



MCB QUANTICO
Child and Youth Programs
- Parent Handbook -

TABLE OF CONTENTS

MISSION STATEMENT	6
PHILOSOPHY.....	6
PROGRAM GOAL	6
CYP POINT OF CONTACTS	6
CHILD AND YOUTH PROGRAMS FACILITIES	7
CHILD DEVELOPMENT CENTER (CDC) NORTH.....	7
CHILD DEVELOPMENT CENTER (CDC) SOUTH.....	7
YOUTH CENTER/SCHOOL AGE CARE (SAC).....	7
DESCRIPTION OF SERVICES	7
CHILD DEVELOPMENT CENTERS.....	7
EXTENDED HOURS.....	8
FAMILY CHILD CARE (FCC).....	8
HOURLY CARE.....	8
PARENT ORIENTATIONS.....	8
RESOURCE & REFERRAL	8
SCHOOL AGE-CARE (SAC)	8
SPECIAL EVENTS CARE.....	9
SPECIAL NEEDS.....	9
REGISTRATION	9
ELIGIBILITY.....	9
REQUEST FOR CARE	9
ADMISSION CRITERIA.....	10
HEALTH ASSESSMENT FORM	10
FEES ARE PAID PRIOR TO SERVICES BEING PROVIDED	10
SWIPE CARD ISSUE AND REPLACEMENT POLICY	10
WAITING LIST	10
FEE CATEGORY	11
CYP PROGRAM POLICIES.....	11
ORGANIZATIONAL STRUCTURE.....	11
OVERSIGHT.....	12

OPEN DOOR POLICY	12
PROGRAM RATIOS	12
FEES.....	12
DISENROLLMENT POLICY	13
TRANSFERS BETWEEN CDCs.....	13
EMERGENCY CONTACTS	13
DAILY ARRIVAL AND DEPARTURE PROCEDURES (CDCs AND SAC).....	14
INTOXICATED PARENTS.....	14
CUSTODY DISPUTES	14
SUBPOENAS.....	14
BASE CLOSURE/DELAYED OPENINGS	14
PERSONAL BELONGINGS	15
CLOTHING	15
JEWELRY	15
TOYS	15
DIAPERS.....	15
DEVELOPMENTAL PROGRAM	16
CDC/FCC CURRICULUM	16
CDC DEVELOPMENTAL ASSESSMENTS.....	16
REST PERIODS.....	16
OUTDOOR PLAY.....	16
FIELD TRIPS.....	17
PETS & PLANTS.....	17
BIRTHDAY AND HOLIDAY CELEBRATIONS	17
TOILET LEARNING.....	17
BEHAVIOR SUPPORT: WHAT TO EXPECT.....	18
DISCIPLINE (APPROPRIATE GUIDANCE.....	19
SAFE PLACE.....	19
GUIDANCE TECHNIQUES	19
POSITIVE CAREGIVING	19
POSITIVE GUIDANCE TECHNIQUES	20
INAPPROPRIATE GUIDANCE TECHNIQUES:.....	20
ONGOING BEHAVIOR CONCERNS	20
BITING	21

APPROPRIATE TOUCH	21
EXAMPLES OF APPROPRIATE TOUCH.....	21
EXAMPLES OF INAPPROPRIATE TOUCH	21
CHILD HEALTH & NUTRITION	22
CHILD HEALTH SCREENINGS.....	22
ILLNESS.....	22
MEDICAL ALLERGIES.....	24
IMMUNIZATIONS	24
MEDICATIONS	24
MEAL SERVICE	25
FOOD SUBSTITUTIONS	26
FOOD EXCEPTIONS BASED ON MEDICAL NEED	26
FOOD EXCEPTIONS BASED ON RELIGIOUS BELIEFS.....	26
CHILD ABUSE IDENTIFICATION AND REPORTING.....	26
PARENT RELATIONS	26
COMMUNICATION	27
MUTUAL RESPECT POLICY.....	27
PARENT BOARD.....	27
CLASSROOM WISH LISTS.....	27
PARENT HANDBOOK ACKNOWLEDGEMENT.....	28
COVID-19 PARENT HANDBOOK ADDENDUM.....	29

Dear Parents,

Welcome to Marine Corps Base (MCB) Quantico's Child and Youth Programs (CYP). We recognize the strength of our Marines comes from the strength of their families. We consider it an honor and look forward to supporting your family readiness. CYP is a Marine Corps program that provides services to all military, Department of Defense civilians, and contract agencies who support the mission of MCB Quantico. Our highly trained staff is committed to providing a safe, nurturing environment that meets the holistic needs of the child/youth ages 6 weeks to 12 years old. Lastly, our programs and activities are specifically designed by early childhood and youth development specialists to meet the growing needs of 21st century military families.

CYP believes that parents are the most influential individuals in the lives of their child/youth. For this reason, our facilities and programs strive to create a family-friendly environment where parents and staff work in partnership in the positive development of their child/youth. Research shows that when families and teachers work together in support of learning, it results in the child/youth remaining in school longer, performing better in school, and possessing a higher sense of self-esteem.

We thank you for partnering with MCB Quantico CYP in the growth and development of your child/youth. We look forward to your visits and encourage you to become involved in the planned learning activities in the centers, in the home of your provider, or in the comfort and convenience of your own home.

Again, thank you for considering MCB Quantico Child and Youth Programs to meet your child care needs!

Sincerely,
Rashunda L. Brooks, MBA
Administrator
Child and Youth Programs

MISSION STATEMENT

Child and Youth Programs (CYP) encompass all aspects of child care and provide high quality, developmentally appropriate child care programs for children 6 weeks to 12 years of age. All programs are designed to assist active duty and Department of Defense (DoD) personnel in balancing the competing demands of family life and accomplishment of the mission and to improve the economic viability of the family unit.

PHILOSOPHY

CYP is fully committed to providing the highest level of quality child care activities for children 6 weeks to 12 years of age. CYP strongly believes quality programs promote a safe and nurturing environment, which enhance the social, emotional, physical, intellectual, cognitive, and language development of all participants, while responding to the diverse needs of the military and DoD families in the MCB Quantico community.

PROGRAM GOAL

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

CYP POINT OF CONTACTS

CYP Administration Office	703-784-3760
Resource & Referral (R/R) Office	703-784-0674/4453
Child Development Center North	703-784-2716
Child Development Center South	703-784-3754
Family Child Care	703-784-2011
USDA Food Program	703-784-3972
School-Age Care	703-784-2249
CYP Nurse	703-784-0302/703-432-0816
DoD Child Abuse/Safety Violation Hotline	1-877-790-1197

CHILD AND YOUTH PROGRAMS FACILITIES

CHILD DEVELOPMENT CENTER (CDC) NORTH is located at 3311 Purvis Road, and is open Monday through Friday, 0600 to 1800. Extended hours may be available for active duty patrons. Full-time and hourly child care services are available. Breakfast, lunch, and afternoon snack are served. The CDC is closed on federal holidays. Patrons may incur a fee for late pick up (\$5 for the first 15 minutes, and a dollar for every additional minute).

CHILD DEVELOPMENT CENTER (CDC) SOUTH is located at 3314 Purvis Road, and is open Monday through Friday, 0600 to 1800. Full-time and hourly child care services. Breakfast, lunch, and afternoon snack are served. The CDC is closed on federal holidays. Patrons may incur a fee for late pick up (\$5 for the first 15 minutes, and a dollar for every additional minute).

YOUTH CENTER/SCHOOL AGE CARE (SAC) is located at 3312 Purvis Road for children enrolled in kindergarten through 12 years of age. Transportation is provided to and from base DoDEA schools. Children off installation will be accepted as spaces are available, as long as parents provide their own transportation. SAC is open Monday through Friday, from 0600 to the start of school and from the end of the school day until 1800. Full-time care from 0600 to 1800 is available for teacher workdays and during school breaks. Extended hours may be available for active duty patrons. Patrons may incur a fee for late pick up (\$5 for the first 15 minutes, and a dollar for every additional minute).

The SAC program is accredited through the Council on Accreditation and affiliated with the Boys & Girls Clubs of America (BGCA). Children are provided with planned activities in the core areas of: character and leadership; the arts; health and life skills; sports; Science, Technology, Engineering and Mathematics (STEM); fitness and recreation; and education and career development.

Breakfast and afternoon snacks are served during the school year. On “no school” days during the school year, when children are in care all day, breakfast, lunch, and afternoon snacks are provided. During our camps (i.e., spring break, Thanksgiving break, winter break, and summer camp), lunch is provided by the family. The SAC program is closed on federal holidays.

NOTE: Children must have completed kindergarten to participate in summer break care.

DESCRIPTION OF SERVICES

CHILD DEVELOPMENT CENTERS serve children ages six weeks through five years of age (prekindergarten). The early years lay the foundation for all later learning in life. Curriculum (i.e., Early Learning Matters – ELM 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. Lesson plans are posted in each child’s classroom and are readily available onsite for parents to view.

Both CDCs are accredited through the National Association for the Education of Young Children (NAEYC). Our program is center-based, child-initiated, and teacher-supported, with an

emphasis on active participation through individual and small group learning experiences. Classrooms support full inclusion for children. Equipment, environmental accommodations, and materials are adjusted to support and maximize learning opportunities. Multicultural and non-gender biased 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. CDC classroom staff offer activity centers/learning areas that allow children the opportunity to explore, create, imagine, and experience their environment. Classroom staff are readily available to facilitate learning and provide nurturing encouragement to each child. Each activity is designed with a goal that promotes further development and prepares your child for the next level of learning.

EXTENDED HOURS are from 0500 to 0600 and 1800 to 1900 and are available when reserved one week in advance for active duty patrons only. The cost is the current hourly care rate per child. Extended care is available at CDC North and SAC.

FAMILY CHILD CARE (FCC) providers are military spouses that are licensed by the Base Commander to care for children in government quarters. They complete the same training as center-based caregivers. FCC homes are inspected regularly, and providers complete ongoing training monthly.

FCC providers offer activity centers/learning areas that allow children the opportunity to explore, create, imagine, and experience their environment. Providers 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.

HOURLY CARE is offered at all our programs on a space-available basis. Hourly care is available for intermittent care and cannot exceed 25 hours a week at a full-day care program, and 10 hours a week during before and after care programming. Each center handles their own reservations. Reservations can be made two weeks in advance in person or by telephone. Families are responsible for paying if they are a no-show.

PARENT ORIENTATIONS Families receive a welcome orientation specific to their child's program. This is the opportunity for parents to share information about their child to help ensure a positive start. The orientation covers policy and instructions to help make your family's transition to CYP smooth. It is necessary and mandatory to attend an orientation prior to your child's start date.

RESOURCE & REFERRAL The Resource and Referral (R&R) Office provides child care information, referrals, and assistance in locating appropriate, affordable, and accessible child care for military personnel and DoD employees. An R&R representative is located at each CDC and can answer all questions regarding CYP programs, the MilitaryChildCare.com website, and the registration process. R&R can be reached at 703-784-0647/4453.

SCHOOL AGE-CARE (SAC) The SAC program is accredited by the Council on Accreditation (COA) and offers a variety of activities before and after school to children who are of kindergarten age through 12 years. The program instills a sense of belonging, usefulness,

influence, and competence by providing the young people with fun, age-appropriate, and well-rounded programming. Activities specific to age groups include Boys and Girls Club of America (BGCA) curriculum-based arts and crafts, games, sports, and special events. Full-day care is available when DoDEA schools are not in session.

SPECIAL EVENTS CARE Units aboard MCB Quantico may request child care services for special events. Contact the CYP Administrative Office at 703-784-3760 for more information.

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 ADA Act of 1990, CYP successfully provides limited special needs care and accommodations for children within a fully inclusive program.

CYP has an Accommodations Collaboration Team (ACT) that reviews the needs of individual children and youth to plan accommodations, provide resources, and create necessary support plans for care. Support plans are created and completed prior to enrollment to ensure that a child is not placed in care before staff are trained and the program is modified or prepared as necessary. An Inclusion Action Team (IAT) meeting may be scheduled in cases that require consultation for determining reasonable accommodations and support at the Installation level.

REGISTRATION

ELIGIBILITY Services are available to dependent children ages 6 weeks through 12 years of age of active duty military, DoD civilian personnel, and guard/reservist on active duty orders. Military retirees, inactive guard/reservists, DoD contractors and other federal employees may qualify based on program space availability.

Patrons must show a valid ID card upon registration to confirm eligibility status. Patrons who experience a change in eligibility status (i.e., retiring or separating from the military, no longer working as a DoD civilian, becoming a DoD contractor) MUST notify their program director immediately. Student spouses must provide a letter from the registrar verifying status as a full-time student upon registration and each fall and spring semester thereafter.

CYP is required by DoD to supplant certain priorities. Child care placement priorities are based on family type and spouse employment status. Patrons accepted under a supplantable priority may be given a 45-day notice to vacate the child care space if a waitlist for that age group exceeds 45 days for a higher priority. Contact R&R for more information.

REQUEST FOR CARE All full-time CDC and SAC care will be offered based on patrons' request for care submitted through the [MilitaryChildCare.com](https://militarychildcare.com) website. The only exception is hourly care registration for CDC and SAC. Hourly care must be submitted via the front desk staff at the requested center. Families must create an account online to submit requests for child care. An R&R office representative is located at each CDC and can assist with questions regarding the MilitaryChildCare.com website and the registration process.

ADMISSION CRITERIA The following registration requirements must be provided before a child can be admitted to a CYP program:

- Form DD2652, Application for DoD Child Care Fees
- Proof of up-to-date immunizations (school-age are exempt if attending public school)
Note: DoDEA schools require students to receive an annual influenza vaccination
- CYP Health Assessment Form completed by primary physician
- CYP Special Needs Screening Form
- CYP Asthma Action Plan or Allergy Action Plan (if applicable, prior to beginning care)
- CYP Registration Form
- USDA Meal Benefit Income Eligibility Form
- USDA Enrollment Form
- Current Leave Earnings Statement (LES)/pay stub or college schedule for both the sponsor and any household member who provides for the child.
- Two local emergency contacts with the ability to arrive within one hour pick up time when contacted by the center.

HEALTH ASSESSMENT FORM The health assessment form must be completed by a physician and returned to the CDC within 30 days from the child's start date. For continued child care, the health assessment form must be updated by a physician annually and submitted to the center. To request an extension for returning the form, a doctor's notice of appointment date can be provided to the front desk staff. If a health assessment form or doctor's notification is not received, your child may be denied care until the proper documents are received. The completed health assessment form may be faxed or scanned to the CDC, at 703-784-3757.

FEES ARE PAID PRIOR TO SERVICES BEING PROVIDED Tuition is due on the first and fifteenth of the month. A prorated amount will be charged if your child's start date does not fall on the first or fifteenth. The start date is defined as the date offered and accepted through MilitaryChildCare.com.

Patrons have the option to sign up to have tuition paid through automatic debiting. Please see the front desk staff at your facility to inquire about this option.

SWIPE CARD ISSUE AND REPLACEMENT POLICY Upon completing the registration process with the R&R office, families are provided a swipe card at no cost. Family members must use this card at all times to swipe in/out when dropping off or picking up their child(ren). If the swipe card needs to be replaced due to loss or damage, there will be a \$5 charge for replacement.

WAITING LIST All full-time and SAC child care spaces will only be offered through the MilitaryChildCare.com website. You will be notified via MilitaryChildCare.com when a space becomes available. The sponsor must confirm acceptance within 48 business hours. Failure to do so will result in the request for care being deleted from the wait list. When a patron is offered and accepts a child care space through MilitaryChildCare.com, the patron's financial obligation begins on the start date offered, whether the child starts on that day or after. After accepting the space, all required paperwork is to be submitted in its entirety to R&R within 72 business hours.

If additional time is needed to obtain or complete the paperwork, an extension can be requested from the R&R office.

Expectant parents may register their unborn child on MilitaryChildCare.com. REGISTERING AN UNBORN CHILD ON THE MILITARYCHILDCARE.COM WEBSITE IS HIGHLY RECOMMENDED.

FEE CATEGORY Child care fees are based on total family income. Patrons must provide a current LES or paystub for use in computing the total family income. ALL patrons must provide pay information annually to be enrolled in and maintain their childcare services. A current fee scale is available through the R&R office.

To provide consistency in programming among all of our activities, a "family" is defined as, "**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.**"

The DoD reviews and may revise the fees and/or income ranges annually. The DoD Fee Policy mandates that total family income must be verified annually.

CYP 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:

Child Development Centers

1. Program Assistant
2. Lead Program Assistant
3. Education Technician
4. Assistant Director
5. Center Director
6. CYP Administrator
7. Family Care Branch Head
8. Assistant Deputy Chief of Staff, Marine and Family Programs
9. Assistant Chief of Staff, Marine Corps Community Services

School-Age Care and Youth & Teens

1. Program Assistant (teacher)
2. Assistant Director
3. Center Director
4. CYP Administrator
5. Family Care Branch Head
6. Assistant Deputy Chief of Staff, Marine and Family Programs
7. Assistant Chief of Staff, Marine Corps Community Services

Family Child Care Program

1. FCC Provider
2. FCC Director
3. CYP Administrator
4. Family Care Branch Head
5. Assistant Deputy Chief of Staff, Marine and Family Programs
6. Assistant Chief of Staff, Marine Corps Community Services

OVERSIGHT CYP is governed by MCO 1710.30, MCB Quantico directives, as well as various health, sanitation, safety, and fire regulations. CYP meal service programs participate in the USDA Child and Adult Care Food Program. MCB Quantico Fire Department, the Naval Clinic’s Preventive Medicine Unit, and trained safety personnel inspect all programs regularly. Additionally, an unannounced USMC Headquarters inspection is conducted annually.

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.

PROGRAM RATIOS DoD mandated staff-to-child ratios are always maintained to provide adequate supervision and ensure expeditious evacuation of all children in the event of an emergency. The following staff/child ratios are always in effect for CDC, FCC, SAC and recreational programs:

Age	Group	Ratio	Maximum Group Size
6 weeks – 12 months	Infants	1 staff per 4 children	8 per group
13 months – 24 months	Pretoddlers	1 staff per 5 children	10 per group
25 months – 36 months	Toddlers	1 staff per 7 children	14 per group
37 months – 5 years	Preschoolers	1 staff per 12 children	24 per group
Kindergarten – 18 years	School-Age	1 staff per 15 children	30 per group
Kindergarten – 18 years	School-Age Field Trips	1 staff per 10 children	

FCC ratios allow six children at a time in each FCC home, with no more than two children under the age of two years. Providers must include their own children in the ratio if the children are less than eight years of age. An infant only FCC home may care for three children, six weeks to two years of age only.

FEES The CDC full-time childcare fees (excluding FCC) include a maximum of 50 hours of child care per week and all meals and snacks per participant. 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.

Child care payments are made in advance of service. Payments for all CYP are due on the first and fifteenth of each month. If payment is overdue, there will be a \$10 late fee assessed to the household at the start of the fourth workday. If payment is not received by the close of the

register on the fourth workday, care will be denied, and the child will be withdrawn from the program.

A late fee is assessed per child if they are picked up after closing time (\$5 for the first 15 minutes, and a dollar for every additional minute). 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 by 1830 and no notice is given from family members. Repeated violations of this policy may result in a request for denial of care being routed to Command leadership.

Hourly fees are charged per hour and due at the time of pick up. All methods of payment are taken at the center. Hourly care no-shows will be charged for the reservation. Fees are charged for no-show hourly care reservations, swipe card replacements, returned checks, and denied auto-debit payments. The cost of these fees is determined each year upon the release of the fee policy.

FCC providers are independent operators of their business and are allowed to set fees individually. A signed payment policy is completed between the FCC provider and the patron. The FCC office does not become involved in disputed payments between FCC providers and patrons.

To remain enrolled, payment must be made even when your child is absent due to illness, vacation, etc. Parents are requested to notify the center when your child will be absent. CYP will call patrons of those children not in care prior to 1000 on days of operation.

A vacation credit can be applied to full-time child care patrons at the CDCs. The discount is 50 percent off the bi-monthly tuition rate for one week of vacation. Each child's account is authorized one week of vacation credit between 1 August and 31 July each year. Vacation time does not carry over from year to year. A form will need to be completed at the front desk prior to the vacation dates.

Due to a temporary financial hardship or change in employment status, the R&R office may be contacted for information on the process to request a review of your fee level assignment.

DISENROLLMENT POLICY A two-week notice of disenrollment is required; otherwise, parents will continue to be responsible for payment. Parents must complete a withdrawal form at the front desk of their CDC or SAC program.

Child care services will be terminated immediately for any patron when there is no DoD affiliation.

TRANSFERS BETWEEN CDCS For those families currently enrolled in a CDC and would like to transfer to another CDC, a request must be submitted on MilitaryChildCare.com.

EMERGENCY CONTACTS Families are required to provide two local emergency contacts prior to enrollment, no exception. Emergency contacts must include the names and phone

numbers of persons allowed to pick up your child. The emergency contacts must be located within a one-hour travel distance from the center. Emergency contacts will be called if CYP is unable to reach a parent, or the parent is unable to arrive at the center within one hour in the event of an emergency, early release, or dismissal due to health reasons. CYP requires changes to the emergency contact list be provided in person. In the event of an emergency, designation of alternate emergency contacts will be accepted from the sponsor's government email address. Phoned-in changes cannot be accepted. In the event family members are unable to pick up their child and no designated escort is available, the Provost Marshal Office will be notified to arrange for the child's release to the Department of Social Services.

DAILY ARRIVAL AND DEPARTURE PROCEDURES (CDCS AND SAC) Patrons must swipe their program registration card 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 children in.

Persons authorized to pick up the child must be listed as an emergency contact and present photo identification before the child will be released. Authorized escorts must be at least 18 years of age. When staff become familiar with parents or designated escorts, identification may only be required periodically.

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 or young children be left unattended in the car. We will notify the Provost Marshal Office when this occurs. ASO 5560.3B prohibits children aged ten and under from being left unattended in a vehicle, and we are required to notify the Provost Marshal Office when this occurs.

INTOXICATED PARENTS The program's staff will strongly recommend the parent to contact an alternate pick up if it is deemed that a parent/custodian picking up a child is intoxicated or impaired for any reason. No parent will be denied access to their child, but if an intoxicated parent attempts to leave the facility with the child, the Provost Marshal Office will be called immediately.

CUSTODY DISPUTES Staff will not become involved in custody disputes. For the child's protection, a copy of the court order or military protective order granting custody must be on file at the program. If the non-custodial parent attempts to take the child from the center, the Provost Marshal 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.

SUBPOENAS cannot be issued to staff members or patrons in the center. Process servers or other agents must contact the Provost Marshal Office (PMO) at 2043 Barnett Avenue, 703-784-2252.

BASE CLOSURE/DELAYED OPENINGS Parents may call the MCB Quantico automated information system at 703-784-3638 or check the installation's media sites and platforms (i.e., MCB Quantico website, Quantico MCCA website, Quantico MCCA Facebook, and Quantico MCCA Twitter) to receive up-to-date information regarding the status of base operations. All

CYP facilities will remain open until directed by the Base Commanding Officer to close. Families must provide accurate telephone numbers and emails to maintain close contact with the program in case of a change in operational status. Once the Base Commanding Officer has directed closure, children must be picked up immediately. If the base has a delayed opening, parents may drop children off 30 minutes before the scheduled base opening.

PERSONAL BELONGINGS

CLOTHING Children should be dressed appropriately for active play. **To prevent injury, sandals and open-toed shoes are not allowed.** 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. If your infant is learning to walk, please provide rubber-soled shoes for use while your child is in care. A complete change of clothes (i.e., underpants, socks, shorts/slacks, and shirt) for each child must be kept at the center for emergencies. Should all available clothing be soiled, the family will be contacted to bring additional clothing to the program. 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 outerwear for the season.

JEWELRY Please do not put jewelry on your young child. Jewelry includes items such as bracelets, hair beads, necklaces, and earrings (except for small posts for pierced ears). Jewelry is discouraged for several reasons. It is easily lost and particularly in infant areas, can be swallowed by other infants. Under no circumstances may children wear necklaces (except teething necklaces as developmentally appropriate) 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 are discouraged from being brought to the CDC/SAC unless the child's teacher has requested children to bring something to the program. Staff cannot be responsible for items brought to the center. A soft "special friend" may be brought in for rest time.

DIAPERS and wipes will be provided by the parent. Diapers will be checked and/or changed at least hourly and whenever a child indicates discomfort or exhibits behavior that suggests a soiled or wet diaper. Parents are recommended to maintain a supply of diapers at the center to meet at minimum: 12 diapers daily for infants, 10 for pretoddler, toddler and preschool aged children. Staff will notify parents of the need for additional diapers on the Daily Activity Sheet. Parents are also encouraged to check their child's diaper before drop-off.

DEVELOPMENTAL PROGRAM

CDC/FCC 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 (ELM) curriculum to observe, assess, and plan for individual development based on the interests and needs of children. ELM 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 and home are 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 multicultural, non-sexist toys, equipment, and activities are available that will promote interaction between the children and the world which surrounds them. Teachers/providers facilitate learning by guiding children to an activity/learning center and encouraging participation. Teachers/providers prepare lesson plans for each learning center based on the 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 and 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 once to twice a year. In addition, conferences may also be scheduled anytime at the request of the family or staff members.

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 if they are at least 13 months old. Blankets should be taken home weekly and laundered.

OUTDOOR PLAY Children should be dressed appropriately for the season. Weather permitting, every room will participate in 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 used by MCB Quantico to determine safe training environments are also used for determining outdoor play times. During green, yellow, and red flag conditions, children are still allowed a period of time outdoors. The time may be limited based on age. No children will be allowed to play outdoors during black flag conditions, which is more than 90 degrees apparent temperature. The installation meteorologists consider the effects of humidity and direct sunlight when assessing flag conditions. During winter months, all children will be taken outdoors daily. Ensure weather appropriate gear is provided. Outdoor play will cease at 40 degrees. This temperature takes into account a 15-mph wind that will result in a temperature that feels like 32 degrees.

FIELD TRIPS for CDC will be limited to places the children can walk. Staff plan special visitors to the classroom. Families are encouraged to participate by assisting in planning or recommending persons or programs. Field trips are a regular part of the program for SAC and Summer Care. 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 are important 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 have a veterinary approval and certification indicating they are disease-free and have current shots. Pet visits may be arranged with your program's director. **If your child is allergic to certain animals, please list this on the special needs assessment form.**

BIRTHDAY AND HOLIDAY CELEBRATIONS 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, candy, or other treats to be brought to the facility. **Parents who desire to hold birthday parties or provide treats must do so outside the center.** CYP staff will not take part in or assist with delivering private party invitations to classmates. Multi-cultural holidays are celebrated in the CDC. 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 make plans to pick your child up from the CDC prior to the celebration.

TOILET LEARNING CDC staff and FCC providers will assist parents with toilet learning after it has been initiated in the home. The child must be able to realize the sensation of the need to eliminate, have control of his/her bowels, and be able to communicate the need for toileting to teachers. Parents should provide several complete changes of clothing (to include socks). Should a child soil all his/her own clothing, parents may be notified to bring more clothing or program-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 naptime 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 program.

BEHAVIOR SUPPORT: WHAT TO EXPECT Marine Corps Child and Youth Programs use a support pyramid model for concerning and unsafe behaviors. We know that children use their behavior to communicate. When we see concerning or unsafe behavior, it is a clue that the child needs our help. We use a pyramid model to make sure we have everything in place to support every child and youth's success.



Level	What it means
Intensive Supports	Individualized supports for your child
Targeted supports	Ways to strengthen communication & coping skills
Environmental supports	Changes to the space, materials, routine, schedule, & expectations
Foundational supports	Close, trusting relationships

We work as a team using tools to help us stay on track and build supports using the pyramid diagram. Our team includes the Program Assistants (teachers) or Family Child Care Provider, Director/Assistant Director, Training and Curriculum Specialist, and the Behavior Specialist. There are six Marine Corps behavior support tools. Sometimes we only need to use one or two tools, other times we will need to use all six. When your child needs behavior support, we will meet every few weeks to determine if the utilized supports are effective.

At times, we may ask for your support with outside resources that may be helpful, such as early intervention, your local school district, or military resources, such as Military Family Life Consultants (MFLCs). We will ask for your input on what may help your child feel safe, connect with peers, participate in the routine, and understand expectations. We will ask for your ideas and support on the practices that help at home or in other settings (such as school or soccer). We may also ask for your feedback on maintaining consistency between your home and our day care environment.

We will always keep you up to date on what methods we are implementing and how they are working. We will ask for your input along the way because you know your child best. If your child needs a Behavior Support Plan (BSP), we will invite you to join us in developing the plan. With your input, and your child's input, if they are old enough, we will write the BSP together to put a consistent plan in place.

If you have questions about the process, you may contact our Family Care Behavior Specialist, Ms. Antoinette J. Flood, Ed.S., at 703-784-2346 or by email Antoinette.Flood@usmc-mccs.org.

DISCIPLINE (APPROPRIATE GUIDANCE) Our programs strive to practice the principles of “Conscious Discipline.” We believe that discipline is the continuous process of teaching a child to self-regulate their emotions and exhibit appropriate behavior. Our goal is to aid the child in developing self-discipline and achieving socially acceptable behaviors. We believe that children learn best when they feel safe, feel loved, and have the power to make choices. We believe that a parent’s or teacher’s job is to make a child safe, and the child’s job is to try to stay that way. We strive to make each classroom a safe environment with fair and consistent limits where children can learn to make appropriate choices. Per the USMC CYP Appropriate Guidance Protocol, teachers are expected to use positive reinforcement of responsible behaviors and redirection of unsafe or otherwise unacceptable ones by guiding children’s behavior. Because different cultures may vary in child rearing practices, communication between teachers and parents is vital so that the home and the school work together in developing consistent behavioral expectations. In instances where a child may need additional support in managing their behavior, CYP applies strategies contained in the USMC Behavior Support Guide, which provides guidance and resources (i.e., Kids Included Together – KIT) for teachers, parents, training & curriculum specialists, CYP managers, and/or the Family Care behavior specialist to partner together to assist children in mitigating challenging behavior.

SAFE PLACE If a child cannot be directed away from an unacceptable behavior and is unable to regain self-control, he/she may be directed to a safe place where he/she can be helped in practicing calming activities, or the child may be allowed to choose another area for solitary play. During this period, the child is allowed time to reflect on the occurrence and discuss it with the teacher before returning to group activities. Children will not be restrained in a chair. The child will be allowed to choose a quiet, solitary activity that assists him/her in recovering self-control.

GUIDANCE TECHNIQUES Appropriate guidance and positive relationships are essential for the development of personal responsibility, capacity for self-regulation, constructive interactions with others, and for fostering academic functioning and mastery. Warm, sensitive, and responsive interactions support the development of a secure, positive sense of self and encourage respect and cooperation with others.

POSITIVE CAREGIVING CYP professionals provide positive caregiving which include, but not limited to:

1. Building positive relationships between caregivers and families
2. Building positive relationships between caregivers and participants
3. Helping participants make friends
4. Expressing warmth through behaviors such as physical affection, eye contact, tone of voice, and smiles
5. Fostering participant’s emotional well-being by demonstrating respect and creating a positive emotional climate as reflected in behaviors, such as frequent social conversations, joint laughter, and affection
6. Interactions with participants are frequent and promote self-esteem, self-confidence, and positive feelings toward learning

CYP professionals facilitate the development of self-control in participants by using positive guidance techniques. Expectations match and respect the participant's developing capabilities. CYP professionals are actively engaged with participants and relate to them in positive ways by:

1. Helping them feel welcome, comfortable, and supported
2. Encouraging and recognizing their work and accomplishments
3. Engaging in frequent meaningful and extended conversations
4. Responding to questions and requests by using effective communication strategies
5. Being consistent and following through

CYP professionals function as a secure foundation for participants. They respond promptly in developmentally appropriate ways to participant's positive intentions, negative emotions, and feelings of hurt and fear by providing comfort, support, and assistance. CYP professionals encourage participants to make appropriate choices and become more responsible. They encourage participants to use appropriate expression of emotions, both positive (e.g., joy, pleasure, excitement) and negative (e.g., anger, frustration, sadness).

POSITIVE GUIDANCE TECHNIQUES CYP professionals use positive guidance techniques which include, but not limited to:

1. Talking in a pleasant voice and making frequent eye contact
2. Ensuring the environment is arranged to eliminate behavior problems
3. Using simple positive reminders to restate rules and give direction
4. Redirecting to acceptable activities
5. Using logical consequences to help participants understand and be responsible for their actions
6. Focusing on the participant's behavior and not the participant
7. Helping participants use their problem-solving skills to develop solutions
8. Having a few simple rules and involving participants in setting them
9. Providing one-on-one time for each participant as often as possible

INAPPROPRIATE GUIDANCE TECHNIQUES:

1. CYP professionals do not use corporal punishment, shaming, or other humiliating methods of discipline.
2. CYP professionals do not use physical punishment, such as shaking or hitting, and do not engage in psychological abuse or coercion.
3. CYP professionals do not use threats or derogatory remarks and neither withholds nor threatens to withhold food or rest as a form of discipline.

ONGOING BEHAVIOR CONCERNS The desire of the CYP staff is 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 the above positive guidance strategies and redirection are not successful in changing a child's challenging behaviors, classroom staff will hold a parent conference. Parents and staff will create a plan for the child's success. If needed, an additional meeting(s) will be scheduled with the parent, training and curriculum specialist, and behavior specialist. Every attempt will be made to work

with the child to facilitate classroom success for all children and staff. When the child exhibits a behavior that jeopardizes the safety of him/herself and/or others, the child will be dismissed for the day, and the staff and parents will work with the child on a behavior support plan. The child should be picked up as soon possible, not to exceed 60 minutes. CYP reserves the right to call an emergency contact on file for pick up if the child is not picked up within an hour. If the behavior support plan is unsuccessful and the child continues to exhibit unsafe behaviors, the child may be disenrolled from care.

BITING Young children biting one another is the most common and most difficult situation in group child care, especially within the pretoddler/toddler age group. Biting is a natural phenomenon that has little developmental significance and is not something to blame on children, families, or teachers. Children who bite at a young age are not on a path of becoming a discipline problem. It is an inappropriate behavior of a child not yet able to participate fully in social situations. Children may bite for any number of reasons such as teething, impulsiveness and lack of self-control, excitement and overstimulation, 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 and gradually lessen. Every effort will be made to help the biting child achieve socially acceptable behavior. In severe cases, it may be necessary to remove the biting child from the program for a period of time. Every effort will be made to assist the family in finding a satisfactory child care setting while the child is away from the group setting. Punishment does not work to change the child's behavior. The young child will not understand delayed punishment at home, and punishment at the center will not improve the situation.

APPROPRIATE TOUCH CYP promotes appropriate physical contact that is necessary for the growth, nurturing, guidance, and sense of security of participants. Appropriate touch involves recognizing the importance of physical contact to participant nurturance and guidance. CYP professionals respect the personal privacy and personal space while maintaining the safety and well-being of participants. CYP professionals also role model appropriate touch.

EXAMPLES OF APPROPRIATE TOUCH include, but are not limited to:

1. Hugs, holding hands, and lap sitting (age appropriate) as expressions of affection to build self-esteem or when the participant needs to be comforted
2. Reassuring touch on the shoulder or back to show approval or provide support
3. Naptime back rubs to relax a tense participant
4. Diapering of infants and toddlers
5. Assistance in toileting and dressing for participants when needed

EXAMPLES OF INAPPROPRIATE TOUCH include, but are not limited to:

1. Coercion (physical or emotional) or other forms of exploitation of the participant's lack of knowledge
2. An absence of intervention that results in the exposure of danger to participants

3. Failure to respect the participant’s right to personal privacy and space
4. Any touching made for the gratification of adult’s desires at the expense of the participant
5. Violates a law or a known cultural taboo
6. Attempts to change participant behavior with adult physical force applied in anger
7. Encouraging the participant to use inappropriate touch

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 programs. Families will be notified of any known communicable diseases to which children in the center have been exposed.

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 or do not feel well enough to participate in the normal daily activities will be denied admission and sent home. Children dismissed from care with a “suspicion of” illness may have to take their child to be seen prior to re-entry into the center. We request that the child’s primary care physician complete the front page of the health dismissal form.

ILLNESS In the event your child becomes ill while at the program, personnel will contact you. We request that you immediately pick up your child. CYP reserves the right to call an emergency contact on file for pick up if the child is not picked up within an hour. When appropriate, notification from the physician stating the child is free from communicable disease and may be readmitted to the center will be required.

CHILD AND YOUTH PROGRAMS (CYP) HEALTH DISMISSAL/READMISSION FORM	
Child’s Name: _____	Center & Room #: _____
Notifying Caregiver(s): _____	Manager on Duty: _____
Date & Time(s) Parent/Guardian Notified for Pick-up: _____	
Dear Parent or Guardian:	
You have been asked to take your child home early today because your child appears to have the signs or symptoms of illnesses as listed on the back of this form.	
The criteria listed for readmission has been developed to help protect your child from becoming more ill or from spreading illness between children and staff. Please ensure that you have met all the readmission criteria before you bring your child back to the program. If an antibiotic is prescribed, the child must be on medication for 24 hours before returning to care. If your child requires accommodations upon their return, please note that an Accommodations Collaboration Team (ACT) meeting may be required prior to their return to care.	
<i>**REMINDER: REGARDLESS OF HAVING MET OTHER CRITERIA, CHILDREN MUST BE FEVER-FREE WITHOUT THE USE OF FEVER REDUCING MEDICATION (TYLENOL, ADVIL). ALL CHILDREN MUST BE WELL ENOUGH TO PARTICIPATE IN DAILY ACTIVITIES.</i>	
We hope that your child is better soon. Thank you for your understanding and cooperation.	
Pick-up Time: _____	
Parent/Guardian Signature: _____	Date: _____
CYP Nurse / CYP Manager Signature: _____	

DISMISSAL CRITERIA	RE-ADMISSION CRITERIA
<input type="checkbox"/> Fever infants under 4 months of age Fever is ≥ 100.4 degrees regardless of signs of illness. CYP does not practice the method of taking rectal temperatures. Temperature Reading: _____ Time: _____ Temperature Re-verified (Manager Initials): _____	<ol style="list-style-type: none"> Child is recommended for immediate assessment by a health provider within the hour, if possible Doctor's note is required to return for infants 2 months and less Infants 2-4 months do not require a doctor's note to return Participant is dismissed for the remainder of the day and the following day and may return when they are fever free without the use of fever reducing medications, such as acetaminophen (Tylenol) or ibuprofen (Motrin/Advil) The earliest child can return to program: _____
<input type="checkbox"/> Fever - 4 months and older Fever is ≥ 100.4 degrees AND symptoms of illness or behavior change. Temperature Reading: _____ Time: _____ Temperature Re-verified (Manager Initials): _____	Participant is dismissed for the remainder of the day and the following day and may return when they are fever free without the use of fever reducing medications, such as acetaminophen (Tylenol) or ibuprofen (Motrin/Advil) The earliest child can return to program: _____
<input type="checkbox"/> COVID-like symptoms: (check all that applies) <input type="checkbox"/> Frequent cough <input type="checkbox"/> Shortness of breath or difficulty breathing <input type="checkbox"/> Fatigue/ Muscle or body aches <input type="checkbox"/> Headache <input type="checkbox"/> Sore throat <input type="checkbox"/> New loss of taste or smell <input type="checkbox"/> Congestion or runny nose	<ol style="list-style-type: none"> Participant is dismissed for the remainder of the day and the following day and may return with improved symptoms OR with a medical verification that child is well enough to return and participate in a group care setting documented on this form OR proof of a negative COVID test. Should a participant receive a positive COVID test, further guidance for readmittance will be given directly by Center Director.
<input type="checkbox"/> Diarrhea (If any one of the following exists): a) Loose watery stool that frequency exceeds two stools above child's norm while in care b) Diapered Children: two episodes not contained by diaper c) Toilet-trained children: Two episodes that cause soiling of pants or clothing d) Any evidence of blood or mucus	<ol style="list-style-type: none"> May return to care the following business day if diarrhea has ceased and normal bowel functions have returned (i.e., when frequency has returned to no more than two stools above normal and symptoms are at least as follows, prior to returning to care) Diapered children: Stool is contained in diaper, even though it may remain loose/watery Toilet trained children: No longer soiling pants or clothing Diarrhea containing blood will require a note from a health care provider to return to care The earliest child can return to program: _____
<input type="checkbox"/> Vomiting: More than one episode in 8 hours OR one episode associated with fever, other signs of illness, or behavior changes.	Participant is dismissed for the remainder of the day and the following day and may return to program when vomiting has been absent for 24 hours, AND child is eating and drinking normally without symptoms of illness. The earliest child can return to program: _____
<input type="checkbox"/> Head Lice	<ol style="list-style-type: none"> Participant may return after completion of treatment. Participant must be nit-free or verification of treatment (lice clinic) can be provided. Physician's signature is not required for readmission
<input type="checkbox"/> Unexplained Rash	Child may return to the program when rash is no longer present OR with a medical diagnosis from physician on this form.
<input type="checkbox"/> Inability to participate in daily activities	Child may return to program once well and able to fully participate in program activities.
PHYSICIAN'S STATEMENT REQUIRED for the following:	
<input type="checkbox"/> Suspicion of Conjunctivitis (Pink Eye)	<ol style="list-style-type: none"> Documentation of an office visit is required with a physician's signature and diagnosis on this form. Child may return to program 24 hours after start of antibiotics and if eyes are clear and no longer discharging.
<input type="checkbox"/> Suspicion "Other" Contagious Illness: (check one) <input type="checkbox"/> Ringworm <input type="checkbox"/> Impetigo <input type="checkbox"/> Strep Throat Other: _____ <input type="checkbox"/> Scabies <input type="checkbox"/> Chicken pox <input type="checkbox"/> Hand, Foot & Mouth <input type="checkbox"/> Thrush	<ol style="list-style-type: none"> Documentation of a visit is required with a physician's signature and diagnosis on this form. If antibiotic is prescribed, child must be on medication for 24 hours before returning to care. Lesions must be covered. If diagnosed with hand, foot, and mouth disease, child may return to program when the fever has been absent for 24 hours and all sores are scabbed over.

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 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 program without current immunizations as recommended by the American Academy of Pediatrics (AAP) and the Advisory Committee on Immunization Practices (ACIP). Children who are not immunized may have their admission denied or delayed until all documents are reviewed by the installation medical authorities.

When a child cannot be immunized due to medical contraindication, parents must provide written documentation from the child's attending medical care provider. When religious beliefs preclude immunization, parents must submit a MCINCR-MCB Quantico CYP Religious Exemption/Waiver of Liability form indicating immunizations are not acceptable. Failure to present certification will preclude enrollment of the child or shall result in the disenrollment of the child until such time as certification is provided. If a vaccine-preventable disease occurs in the facility, unimmunized participants will be excluded from the program for the duration of the exposure or until age-appropriate immunizations have been completed.

MEDICATIONS Trained CYP personnel may administer medications to children. Parents are not authorized to give medication to their child(ren) on CYP property. Generally, medications that are given one to two times per day can be given at home unless the medication prescription specifies the need to be administered with meals, or at specific times that occur during program hours. Parents must administer the first dose of new medication 24 hours prior to the child returning to care. This ensures that there is a positive response without negative side effects. Cough and cold medications are not administered in CYP. If a child is administered fever or pain-reducing medication prior to being dropped off for care, he or she will not be able to remain in care if the child becomes ill, spikes a fever, or is unable to fully participate in program activities.

Over-the-counter medications can only be administered if they are ordered by the healthcare provider, are in the original packaging, and have a prescription label with a start and stop date. As needed medications will not be administered except for the following: rescue inhalers; antihistamines and epi-pens 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 by completing the applicable Asthma Action Plan or Allergy Action ACT and action plans must be renewed at least annually. If medications and action plans are not on site or have expired, the child will be denied care.

If there are other medications essential for the well-being of your child, we will consult with our IAT and determine the best plan of action.

For medication to be administered at the program, the parent must complete the Medication Authorization and Administration Record NAVMC 1750/10. Medication must be in the original labeled container. The following information must be provided on the prescription:

1. Name
2. Dose
3. Route of administration (i.e., oral, topical, drops, etc.)
4. Specific times the medication should be given
5. The length of time the medication should be administered (start and stop date)
6. Any additional instructions

Medications will be administered within a 30-minute window before and a 30-minute window after the prescribed time. If the medication is not given within this window, it will not be administered, and the parent will be notified immediately.

Parents can also sign the Non-Medicated Topical Products Authorization NAVMC 1750/7 for non-medicated topical products such as non-aerosol sunscreens, non-aerosol insect repellants, diaper ointments/creams, lotions/creams, lip balm, petroleum jelly and lanolin. Over-the-counter creams and lotions containing Hydrocortisone or triple antibiotic ointments will not be utilized in the center without a prescription and medical documentation providing guidance. The use of baby powder in the program is prohibited. However, if a child has a diaper rash, 100% pure cornstarch can be used when provided by parents. In accordance with the Food and Drug Administration guidance, Benzocaine (found in teething gel) products will not be used on children younger than two years of age. Products in this category should be nonprescription, have no label restrictions with respect to use on children, and are not mixed/homemade concoctions. Aerosol sprays are not accepted in the facilities.

If you have questions about medications, contact the CYP nurse.

MEAL SERVICE CYP is required to participate in the USDA Child and Adult Care Food Program (CACFP). A well-balanced breakfast, lunch, and afternoon snack are provided. An enrollment and income eligibility application must be completed annually for each child. Menus are prepared using CACFP guidelines. A weekly menu is posted in each room, as well as at the front desk of each center.

- Children must be at the center during meal service, as food may not be held for later consumption. Infants are fed on demand.
- Family style dining is conducted in each classroom. 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 may be brought into the CDCs except for infant formula or breast milk. Parents will provide a healthy sack lunch during the Youth Center's Summer Care. The sack lunch should be placed in a glass-free container and should not require refrigeration or heating (i.e., microwave). All facilities strive to maintain a nut-free environment, so sack lunches should not contain nuts, peanut butter, or snacks containing nuts.
- The CDC provides a selected infant formula for parents of infants to use at the center. Families who choose not to use program-provided 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 first and last name and date the bottle was prepared. Infants may be fed infant food beginning at four months of age. Families

and staff work together to introduce new foods to infants and when transitioning from infant food to table food. Teachers will assist families weaning their infants from a bottle to a cup. Infants will be given whole milk in a sippy cup upon their first birthday to assist with the transition to the pretoddler age group. Straws are prohibited.

- The sippy cups will be provided by the kitchen, and straws are not used.
- 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 hour.

FOOD SUBSTITUTIONS will not be authorized in CYP unless required as a documented medical need or a documented religious need. Parental or family preference will not be accommodated.

FOOD EXCEPTIONS BASED ON MEDICAL NEED 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 specifying the medical need for a substitution and recommended substitution(s) noting portion and frequency of each substitution. Upon receipt of this information, the center may provide alternate foods for the child.

FOOD EXCEPTIONS BASED ON RELIGIOUS BELIEFS ACT will review the USMC CYP Special Diet Accommodation – Religious Exemption Form (NAVMC 1750/8, once available). A required statement from a recognized medical authority will specify, based on religious beliefs, the food or food component for which a substitute is required, noting portion and frequency of each substitution, and the recommended alternate foods. Upon receipt of this information, the center may provide alternate foods for the child.

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 aboard Marine Corps Base Quantico, and Prince William County Child Protective Services will be notified. Center personnel will not notify parents when suspected institutional child abuse is reported. For families, the Department of Defense operates a **Child Abuse/Safety Violation Hotline. The telephone number is 1-877-790-1197.**

To further promote the safety of all children enrolled in CYP, all staff members must satisfactorily complete a criminal history background check.

PARENT RELATIONS

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 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 center

COMMUNICATION Daily activity sheets are sent home each day for infants through the toddler age. 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's director so that arrangements can be made for another staff member to substitute in the classroom. It is of utmost importance that there always be adequate classroom supervision. Telephone conferences can be arranged if necessary. Families are encouraged to talk with their children 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. CYP maintains a Facebook page, "Quantico Child and Youth Programs," that posts upcoming events and information on base or facility closures - be sure to 'like' the page. CYP utilizes email blasts to communicate important information. The email address given on enrollment documentation will be used. See the front desk to add multiple email addresses.

MUTUAL RESPECT POLICY CYP is a successful program due to the continuous partnership between staff and parents. We pride ourselves on consistently providing world-class customer service and encourage feedback from patrons on how we met your needs and how we can improve. This respectful communication is a two-way path, and we expect our patrons to be always respectful to our staff and children. While we encourage feedback and opportunities to improve services, rude, inappropriate, or perceived threatening behavior/language from a patron can result in notification to Command and/or denial of service.

PARENT BOARD A Parent Board (PB) is established to discuss CYP recommendations for improving programs and services and to coordinate a parent participation program. The PB shall be comprised of and chaired by volunteers who have children enrolled in CYP. All parents are encouraged to attend the quarterly PB meetings, and we are always looking for room representatives. For additional information on the PB, please see the center's director.

CLASSROOM WISH LISTS Occasionally, the classroom will post a wish list of items that are needed, such as paper towel rolls, dress-up clothes, magazines, thread spools, wallpaper samples, etc. Please check with your child's classroom or center's director before discarding items that may be of use in the center. Your trash just may be our treasure!

QUANTICO CHILD & YOUTH PROGRAMS
PARENT HANDBOOK ACKNOWLEDGEMENT

I have read and understand the Parent Handbook. I acknowledge that I have read and understand the Standard Operating Procedures below, which are in the CYP Parent Handbook and that I have received an orientation by the program.

Please place your initials next to each topic below:

- _____ Health Assessment Form
- _____ Payment Policy
- _____ Staff-to-Child Ratio Guidelines
- _____ Late Pick Up Policy/Fees
- _____ Intoxication Waiver
- _____ Positive Guidance Policy
- _____ Biting Policy
- _____ Touch Policy
- _____ Health Screenings and Dismissals
- _____ Child Abuse Reporting
- _____ Mutual Respect Policy

In the event of a medical emergency, I consent for my child to be transported to the nearest hospital via an ambulance. I understand that if I am not present when the ambulance leaves the facility, a staff member at the program site will accompany my child to the hospital. I understand that the designated hospital is Stafford Hospital, although the hospital the child is routed to may change due to traffic and other situational circumstances.

Child's Name

Parent/Guardian Signature

Print Parent/Guardian Name

Date

Center Director Signature

MCB QUANTICO – CHILD AND YOUTH PROGRAMS **COVID-19 PARENT HANDBOOK ADDENDUM**

Child and Youth Programs (CYP) takes the health and safety of our staff, children, and families seriously. The following procedures are provided to meet the health and safety intent of CYP, MCCS, and Marine Corps Base Quantico (MCBQ) during the current COVID-19 pandemic. CYP and MCBQ continually monitor guidance from Headquarters Marine Corps, the Department of Defense and the Centers for Disease Control. As guidance evolves, so will operations. We appreciate the continued patience of the staff, families, and children we serve.

Child Care Placement CYPP is currently extending childcare offers to eligible from the MilitaryChildCare.com waitlist by utilizing the Department of Defense (DoD) priority symptom. Once an offer for care is extended, the family must accept the offer within 48 hours. If the child care offer is not accepted via MilitaryChildCare.com, the family is removed from the waitlist and will no longer be considered an unmet need for child care.

Hours of Operation Child care hours of operation are from 0600-1800, **Monday through Friday** for the Child Development Centers. The School Age Care (SAC) program operates from 0600-1800 when school is in session. During breaks, SAC is in operation from 0600-1800, **Monday through Friday**. Currently, **CYP is not providing extended care**.

Meal Service CYP menus are subject to change based on product availability; any menu changes are posted at the front desk of the center. Meals are plated for children. Serving utensils will not be used by children, and serving bowls will not be passed around tables (i.e., family-style dining). The caregivers serving food will use gloves.

Special Precautions CYP has enacted numerous precautions designed to reduce the risk of spread of infection and protect the health of children and employees. Examples include:

- Cots and cribs are placed at least three feet apart, and children are placed in an alternating head-to-toe pattern to minimize face-to-face contact.
- Sand/water table group play has been suspended. If sand or water play occurs, children are provided with their own container and toys. Containers and toys are sanitized before being used by another child and the contents, such as water or play sand, are disposed.
- Children are provided with their own playdough/clay/sensory mixture. Mixtures are not shared with other children.
- To the extent possible, children are provided with individualized supplies of art/drawing materials (crayons, colored pencils or markers, glue sticks, etc. as age appropriate).
- Toys are sanitized throughout the day and washed daily or after being “mouthed” by a child.

- CYP will conduct handwashing procedures with the children using soap and water for at least 20 seconds upon arrival, before meals or snacks, after outside time, after restroom use, after touching trash, after sneezing or coming in contact with any bodily fluids, after messy play, before departure and at other opportunities, as appropriate.
- High-touch areas are frequently cleaned and sanitized throughout the day. Cleaning and sanitizing solutions are prepared as prescribed by the CYP Health Protocol, which meets the Centers for Disease Control standards. Other methods of sanitation, such as foggers, are used on a weekly basis in the classroom after hours.
- Dramatic play clothes that are pulled over the head have been removed. Dramatic play vests and other soft furnishings/dolls are laundered daily. Paint smocks are laundered after use.
- To allow for greater spacing between children, activities are set up that encourage small group play instead of whole group activities.

Health Screening Protocol Face coverings are optional in all MCCS facilities to include CYP, by anyone aged two and older.

Any individual who presents:

- TWO of the following symptoms: fever, chills, pain in muscles, headache, sore throat, nausea or vomiting, diarrhea, fatigue, congestion, or runny nose

OR

- ONE of the following symptoms: cough, shortness of breath, difficulty breathing, or new loss of taste or smell

will be denied access to the program until symptoms subside for a period of not less than 24 hours and are asymptomatic and fever-free for 24 hours without fever-reducing medication.

MCBQ and NHCQ require immediate notification to the CYP facility's director or assistant director in the event a staff member, child, or individual living in the home has been tested for COVID-19 or came into contact with anyone who has been tested for COVID-19. Close contact, as defined by medical professionals from the Center for Disease Control and NHCQ, involves contact without a face covering, exposure less than six feet apart for a time more than 15 minutes within a 24 hour period of time.

Reporting of Symptoms Parents should report COVID-19 like symptoms or COVID-19 tests of children or household members to facility management. Classrooms will no longer be closed for pending COVID-19 testing results.

Positive COVID-19 Case Response In the event that an individual tests positive for COVID-19, the children and staff assigned to the room where the individual was present will be restricted

from returning to the program for a period of no less than five days from last day of exposure (10 days for children in an infant or pretoddler classroom).

If a child or staff member is exposed to an individual who is positive for COVID-19 (within six feet for more than 15 minutes), there are two courses of action depending on vaccination and booster status:

- 1) If an individual is unvaccinated, or if they have completed the primary series of Pfizer or Moderna vaccine over six months ago and the Johnson and Johnson vaccine over two months ago and are not boosted, the exposed individual must quarantine for a period of five days from last date of exposure, followed by five days of strict wearing of a well-fitted mask. If the individual chooses to test, it is recommended that the individual test on Day 5. If symptoms develop, the individual should get tested and stay home. For individuals living in a household with a positive individual, the individual will be out of the program for no less than 10 days. This will allow five days for COVID-19 recovery of the COVID-19 positive individual and five additional days from date of last exposure. This reduces the time out of the program from the current 24 days to 10 days for those who fall within this category.
- 2) If boosted, or if an individual has completed the primary series of Pfizer or Moderna vaccine within the last six months or the Johnson and Johnson vaccine within the last two months, quarantine is not required. CYP staff in this category will continue to report to work. The individual is to wear a mask around others for 10 days. If the individual chooses to test, it is recommended that the individual test on Day 5, and if symptoms develop, the individual should get tested and stay home.

A positive COVID-19 case may not result in entire facility closures.

Cleaning and Sanitation Closed rooms are cleaned and disinfected using the procedure per MCO 1710.30 (Marine Corps Child and Youth Program Health Protocol), which meets the recommendation of steps to follow for cleaning and disinfection by the Centers for Disease Control.

A fogger that disseminates a fine mist of a sanitation agent is used by CYP staff in the affected room prior to reopening. Safety Data Sheets for the sanitation solution deployed by the fogger have been deemed safe to use in the CDC and are kept on file in the program.

Appropriate handwashing hygiene as per Reference A is to be always used.

USMC Child & Youth Programs

Assisting Children with Handwashing



When to Wash Hands

- Immediately before and after food or bottles
- After contact with potentially contagious individuals
- Before or after administering medication/basic care items/first aid
- After diapering/toileting
- Before and after water play
- After entering facility/home from outdoors
- After coughing/sneezing
- After contact with bodily fluid
- After handling pets
- After handling garbage
- When hands are visibly dirty
- Before going home

Handwashing Steps

1. Turn on warm water (80-110°F)
2. Wet hands
3. Apply liquid soap
4. Wash hands for 20 seconds
Rub top and inside of hands, under nails and between fingers
5. Rinse hands under running water for at least 10 seconds
6. Dry hands with disposable paper towel
7. Turn off water with paper towel
8. Throw paper towel into a lined trash container

Participants who...

CAN safely stand or roll to a sink:



1. Ensure proper equipment is available and utilized (e.g. pull out steps, slip resistant step stool, ADA sink).
2. Assist and/or monitor participant with proper handwashing
3. Wash your hands

CANNOT stand or roll to a sink:

Adult **cannot** hold infant or child at sink:

Use the **Three Towel Method** to wash hands

1. Wipe infant or child's hands with a damp towel moistened with a drop of liquid soap
2. Wipe infant or child's hands with a second wet paper towel
3. Dry infant's or child's hand with a third paper towel

Adult **can** hold infant or child at sink:

- Carry infant or child to sink
- Hold infant or child at the sink
Do not push infant or child's tummy into the sink
- Wash infant or child's hands
- Wash your hands

MARINE & Family



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