Dear Families:

Welcome to the Child and Youth Program, part of the Family Care Program housed within the Marine and Family Programs Division of Marine Corps Community Services, Lejeune-New River. Our child development centers and school age care facilities are designed to meet the needs of military connected families, and the United States Marine Corps is committed to providing high quality child care that allows parents to fully focus on their mission. We provide children with positive experiences in stimulating environments, and our caring professionals promote optimal development of children through engaging interactions and facilitation of play. Please read through our policies to learn more about our program, what to expect, and what our expectations are for daily practices in our facilities.

CYP encompasses care for children ages six weeks through twelve years of age. Children with a military or Department of Defense sponsor are eligible for our programs. These programs include: resource and referral services, center-based full-time child care, center-based part-time child care, center-based hourly child care, before and after school care, summer camp and out-of-school time care for school age children, child care in certified Family Child Care Homes, emergency child care, child care for deployment related briefs, and child care for unit-funded special events.

We welcome and encourage family involvement through our Parent Advisory Committees and Parent Participation Program. We also have an "open door" policy and invite you to visit your child’s classroom or program at any time.

We are here to serve you. We designed our programs to meet the child care needs of the military community, and we are always interested in parent suggestions for improving or refining our services.

Thank you for choosing MCCS Lejeune-New River’s CYP to meet your family’s child care needs!

Sincerely,

Your Family Care Program Manager
MISSION STATEMENT
Lejeune-New River Child and Youth Program (CYP) supports military readiness by contributing to the well-being of families with children through quality, affordable child care in center and home-based settings. Full-day programs are designed to meet the needs of working parents. Part-day preschool programs, parent education, child care for unit functions and special events, weekday hourly care, and emergency care services are available to meet the varying needs of a diverse military population. All programs are inclusive, developmentally appropriate and designed to provide for the social, emotional, physical, intellectual and cognitive growth of children regardless of age.

CHILD AND YOUTH PROGRAM POINTS OF CONTACT:
CYP Resource & Referral Office.................................................................450-0553/54/55
Family Child Care Office.................................................................449-9882/9587
Brewster Child Development Center.................................................450-8467
Courthouse Bay Child Development Center.................................440-6228/29/30
Tarawa Terrace I Child Development Center.................................450-1646/1648
Tarawa Terrace II Child Development Center.................................450-0545/0546
Heroes Manor I Child Development Center.................................450-4078/4089
Heroes Manor II Child Development Center.................................450-4119/4120
New River Child Development Center (and School Age Care)...........449-6712/13
Stone Street Youth Pavilion.................................................................450-8674
Tarawa Terrace Youth Pavilion..........................................................450-1422
Child and Adult Care Food Program.................................................449-9585/86/20
Family Care Program Office.................................................................449-9583
CHILD & YOUTH PROGRAM PHILOSOPHY

The Child and Youth Program (CYP) is fully committed to providing the highest level of quality child care and recreational activities for children ages 6 weeks to 12 years of age. CYP strongly believes quality programs promote a safe and nurturing environment that enhances the social, emotional, physical, intellectual and cognitive development of all participants while responding to the diverse needs of the military and DOD families in our community. CYP continually strives to meet and maintain the standards and practices set forth by the National Association of Education of Young Children (NAEYC) and the Council on Accreditation. CYP promotes the belief that all children are winners, all children can learn, and self-esteem and respect for others is continually fostered.

PROGRAM STATEMENTS

CHILDREN SIX WEEKS THROUGH 5 YEARS OF AGE:

Children’s learning occurs through experiences and interactions with the world around them. The early years are truly learning years. Every moment is an opportunity to learn, to practice social skills, and to gain knowledge about the world. The early years lay the 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 Early Learning Matters, developed for the Department of Defense by Purdue University as the basis for activity planning. Activity plans are posted in each child’s classroom and are readily available on-site for parents to see. If you would like a copy, please speak directly to your child’s teacher.

Our program is child initiated and teacher supported, with an emphasis on active participation through individual and small group learning experiences. Classrooms support inclusion for children. Environmental accommodations, materials, and equipment are adjusted to support and maximize learning opportunities for all. Multicultural and non-sexist materials and experiences are available for children of all ages.

It has long been known that children’s learning is the most meaningful when their play is self-directed. Child Development Center (CDC) classroom staff and Family Child Care (FCC) Providers offer activity centers / learning areas that allow children the opportunity to explore, create, imagine and experience their environment. Teachers 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.

SCHOOL AGE CHILD CARE:

The Youth Pavilions (offering school age care) promote a safe place for children. Programs are designed to provide leisure activities for school age children in kindergarten to 12 years of age. Crafts, games, food experiences, homework assistance, and field trips are regular activities your child will encounter. All programming is developed with consideration of the desires of the participants and with respect to the cultural diversity and the familial values of each member. We are an affiliate of the Boys and Girls Club of America.

Patterned after the successful Conscious Discipline model, the Youth Pavilions utilize an emotional intelligence program consisting of strategies for responding rather than reacting to life events. Through
responding, conflict moments are transformed into cooperative learning opportunities. This research-based program will increase academic achievement, decrease problem behaviors, and improve the quality of relationships with students, teachers, parents, and coworkers.

DESCRIPTION OF SERVICES

CENTRAL REGISTRATION. Patrons desiring to use full-day child care, Family Child Care, School-Age Care program, hourly care or part-day programs must create an account and request care at www.militarychildcare.com. Once an offer for care is accepted, registration can be completed at the CYP Resource and Referral Office located in the Tarawa Terrace housing area, bldg. 2455H, Iwo Jima Blvd. Registration is renewed annually and is free of charge.

FAMILY CHILD CARE. Family Child Care (FCC) providers are authorized by the Commanding General to care for children in privatized military housing quarters after completing a number of program compliance requirements. Each FCC home is a small business operated by the spouse of a military service member. Referrals and information on becoming a Family Child Care Provider may be obtained from the Resource and Referral Office.

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. Communication between families, teachers and staff is vital to the well-being of your child. Exceptions to this policy may be enacted to limit visitation at the direction of public health officials during wide spread illness outbreak or pandemic.

OVERSIGHT. CYP is governed by Marine Corps Order 1710, various health, sanitation, safety, and fire regulations, and food service guidelines provided by the USDA Child and Adult Care Food Program. Camp Lejeune Fire Department, the Preventive Medicine Unit, Naval Hospital Camp Lejeune and trained safety personnel inspect all programs monthly. CYP is subject to annual comprehensive, unannounced inspections each year, including by a multi-disciplinary team. Additionally, an unannounced DOD inspection may be conducted at any time.

PARENT ORIENTATIONS/TOURS. Prospective patrons may visit any CYP when escorted by center personnel. Escorts are necessary to ensure protection for the children enrolled in the programs. All families who accept a space in our child development programs are encouraged to phone their center directly to schedule an appointment to meet with their child’s teacher. 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. Translation services for CYP program orientation, tours, and curriculum are available for our families upon request.

RESOURCE & REFERRAL. The Resource and Referral (R&R) Office provides child care information, referrals, and assistance in locating appropriate, affordable and accessible child care to military personnel and DoD employees. R&R may provide information regarding off-base child care availability. For more information on CYP or for placement of your child(ren), call Resource & Referral at 450-0553/54/55, or visit their office in the Tarawa Terrace housing area, Bldg. 2455H, Iwo Jima Blvd.

EMERGENCY CARE. Emergency child care services are available free of charge to families in crisis when there is no one to assist with child care, generally during periods of deployment for the military
spouse. Care is provided in an authorized Family Child Care home. Emergency care is available 24 hours a day and usually is for a short period of time to meet an immediate child care need. At least one of the following criteria for eligibility must be met:

- Medical emergencies
- Incapacitation of family member
- Recuperation from illness
- Hospitalization or surgery of service member or spouse
- Attendance at counseling sessions, Marriage Enrichment or Parenting workshops
- Severe emotional pressure diagnosed by a mental health care provider

Eligible patrons must contact their Deployment Readiness Coordinator, Unit Commander, Naval Hospital Social Worker, or New Parent Support Program Nurse/Social Worker. These persons will then contact the Family Care Program Manager or MCB/MCAS Command Duty Officer to request approval for emergency child care.

SPECIAL EVENTS CARE. Units aboard Camp Lejeune or New River Air Station may request child care services for special events. For events held in the evening, meals are not provided. Parents are encouraged to bring a snack for their child(ren). All peanut products are prohibited in the centers. Contact the Family Care Program Administrative Assistant at 449-9583 for more information. Special event care may not be available during elevated health protection conditions.

SPECIAL NEEDS. CYP promotes the placement of children with special needs in an age-appropriate, least restrictive environment for child care purposes. In accordance with the Americans with Disabilities Act of 1990, CYP successfully provides limited special needs care and accommodations for children within a fully inclusive program. Knowledge previously gained from these experiences indicates the following special needs care requests will not require an evaluation by the Inclusion Action Team (IAT) or Accommodations Care Team (ACT):

- Diet: i.e. vegetarian, food allergies and restrictions due to religious observations.
- Medication administration: i.e. asthma, eczema, oral and topical medications and antibiotics.
- Physical challenges requiring appliances or building modifications: i.e. wheelchairs, crutches and entrance/exit ramps.

Placement of children with other special medical or emotional needs may be delayed until the IAT meets. The IAT meets monthly, or more often, as needed. Informal meetings may occur in between formal meetings. Families are required to provide evidence of enrollment in the Exceptional Family Member Program and a physician's statement specifying the child's special need(s) and coordinated treatment strategy, and an IFSP or IEP developed by personnel familiar with the child. Families are encouraged to participate in the IAT meeting.

CHILD DEVELOPMENT CENTERS & SCHOOL AGE CARE SITES

CAPACITY OF CLASSROOMS. Each classroom/group has been evaluated to ensure capacity is appropriate given the size of the space. Per the American Academy of Pediatrics, cribs and cots will be placed at least 3 feet apart, and children will be placed in an alternating head to toe pattern to maximize space between children.

While square footage of classrooms varies, generally, classroom sizes generally serve the following:
<table>
<thead>
<tr>
<th>Age Group</th>
<th>Classroom capacity (may vary based on actual square footage)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants</td>
<td>6-8</td>
</tr>
<tr>
<td>Pre-toddlers</td>
<td>7-9</td>
</tr>
<tr>
<td>Toddlers</td>
<td>10-12</td>
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<tr>
<td>Threeschool</td>
<td>12-14</td>
</tr>
<tr>
<td>Preschool</td>
<td>16-18</td>
</tr>
<tr>
<td>School Age</td>
<td>15-30</td>
</tr>
</tbody>
</table>

HOURS OF OPERATION may be impacted during elevated health protection conditions to allow for consistent staffing with each classroom of children from open to close, thus reducing the number of adults who will need to work in each classroom across the operational day. At least 50 hours of child care will be offered each week (excluding holidays), with additional care designed to meet the needs of military-connected families. Hours of operation may be changed as conditions require or permit. Hours of operation are currently 0615 - 1715, Monday-Friday, excluding federal holidays, the day after Thanksgiving, and the day before or after Christmas (the day will vary to match the days allowed for the military liberty period), and any other days determined by the Commanding General. Facilities may also close for emergencies or inclement weather.

HOURLY CARE is available at all Child Development Centers on a space available basis. Child care fees are paid for amount of time reserved regardless of whether the entire reserved time is used. Hourly care may be suspended during elevated health protection conditions or when space is not available due to waiting lists for full-time child care.

FACILITIES

Brewster CDC  
Courthouse Bay CDC  
Heroes Manor I CDC  
Heroes Manor II CDC  
New River CDC/School Age Care (SAC)  
Tarawa Terrace I CDC  
Tarawa Terrace II CDC  
School-Age Care (SAC)  
Stone Street Youth Pavilion  
Tarawa Terrace Youth Pavilion

ELIGIBILITY. Services are available to all children six weeks through 12 years of age of military and Department of Defense civilian personnel, reservists on active duty or during inactive personnel training, retirees, and DoD contractors. Patrons must show a valid ID card upon registration. Some categories of patrons (such as retirees and DoD contractors) are not eligible for child care subsidies to offset fees.
REQUESTS FOR CARE. All DoD CYP utilize an internet-based service, MilitaryChildcare.com to accept and process requests for child care services. Navigate online to www.militarychildcare.com, create an account and place a request for care for the location(s) you wish to access. Offers of child care spaces will be made according to date the request was made and the priority placement criteria set forth by the Department of Defense. Your offer for child care will be emailed to the address you provided to militarychildcare.com. It will be important to check your email account regularly for emails from an MCC address or from a Resource and Referral employee. Families may be offered a space at an alternative location if the preferred location is not available. Families who accept care at an alternative location can remain on the waiting list for their preferred location.

The following documents are required for enrollment:
- Updated immunization records per child
- Sponsor's current LES/pay stub
- Family member's current LES/pay stub, or college schedule
- Power of Attorney (if military spouse is deployed)
- Single parents must submit NAVMC10922 (Application for BAQ) or a copy of the data page from the Marine Corps Total Force System (MCTFS)

NOTE: Either parent may register child(ren), however, SPONSOR must sign forms in the CYP office to complete registration, or a Power of Attorney must be presented.

ADMISSION CRITERIA. The following registration requirements must be met before a child can be admitted to a CYP program:
- Complete the Health Assessment signed by a physician/health care provider.
- Provide proof of up-to-date immunizations
- Sign the payment policy*
- Provide current LES/pay stub or college schedule for both the sponsor and family member; failure to provide this information will result in fees being assigned at the maximum level*
- Complete the Emergency Contact Information sheet; families must designate at least two other persons who may pick up their child in case of an emergency. (Department of Social Services will be notified should the family members be unable to pick up the child and no escort is designated.)
- Single parents must submit NAVMC 10922 (Application for BAQ) or a copy of the data page from the Marine Corps Total Force System (MCTFS)*
- Complete a Child and Adult Care Food Program Eligibility Application Form.
*Criteria does not apply to enrollments for hourly care services only.

When offered a full-time or part-time space at a child development center or School Age Care program, a $25.00 non-refundable deposit must be made within 48 hours if a family accepts care. The deposit will be deducted from the first payment. Fees must be paid prior to services being provided. When enrollment begins or ends within a pay period, fees will be prorated. Fees are due on the first day of attendance, regardless of the start date.

CYMS Card: Issue and Replacement Policies. Upon completing registration with the Resource and Referral office, families will receive two cards or key fobs at no cost. Family members must have their card/fob at all times to swipe in/out when using CYP services. If the card/fob needs to be replaced (due to loss or damage) there will be a $5.00 charge for replacement. Replacement cards/fobs may also be required if families fail to check their child in with a card more than twice.
WAITING LIST. When the CDC’s full-time child care spaces or the SAC spaces are at maximum capacity, your child(ren) may be placed on the waiting list after making a request for care on militarychild care.com. Spaces will be offered according to DoD priority placements guidelines.

PRIORITY PLACEMENT. Lejeune-New River Child and Youth Program (CYP) follows the Office of the Secretary of Defense’s Priority Placement criteria in placement decisions. Children in care may lose a spot to others on the waiting list in a higher priority category. Impacted families will receive at least 45 days’ notice prior to being supplanted.

When a space can be offered, an email will be sent to the address used when the militarychild care.com account was created. If the offer for care is not accepted within two business days, the request for care expires, and a new request may be made, if needed. Upon accepting the space offered, registration for care is completed in the Resource and Referral office or via email. Families with an expired offer for care who are still in need of care are encouraged to immediately contact Resource and Referral regarding the expired offer to request reactivation of the offer. Resource and Referral attempts to contact families by phone in addition to email when offers are made. Families on the waiting list may contact Resource and Referral for updates regarding waiting list status.

Families offered care in a facility other than their preferred facility (Alternative viable option) may remain on the waiting list for the facility of their preference.

Families may request care in advance of needing care by signifying “date care needed” when making the request. Families must update their request and respond to emails from militarychild care.com to keep their request active.

Expectant parents may request care for their unborn child by utilizing the “date care needed” feature on militarychild care.com. It is recommended that families who will need child care for their infant make a request for care as soon as reasonably possible.

ESTABLISHING FEE LEVELS. There are more than a dozen income levels used to determine fees for DoD child care based upon total family income as mandated by The Military Child Care Act, Public Law 101-189. Patrons must provide a current LES and/or pay stubs for use in computing the total family income. Failure to provide this information will result in removal from the program, as income information (even for high level incomes) is used to verify program eligibility and priority placement status. A current fee scale is available through the Resource and Referral office.

In order to provide consistency in programming among all of our activities, a "family" is defined as the following, "a group of related or non-related individuals, who are not residents of an institution or boarding house, but who are living as one economic unit."

There is an annual across the board fee change mandated by the Department of Defense (DOD). Total Family Income must be verified annually.

CHILD DEVELOPMENT & SCHOOL AGE CHILDREN PROGRAM POLICIES

ORGANIZATIONAL STRUCTURE. Any concerns or problems should be brought to our attention immediately. We adhere to the philosophy that problems should be resolved at the lowest level possible. Our organizational structure is as follows:
Chain of Command for Child Development Centers and Youth Pavilions

Program Assistant (signified by classroom staff wearing red or blue shirts)
Program Leader (signified by classroom staff wearing a black shirt)
Assistant Director
Director
Deputy Administrator, Child and Youth Program
Family Care Program Manager
Deputy Director, Marine and Family Programs Division
Director, Marine and Family Programs Division
Deputy Assistant Chief of Staff, Marine Corps Community Services
Assistant Chief of Staff, Marine Corps Community Services

* Facilities also employ support staff, including Custodians, Food Service Workers, Office Automation Clerks, Training and Curriculum Specialists, Community Health Nurses, and Behavior Specialists

Family Child Care Program

Family Child Care Manager
Training and Curriculum Coordinator
Family Care Program Manager
Deputy Director Marine and Family Programs
Director, Marine and Family Programs
Deputy Assistant Chief of Staff, Marine Corps Community Services
Assistant Chief of Staff, Marine Corps Community Services

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

<table>
<thead>
<tr>
<th>AGES</th>
<th>STAFF</th>
<th>CHILDREN</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 WKS - 12 MOS (Infants)</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>13 MOS - 24 MOS (Pretoddlers)</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>25 MOS - 36 MOS (Toddlers)</td>
<td>1</td>
<td>7</td>
</tr>
<tr>
<td>37 MOS - 5 YRS (Preschoolers)</td>
<td>1</td>
<td>12</td>
</tr>
<tr>
<td>Kindergarten through 12 Years)</td>
<td>1</td>
<td>15</td>
</tr>
</tbody>
</table>

Family Child Care Ratios allow 6 children at a time in each FCC Home with no more than 2 children under the age of 2 years. Providers must include their own children in the ratio if the children are under 8 years of age. An Infant only FCC Home may care for 3 children 6 weeks to 2 years of age only.

FEES.

- CDC/SAC fees are collected on the 1st and 15th of each month. When the CDC/SAC is closed, fees will be due on the following open day. All fees are payable in advance. Payment by phone is available for parents on leave or unable to visit the centers on payment due date. A $5.00 per day late payment fee will be assessed for payment not received on the due date. Additionally, failure to pay required fees could result in disenrollment of your child.
- To remain enrolled, payment must be made even when your child is absent due to illness, vacation, etc. Parents: YOU ARE STRONGLY ENCOURAGED TO NOTIFY THE CDC WHEN YOUR CHILD IS ABSENT. This will allow the CDC Director to determine if disenrollment is necessary.
• Patrons with verifiable emergency leave may be eligible for a waiver of fees for up to 30 days. Submit your request with a copy of emergency leave papers to your CDC Director. Upon approval from the Family Care Program Manager, your account will be credited.

• Fees are based on an average cost of program operations for one year. Fees will not be pro-rated for holidays, base closure, or emergencies.

• For a review of your fee level assignment due to a permanent change in family income, contact the Resource & Referral Office for information regarding the request process. Once all documentation is received by the R&R Office, it will be reviewed and a decision to grant or deny a reduction in fees. Parents will be promptly notified of the decision. As per instructions received from the Commandant of the Marine Corps, military installations are not obligated to adjust fees during the year as a result of changes in individual family income.

• A late pick-up fee is assessed when children are picked up after closing time. Every effort will be made by the staff to contact the parent(s) and the emergency contacts noted for the child. Appropriate agencies will be called in the event a child is not picked up within 1 hour of closing and no notice is given from family members.

• Family Child Care Providers are independent operators of their business and allowed to set fees individually. A signed payment policy is completed between the FCC Provider and the patron. The Family Child Care Office does not become involved in disputed payments between FCC Providers and patrons.

**DISENROLLMENT POLICY.** A two-week notice of disenrollment is required or payment is required at each CDC/SAC site. Parents must complete a disenrollment form at the front desk of your CDC or SAC site. For further information, refer to your payment policy.

**TRANSFERS BETWEEN CDCs.** Requests to move to another facility will generally be handled through militarychildcare.com to ensure fair offering of available spaces. Exceptions may be available for emergency situations or to meet the health or other needs of a currently enrolled child.

**EMERGENCY CONTACT INFORMATION.** Families are required to update their emergency contact information quarterly with the names and phone numbers of persons allowed to pick up their child. If important contact numbers change frequently, then the emergency contact information should be updated accordingly. In the event family members are unable to pick up their child and no designated escort is available, the Provost Marshal's Office will be notified to make arrangements for the child's release to the Department of Social Services. Emergency contacts should be available in the local area and available to pick up a child as needed.

**DAILY ARRIVAL AND DEPARTURE PROCEDURES (CDCs AND SAC).** Patrons must use their key fob at the CYMS swipe machine located at the front desk upon drop off and pick up. Children must be escorted to and signed in/out of their activity room. SAC staff members receiving children from the school bus will swipe school children in. Families utilizing CDCs are asked to complete the top portion of the Daily Activity Sheet designed to inform you of your child’s activities.

Persons authorized to pick up a child must be listed on the enrollment form and must present valid photo identification before a child will be released. Photo identification will be requested at the front desk upon entry to the facility and will also be requested in the child’s classroom prior to release of the child. Persons authorized to pick-up a child must be at least 16 years of age. All authorized persons presenting for pick-up who are not familiar with the center and have not regularly picked up a child will be escorted to the correct classroom by the CYP employee who checked the photo identification at the front desk and cross-referenced with the authorized pick-up list. Identification will be required for verification in the classroom prior to release of the child. When front desk and classroom staff become familiar with parents
or an authorized pick-up person, identification may only be required periodically, but the facility reserves the right to request presentation of photo identification at any time.

Please note that it is against Base regulations to park in the fire lane, and at no time should a vehicle be left with the engine running. BOP 5560.2K prohibits children age 10 and under from being left unattended in a vehicle.

**CUSTODY DISPUTES.** The center staff will not become involved in custody disputes. For the child's protection, a copy of the court order granting custody must be on file at the CDC/SAC. If the non-custodial parent attempts to take the child from the center, the Provost Marshal's Office and the admitting parent will be notified. In the event of physical force, the staff will not endanger other children or staff members to prevent the parent from taking the child from the premises. Non-custodial parents seeking information regarding the child may submit a request for information to the Assistant Chief of Staff, Manpower under the Freedom of Information Act.

**DESTRUCTIVE WEATHER.** During extreme weather conditions, all facilities will remain open until directed by the base Commanding Officer to close. During such conditions, parents should maintain close contact with the program in preparation for worsening of conditions and changes in operational status. FAMILIES MUST PROVIDE AN ACCURATE PHONE NUMBER DURING THIS TIME. ONCE THE COMMANDING OFFICER HAS DIRECTED CLOSURE, CHILDREN MUST BE PICKED UP WITHIN ONE HOUR. Parents may call the Camp Lejeune Marine Corps Base automated information system, 451-1717 option #1, option #8 to receive up-to-date information regarding the status of facilities.

**GIFTS FOR STAFF MEMBERS.** Parents may wish to give gifts to staff members for holidays, special occasions, or when the child moves. This is acceptable as long as the gift is of nominal cost. The recommended value of the gift should not exceed $10.00.

**PERSONAL BElongINGS**

**CLOTHING** Children should be dressed appropriately for active play. To prevent injuries, sandals and open-toed shoes are strongly discouraged. Rubber-soled shoes are most effective for young children when climbing on playground equipment or participating in gross motor activities. Children in Pretoddler, Toddler and Preschool classrooms must have footwear. A complete change of clothes (i.e. under-pants, socks, shorts/slacks, and shirt) for each child must be kept at the center for emergencies. Should all available clothing be soiled, the families will be contacted to bring additional clothing to the CDC. Precautions will be taken to safeguard clothing and/or personal belongings. However, we will not be responsible for lost or damaged articles. Children's names printed on the inside labels of their clothing and personal items is strongly recommended. Children will play outside every day, weather permitting. Please make sure your child has appropriate outer wear for the season.

**JEWELRY** Jewelry is discouraged for safety reasons. Jewelry includes items such as bracelets, necklaces and earrings (except for small posts for pierced ears). Jewelry is discouraged for a number of reasons. It is easily lost and particularly in infant areas can be swallowed by other infants. Under no circumstances may children wear necklaces or hoop-style earrings due to the likelihood of getting caught on playground equipment, furniture, clothing, etc. Teachers may remove jewelry that poses a hazard and return it to the parent. Children enrolled in SAC or Recreational Activities may wear jewelry as the family deems appropriate, however, precautions should be taken regarding necklaces or hoop earrings which may be caught in play equipment.
TOYS  Toys are discouraged from being brought to the CDC/SAC unless the child's teacher has requested children bring something to school. CDC staff cannot be responsible for items brought to the center. A special item (such as a blanket) may be brought for rest time.

DIAPERS  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. Families are encouraged to leave a supply of diapers and a container of wipes at the center. Teachers will notify parents of the need for additional diapers on the Daily Activity Sheet.

DEVELOPMENTAL PROGRAM

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

CYP uses The Early Learning Matters Curriculum, authored by Purdue University, to observe, assess, and plan for individual development based on the interests and needs of children. Early Learning Matters uses classroom observations and assessments performed by teachers on each child to formulate a lesson plan promoting physical, intellectual, cognitive and social growth. A balance is created to include both active and quiet activities. Outdoor experiences are planned for children of all ages as well.

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

CDC DEVELOPMENTAL ASSESSMENTS. Each child is assigned a primary teacher when he/she is enrolled in a CDC. The teacher assesses growth using a list of developmentally sequenced behaviors in four different skill areas (self & others, communication, cognitive or “thinking” skills, and motor skills). Combining knowledge of development with observations of a child's interests, the teachers develop activity plans that will promote individual growth and development. Formal Developmental Conferences are offered bi-annually to families in May and November. In addition, conferences may be also scheduled anytime at the request of the family or staff members.

CDC REST PERIODS. Rest periods are scheduled for all full-day enrolled children. Infants are allowed to establish their own sleeping patterns. All children in the pretoddler through preschool full-day classrooms will have an opportunity to rest. Children are not required to sleep, but are encouraged to rest quietly during this time. After an initial quiet time, children who do not fall asleep will be offered quiet
activities. Each child is assigned a crib or cot. Crib sheets are laundered daily; cot sheets are laundered weekly (more frequently if needed). Parents are encouraged to provide a blanket for their child's comfort. Blankets should be taken home weekly and laundered.

**OUTDOOR PLAY.** Children should be dressed appropriately for the season regarding daily outdoor play. Children will not be kept inside per request by family due to staff/child ratio requirements. Children too ill to participate in the normal daily activities should be kept at home. Outdoor play keeps children physically healthy and mentally well. When playing outdoors, children will:

- Release pent-up energy
- Develop gross motor skills
- Discover different sounds and smells etc.

During the summer months, the flag conditions as used by Marine Corps Base to determine safe training environments are also used for determining outdoor play times. During green flag conditions, all children are allowed a period of time outdoors. During yellow and red flag conditions, the Center Director will determine which age groups will be allowed outdoors and the length of time allowed. No children will be allowed to play outdoors during black flag conditions. During winter months, preschool children will be taken outdoors daily for short periods of time. Toddlers, pretoddlers, and infants will be taken outdoors based on the weather and judgment of the Center Director and teachers.

**FIELD TRIPS.** State regulations require children less than 4 years of age to be in an approved car seat. As transportation is not available to accommodate car seats, Child Development Centers do not take field trips. Teachers plan special visitors to the classroom. Families are encouraged to participate by assisting in planning or recommending particular persons or programs. Field trips are a regular part of the program for SAC and Summer Camp during regular health protection conditions. Each family is asked to sign a release of liability and permission for their child to participate in the field trips. Advance notification of a planned trip is made to all patrons.

**PETS & PLANTS.** Pets and nonpoisonous plants may be components of the child development setting. Nonpoisonous plants are grown in activity rooms and playgrounds to enhance the physical environment. Pets may reside in the activity room or be an occasional visitor. All pets must have a veterinary certification indicating they are disease-free and have current shots. Pet visits may be arranged with your child's teacher. If your child is allergic to certain animals, please list this on the enrollment form.

**BIRTHDAY AND HOLIDAY CELEBRATIONS.** Birthdays are celebrated by the teachers in each CDC/SAC. The child’s birthday is acknowledged and the teacher works with each child to ensure he/she feels honored on his/her special day. However, we do not allow parties, character visits, food or candy or other treats to be brought to the facility to celebrate a birthday. **Parents who desire to hold birthday parties must do so outside the center.** Staff will assist parents planning parties by providing names of children in the classroom and distributing invitations brought to the center. When invitations are brought to the CDC for distribution, we request that all children be given an invitation.

An array of holidays are celebrated in the CDC, including some from other countries. Parents are encouraged to participate in these holiday celebrations by engaging in special activities designed for parent-child interactions. If your child cannot participate in these events for any reason, please discuss with your facility’s director so that appropriate accomodations can be made.
TOILET LEARNING. Child Development Center staff will assist parents with toilet learning after it has been initiated in the home. The child must be able to realize the sensation of need to eliminate, have control of his/her bowels, and be able to communicate the need for toileting to the teachers. Parents should provide several complete changes of clothing. Should a child soil all his/her own clothing, parents may be notified to bring more clothing or center based donated clothing may be used when available. Teachers will encourage the child to toilet at regular intervals but will not restrain the child on the toilet. Due to sanitation requirements, the child may be placed in a diaper during nap until he/she gains bladder control during sleep. Parents who are preparing for this major milestone should contact their child's teacher and plan the transition from home to the CDC.

SELF-REGULATION. Our programs strive to practice the principles of “Conscious Discipline.” We believe that discipline is the continuous process of teaching a child to regulate their body and emotions. Our goal is to aid the child in developing a sense of self and achieving appropriate means of expression and interaction with others and the world around them. Children function best when they feel safe, nurtured, and have the power to make choices. A parent or teacher’s job is to make a child feel safe. Classrooms are designed to be safe environments, and staff are trained to recognize and respond to the needs of children. Staff utilize strategies of redirection, assisting a child to engage with an activity, toy or person, and focus on calming techniques. If a child displays consistent difficulty with maintaining regulation and control, additional resources, such as our Behavior Specialists, may engage to provide strategies to classroom staff. Behavior Specialists also involve parents, as parents have the greatest expertise about their child. CYP makes every effort to assist children in gaining self-regulation skills in a group care environment and makes referrals to additional resources as needed.

GUIDANCE TECHNIQUES. The following techniques are used to guide children in developing self-discipline and self-control.

WE DO:
1. Praise, reward and encourage.
2. Reason with and set limits for children.
3. Model appropriate behavior.
4. Modify the activity room environment in an attempt to prevent problems before they occur.
5. Listen to children.
6. Provide children alternatives to inappropriate behavior.
7. Provide the 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.

WE DO NOT:
1. Spank, shake, bite, pinch, push, pull, slap, or otherwise physically punish children.
2. Make fun of, yell at, threaten, make sarcastic remarks about, use profanity, or otherwise verbally abuse
3. Shame or punish children when toileting accidents
4. Deny food or rest as punishment.
5. Relate discipline to eating, resting, or sleeping.
7. Place children in locked rooms, closets or boxes as punishment.
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. Use a cool off period for children to regain self-control.

12. Stay consistent in our expectations while working with young children.

It is the desire of the CYP staff to provide your child with the support that is necessary to be successful in his/her classroom environment. Establishing early pro-social classroom behaviors will promote future school success. If a child becomes escalated in a manner that creates risk and jeopardizes the safety of him/herself and/or others, parents may be called to pick up the child from care for the remainder of the day. Each day is treated as a fresh start for a child, and great attention will be paid to help children remain regulated and avoid instances of escalation that are difficult to de-escalate. If a child is escalated and engaged in unsafe behavior that results in a phone call for pick-up, parents are asked to arrive as soon as possible, but within one hour of the phone call.

If a pattern of unsafe behaviors develop, families may be asked to assist the program in trying other strategies, such as moving the child to a different classroom or facility. In very rare instances, it may be determined that large group care is not a safe or appropriate setting for a child with continuous unsafe behaviors. The program and Behavior Specialist will work extensively with a family, will engage the Inclusion Action process to identify any additional accommodations that can be made, and will seek to identify a more appropriate setting in collaboration with the family. If a family chooses a different setting for a period of time while a child gains new skills in self-regulation, the family is welcome to make another request for care to return as the child develops and grows. CYP provides documentation to the chain of command if the program is unable to meet the needs of a child and needs to recommend cessation of child care.

**BITING.** Young children’s biting one another is the most common, most difficult situation in group child care, especially within the pre-toddler/toddler age group. Biting is a natural phenomenon that has little developmental significance. Children who bite at a young age are not on a path of becoming a discipline problem. Biting may be a form of communication for children with undeveloped verbal communication skills. Children may bite for any number of reasons such as teething, impulsiveness, excitement and over stimulation, or frustration. When a child begins biting behaviors, the teacher 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.** Families of children who bite will receive an incident/accident report as will the child who is injured. Families will be immediately notified if a bite requires medical attention beyond first aid treatment. 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 learn that biting hurts and that teeth are for eating food. Children who bite are redirected and provided guidance. Punishment by parents of a child who engaged in biting is not expected and is not helpful in assisting the child with gaining more appropriate skills for interacting with others.

**TOUCH POLICY.** Children need to be given affection and comfort from their teachers. The following touch policy was designed to provide this necessary contact between children and staff without unduly alarming parents or the child. Also, this policy should allow caregivers to feel relatively free of potential legal action or accusations when performing their duties.
APPROPRIATE TOUCHES ARE:

1. Hugs, reassuring touches on the shoulder, backrubs at naptime to help a restless child fall asleep.

2. Holding a child on your lap that needs comfort due to separation anxiety, illness or injury when it is desired by the child.

3. Assisting a child with toileting or diaper changing, which includes cleansing the diaper/genital areas as necessary.

4. Touches that affect the safety and well-being of a child, i.e., holding hands while crossing the street, holding a child gently but firmly during temper-tantrum to prevent self-injury or injury to others.

5. Rocking infants or holding children in a manner that recognizes the importance of physical contact to child nurturance and guidance.

INAPPROPRIATE TOUCHES ARE:

1. Forced hugs or kisses, or use of coercion or other forms of exploitation of a child's lack of knowledge.

2. Prolonged tickling; fondling or molestation.

3. Prolonged physical contact with diaper areas while providing toileting assistance or diaper changing.

4. Attempts to change behavior with adult physical force, often applied in anger.

5. Satisfaction of adult needs at a child's expense.

6. Reinforcing the concept of "striking out" in response to a problem.

7. Physical contact with intent to punish others.

CHILD HEALTH & NUTRITION

The health and well-being of all children enrolled in CYP is a priority. Every effort is made to stop the spread of communicable diseases. Families are asked to assist staff members by not placing sick children in the CDC/SAC. Families will be notified of any known communicable diseases to which children in the center have been exposed. Exclusion and readmission criteria may change at the direction of local public health officials in times of wide spread illness outbreak/pandemic.

CHILD HEALTH SCREENINGS. Staff members will observe each child upon arrival and during the day for obvious signs of illness. Children who appear to be ill will be denied admission or requested to leave the center.
Criteria for denial of services are as follows (but are not limited to):

- **Reminder:** Regardless of having met other criteria, participants **may NOT** be admitted with a fever.
- **All children/youth must be well enough to participate in daily activities.**

Criteria for exclusion from group care setting includes, but is not limited to, the following:

<table>
<thead>
<tr>
<th>EXCLUSION CRITERIA</th>
<th>READMISSION CRITERIA</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fever - under 4 months of age</strong></td>
<td>- Doctor’s note required to return for infants 2 months or less; recommended for immediate assessment by a health provider; within the hour if possible.</td>
</tr>
<tr>
<td>100.0 degrees or higher regardless of signs of illness.</td>
<td>- Infants 2-4 months do not require a doctor’s note to return AND</td>
</tr>
<tr>
<td></td>
<td>- Participant may return to care when they are fever free for 24 hours without the use of fever reducing medications, such as acetaminophen (Tylenol) or ibuprofen (Motrin/Advil).</td>
</tr>
<tr>
<td><strong>Fever - 4 months and older</strong></td>
<td>Participant may return to care when they are fever free for 24 hours without the use of fever reducing medications, such as acetaminophen (Tylenol) or ibuprofen (Motrin/Advil).</td>
</tr>
<tr>
<td>100.4 degrees or higher axillary (underarm) with symptoms of illness or behavior change.</td>
<td><strong>If a child is sent home with a fever more than once in 5 consecutive days, a doctor’s note will be required to return to care</strong></td>
</tr>
<tr>
<td><strong>Diarrhea (if any of the following exists)</strong></td>
<td>May return when frequency has returned to no more than two stools above normal and symptoms are at least as follows, prior to returning to care:</td>
</tr>
<tr>
<td>a) Loose watery stool that frequency exceeds two stools above child’s norm while in care.</td>
<td>• <strong>Diapered children:</strong> Stool is contained in diaper, even though it may remain loose/watery.</td>
</tr>
<tr>
<td>b) <strong>Diapered Children</strong>: two episodes not contained by diaper.</td>
<td>• <strong>Toilet-trained children:</strong> No longer soiling pants or clothing.</td>
</tr>
<tr>
<td>c) <strong>Toilet-trained children</strong>: Two episodes that cause soiling of pants or clothing.</td>
<td>• Diarrhea containing blood, or caused by e-coli, Shigella or Salmonella will require a note from a health care provider to return to care.</td>
</tr>
<tr>
<td>d) Any evidence of blood or mucus.</td>
<td></td>
</tr>
<tr>
<td><strong>Vomiting</strong></td>
<td>No longer vomiting, prior to returning to care, AND child is eating and drinking normally without symptoms of illness.</td>
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<tr>
<td>More than one episode in 8 hours</td>
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<tr>
<td>OR One episode associated with fever, other signs of illness, or behavior changes.</td>
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<tr>
<td><strong>Yellow/Green drainage from eyes</strong></td>
<td>• May remain in care until the end of the day (courtesy call to be made).</td>
</tr>
<tr>
<td><strong>Pinkeye/Conjunctivitis</strong></td>
<td>• Children who have pain and/or copious amounts of drainage, may be sent home prior to the end of the day.</td>
</tr>
<tr>
<td></td>
<td>• Doctor’s note may be required to return to care the following day.</td>
</tr>
<tr>
<td><strong>Rash</strong></td>
<td>• Doctor’s note required to return</td>
</tr>
<tr>
<td>• Rash with fever or behavior changes</td>
<td>• If antibiotics are prescribed, may return after treatment has been started.</td>
</tr>
<tr>
<td>• Oozing, open wounds</td>
<td></td>
</tr>
</tbody>
</table>
### EXCLUSION CRITERIA

<table>
<thead>
<tr>
<th>Illness</th>
<th>Readmission Criteria</th>
</tr>
</thead>
</table>
| Impetigo                      | • May remain in care until the end of the day (courtesy call to be made), if lesions can be covered.  
                             | • Doctor’s note required to return  
                             | • If antibiotics are prescribed, may return after treatment has been started.  
                             | • Cover lesions if possible. Lesions must remain covered until they are dry. |
| Chicken Pox                   | Return when all lesions have dried or crusted (usually about 6 days after onset of the rash) |
| Ringworm (other than scalp)   | • May remain in care until the end of the day (courtesy call to be made).  
                             | • Return when treatment is started. Cover lesions for at least the first 24 hrs.  
                             | • Doctors note is only required if the scalp is affected.                  |
| Scabies                       | Doctor’s note required to return.                                                      |
| Head lice                     | • May return after treatment.                                                          
                             | • Encourage parents to remove all nits. Some nits may be present upon return, but no live lice.  
                             | • Re-treat in 7-10 days.                                                              |
| Measles, mumps, rubella, pertussis, hepatitis A, or other contagious/vaccine preventable illnesses; to include influenza. | • CYP follows public health/preventive medicine guidelines.  
                             | • Participant may return to care when they have remained fever free for 24 hours without the aid of fever reducing medication. Participant must be well enough to participate in daily activities. |

### ILLNESS

In the event your child becomes ill while at the CDC/SAC, center personnel will contact you. We request that you immediately pick up your child. Failure to do so (within a reasonable period of time allowing for travel) may result in the Center Director contacting the Provost Marshal Office, Family Advocacy Program and Department of Social Services to report neglect. When appropriate, notification from the physician stating the child is free from communicable disease and may be readmitted to the center will be required.

### WIDESPREAD ILLNESS OUTBREAK/PANDEMIC

In the event of wide spread illness outbreak (Influenza) and/or Pandemic (COVID19), CYP will work closely with local health officials. Exclusions for illness may differ from those listed above and additional health and safety precautions will be implemented at the guidance of health officials and local medical authorities. Notification will be made to patrons regarding any changes in current practices as appropriate. ** Example SOU with COVID Related Policies.

### INJURY/INCIDENT REPORTS

NAVMC 1750/6 Incident Report Form will be used to document non-serious incidents or accidents within Child and Youth Programs. A copy of the form will be provided to the parent/guardian and a copy will retained in your child’s file at the CDC/SAC.
**MEDICAL ALLERGIES.** If your child has allergies or allergic reactions, please note this on your child's enrollment form. Parents are requested to provide a doctor's statement indicating all medical conditions that require special care with particular interest to severe allergic reactions to food, insects, latex, or other allergens that could result in the child experiencing anaphylactic shock. Failure to provide this information will absolve CYP from any and all liability and may render the staff unable to meet the child's medical needs adequately in an emergency.

**IMMUNIZATIONS.** No child may be admitted to a CDC/SAC without current immunizations as recommended by the American Academy of Pediatrics, except where religious beliefs preclude or clear medical contraindication exists. When a child cannot be immunized due to medical contraindication, parents must provide written documentation of such from the child’s attending medical care provider. When religious beliefs preclude immunization, parents must submit a notarized form. Failure to provide documentation may delay enrollment of the child or may result in the disenrollment of the child until such time as documentation is provided. Children who are not immunized may have their admission denied or delayed until all documents are reviewed by the installation medical authorities. Influenza vaccinations are required, as appropriate, for all participants attending CYP facilities during influenza season and while influenza immunizations are available in the local area and at the Naval Hospital Camp Lejeune Immunization Clinic.

**MEDICATIONS.** Specially trained CYP personnel may administer medications to children as outlined below.

Generally, medications that are given 2-3 times per day can be given at home unless the medication needs to be administered with meals, or is very time sensitive. Parents must administer new medication for the first 24 hours. This ensures that there is a positive response without negative side effects.

Over the counter medications can only be administered if they are ordered by the healthcare provider. As needed medications will not be administered with the exception of the following; Rescue inhalers, Benadryl and epipens for allergic reactions, and diastat for emergency treatment of seizures. The child’s medical care professional must provide guidance on the use of these medications (Emergency Action Plan is preferred) and orders must be renewed at least annually. CYP personnel will not administer medications via nebulizer. Parents may come to the center and administer nebulizer treatment to their child. Other medications that are routinely administered are prescription creams for eczema, diaper rash or minor skin infections, and antibiotics requiring frequent dosing. These medications must be prescribed for a specific period of time.

If there are other medications which are essential for the well-being of your child, please consult your center Nurse for the best plan of action.

In order for medication to be administered at the CDC the parent must complete the release of liability (available at your CDC/SAC) to administer medication. Medication must be in the original labeled container. The following information must be provided. This can be on the medication label or on a separate form.

1. Dose
2. Specific times that the medication should be given
3. The length of time that the medication should be administered
4. Any additional instructions
Parents can also sign the topical permission slip for non-medicated topical products such as sun screen, diaper cream, calamine lotion, eczema cream, insect repellent, and moisturizing lotion. These items need to be non-aerosol products. Products in this category should be nonprescription and have no label restrictions with respect to use in children. Powders, whether prescription or non-prescription, are not permitted.

If you have any questions about medications call the CDC and ask to speak with the nurse.

**MEAL SERVICE.** 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 provided to each family throughout the month. Meals are served during the follow times:

- **Infants:** On demand
- **Pretoddlers:** Breakfast 0815-0915; Lunch 1115-1230; Snack 1415-1530
- **Toddlers & Preschoolers:** Breakfast 0815-0915; Lunch 1115-1230; Snack 1415-1530
- **SAC:** Breakfast 0645-0845; Lunch 1045-1230; Snack 1430-1630

Children attending close to the end of the day may be offered a supplemental snack, as children in our program are to be offered food every 2-3 hours while in care.

- Children eating table food must be at the center during meal service, as food may not be held for later consumption.
- Teachers sit and eat with the children to enhance social interaction and promote healthy eating habits. Children are encouraged to sample all foods, but are not forced to eat. Children participate in table setting, serving and cleanup.
- No food or beverage may be brought to the CDC/SAC with the exception of infant formula or breast milk.
- The CDC provides a ready-to-drink infant formula to infants according to parental preference. Parents must bring enough clean, labeled bottles for children to use a new bottle at each feeding each day. Families who do not accept the selected formula for their infant may continue to provide formula or breast milk. All formula or breast milk should be brought daily to the CDC in plastic bottles labeled with the child's name and date the bottle was prepared. Infants may be fed infant food when they are developmentally ready. Separate infant menus are available. Families and staff work together to introduce new foods to infants and when transitioning from infant food to table food. In an effort to maintain good dental health, juice will be served only in a cup to infants over 8 months of age and teachers will assist families weaning their infants from a bottle to a cup.
- Space is provided in the infant rooms for breastfeeding mothers wishing to nurse their children.
- If not completely consumed, staff will discard the contents of a bottle after one (1) hour.
- At the Youth Pavilions, during school holidays and Summer Camp, bagged lunches may be provided by the parent. Breakfast and P.M. snack will be provided by the YP. No reduction in fees is available.

**FOOD ALLERGIES:** Child Nutrition Regulation 7 CFR 226.20 (h) of the Child and Adult Care Food Program states: "Substitutions because of medical needs shall be made only when supported by a statement from a recognized medical authority which includes recommended alternate foods." Parents are required to provide a doctor's statement of the child's food allergy(ies) and recommended substitution(s) noting portion and frequency of each substitution. Upon receipt of this information, the center will provide alternate foods for the child.
FOOD EXCEPTIONS BASED ON RELIGIOUS BELIEFS: Child Nutrition Regulation (CNR) 7 CFR 226.20 (i) provides for variations in the food components where there is evidence that such variations are nutritionally sound and are necessary to meet ethnic, religious, economic, or physical needs. CNR 7 CFR 226.20 (h) requires "a statement from a recognized medical authority that includes recommended alternate foods when food substitutions are requested. Parents are asked to provide a statement specifying, based on religious beliefs, the food or food component for which a substitute is required and the recommended alternate foods.

CHILD AND ADULT CARE FOOD PROGRAM

BUILDING FOR THE FUTURE

The Child Development Centers and SAC Centers participate in the Child and Adult Care Food Program (CACFP), a Federal program that provides healthy meals and snacks to children receiving child care.

Each day more than 2.6 million children participate in CACFP at child care homes and centers across the country. Providers/Centers are reimbursed for serving nutritious meals which meet USDA requirements. The program plays a vital role in improving the quality of child care and making it more affordable for low-income families.

MEALS

CACFP homes and centers follow meal requirements established by USDA.

<table>
<thead>
<tr>
<th>Breakfast</th>
<th>Lunch or Supper</th>
<th>Snacks - Two of the five</th>
</tr>
</thead>
<tbody>
<tr>
<td>Milk</td>
<td>Milk</td>
<td>Milk</td>
</tr>
<tr>
<td>Fruit or Vegetable</td>
<td>Milk or meat alternate</td>
<td>Meat or meat alternate</td>
</tr>
<tr>
<td>Grains or Meat or meat alternate</td>
<td>Grains</td>
<td>Grains</td>
</tr>
<tr>
<td>subbed up to 3x per week</td>
<td>Vegetable</td>
<td>Vegetable</td>
</tr>
<tr>
<td></td>
<td>Fruit</td>
<td>Fruit</td>
</tr>
</tbody>
</table>

PARTICIPATING CACFP FACILITIES

Many different homes and centers operate CACFP and share the common goal of bringing nutritious meals and snacks to participants. Participating facilities include:

- **Child Care Centers:** Licensed or approved public or private nonprofit child care centers, Head Start programs, and some for-profit centers.
- **Family Child Care Homes:** Licensed or approved private homes.
- **After School Care Programs:** Centers in low-income areas provide free snacks to school-age children and youth.
- **Homeless Shelters:** Emergency shelters provide food services to homeless children.

ELIGIBILITY FOR CACFP

State agencies reimburse facilities that offer non-residential child care to the following children:
- Children age 12 and under,
- Migrant children age 15 and younger
- Youths through age 18 in after school care programs in low income areas.

**CONTACT INFORMATION FOR CACFP**

If you have questions about CACFP please contact one of the following:

<table>
<thead>
<tr>
<th>Sponsoring Organization</th>
<th>State Agency Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child and Youth Program</td>
<td>Dept. of Health and Human Services</td>
</tr>
<tr>
<td>Attn: Child and Adult Care Food Program</td>
<td>Division of Public Health</td>
</tr>
<tr>
<td>Bldg. LCH-4012B</td>
<td>Nutrition Services Branch</td>
</tr>
<tr>
<td>Midway Park, NC 28544</td>
<td>1914 Mail Service Center</td>
</tr>
<tr>
<td>910-449-9586</td>
<td>Raleigh, NC 27699</td>
</tr>
<tr>
<td></td>
<td>919-715-1923</td>
</tr>
</tbody>
</table>

**CHILD ABUSE IDENTIFICATION AND REPORTING**

Staff members are required, by law, to report any situation or condition where there is reasonable cause to suspect abuse or neglect of a child. At no time will a child be undressed fully to be examined for marks or bruises etc. without at least two staff members present. If child abuse/neglect is suspected, the Provost Marshal Office, Family Advocacy Program Lejeune-New River and Onslow County Child Protective Services will be notified. Center personnel will not notify parents when suspected child abuse is reported. The Department of Defense operates a Child Abuse/Safety Violation Hotline. The telephone number is 1-877-790-1197. Camp Lejeune Family Advocacy Program phone is 910-451-2864. Onslow County Child Protective Services is 910-989-0230. Provost Marshall’s Office phone is 910-451-3004/3005.

To further promote the safety of all children enrolled in CYP, all staff members must satisfactorily complete a criminal history and background check. All CYP personnel complete a Child care - National Agency Check with Inquiries (CNACI). Direct care and other personnel who are in process of having this check returned can be identified via a red shirt or smock. Once the check has been fully adjudicated per the Office of Personnel Management standards (by Human Resources professionals), direct care staff are permitted to wear a blue shirt. Program leaders with an adjudicated CNACI are identifiable by a black shirt. At no time are personnel without an adjudicated CNACI left alone with children, and these staff must work in line of sight supervision of CYP personnel with an adjudicated CNACI. The process for a CNACI to be returned and adjudicated takes approximately six months, but can vary.

**FAMILY ENGAGEMENT**

Effective programs are those in which parents are actively involved. The following is a brief list of involvement ideas:

- Observe your child within the program setting. Join him/her in an activity
- Have daily contacts with staff members
- Attend Parent Advisory Board meetings and provide input concerning the program
- Attend family/child activities
- Share your talent/skill/hobby with your child's class
- Arrange for your military unit to display equipment, etc. to share with the children
- Take note of announcements posted in the Family Information Corner of the center
**COMMUNICATION.** At the Child Development Centers, Daily Activity Sheets are sent home each day. This report contains information relative to meals, rest periods, diaper changes/toileting, the child's moods, and other activities that have occurred during the day. Each classroom posts their day's activities. Weekly activity plans and the daily schedule are also posted. Teachers are available daily for short chats regarding the classroom's activities. If a longer conference is desired, please notify the Center Director so that arrangements can be made for another staff member to substitute in the classroom. It is of utmost importance that there be adequate supervision at all times. Phone conferences can be arranged if necessary. Families are encouraged to talk with their child (ren) daily about their activities. Open communication between families and staff will promote a healthier environment for the child and a more satisfactory care arrangement for the family.

**PARENT PARTICIPATION PROGRAM.** The Parent Participation Program (PPP) is designed to encourage parents to take an active role in their children's early educational experiences. The program consists of a Parent Advisory Board and a Parent Involvement Plan.

PARENT ADVISORY BOARD: A Parent Family Advisory Board (PAB) is established for all Child and Youth Programs to provide recommendations for the improvement of services and operations. Participants are encouraged to participate in regularly held meetings and share information and ideas that are forwarded for consideration and discussion by the Family Care Program and other MCCS and installation leadership as needed. The Family Care Program Manager and CDC Directors function as advisors to the PAB. Notification of PAB meetings will be posted at the CDCs for parent’s convenience. The Parent Advisory Board also provides oversight for the Family Involvement Plan. For additional information on the PAB, please see your Center Director.

PARENT INVOLVEMENT PLAN: Parents are allowed easy access to their child's classroom at all times and are encouraged to participate in the activities. Parent Participation events are noted on the monthly calendar. In addition, each family may select ideas from the list of family involvement ideas (Appendix A). Families will be asked to sign a participation record each time they engage in an activity. These records are maintained at the CDC as supporting documentation for the Parent Participation Program.

**DONATIONS.** Occasionally, the classroom will post a wish list of items that are needed such as paper towel rolls, dress-up clothes, magazines, thread spools, wall paper samples, etc. Please check with your child's classroom or Center Director before discarding items that may be of use in the center.

In addition to the policies in this handbook, please also see current year Statement of Understanding for additional policy information relevant for CYP patrons.