

DEPARTMENT OF THE AIR FORCE



**CHILD DEVELOPMENT  
CENTER**

**Vandenberg CDC  
Parent Handbook**



## TABLE OF CONTENTS

|   |       |
|---|-------|
| 1. Definitions  | 3     |
| 2. Responsibilities                                     | 3-4   |
| 3. Parent Involvement/Parent Advisory Board             | 4     |
| 4. Program Attendance and Late Charges                  | 4-5   |
| 5. Weekly Fees/Late Payment Fee/Multiple Child Discount | 5-6   |
| 6. Fee Categories                                       | 6     |
| 7. Meals/Food Allergies                                 | 6     |
| 8. Child's Absence/Sublet                               | 6-7   |
| 9. Clothing/Diapers/Bottles                             | 7     |
| 10. Outdoor Play Policy                                 | 7     |
| 11. Immunizations                                       | 7-8   |
| 12. Inclusion of Children with Special Needs            | 8     |
| 13. Ages and Stages Questionnaire                       | 8     |
| 14. Exclusion and Readmission of Ill Children           | 8     |
| 15. Illness/Injury/Emergency Notification               | 8     |
| 16. Exposure Policy                                     | 8-9   |
| 17. Medication  | 9     |
| 18. Guidance & Discipline/Challenging Behavior          | 9     |
| 19. Transitions   | 9     |
| 20. Termination   | 10-11 |
| 21. Authorized Release                                  | 11    |
| 22. Annual Tax Information                              | 11    |
| 23. Annual Topical Ointment Release                     | 11    |
| 24. Military Family Life Consultant (MFLC) Services     | 11    |
| 25. Emergency Procedure/ Plans                          | 11-12 |
| 26. Media Release                                       | 12    |
| 27. No Smoking, Illegal Drugs and Alcohol               | 12    |
| 28. Eco –Healthy Practices                              | 12    |
| 29. Vehicle & Building Safety                           | 12    |
| 30. Chain of Command                                    | 12    |
| 31. Disclaimer  | 12    |

## DEFINITIONS

- a. "Patron" includes the child's parent(s), legal guardian, and/or sponsor. Patrons are considered eligible for CDC usage if at least one family member is active duty military (regardless of branch of service), a Department of Defense employee, an APF/NAF civilian employee, employed by DECA, DFAS, or Contractor assigned to Vandenberg SFB.
- b. "Center" and "CDC" refers to the Vandenberg SFB Child Development Center.

## RESPONSIBILITIES

We adhere to the AF CYP Mission Statement: To assist Department of Defense (DoD) military and civilian personnel in balancing the competing demands of the accomplishment of the DoD mission and family life by managing and delivering a system of quality, available, and affordable programs and services for eligible children and youth birth through 18 years of age. The Child Development Center (CDC) will offer full-time care in a safe, healthy, developmentally appropriate environment for enrolled children, ages 6 weeks to 5 years (or until they enter Kindergarten). Center must adhere to all Air Force regulations, guidelines, policies, procedures and operating instructions. These guidelines are available for your review at the front desk of the CDC. Please ask if you need translation services available for any discussions with program staff.

Center personnel will provide an individualized program that includes a variety of activities developmentally appropriate for each child. The activities provided for the children are based on quality early childhood practices in accordance with the Early Learning Matters Curriculum. All activity plans are reviewed and approved by the Center's Training and Curriculum Specialist prior to implementation. All staff are trained in confidentiality.

Center personnel follow standardized procedures for creating safe sleep environments for infants. Infants up to 12 months of age must be placed supine (wholly on the back) for sleep by CDC personnel. Any deviation from placing infants to sleep on their backs requires a physician's signed sleep medical exception. The exception shall be reviewed and approved by the CDC Medical Advisor and AFPC/SVI. Elevating cribs for infants with gastro-esophageal reflux is not permitted. Please ask for a copy of the Air Force Child Development Programs Infant Safe Sleep Instructional Guide for additional details.

Center personnel are mandated reporters of child abuse and neglect. Any suspicion of child abuse is reported verbally and in writing to the Family Advocacy Office and AFPC/SVI through unit channels within 24 hours. Personnel suspected of abuse are removed from duty until investigations are complete and a determination is made regarding the individual's suitability to return to work. There are three ways to report suspicions of child abuse or neglect by calling one of the following:

DoD Child Abuse and Safety Hotline: 877-790-1197

Family Advocacy: 805-606-8217

Child Protective Services: 800-367-0166

All center personnel receive mandatory annual positive guidance and appropriate touch training. Please let us know if you would like a copy of this training.

All Annual Comprehensive Inspections, Annual Unannounced Higher Headquarters Inspections, Multi-Disciplinary Inspections, Parent Advisory Board Minutes and Product recalls are located at either the front desk or in the lobby for your review.

The Center has an open door policy. Families are welcome and encouraged to visit their children at any time during operating hours.

A program orientation will be scheduled prior to the child (ren)'s start date for enrollment. This is a one-time requirement and is mandatory.

Formal parent conferences will be scheduled semi-annually to give patrons and classroom teachers the opportunity to discuss the child's growth and development. Patrons will be encouraged to assist teachers with setting future goals for

their child's progress and learning. Parent conferences are highly encouraged, but optional for the patron. The meetings may include the Director, Assistant Director or the Training and Curriculum Specialist.

Other conferences may be scheduled as needed when supporting children's development and assisting them as they learn appropriate behaviors for group care settings. Patrons will attend scheduled meetings throughout this process or care may be denied.

Staff to Child ratio:

|                         |         |
|-------------------------|---------|
| 6 weeks to 12 months:   | 1 to 4  |
| 12 months to 24 months: | 1 to 5  |
| 24 months to 36 months: | 1 to 7  |
| 3 years to 5 years:     | 1 to 12 |

**Ratio may be lower in classes that serve children with special needs, as determined by Inclusion Action Team and AFPC/SVI.**

### **PARENT INVOLVEMENT/FIELD TRIPS/PARENT ADVISORY BOARD**

Parents are highly encouraged to take an active role in their child's daily learning at the Center. Classrooms schedule weekly parent involvement activities and the Center offers monthly opportunities for families to get involved. Parent input is critical to make these events successful; we try to plan events at times of the day that work best for the majority of family's work schedules.

Parents are also encourage to accompany us during field trips to the surrounding areas. Children will be transported by a bus service provided to us from base transportation. Fieldtrips are planned 2 weeks in advance to allow families time to make arrangements if they wish to accompany us.

The Combined Child and Youth Programs Parent Advisory Board (PAB) meets quarterly. The CDC PAB meets as needed to discuss events, plans, and upcoming changes in the Center. We encourage all parents to take a leadership role in the private organization and use this forum to meet other parents, ask questions, and become more active in the program. The PAB also creates an annual involvement calendar.

### **PROGRAM ATTENDNCE AND LATE CHARGES**

A week is defined as Monday through Friday.

A new enrollment agreement is required each fiscal year.

Center hours of operation are 0645 until 1715 each day, except federal holidays, Christmas Eve, the day after Thanksgiving, base closure days, or US President- directed closure days.

Daily notification of non-attendance is required. If the program does not received notification of non-attendance and your child does not arrive for care at their usual time, you will receive a call by 0900 to inquire about your child's attendance for that day. This is important for two reasons:

1. We value your child's safety. There have been instances in which children were transported to care but forgotten in the car on a hot day, where temperatures resulted in their death.
2. We value your personal finances. If you are able to notify us by 0730 of the morning of care AND we are able to fill your childcare space with an hourly care patron that day, you will receive a credit for the hours used on your next week's child care fee. The credit will be based on your hourly rate for your income category and the hours utilized for hourly care.

Late charges will be applied for the following reasons:

1. A late pick-up fee of \$2.00 per minute will be charged for any child left in the Center after the 1715 closing time after a 10-minute grace period. The 10-min grace period is for emergencies only. This fee can be waived by the Manager on Duty depending on circumstances AND if advanced notice is given (prior to 1715).
2. These fees will be charged the following business day.
3. Security Forces will be called for assistance when a child remains in the CDC after 1730 hrs. and the CDC is unable to contact the patrons or authorized emergency contacts.

Copies of all required supporting documentation for enrollment in the CDC will be provided/updated annually: Medical documentation of any special needs and accompanying action plans for allergies or special diet to include substitution and exposure plans; child custody order/divorce decree limiting parent rights; copies of current earnings statements, and all USDA Child & Adult Care Food Program enrollment forms.

Parents authorize the center to post their child's allergies/food preferences and/or special needs on an Allergy Listing in a visible place in each classroom and at the kitchen and front desk to ensure their child's safety.

### **WEEKLY FEES/LATE PAYMENT FEE/MULTIPLE CHILD DISCOUNT**

Weekly fees will be based on the total family income (TFI) entered on DD Form 2652. Total family income includes all pay and allowances as stipulated by the Air Force Fee Policies and is based on pre-tax income. Disclosure of this information is mandatory. For married patrons living in two households, total family income is still determined by both patron's pay and allowances. For households in which unmarried couples or pairs are living as a family, the total household income of the "family unit" will be used to determine TFI. For blended families, the income of the household in which the child spends most of his or her time should be used for TFI. For households in which non-related families are living in the same residence, include the income of all adults who financially contribute to the welfare of the child. In households where the parents are married and the custodial parent is geographically separated from the sponsor, total family income includes the income of both. During deployments, temporary custody to relatives or friends will not affect the TFI calculations for the dependent child. The fee category will be based on the sponsor's TFI. Misrepresentation of the information may result in disciplinary actions as stated on DD Form 2652. Please contact the CDC Director if there are changes in TFI during the term of this contract. You may be eligible to apply for a hardship waiver. The Director or designee will route the request to the Mission Support Group Commander, through the Airman and Family Services Flight Chief, for approval. Patrons requesting TFI recalculation may be required to attend a financial assistance appointment with the Airman & Family Readiness Center's personal finance representative. Please contact the CDC Director with other questions about TFI or eligibility.

Weekly fees are paid in advance of provision of care. This payment reserves a space for each child listed on the Child Care Agreement. Are not refundable, unless paid in advance for care not provided beyond the required two-week withdrawal notification period. Are not excused for most instances, including but not limited to, vacation and illness. Patrons are charged for any contracted time even though their child is absent from the Center. This reserves the child's space for their return. Include breakfast, lunch and snacks. Patrons may not bring food into the CDC for birthdays, special occasions, or to provide individual food for their child.

Weekly fees will not be prorated for:

1. The days the Center is closed for federal holidays, base closure days, or US President-directed closure days.
2. If your child is sent home from the Center for a day due to the display of inappropriate behavior.
3. Partial attendance or days missed due to illness, vacations and/or withdrawals from Center without a written two-week notice period.

Weekly fees will be prorated for the closure on the Day after Thanksgiving and Christmas Eve.

**Weekly fees must be** paid by VISA, American Express or MasterCard and will be processed through auto pay. The choices for payment frequency are detailed below:

Weekly (due every Monday)

Bi-weekly (due every other Monday)

Bi-Monthly (due 1<sup>st</sup> and the 16<sup>th</sup>)

Monthly (due every 1<sup>st</sup> of the month)

Auto payment is required.

- a. If the card is declined, patrons are given a one-day grace period to provide a new card number. If no payment is rendered following the grace day, there will be a late payment fee of \$5.00/day, care may be denied and patron will need to speak with the Center Director before care will begin again.

Patrons are eligible for a multiple child discount of 15%. The discount will be applied to the child's fees that are the lowest. (e.g. If a family has one child in the School Age Program for before and/or after school care and one child in full time CDC care, the School Age Program fees will be discounted 15% and the CDC fees will be full price.

### **FEE CATEGORIES**

The current fee categories have been established within DOD and AF guidelines. Annual fee letters are provided to parents. Copies of the category structure and applicable fees may be obtained from the front desk. All questions regarding fees should be made to the program's Director.

### **MEALS/FOOD ALLERGIES**

Children should be signed into the Center by **0815** hours for breakfast and by **1115** hours for lunch to ensure children will receive adequate meals. Snack time is at **1400**.

All meals and snacks meet USDA nutritional guidelines and are approved by the base Dietician/MAJCOM Specialist. The program's goal is to meet nutritional needs while introducing children to a variety of foods served in a family-style setting. If a child has dietary restrictions due to medical or religious reasons, parent/guardian must provide supporting documentation from a medical professional. A Special Diet Statement form may be obtained at the front desk to be filled out by your child's physician. Please ensure that all known allergies to food or other items are annotated in the "Allergy and Special Needs Information" section of your CYPBMS parent portal.

When the CDC is unable to provide food required for a child's medical condition, parents may provide food when prescribed by the child's health care provider and approved by the CYP Medical Advisor. The Installation's Public Health Office is consulted for safe food storage. All food must meet USDA CACFP guidelines.

Infants are fed on demand. Solid foods are not fed to infants younger than 4 months of age. Patrons should refer to the Air Force Child Development Programs Feeding Infants and Young Children Instructional Guide for additional information.

### **CHILD'S ABSENCE/SUBLET**

For medical and safety reasons, we request patrons to notify the Center staff within 24 hours of the start of their child's absence from the Center for any reason—illness, family emergency, etc.

Families in the CDC program are entitled to sublet their space to another family whose child is of the same age. Only weekly spaces (Monday-Friday) will be available to sublet. The CDC will provide assistance to promote the available space; however, it is the sole responsibility of the owner of the space to advertise and to find a family that would like to

sublet. More information about subletting is available at the front desk. If the child subletting the space has special needs, enrollment could be delayed until special needs documentation is approved by the flight medical advisor. IAW AFI43-144, para. 8.4.10.

Patrons will be responsible for half their child's weekly fee up to a one month period of time while on Emergency Leave. To be eligible, patrons must provide medical documentation prior to the start date of the Emergency Leave.

If a patron withdraws their child (ren) from the program during their deployment, the child (ren)'s name(s) will be placed at the top of the waiting list for their age-group and remain there until their parent returns from deployment. If immediate placement upon return cannot be arranged, the program will assist in making temporary child care arrangements in a Family Child Care home.

### **CLOTHING/DIAPERS/BOTTLES**

Patrons will provide a complete change of clothing to be kept at the Center. Children being toilet trained should have at least 3 changes of clothing until accidents no longer occur. Failure to supply adequate clothing may result in you being called to bring in a change of clothing during the day. Children are required to wear closed-toed shoes with a strapped heel that keeps the shoe on the foot. This is to safeguard your child from any injuries or infections that may occur because their feet are exposed. Infants learning to walk are encouraged to wear soft-soled shoes. Children may not wear jewelry around their neck, earrings that dangle, or other items that could present a danger either to the child wearing it or to another child if picked up and put in their mouth.

Patrons are required to supply enough diapers and wipes for the time the child will be in the Center so that staff can change wet or soiled diapers promptly. Please check with classroom staff to determine the frequency of diaper changes.

Patrons are also required to supply enough clean bottles to accommodate their infants feeding needs. Infants are fed on demand. During a typical 10 hour day this usually requires 6-8 bottles. For breast-fed babies, please consult with your lactation consultant for how much breast milk your infant should be provided while in child care away from you.

Items belonging to each child, including but not limited to, clothing, diapers and bottles, must be clearly labeled with the child's name prior to admission to the Center. The CDC is not responsible for any misplaced or damaged personal belongings.

### **OUTDOOR PLAY POLICY**

Outdoor play is an important part of a child's day. Sunscreen of 30 SPF or higher will be applied 30 minutes prior to going outside. Drinking water is available for proper hydration. We do experience winds and rain. Parents are asked to dress their children appropriately and to send a coat or jacket for outside play.

Temperatures from 50-80 are considered temperate. Cold weather is 32-50 degrees and outdoor activities may continue provided each child has adequate cold weather clothing. If not, the parent will be called to bring in. During extreme cold weather, including wind chill below 32 degrees, outdoor activities will be discontinued. Hot weather temperatures are between 80-89, activities will be carried out as normal, 90-99 degrees activities will be carried out in shaded areas for no more than 10 min.

### **IMMUNIZATIONS**

Children's immunizations must be current at all times in accordance with the current year Center for Disease Control immunization schedule for the child's age. According to AFI 34-144-2, para 12.6.1, children who have not received their age-appropriate immunizations prior to enrollment and do not have a documented religious or medical exemption from routine childhood immunizations are required to have immunizations within 30 days of enrollment. Dis-enrollment of the child will happen if documentation is not provided within thirty calendar days of enrollment. For a child currently attending the program, a parent will be given 2 weeks to meet the immunization requirement or submit a waiver request. Once the waiver request is received, enrollment will not be terminated until a decision is reached by HQ AF.

## **INCLUSION OF CHILDREN WITH SPECIAL NEEDS**

The Vandenberg CDC is an inclusive facility. We make every accommodation possible within the constraints of our facility, staffing, and AF policy. Patrons will notify the CDC on the Child Placement Questionnaire of any special needs (e.g. developmental, physical, allergies, and/or asthma) their child may have. Patrons will complete the Parental Permission Request and provided all necessary documentation. The program's medical advisor will review all documentation to determine the child's needs within the program setting. If necessary, the Inclusion Action Team (IAT) may meet to review/discuss the child's enrollment and any special provisions needed to meet the child's need. If reasonable accommodations can be met, training will be provided to CDC staff members to meet all specific instructions for care. Note: Long term or permanent changes in ratio or group size must be approved by the IAT and AF/A1SOC.

## **AGES AND STAGES QUESTIONNAIRES**

Upon enrollment and at regular intervals through the year, parents will be provided with Ages and Stages Questionnaires (ASQs). These questionnaires assist parents and staff in assessing children's developmental progress and identifying children's developmental delays and/or needs. The direct care staff receive initial and ongoing training in use and application of assessment tools and also utilizes the input of the Director and/or Training and Curriculum Specialist. Parents are always the primary decision makers regarding receipt of any additional services for their children. However, program staff will make recommendations where applicable to ensure parents have all resources possible to advocate for their child.

## **EXCLUSION AND READMISSION OF ILL CHILDREN**

The Center uses the book *Managing Infectious Diseases in Child Care and Schools* 6<sup>th</sup> Edition to make decisions for exclusion and readmission. In some situations, children may need a physician's statement regarding specific possibly contagious conditions clearing the child for care. Exclusion may also be necessary if a child is too ill to participate comfortably in all program activities (including outside play) or exhibits a condition requiring greater care than can be accommodated by the CDC staff without compromising the health and safety of the other children in care.

## **ILLNESS/INJURY/EMERGENCY NOTIFICATION**

It is the Center's intent to protect all children and staff from the possible exposure to illness. Patrons will be contacted when a child exhibits any sign of illness and be required to pick up their child when the illness requires exclusion. Patrons are required to pick up their child within one hour from the time of contact. If the patron cannot be reached, the emergency contact will be called. It is our policy to complete an accident report when a child is injured in our facility. If the injury is severe, 911 will be called. If needed, trained staff will administer First Aid/CPR and child will be transported to the nearest medical facility. Parents will be notified as soon as possible.

## **EXPOSURE POLICY**

Center staff will follow strict exposure control policies to limit children's contact with bodily fluids. If a child has mistakenly consumed another child's cup of expressed human milk, the possible exposure to hepatitis B, hepatitis C, or HIV will be treated as if an exposure to other body fluids had occurred. For possible exposure to hepatitis B, hepatitis C, or HIV, the program will inform the mother who expressed the human milk about the mistake and when the milk switch occurred. The Center will also discuss the mistake with the parents/guardians of the child who was fed the wrong bottle/cup. Parents will be encouraged to contact their infant/child's primary health care provider for further guidance. The Center will also contact the Public Health Office and the CYP Medical Advisor. A review of the incident will be conducted and strategies will be developed to prevent future incidents.

Mothers who are HIV, Hep B or Hep C positive agree not to provide expressed milk to their children.

\* **Please note:** The risk of hepatitis B, hepatitis C, or HIV transmission from expressed human milk consumed by another child is believed to be low because:

- 1) In the United States, women who are HIV-positive and aware of that fact are advised NOT to breastfeed their infants and therefore the potential for exposure to milk from an HIV-positive woman is low;
- 2) In the United States, women with high hepatitis C antiviral loads or who have cracked or bleeding nipples might transmit the infection through breastfeeding. Therefore, they are advised to refrain from breastfeeding
- 3) Chemicals present in human milk act together with time and cold temperatures, to destroy the HIV present in expressed human milk;
- 4) Transmission of HIV from a single human milk exposure has never been documented.

## **MEDICATION**

The Center's trained staff will administer only prescribed medication that is provided by the patron in its original container with the prescription label intact. Air Force Form 1055, *Youth Flight Medication Permission*, will be completed by the administrative staff and patron will sign, prior to the CDC staff administering any prescribed medicine. The initial dose of any medication must be provided by the parent at least 20 minutes prior to the return to care. Expiration dates must be annotated on the prescription label and on the AF Form 1055. All medications accepted must have a start and stop date. For children with conditions that require medications without prior notice (for example: children with asthma), the Center will contact the patron to receive confirmation either verbally or electronically.

Medication is stored behind the front desk in a secure location. There is a refrigerator available for medicines that must remain at a specific temperature.

Staff who administer medications are trained annually by a subject matter expert on the correct procedures.

Prescriptions that indicate medications need to be taken once or twice a day will not be given by Center personnel. Medications that need to be taken three times a day will be offered at either 1000 or 1500, based on parent request. Medications that need to be taken four times a day will be offered at 1000 and 1500.

Infant cereal, fruit juice, or any other foods (to include prescription and non-prescription medications) are not added to bottles with IFIF or human milk, unless directed by the infant/child's health care provider and approved by the Child and Youth Programs (CYP) Medical Advisor.

## **GUIDANCE & DISCIPLINE/CHALLENGING BEHAVIORS**

All personnel practice a positive approach to discipline that will aid children in developing self-control. The goal is for children to learn to regulate their own behavior and follow rules and limits, not because they are afraid of being punished, but because a caring and trusting relationship has been nurtured and developed. No form of guidance such as spanking, withholding food, frightening, verbal abuse, humiliating, or binding is tolerated in the CDC.

### Infants and Toddlers Appropriate Guidance Techniques:

- Redirect attention to a safe object or area of the room.
- Remove objects that pose a threat or problem.
- Offer a diversion.
- Separate/move infants who would hurt themselves or each other.
- Use facial expressions and tone of voice to convey messages.
- Give children a chance to work it out if no one will be hurt.
- Resist overusing 'No'. This should be used for dangerous situations that require immediate responses.
- Monitor infants at all times. Anticipate dangerous situations.
- Explain what children can do in a positive manner.
- Give hugs and nurture. Let children know that it is not necessary to misbehave to get attention.
- Praise appropriate behavior.
- Maintain a positive attitude toward the child. Keep a sense of humor.
- Help the child gain control by holding and talking quietly to the child.

### Preschoolers Appropriate Guidance Techniques

- Encourage children to develop problem-solving skills.
- Anticipate problems and plan ahead.
- Talk with the children to help them understand how their actions cause a problem.
- Immediately stop dangerous behavior.
- Observe when children are restless and change the activity to allow energy to be redirected in a positive manner.
- Redirect activities toward acceptable behavior. Make frequent checks on the child to make sure that he or she follows through.
- Praise appropriate behavior.
- Maintain a positive attitude toward the child. Keep a sense of humor.
- Explain desired behavior in a positive manner.
- Involve the children in setting rules and limits.
- Offer choice. Provide several acceptable alternatives/
- Help the child gain control by holding and talking quietly to the child, using restraint as a last resort to ensure safety of the child and others.

It is the Center's goal to provide a safe environment for all children. Children exhibiting challenging behaviors will be placed on a Behavior Intervention Plan. Patrons will be requested to meet with their child's teacher, Training & Curriculum Specialist and the Director. All efforts will be made to assist the child to work through this time. There may be times the patron will be called to assist in the program. Time frames will be established with the patron. Failure to follow the agreed upon plan may result in removal of the child. When behaviors continue beyond the period of developmental appropriateness or the behavior escalates, the child may be removed from the program for the remainder of the day. If the Behavior Intervention Plan is not successful a Special Needs Multidisciplinary Team (MDT) will meet to review/discuss the child's enrollment and any special provisions needed to meet the child's need. If the team determines that reasonable accommodations cannot be met, recommendations for removal from the program will be routed to AFPC/SVI for a final determination.

### **TRANSITIONS**

Children will transition to the next appropriate age group within 30 days before or 30 days after the child's birthdate whenever possible. The program will notify parents when transitions are occurring and will ensure a date is set for a transition conference with both the current and new classroom teachers and/or the training and curriculum specialist.

Children transitioning to kindergarten will have an automatic placement into the Air Force School Age Program that services the child's school district. Program can put parents in touch with School Liaison Officer to assist with transition to Kindergarten. Children attending Kindergarten are no longer eligible for care at the CDC.

### **TERMINATION**

Patrons must notify the CDC personnel by providing a Notice of Intent to Terminate Use of Child Care form, a minimum of two weeks prior to any other selected date to arrange termination of this agreement. In the event that written notice is not received, the patron will be charged for the time during the mandatory two-week notification period that the child care space remains vacant.

Patrons must notify CDC Staff when patron eligibility for care is affected by the following changes: From full-time to part-time employment or unemployment; Military status changes; Termination of employment (voluntary or involuntary). Patrons will be given 45 days from notification of eligibility status change to provide documentation stating they qualify for care, or their space will be supplanted to a child with a higher priority on the waitlist.

### **AUTHORIZED RELEASE**

Only individuals listed in the emergency contact or authorized person section of your CYPBMS parent account may pick up your child from the CDC. Children may not be released to anyone less than 14 years of age. If copies of the legal documents are on file at the CDC, a divorced or separated parent who does not have legal custody of a child may not pick up the child unless authorized by the custodial parent by being listed in the CYPBMS parent portal. Without legal custody documentation, children will always be released to their biological parent(s). Children will not be released to adults who are inebriated. Security Forces will be called if help is needed. Please make other arrangements for pick-up of your child (ren) if necessary.

### **ANNUAL TAX INFORMATION**

Annual tax information is available to download through the CYPBMS parent portal. The tax identification number for the program is # 53-0228403.

### **ANNUAL TOPICAL OINTMENT RELEASE**

Parents give consent for the Child Development Program to apply non-prescription diaper cream, sunscreen, lip balms, and over-the-counter hand lotions. Sunscreen, insect repellent and hand sanitizers must be approved by the CYP medical advisor and purchased by the program. All topical ointments must be labeled with the child's first and last name. Any sunscreen, insect repellent or hand sanitizer (different from the center supplied, and medical advisor approved brands) brought in by parents must be accompanied by a detailed note from a physician.

### **MILITARY FAMILY LIFE CONSULTANT (MFLC) SERVICES**

MFLC services provide non-medical, short term, situational, problem-solving counseling services. This non-medical counseling is designed to address issues that occur across the military lifestyle and help Service members and their families cope with the normal reactions to the stressful/adverse situations created by deployments and reintegration.

The consultants can support the programs in many ways, such as:

- Observe, participate, and engage in activities with children/youth
- Provide direct interventions in classroom, camp or Family Child Care (FCC) settings; assist staff in managing and setting boundaries
- Model behavioral management techniques and provide feedback to staff
- Be available to staff to discuss interactions and other concerns
- Outreach to parents when they drop off and pick up children
- Facilitate small groups with children to help with developmental skills
- Conduct trainings for staff and parents.

These consultants provide support to faculty, staff, parents, and children in the Airmen & Family Services Flight. They remain in line of sight of the CYP staff and do not meet alone with children under the age of 18. Military and Family Life Consultant services follow the DoDEA guidelines for individual and group counseling services. The Military and Family Life Consultant services available are provided by Department of Defense contractors. All MFLC consultants are licensed professionals.

### **EMERGENCY PROCEDURES/ PLANS**

The Child Development Center participates in monthly unannounced fire drills and bi-annual shelter in place drills as well as base exercises as directed. In order to ensure accurate counts of children, we will not release or accept children during these times. Any patrons present in the facility during a drill must participate in the drill. We request patrons sign up for our texting service and have updated phone numbers on their CYPBMS parent portal to expedite notification in real life emergencies. Parents will receive detailed evacuation procedures for short and long term evacuation during parent orientation.

If you would like to review any of our emergency procedures please see a desk clerk or call 805-606-1555.

## **MEDIA RELEASE**

Parents will be asked to authorize any media release which reads as follows: “I authorize and give consent to the photographing of my child and understand that any videos and photographs of my child may only be used in a specific reference to the Child Development Program for promotion, publicity or recognition purposes of the Center through installation publications.” Parents may limit the media release at time of enrollment.

## **NO SMOKING, ILLEGAL DRUGS AND ALCOHOL**

Smoking on or around the CDC property/facility is prohibited at all times. The use of illegal drugs or alcohol around the CDC property is also prohibited.

## **ECO –HEALTHY PRACTICES**

The Child Development Center promotes Eco-healthy practices which are incorporated in our daily routines, curriculum and health practices. Examples are, but not limited to: choices of furnishings, materials, supplies, and procedures that eliminate or reduce exposure to environmental health hazards such as unhealthy air, heavy metals and chemicals. The CDC participates in monthly water testing for contaminants. All fruits and vegetables are washed before consumption; only non-toxic toys and art supplies are purchased, and eco-friendly detergents and cleaners are used by the facility. When possible, the classrooms make use of recyclable materials for planned activities.

## **VEHICLE and BUILDING SAFETY**

Per Installation Motor Vehicle Code SWI 31-109, it is not permitted to leave vehicles running unattended in the parking lot. It is also not permissible to leave a vehicle unattended for any reason if minor children (under ten years of age) are in the vehicle. Please respect our policy and help us keep our children safe by following the Security Forces guidance.

Note that we are a single entrance facility. Patrons use the front door only. Emergency exit doors are alarmed. The desk clerks monitor the doors and ensure all visitors are signed in, issued a visitors’ badge and escorted while in the facility. Our facility is consistently monitored by a CCTV program. All children, staff and visitors in our program may be subject to closed circuit video monitoring and recording as part of their participation/enrollment at the CDC.

## **CHAIN OF COMMAND**

It is our goal to have open communication with all patrons in order to better serve the children in care. We encourage parents to address questions and concerns with their child(ren)’s teachers. We understand that at times negotiating difficulties and differences might arise in interactions between families and program staff. If this occurs the Director, Assistant Director and Training & Curriculum Specialists are available to assist to moderate the discussion or as the next link in elevating the concern. The CDC has an open door policy, but at times a separate meeting may be scheduled to address the issues and concerns in a more formal manner. If this approach does not produce the desired outcome, the issue will be elevated to the Flight Chief who, depending on the situation, will seek further guidance from the 30th Force Support Squadron Commander or Air Force Higher Headquarters.

## **DISCLAIMER**

The Vandenberg SFB CDC does not and shall not discriminate on the basis of race, color, religion (creed), gender, age, national origin, disability, marital status, or sexual orientation, in any of its activities or operations.