child care arrangements in a licensed FCC until CDC care is available.

**Note:** Full-time employed spouse must be in a permanent or regular position guaranteed a minimum of 20 hours a week. Full Time Student (12 hours during school year/6 hours during summer). If a spouse is a student, proof of full-time student status must be provided each semester. If proof is not provided, the family status will change to a lower priority. Child care will be terminated if there are higher priority children on a waiting list. A 30 day written notice will be provided.

**Note:** Permanent Change of Station (PCS) inbound personnel with orders are considered assigned to Eielson AFB for priority placement and can fax their AF form 2606 to the CDC or the Resource and Referral Office and are placed on the waiting list. Priority determination is made at the time of registration or placement on the waiting list. Care for children enrolled may be terminated if there are higher priority children on the waiting list. A 30 day written notice will be provided if care is terminated

## PROGRAMS

### CHILD DEVELOPMENT CENTER

The Child Development Center program has been accredited by the National Association for the Education of Young Children (NAEYC). We use the AF Creative Curriculum in our program. Care for children ages 6 weeks through 5 years is available on a full time or hourly basis. A dedicated and professional staff develops individually based goals and activities for the children in each classroom. Ratios have been established for each age group to ensure individual needs are met.

- 6 weeks - 12 months            1 staff per 4 children (maximum 8 children per room)
- 1 year olds                      1 staff per 5 children (maximum 10 children per room)
- 2 year olds                      1 staff per 7 children (maximum 14 children per room)
- 3 - 5 year olds                 1 staff per 12 children (maximum 24 children per room)

**Note:** Individual needs, age and developmental readiness of the child determine transition time to a new classroom. When children transition from one room to another, temporary visitation in the new room may occur daily for a determined period of time to ensure the child and the parent will be comfortable with the new environment. Contact the CDC for their specific transition policy. Children enrolled in the CDC and preparing for Kindergarten will be involved in a transition program to acclimate them in the fall at the School Age program. 5 year olds in the CDC may remain for the summer program and transfer to School Age at the start of school.

## **ADDITIONAL CHILD AND YOUTH PROGRAMS**

### **PART DAY ENRICHMENT:**

Part Day Enrichment is for children 4 years of age (by 1 Sept) who are entering Kindergarten the following year. This class is three hours per day, five days per week. The morning class is the primary class (0830-1130). An afternoon class (1330-1630) will be offered if sufficient interest (min 10 children). Fall and winter classes will follow the school district calendar. The program will be closed on Saturdays, Sundays, federal holidays, PACAF Family days, and school closures. The Creative Curriculum is the same that is offered in the Full Day program for ages 3-5.

### **GIVE PARENTS A BREAK:**

Sponsored/funded by Air Force Aid through the Airman & Family Readiness Center (A&FRC) offers eligible parents a few hours break from the stresses of parenting. Active duty families eligible for the program would include those where a parent is feeling unique stress due to: military member deployed or TDY, having a child with special needs, emergency situations, unique circumstances or hardships, or a family recently moving to the base. If care is provided on a day full day care is scheduled, children *must be taken out of the CDC for 1 hour prior* to returning to any evening care. Contact the CDC for additional information.

### **USDA FOOD PROGRAM:**

The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.)

If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter to us by mail at U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339; or (800)845-6136 (Spanish).

**USDA is an equal opportunity provider and employer.**

### **Child Development Center Curriculum:**

The long-range curriculum goal for the CDC is to provide an environment rich in experiences to enhance to the social, emotional, cognitive, and physical development areas for the child. Strong emphasis is placed on child-initiated play experiences so that the child learns through discovery methods. The curriculum is sensitive to individual learning styles and respects the range of differences within a single child.

**Infants (6 weeks-12 months):**

Infants are provided individual schedules that best suit their needs including diapering, eating, and rest times. Infants are exposed to a multitude of experiences that provide auditory, visual, and tactile stimulation.

Infancy is an important period for social and emotional development. Children form their first attachment to their caregivers during infancy, and our caregivers provide quality care to meet the individual needs at this very early age. Due to minimal space, hourly care may be very limited for the 6 weeks to 1-year age group. To personalize our infant program, parents are asked to give the caregivers daily information about their child to include: meal schedule, types of food to be fed, nap schedules, particular ways of communication and health history. In turn, the CDC staff ensures the parent is informed of their infant's day through daily written reports.

**Diaper/wipes for infants:**

Parents must provide sufficient disposable diapers for their young children (8-10 per day for infants, 6-8 for toddlers). Parents will be provided a courtesy notice when diapers and/or wipes are running low, so you will have time to replenish the supply. The CDC does not keep additional diapers on hand.

**Pre/toddlers (1-3 years old):**

Pre/Toddlers are provided experiences and materials that enhance the development of positive self-concept. Toddlers learn by exploring their environment and through active play. The curriculum stresses communication skills, fine and gross motor skills, and self-help skills appropriate to this stage of development.

**Preschoolers (3-5 year olds):**

Preschoolers are provided learning experiences through the curriculum, according to individual interest and abilities. Activities provide social interactions and problem-solving skills that build self-esteem while developing a positive feeling towards learning.

The Child Development Center schedules Parent/Teacher conferences two times a year; one in April and the second in October. Parents may request an additional conference at any time.

**ADMISSION POLICY****REGISTRATION (Admission) for CDC**

1. **Initial:** At a child's first admission, a parent or sponsor must present the following:
  - Child's immunization record. Immunizations received after initial admission must also be verified by providing the CDC with an updated immunization record. If your child has not received the required immunizations, he/she will not be admitted in the center (this includes hourly care). Flu shots may be waived dependent on immunization availability at the medical services.
  - See Center For Disease Control current schedule for immunization at [www.cdc.gov](http://www.cdc.gov)
  - Completed and signed AF Form 1181, Air Force Youth Flight Program Patron Registration.
  - CDC enrollees require a CDC Health Assessment Form,
  - DD Form 2606 Request for Care
  - DD Form 2652 Application for DoD Child Care Fees
  - Current Leave & Earnings Statement (LES), Pay Stub, or Income Tax (*Parents that are Self-Employed must submit Tax Documents*) return for both parents is required to

calculate Total Family Income (TFI) and fee category,

- USDA Food Program Application
- Credit Card Authorization -Credit cards are run each Wednesday if parents have not paid their bills.
- Photo/Video Release Form

**Note:** The child's AF Form 1181 is kept at the center and updated annually or more frequently if additional or new information about the child occurs. Additionally, the CDC requests your email address to keep you up to date on the programs happenings.

## 2. **Annual**

- Review of AF Form 1181 and AF Form 2652 to update information and complete a new payment contract.

## 3. **Daily**

- The CDC uses Closed Circuit Televisions (CCTV). All children may be subject to CCTV monitoring and recording as part of their participation/enrollment in CYP.
- Parents are required to sign children in/out daily. Each day a child is present, the PARENT signs the child in/out at the front desk of the CDC. The child is signed IN with the time noted and signed OUT with time noted and a legible parent signature.
- Classroom sign in/out. Each day a child is present, the parent must accompany the child to his/her room and sign AF Form 1930, Daily Attendance Record. At the end of the child's stay at the center, parents go to the appropriate room, sign the AF Form 1930, and pick up their child.
- In efforts to maintain Child/Teacher ratio, we are required to request for parents to contact the CDC by 0900 if their child will not be attending or if the child will be dropped off later than 0900. If contact has not occurred by 0900, CDC will make contact to find out the status of your child.

**VERY IMPORTANT:** Signing in/out at the front desk and signing in/out in the classroom (AF Form 1930), is a requirement. This is the only way to account for children's safety in case of an emergency which may result in the evacuation of the building.

Use of the CDC is a privilege. This privilege may be denied to a family for, but not limited to, the following reasons:

- Children too ill to participate in everyday activities.
- Failure to provide required information, immunizations, emergency contact/numbers (before the established deadlines).
- Children presenting severe behavior problems.
- No telephone number or inability to reach parent or designated responsible adult.
- Consistent failure to observe closing hours.
- Consistent failure to pay for the contracted service. Commanders and First Sergeants may be contacted for assistance prior to taking other steps to obtain payment.
- Failure to follow program rules and policies.
- Inappropriate guidance techniques while at the center.
- Rudeness to program personnel, including inappropriate language.

## **RELEASING CHILDREN FROM CARE:**

Only individuals parents designate on AF Form 1181 and with proper identification will be allowed to sign children in/out of the program. Children may not leave the CDC or be released to older siblings under the age of 14 unless authorized in writing by the parents. Divorces or separated parents who do not have legal custody of a child may not pick up a

child unless authorized by the legal parent/guardian. **Children will not be released to parents who appear to be under the influence of a drug or alcohol, or in any way a threat to themselves or the child's welfare.** Security Forces (SFS) will be notified to determine the parents' sobriety or fitness to drive. SFS will be notified if parents do not pick up their children **30 minutes after closing!**

#### **Items to be provided by parents:**

- EXTRA SET OF CLOTHING (including underwear, socks, and shoes). **Be sure to label all clothing with child's name! The CDC is not responsible for lost or damaged items or clothing.**
- Un-Opened can of formula if you are not requesting formula from the CDC. (To be replenished by parents as needed)
- Non-glass bottles (1 bottle for every 2 hours that your infant will be at the CDC). Bottles prepared at the CDC will not be allowed to go home at the end of the day.
- Diapers and wipes (replenished by parents as needed)
- Snow Gear for daily outdoor activities is required

Children are not permitted to bring toys from home except on Show & Share days. This will assist us in keeping disruptions to a minimum. Sufficient toys are provided in each classroom which are developmentally appropriate.

#### **AFTER HOURS**

When children are left at the center after the close of operation, the staff will make every attempt to contact the parent or emergency contact by phone. If these attempts are unsuccessful, the sponsor's unit will be contacted. SFS may be contacted for assistance in finding the parents or finding temporary placement for the child if they are not picked up by 30 minutes after closing. **A late fee of \$2.00 per minute will be charged per child.** For Part-Day Enrichment parents, this fee will be assessed after the program that your child is in enrolled closes. Consistent abuse of not picking up children will not be tolerated!

**Note: Extended Duty Care** is for parents needing care outside CDC hours of operation in efforts to carry out their duty mission. Verification will be made by contacting the Sponsor's First Sergeant. *Extended Duty Care will be offered at the discretion of the Installation Commander.*

#### **RESERVATION POLICY**

##### **HOURLY CARE:**

Hourly care may be reserved by telephoning the CDC at 377-3237, in advance or on the same day care is needed. Parents are responsible for making hourly care reservations. Space is approved on a space-available, first-come, first-serve basis. The space is held for one-half hour after the reserved time begins. If parents fail to show in that allotted one-half hour, the space may be given to the next family in need of child care. Parents may change reservation time up to one hour in advance of your reserved time. Failure to cancel a reservation will result in a charge for 2 hours. Payment for hourly care is due on the day of care.

##### **FULL DAY CARE:**

Weekly care may be reserved by completing a contract agreement at the CDC. The program may have a waiting list depending on the age of each child. Detailed contracts are available at the CDC, outlining policies that apply. Advance payment is required at the CDC and is due as required by the contract. A weekly service charge is imposed for delinquent payments, and repeated delinquent payments may result in the loss of the reserved space. Since fees are



calculated based on consistent, year-round usage, periods of care not used are not reimbursable or prorated due to a holiday, illness, and vacation or program closure. Children that are absent from the center for extended periods of time due to parents' personal reasons, i.e. vacations, without terminating their contract will be charged upon their return for the time period they would have been present. Any day your child will not attend the program, we require you notify the respective program by 0900 or else we will give you a call to verify that your child will not be attending for the day.

A parent orientation provides parents new to our program an opportunity to meet the Director and their child's provider, tour the facility and review their contract. The individual classroom teachers, Director, or other program staff, as necessary, will explain policies and procedures of the CDC and answer any questions you may have. The Director and Flight Chief have an open door policy for any concerns, suggestions, or questions. Please contact the Director first.

Parents are also required to fill out an Application for Department of Defense Child Care Fees, DD Form 2652, which will be retained in each child's file after enrollment. This form is used to calculate the family income to assess the fees. Parents that do not provide income verification will be required to pay the highest category. This form must be filled out at the beginning of October each year.

#### **REQUEST FOR CARE:**

DD Form 2606, Request for Child Care Form, is filled out by patrons when child care services are not available for their child. The form is submitted to the FCC. This form is updated every two months. Expectant parents may submit a request for care 90 days prior to the expected delivery date. They will be placed on the inactive list until the program is notified of the birth. There is an active waiting list where parents need care within 2 weeks and an inactive wait list where parents want care, but do not have an immediate need for care.

#### **UNMET NEED:**

This list is maintained for children whose parents are unable to work because of available, quality and affordable child care is not available. Spaces offered may be in the CDC or FCC programs. If parents refuse care in either program, the child's name will be removed from the unmet need list. Upon notification that there is space available for your child, you will have **24 hours** to respond. If you do not respond within the 24 hours or you refuse service, you will be removed from the waiting list. If you wish to remain on the waiting list, you will need to complete another DD Form 2606 and your name will be placed at the bottom of the list. You will be expected to begin care within 2 weeks from your acceptance. **If you wish to extend your start date to longer than 2 weeks, you will be required to pay the weekly rate according to your Fee Category.** The wait list is prioritized IAW DODI 6060.02.

#### **WITHDRAWAL FROM CARE:**

Parents must provide the CDC at least **TWO WEEKS ADVANCE WRITTEN NOTICE** if the contract is to be terminated. Emergency situations (i.e. emergency leave, TDY, etc.) will be handled on a case-by-case basis and approved by the Director/Flight Chief. If the required two weeks' notice is not given, the child(ren) will be dropped from regular status and fees will be collected. If fees are not paid, the Director/Flight Chief may contact the Sponsor's Commander or First Sergeant for assistance in collecting fees or bill collection procedures will be initiated. A two week notice is not required for children transferring from the CDC program to the SA program when they enter Kindergarten. However, parents do need to notify both programs they intend to continue utilizing the program vs enrolling them in a different before/after school program.

## **FEES AND CHARGES**

### **ENROLLMENT FEES:**

The Military Child Care Act of 1989 (Public Law 1809, Section 1504) requires that the DoD establish uniform fees for child care based upon total family income (TFI). It is not required that families provide income verification; however, if verification documentation is not provided the family will be placed in the highest fee category. Verification documentation is only required for placement in a lower fee category.

All fees should be paid weekly no later than the second business day of the week that care is provided. Cash, personal check, money order, or MasterCard/Visa credit card are accepted. If payment has not been received by Tuesday at 1745, the credit/debit card parents have on record at the CDC will be run on Wednesday, during the week of care. Fees are based upon the normal operational hours of care per day. (See individual contract for specific fees) Additional care may be coordinated with a FCC provider (evening and weekend). (See separate fee sheet, adjusted annually) **There will be NO rebates for severe weather, vacations, illness, holidays, PACAF Family days or suspensions.** If full payment is not received 15 calendar days from the original payment due date, your contract will be terminated.

### **SCHEDULED EXTENDED CDC OPERATION HOURS:**

A per hour rate based on the family category fee rate will be charged for each child that remains in the CDC past the normal closing time. If a weekly parent has a child in care during extended hour for exercise or real world, they will be charged an hourly rate equivalent to no more than the per hour weekly rate the parent is paying in their fee category.

### **FEE WAIVERS:**

Parents may submit a letter with documentation and justification for a CDC fee waiver. Prior to requesting a waiver, parents should pursue all avenues to obtain financial assistance (Family Support, Unit Commander/First Sergeant, CCA, or other on/off base agencies). A waiver form is available at each facility. The Mission Support Group Commander may temporarily adjust individual family fees (based on hardship or other special circumstances on a case-by-case basis). Parents must submit a waiver request signed by the sponsor's Unit Commander or First Sergeant along with a budget prepared by A&FRC prior to submitting to the center Director/Coordinator. The Director/Coordinator will then forward the request to MSG/CC for approval/disapproval (if disapproved parents will remain in their established fee category). Parents should solicit the CCA - (information is available at CDC) prior to requesting a fee waiver. If parents qualify, this state agency may assist parents to meet their child care fee obligations IAW their established income category.

## **HOURS OF OPERATION**

**0630-1800**

**Monday-Friday**

**Closed on Weekends,**

**Federal Holidays and**

**PACAF Family Days**

The Installation Commander approves each program's hours of operation. The hours of operation are based on utilization and the needs of the majority of the base populace. Parents should be aware of these hours of operation. The hours are posted at the facility and a late fee will be charged for children remaining in the center past the posted closing times.

**Note:** Children cannot be signed into the centers prior to the scheduled opening times.

**Note:** A snack will be served if a child is in care up to three hours. An additional meal will be served if the children remain in the program for six or more hours.

### **Children with Special Needs**

**AFI 34-144**, CDC defines children with "Special Needs" as those with a "...physical or mental impairment that substantially limits one or more major life activities, has a record of such an impairment, or is regarded as having such an impairment." The CDC is authorized to accept these children under certain conditions provided they can meet the needs of the child. The Medical Advisor will determine a child's special need and type of care. A child with special health problems or special needs will be admitted with the written concurrence of the Medical Advisor. A written plan of care developed jointly by medical personnel, special education professionals, staff, and parents must be on file and followed for each child designated as having special needs. Staff caring for special needs children must receive specialized training prior to providing care. Every effort will be made to meet the needs of the child in a timely manner. Any information on special health, physical, or diet requirements (must be a medical statement) must be specified and documented in the child's records and maintained at the CDC.

### **HEALTH POLICIES**

Caregivers will visually check each arriving child for signs of illness. If your child has a fever of above 101 degrees, appears unhealthy, or has symptoms of a communicable disease, he/she may be refused admittance or be required to bring a note from a doctor stating that the child is well enough to participate in all activities and is not contagious. If a child develops signs of illness after being admitted, the parents will be contacted, asked to pick up the child within **one-half hour (30 minutes)**, and must comply with the flight inclusion/exclusion/dismissal policy. Children unable to participate in activities should be kept at home until they are well enough to be involved in all aspects of our program. It is very important to inform us if your child comes down with a communicable disease and has attended the Child Development Center during the incubation period. When necessary, we inform the parents of other children who were exposed to the illness so they can be alerted to symptoms in their own child.

Some conditions merit exclusion from programs due to contagious infections, because they render the child unable to participate in the usual program activities or require a program worker to spend extra time caring for that child causing inattention to the other children. Some examples of conditions that require exclusion from our programs are:

- Any illness that renders your child unable to participate comfortably in daily activities.
- Fever from unknown cause above 101 degrees, child may require medical assistance.
- Lethargy, irritability, persistent crying.
- Difficulty breathing, persistent cough.
- Diarrhea - Parents will be notified after the second loose stool and discharged after the third. (Not to be confused with exclusion due to a stool that is not contained in the diaper (that would require parents to pick up after the 1st one).
- Vomiting 2 or more times in the past 24 hours unless it is determined to be due to a non-communicable condition and there is no danger of dehydration.
- Mouth lesions that cause a child to drool or be unable to drink or eat.
- Rash with fever unless it has been determined non-communicable.
- Impetigo, until on antibiotics for 24 hours, a doctor's note may be required.
- Streptococcal-pharyngitis, until on antibiotics for 24 hours and no fever for 24 hours.
- Head lice, until after first treatment.
- Scabies, until after the treatment has been completed.
- Chickenpox - may return sooner if all the lesions have scabbed and are dry. Lesions on the

- scalp, palm, and soles do not usually scab.
- Ring worm -may return once treated and covered.

**Note:** *Children that are sent home due to symptoms that would exclude them from group participation may return the next day if they are not exhibiting the symptoms that cause them to be excluded.*

**Key criteria for exclusion of children who are ill:**

When a child becomes ill but does not require immediate medical help, a determination must be made regarding whether the child should be sent home (i.e., should be temporarily “excluded” from care). Most illnesses do not require exclusion. The caregiver/teacher should determine if the illness:

- Prevents the child from participating comfortably in activities;
- Results in a need for care that is greater than the staff can provide without compromising the health and safety of other children;
- Poses a risk of spread of harmful diseases to other.

If any of the above criteria are met, the child should be excluded, regardless of the type of illness.

Not all illnesses require medical intervention, nor do they require medication. If any condition is persistent, lasting over 72-96 hours, parents are advised to seek a medical opinion. This can alleviate the spread of many childhood illnesses, ensuring the health of both the children in the child care, their families, and the adults who care for them.

In order to help prevent the spread of illness throughout the center, all children and staff must wash their hands upon entering and exiting the classrooms. This will cut down on the spread of germs and help us provide a healthy environment for your child.

**OUTDOOR PLAY:**

Outdoor play is very important for children. Each classroom is scheduled to go outside twice a day weather permitting. Please, dress your child according to the weather. Shoes must be suitable for running and climbing and completely enclose the child's foot. Sandals are not permitted in CDC programs. All children and classroom staff are required to wear **CLOSED-TOE** shoes. Children will only be kept inside during inclement weather, situations involving air quality, sleet, hail, thunderstorms, extreme temperatures, etc. With your written permission, sunscreen, bug spray approved by the medical advisor, will be applied to your child prior to outdoor activities.

The following temperatures are recommended for children's outdoor play:

6 weeks-12mo	32 degrees F to 85 degrees F
12mo - 24 mo	20 degrees F to 85 degrees F
24mo - 36 mo	10 degrees F to 85 degrees F
3yrs - 5 yrs	0 degrees F to 85 degrees F
5-12 yrs (SA)	-20 degrees F to 85 degrees F

**HIGH RISK ACTIVITIES:**

There are established ratios when dealing with children of various age groups in the CDC. During specific activities, i.e. working with tools, swimming, outdoor adventures, ratios are reduced to increase the safety of the children.

**TEETHING:**

Teething does not cause a true fever (> 100.4 degrees F), but there may be loose stools, some irritability. However, the exclusion policy for loose stools will be implemented.

**BITING:**

Biting is bothersome but is natural in the developmental milestones of most toddlers. It usually is self-limited and does not require intervention. In the event that a child is bitten and the skin is broken, the parent will be notified to determine if medical attention is necessary. Biting children will receive positive reinforcement, redirection, and behavior modification. Every attempt will be made to work with the parents of the biting child to change the behavior pattern. In some cases the child may be temporarily removed from the center until the child outgrows the behavior. In general, there is no specific minimum or maximum number of bites prior to removal from the program (case by case basis). Biters do not present a public health hazard.

**TOILET TRAINING:**

Toilet training is a major milestone in your child's life! We would like to support you in this endeavor. Parents and staff must work together to ensure success for your child. Our goal is to be consistent in working together. Children should have successful toileting experiences at the center. Some children have difficulty toilet training in pull-ups because of its similarity to a diaper. If this becomes an issue, the caregivers will ask you to begin to use underwear/training pants only.

Toilet training should not be rushed. When the child begins to show signs of readiness (i.e., wakes up dry after nap, seems to be aware of bodily functions, able to verbally express the need to potty) toilet training should be initiated. If your child does not show an interest in toilet training, the training should be postponed until an interest is shown.

Each child should have several changes of clothes each day in case of accidents. Wet or soiled clothing will be placed in a plastic bag and tied. For health reasons, dirty garments will not be rinsed, washed or dried by caregivers. All clothes brought to the centers should have a label with the child's name for identification.

**REST PERIODS:**

Rest periods or naps are scheduled following lunch and after 2100 hours during special openings. Hourly care patrons who do not want their children to rest should take this into consideration when scheduling their child care. During naptime, children are required to sit/lie quietly on sleeping mats/cots with a book until children desiring rest are asleep. Then, they may engage in quiet activities at a table or activity center until the other children awaken.

**TRANSPORTATION OF CHILDREN:**

CDC children are only transported away from the facility for emergency situations. All other travel out and about the facility is by buggy or walking. Children are never transported by personal vehicle. A signed permission slip is required when going off the installation for field trips. All on-base field trips require authorization on AF Form 1181, Youth Flight Program Registration.

## **MEDICATIONS**

**ADMINISTERING MEDICATIONS:**

In accordance with AFI 34-144, CDC will adhere to the following guidelines when administering medication:

Only medications prescribed by a medical authority will be administered. Prior to administering medication, the parent or guardian must complete AF Form 1055 Youth Flight Medication Permission and the parents must give daily written permission.

Prescription medication shall be in the original container, stored according to instruction, labeled with specific child's name, name of medication and dosage strength, along with instructions (to include a start and stop date) for use and the physician's name and date of prescription. The prescription must be current (within the year). No "over-the-counter" medications, including Aspirin-like products, Tylenol, Antihistamines, Orajel, and Cough Syrup will be administered unless a medical authority has prescribed them for a particular child. The CDC staff will not administer medication to reduce fevers. If an over-the-counter medication is prescribed, the guidelines below are required in order for staff to administer medications:

- Only sunscreen and bug repellent approved by the medical advisor will be used in the program and will be applied with parental permission each year.
- Medications will only be administered by trained staff members.
- Tylenol will only be given with a medical prescription.
- The parent will administer the first dose of any new medication.
- The center will not give medication on an "as needed" basis.
- Medication times will be as follows: If the medication schedule is twice a day, the center will not administer the medication. It should be administered at home. If the medication schedule is three times a day, the medication will be administered at 1430-1500. If the medication schedule is four times a day, the medication will be administered at 1030-1100 and 1430-1500. Medications will only be administered at the above times, Monday through Friday. Special situations will be taken into consideration.
- Children must be on oral medication at least 24 hours before dosage is administered by CDC Staff. This is in precaution of allergic reactions to new medications.
- Diapering ointments will not be applied as preventative. They will only be used to aid in curing a rash.

**Note:** Only designated and trained staff will administer medications.

## **MEALS AND SNACKS**

The CDC participates in the USDA Child and Adult Care Food Program. Nutritious foods are provided for all children during meal/snack times at no additional charge. Only food prepared at or for the programs is served. Parents and staff are not permitted to bring in food. All Child and Adult Care Food Program guidelines for the preparation of balanced, proportioned, nutritional meals/snacks are followed. The HQ PACAF Child Development Specialist or Air Force Dietitian approves program menus. A weekly menu is posted on the parent's bulletin board. Menu changes may occur occasionally and are noted daily on the main menu. All children signed in the center are served prepared meals and snacks (except for infants). This requirement applies to foods for special celebrations i.e. birthdays (candies are not allowed).

CDC children eat in their rooms with their caregivers in a family-style setting. Children are encouraged to serve themselves and are encouraged to try all the food. Caregivers model good table manners. Parents are encouraged to join their child for meal time. Kitchen staff must be notified in advance in efforts to prepare adequate amount of food for the classroom.

### **INFANT FEEDING:**

Parents are requested to bring in 6 plastic bottles (to include with each, bottle lids and nipples) on a daily basis. This will allow staff to ensure infants are fed in a timely manner each day.

Each bottle will be labeled with child's first and last name, formula the child drinks and any other special information, i.e.; ounces provided at each feeding. The CDC offers 2 types of formula (SimaSoy and Similac-Sensitive). Parents that do not want to use the CDC formula will be required to provide their own formula to the kitchen staff in an unopened factory sealed container. Parents that breast feed can bring prepared bottles/bags directly to the room. Prepared formula/breast milk that is provided by the parents may NOT contain medications, juice, or infant cereal or any other foods. Mothers that desire to visit the CDC during feedings are welcome.

#### **SPECIAL DIET REQUIREMENT:**

Parents are reminded not to bring any food items into either program, per USDA Child and Adult Care Food Program regulations. If your child requires a special diet, you should contact the Director. A Special Dietary Requirement Form must be completed by a doctor for each child. We will work with you to try and meet your child's special dietary requirements.

## **HOLIDAYS**

The activities offered must be developmentally appropriate for the ages of the children in the program. **NOTE:** Since the children in the Child Development Program are less than five years of age and have limited ability to understand abstract concepts, such as, sharing and giving thanks, and have limited ability to differentiate fantasy from reality, there are very few aspects of the seasonal holidays that are developmentally appropriate.

Seasonal decorations must be limited to activities suitable for presentation within the curriculum. Activities may include creating decorations to limit the use of commercial decorations. Holidays will not be used as the primary activity to teach cultural diversity. Holiday activities are used as part of other activities.

Activities introducing traditions and holidays of every culture group represented in the classroom shall be planned. Staff avoids treating some holidays as regular and others as unusual. Respect for every cultural group's traditions is demonstrated throughout the activities and celebrations. Parents are encouraged to share family cultural traditions with their child's classroom throughout the year.

Staff is sensitive to families whose beliefs do not permit participation in holiday celebrations. Parents are consulted to develop alternatives for their children within the activity room. Alternative activities are planned and offered to children who do not desire participation in holiday activities.

The CDC will be closed on the following Federal Holidays:

<b>Jan</b> - New Year's Day & Martin Luther King Day	<b>Sep</b> - Labor Day
<b>Feb</b> - Presidents' Day	<b>Oct</b> - Columbus Day
<b>May</b> - Memorial Day	<b>Nov</b> - Veterans' Day & Thanksgiving Day
<b>Jul</b> - Independence Day	<b>Dec</b> - Christmas Day

If the President declares a federal holiday during the year, that day will also be observed.

#### **GOAL OR FAMILY DAY POLICY:**

Goal or PACAF Family days are earned by all personnel in the 354th Fighter Wing. The center

is closed on all Family Down Days so our staff can spend time with their families. There are no refunds for these days.

**Emergency Closure Procedures:** In the event of base closure due to inclement weather, all programs will be closed. If children are in the facilities, parents will be notified and the facility will remain open until all children are picked up.

In the event the facility is damaged or has to evacuate, children will be removed and transported to a designated safe haven IAW the Wing Disaster Preparedness Plan (in coordination with the Fire Department).

## **GUIDANCE POLICY**

The CDC provides a caring environment that encourages growth in self-control and respect for the rights of others. A child's attempts to learn, participate, and respond to people and activities in the center are respected as an important part of his/her overall development. Children are protected from hurting themselves and others. Guidance should be a process of teaching and learning which allows socialization to take place. Adults are the models for children. We practice techniques that are fair, consistent, and respectful of children and their needs on a case by case basis. In this way, a child will know the importance of similar behavior in his/her own life.

### **The following children's behavior is considered inappropriate in the child and youth programs and may result in exclusion from program:**

- Intentionally causing physical harm to another child or adult by hitting, biting, kicking, throwing, or any other physical action.
- Use of inappropriate language, spitting, and other forms of verbal abuse or degradation by children directed at other children or adults.
- Repeated refusal by a child to comply with center or classroom rules and/or failure to listen to caregivers.
- Behavior that is potentially harmful to themselves or others.

### **Acceptable guidance techniques include:**

- Redirecting the child to another activity.
- Planning ahead to prevent problems.
- Encouraging appropriate behavior.
- Having consistent, clear rules that are developed in conjunction with children and discussed with them to make sure they understand.
- Describing the situation to encourage children's evaluation of the problem rather than imposing a solution.
- Applying logical and natural consequences in problem situations.

### **Unacceptable guidance techniques include:**

- Humiliating or frightening punishment is strictly forbidden. This includes physical punishment such as spanking, slapping, hitting, pinching, or shaking.
- Verbal abuse, threats, or derogatory remarks about the child or family.
- Restrictions or confinement by physical means.
- Withholding of meals/snacks to change behavior.

Occasionally, there are children who have difficulty adjusting to large groups. If group care is not conducive to your child, we may recommend a smaller setting such as a FCC home. Should a child repeatedly behave in a way that is detrimental to himself,



herself, other children, or adults, the caregiver will bring the problem to the attention of the Director or designee. At this time, parents will be contacted to discuss the problem. After documented attempts have been made to work with the child on these challenges, the Director/Flight Chief or designee may suggest professional guidance or temporary removal from the program. Example: repeated incidents of biting or any other behavior considered inappropriate in the center without any signs of progress. Parents are required to follow the center's approved guidance methods while in the center.

**NOTE:**

- When inappropriate behavior cannot be controlled, the CDC reserves the right to contact the parents immediately. This may result in immediate removal from the center.
- Parents contacted to assist staff with the behavior of their child may not discipline them inappropriately while in the CDC or on the CDC grounds. i.e. spanking, raising their voices.
- Parents not in agreement with the center's decision to have their child removed from the program may request a review using the following chain:
  - a) Chief, Airman and Family Services (Chief, A&FS Flt)
  - b) 354 FSS Panel: (Chaired by Commander FSS) consists of clinic representatives (Pediatrics and Family Advocacy), Chief A&FS, CDC Director, or their designee.
  - c) 354 MSG/CC has final decision authority (during this period of review, the child may be temporarily removed from the center, pending final decision).
  - d) If results of the review process determine that the child may return to the center, a probationary period will be established. The panel may determine that the child be temporarily removed from the center, pending final decision. The panel will then have final authority to determine continuation or removal from the program based upon the results of the probationary period.
- The CDC program has written guidance policies that all staff providers have read and signed. All violations of the guidance policy by staff are reported in writing to the Director and by the Director to the Flight Chief. Staff that violates the child guidance policy are not permitted access to children until retrained. Also, they may be assigned to a position not in child development or youth, or have their employment terminated.

Our programs strive to maintain a quality program to meet the needs of the children enrolled and provide training to staff in order for them to expand their experience and education level. One way is to utilize consultants to observe the classroom and make recommendations for improvement to the Directors. Consultants may consist of representatives from Pediatrics, Family Advocacy, Military Life Consultants (MFLC) or outside experts. This may be accomplished using the following:

- a) Individual Centered Consultation -working with the teacher to develop a plan that will enable the teacher to better respond to particular individual s in the classroom environment for smoother transitions between activities, reduce potential situations that may cause stress between children and help orchestrate the curriculum delivery. Parents will be invited to be part of this process and an Individual Education Plan (IEP) would be developed and used by the teacher.
- b) Teacher centered consultation -working with a teacher to enhance their performance in delivering services to a particular individual or group. The focus is on the teacher's skills, knowledge, ability and/or objectivity. This will better prepare the teacher to meet special needs of children within a particular child care environment.
- c) Program Centered Administrative Consultation-working with the Director and Training & Curriculum Specialist to resolve problems related to an existing program.

**Note:** Parental consent for the use of consultants in the CDC program will be annotated on the annual contracts.

## **TOUCH POLICY**

Positive physical contact is a significant part of the CDC's approach to child care. Positive physical contact is essential to a child's emotional/social growth. Warm, positive adult relationships help children develop a sense of trust and security in the world and directly affect children's self-esteem. Appropriate touching is touching that creates a positive emotional/social growth in the child and affects the safety and well-being of the child (i.e. holding the child's hand while crossing the street, holding the child gently but firmly during temper tantrums). Appropriate touching includes hugs, lap sitting, reassuring touches on the shoulder or hand and naptime back rubs for a tense child.

Inappropriate touching is touching that creates an improper/negative emotional effect on the child and is a touching that violates the law and societal norms. Inappropriate touching may involve coercion or other forms of exploitation of a child solely for the satisfaction of adult needs or attempts to change a child's behavior with adult physical force, often applied in anger and physically striking a child to solve a problem. Inappropriate touching includes forced kissing, corporal punishment, slapping, pinching or striking, prolonged tickling, fondling or molestation. Staff members are trained on appropriate touch policies. Adults engaging in inappropriate touching are reported to the Family Advocacy Office for investigation and are removed from working with children until an investigation clears staff of any misconduct.

## **CHILD ABUSE PREVENTION PROGRAM**

The child and youth programs have taken steps to protect children from abuse and neglect and to support children, parents, staff and providers. The Air Force ensures protection through the following policies:

If you or anyone else, suspects child abuse or neglect in any way, in any Family Member Programs Flight program, report it immediately to the Director/Supervisor. All suspected cases of child abuse and neglect are reported to the Family Advocacy Office at 377-4041/4042, the Safety Office at 377-4263 and Head Quarters Child Development Project Officers within 24 hours of the incident.

There is a DoD Child Abuse and Safety Hotline for individuals to report suspected child abuse or safety violations at military CDC, YC, or FCC homes. The hotline is housed in the Office of the Deputy Assistant Secretary of Defense (Family Support, Education, and Safety), office of the Family Policy and Support, or call 1-877-790-1197.

It is recommended to use the local reporting procedures (Family Advocacy, Director, etc.) prior to using the DoD hotline.

The entire child and youth staffs are trained in identification of child abuse and procedures to be followed in reporting suspected cases, they are mandated reporters. The following precautions are taken to minimize the potential for child abuse to occur:

- All volunteers and visitors (such as guests, base support personnel) are required to sign in and out when entering the facility.
- No staff member or volunteer may take a child from the center unless it is for emergency medical treatment or as part of a group activity such as a field trip with the parent or guardian written permission.
- All visitors are escorted while visiting the building or program.
- Friends or family members of staff may not be present in activity rooms or staff-break room unless approved as volunteers (regular volunteers may not work at the center until

local background checks are completed and they have completed mandated child abuse and child guidance training) by the Director and their participation noted in advance.

- Night care at the CDC will be scheduled near the main entrance for ease in supervision.
- All personnel in the child and youth programs undergo background checks which review the past five years of the potential employee's file. This helps ensure that the applicant is free of any incidents or characteristics that would indicate that the applicant would not be suitable to work with children. The screening would detect incidents of child abuse and/or neglect, violence in the household, drug dependency, and other similar characteristics of non-suitability. Personnel also receive a National Agency Check that screens them for criminal activity for the past seven years.

## **INSPECTIONS**

The Military Child Care Act of 1989 and current DoD and Air Force policy require four (4) unannounced inspections of Child Development Programs (CDC, SA, Youth & FCC) per year. These include comprehensive fire, safety, & health, multi-disciplinary and higher headquarters inspections. The multi-disciplinary team includes individuals with expertise in each of the areas of the standards and parents from all programs offered. Facilities are certified by the Air Force Civil Engineering and Safety Agency (AFCESA) to ensure they are compliant with all federal requirements for child care use. Additionally, we have frequent inspections from military public health, fire, and safety throughout the year. Task-certified individuals at the centers accomplish daily/monthly health, safety, and playground inspections. The Flight Chief makes regular checks on all programs, activities, personnel, and equipment. These inspections ensure the program's high quality of care is maintained.

## **STAFF REQUIREMENTS**

The key to maintaining excellence in the child and youth programs staffing these programs with well trained personnel. These professionals are dedicated to the well-being of your child. They must pass a physical, receive a food handler certification, and undergo an Installation Records Check through Security Forces and a National Agency Check. Before any new employee is allowed to work with children they must participate in a briefing that includes safety and emergency procedures, sanitation and health practices, and positive guidance techniques. The new employee is then assigned to work with an experienced caregiver in each age group. When the background checks are returned, the new caregiver may be given the responsibility for a group of children.

Staff training at CDC is an on-going process. The Air Force has developed 15 comprehensive, and developmentally appropriate, modules for CDC staff to enhance the caregivers' skills and ensure competency with specific ages. The 15 primary titles of the Program Assistant Certification Training (PACT) modules include: module information is tailored for the caregivers work environment ex: infant, toddler, family setting, and school age etc.

- |  |   |
|--|---|
| 1. Keeping Children Safe               | 10. Providing Positive Guidance         |
| 2. Promoting Good Health and Nutrition | 11. Working with Families               |
| 3. Environments for Learning           | 12. Being an Effective Manager          |
| 4. Promoting Physical Development      | 13. Commitment to Professionalism       |
| 5. Promoting Cognitive Development     | 14. Identifying & Reporting Child Abuse |
| 6. Promoting Communication             | 14. Identifying & Reporting Child Abuse |
| 7. Promoting Creativity                |   |
| 8. Building Children's Self-Esteem     | 15. Preventing & Responding to Abuse    |
| 9. Promoting Social Development        |   |

Some CDC staff members have also achieved the Child Development Associate (CDA) credential. The CDA credential certifies the caregivers' training and demonstrated skill in child/youth development. Additionally, the staff participates in training each month that is focused on child growth and development, classroom management, curriculum planning, or professional and personal development. The Director, Training and Curriculum Specialist, outside resource persons, or staff members who have a particular area of expertise conduct these training sessions. The staff is also trained in First Aid and CPR (CDC are required to have pediatric first aid).

## **PARENTS CAN HELP TOO!**

Communication between parents and the staff enhances the care of your child. It's important that you give the desk clerk and/or the caregivers as much information about your child as possible. Any suggestions or concerns should be brought immediately to the attention of the Director.

Parents are welcome and encouraged to visit and participate in the classroom activities and special events at any time during the operational hours. Information on upcoming events is posted at the front desk, parent bulletin board, and in the classroom. With an email address on record, information can be sent to parents.

If you think separation might be difficult for your child, we recommend that you visit with your child on several occasions before you leave your child with us. Then, if possible, plan to leave your child for only short periods of time. All children are anxious when they are separated from their parents. It's important to make that separation as pleasant as possible for your child. Let's work together to make this a positive experience!

Get to know the people who care for your child. Let the caregiver know about such things as a toy, illness, visiting relatives, or other events that might affect your child's behavior. Find out what your child did during the day and let your child introduce you to favorite playmates or show you favorite learning areas or centers.

A daily schedule is posted in each CDC. In addition, a detailed plan of the week's activities is prepared for each classroom. The plan is used by the caregivers to ensure the children have a variety of rich experiences. We encourage you to read the plan, be aware of the things your child is doing and talk about them at home. This will help reinforce your child's learning and make the adjustment from your home to the program easier for your child.

Your child should be dressed in play clothes. Although the children wear smocks for the messier projects, spots of paint or other stains may appear on clothes. Children are often upset if their clothes are wet or soiled in an accident, during mealtime, water play, etc. An extra set of clothing should be brought for your child. The center is not responsible for lost or damaged clothing.

### **Remember: Play *IS* a Child's Work.**

All clothing should be easy for your child to put on or take off with minimal help. This encourages your child to develop feelings of confidence and independence. Older children should be able to take care of their own toilet needs without depending on the staff to undo pins, difficult fasteners, or suspenders. All CDC children, excluding infants, must wear shoes (sneakers or closed-toed shoes. **(No sandals, jelly shoes, or flip-flop types of footwear are permitted, exception: water/pool activities)**). This is a safety precaution in order to help prevent stubbing of toes on learning center materials used on the floor, and in the event of

emergency evacuation of the building.

Remember to label everything brought into the center. We make every effort to keep a child's belongings together, but sometimes items are misplaced or given to the wrong child. Children or caregivers may inadvertently place belongings in the wrong bag or cubby. If the child's name is permanently marked on each article, items can be found more readily and returned to the owner.

Only disposable diapers are used in the center. Please bring plenty! If your child is being potty-trained, several changes of training pants, plastic pants, pull-ups and clothing should be included in their bag.

We understand that for some children, a "security" possession (special blanket or stuffed toy) may be needed during rest periods. If your child needs such a possession, please be sure to clearly label the item with your child's name. We do not assume responsibility for the loss of any personal item.

We have a **Lost and Found** box where all unclaimed items are placed. Please check for missing items periodically. As a rule, we try to clear this box once a week. Items, which appear to be of some value, will be left in the box for an additional week. All other items not claimed will be appropriately donated.

Please check with your child teacher or check your child's cubby each day to see if there is any correspondence, art projects or soiled clothes to take home. These projects are important to your child's development. Take the time to look at and discuss the projects with your child. Try to understand the effort involved, not just the end result. The process involved in doing the project is more important than the finished product.

Parent conferences are held at least annually to discuss your child's progress and challenges. During this time, parents and staff establish goals for each child. Anytime you would like an additional conference, contact your child's caregiver. If parents decline, they will be asked for a written statement that they declined the conference.

The Training and Curriculum Specialist (T&C) provides various training throughout the month. Parents and other primary caregivers are welcome to attend any of these training sessions. Contact the CDC Director for dates, times and locations.

Field trips are an integral part of our programs for children 3 years old and up. The children may be taken to different facilities on base, such as a nature walk, the Bowling Center, Fitness Center, Pool, Library/Community Center, or off base to an event in town. Parents are responsible for signing the permission slips that allow their children to attend the trips. Keep in mind that parents and volunteers are always welcome to assist the center staff on these trips.

IAW Air Force policy, No Smoking (please extinguish all smoking material before arriving at the centers/sports fields), use of alcohol, or illegal drugs is not allowed in or around facilities used for child care or around youth sports fields. For the safety of children, parents under the influence of drugs/alcohol will require an individual to assist them if driving. Security Forces may be called for assistance.

For the safety of the children, we would encourage parents not leave children under the age of

10 in the car while retrieving children from the CDC programs. Consider turning off the vehicle engine. Vehicles have been known to engage and could do damage to the facility and place children in harm's way.

## **PARENT ADVISORY BOARD**

The A&FS Flt has a Parent Advisory Board, which is composed of parents of children attending the various programs. The Board encourages active parent participation, supports parent education and serves as an advocate for children. The purpose of this Board is to increase parent involvement in the CDC programs. When parents are involved in the program in meaningful ways, everyone benefits. Parents feel that they are a part of the program and learn about the program and the staff's goals, which will help them extend and reinforce learning at home. Caregivers benefit when parents share their knowledge about their children and contribute to the program by donating their time and resources to enrich the curriculum. Children benefit the most when the significant adults in their lives are working together to give them the support and guidance they need to grow and develop. Trust in their center's environment is more easily established when children see that their two worlds are linked closely together.

The Board meets quarterly. Watch for notices. You can be involved in the program in many ways. You can share a particular interest, skill or even an aspect of your cultural heritage. You can plan and implement a special cooking, science, art, or other activity with the children. You can also come in and read a story to the children or you can offer support to the caregiver by helping prepare materials. Parents are welcomed in the programs at any time.

This Parent Handbook is the primary guide for parent information for our child and youth programs. Program Directors may supplement this handbook to provide more specific information on the various programs within their centers that may occur throughout the year. Any additional information requiring changes will be made by policy letter and incorporated in the parent handbook revision next year.

## **Listing of Key Personnel:**

### **CHIEF, AIRMAN AND FAMILY SERVICES**

Mrs. Charlotte Lewis  
Amber Hall Room 362  
Mon-Fri 0830-1730  
Office: 377-1582; Cell: 388-3228

### **CHILD DEVELOPMENT CENTER**

Director: Mrs. Jo Bolish  
Assistant Director: Ms. Rebecca Crusselle  
BLDG 5182  
Mon-Fri 0630-1800  
Nights and Saturdays as scheduled  
Exercises -As Directed  
377-3237

### **SCHOOL AGE PROGRAMS**

School Age Coordinator: Mrs. Tara Rollins  
BLDG 3303  
Mon-Fri 0630-1800  
Exercises - As Directed  
377-5437

### **YOUTH CENTER**

Director: Mrs. Danielle Petty  
Bldg. 5313  
Mon-Fri 1000-1900  
Sat 1300-1900  
Teen Break -BLDG 3300  
Fri & Sat 1900-2300

### **FAMILY CHILD CARE**

Family Child Care Coordinator: Mrs. Malia St. Andre  
BLDG 2555  
377-3635 (voicemail)  
Fri 0800-1700  
(Individual homes set their own hours)

CDC, SA YP, and FCC Offices are CLOSED on all Federal Holidays.

All Directors and SA/FCC Coordinators have an open door policy for parents and staff to express concerns or suggestions at any time.

## **Community Resources**

Air Force Family Advocacy Program (FAP)  
377-4041/4042

Child Find  
Child Find Coordinator: Janice Cleworth  
452-2000 ext. 11445  
[www.k12northstar.org](http://www.k12northstar.org)

ThrivAlaska  
452-4267 ext. 235 or 260  
[www.thrivalaksa.com](http://www.thrivalaksa.com)

Military Family Life Consultants (MFLCs)  
240-0635  
687-3546

Resource Center for Parents and Children (RCPC)  
456-9002

Northwest Resource Associates  
800-478-7307  
[acrf@nwresource.org](mailto:acrf@nwresource.org)

Alaska Department of Education & Early Development  
465-2800  
[www.eed.state.ak.us](http://www.eed.state.ak.us)