

Child and Youth Programs (CYP) Task Force

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FEES

QUESTION Group – How are fees determined:

- a. How does the CDC/SAP calculate fees?
- b. Why does a dual military spouse couple have to pay the same CDC/SAP rate as an officer?
- c. Why is it that my wife, who is a nurse off base, and I, a SSgt, would be in the highest bracket if we took our children to the CDC?
- d. Why does the CDC/SAP use BAS and BAH to calculate which category a parent is in?
- e. Does COLA affect the CDC charged rate?
- f. Is parent's COLA used to pay staff's COLA?

RESPONSE: Fees are based on total family income, in accordance with DoD guidelines and DD Form 2652 Application for Department of Defense Child Care Fees. COLA is not included when calculating fees.

REFERENCE:

- DoDIs 6060.2, para E2.1.38 and 6060.3 E2.1.21. "Total Family Income." Includes all earned income including wages, salaries, tips, long-term disability benefits, voluntary salary deferrals, quarters allowances and subsistence allowances and in-kind quarters and subsistence received by military member, pay for service in a combat zone and anything else of value, even if not taxable, that was received for providing services. Quarters allowances and subsistence allowances mean the Basic Allowance for Quarters and the Basic Allowance for Subsistence received by military personnel (with respect to grade and status) and the value of meals and lodging furnished in-kind to military personnel residing on military bases.
- DD Form 2652, *Application for Department of Defense Child Care Fees*: Total Family Income is defined as all earned income including wages, salaries, tips, long term disability benefits, voluntary salary deferrals, retirement or other pension income, etc, before deductions for taxes, social security, etc. Include quarters subsistence, and other allowances appropriate for the rank and status of military or civilian personnel whether received in cash or in kind. For dual military living in government quarters, include BAH-II of senior member only. Include anything else of value, even if not taxable, that was received for providing service. **DO NOT INCLUDE** cost of living allowance (COLA) received in high cost areas, alimony, child support, temporary duty allowances or reimbursements for educational expenses.

ANTICIPATED CHANGE DUE TO JRM: No change as this is a DoD policy

REFERENCE: N/A

QUESTION: Why does the CDC here cost so much more than CONUS?

RESPONSE: Weekly fees are established to offset the costs of operating the center. Although Guam is a high cost area, we are neither the lowest nor highest in the AF. Below shows where Andersen stands in comparison to 87 AF bases.

	CAT 1	CAT 2	CAT 3	CAT 4	CAT 5	CAT 6
Andersen fees	\$62	\$76	\$89	\$102	\$116	\$129
% AF above Andersen	47%	39%	44%	41%	39%	48%

ANTICIPATED CHANGE DUE TO JRM: Upon transition to the Navy, our child care fees may go down depending on our ability to receive additional appropriated funds from Commander, Naval Installation Command (CNIC).

REFERENCE: None.

QUESTION: Where is the money going that parents are paying?

RESPONSE: Fees are used for wages, benefits, training and supplies.

REFERENCE: AFI 34-248, 7.1.4. Use fees only for CDPA (Child and Youth Program Assistants) wages, benefits, and training and consumable supplies. Consumable supplies are supplies that are consumed as used. Parent fees may also be used for items for which APF is not authorized such as using a credit card machine.

ANTICIPATED CHANGE DUE TO JRM: None

REFERENCE: OPNAVINST 1700.9E, para. 4.b. “The responsible command shall ensure that receipts are used only for compensation of CYP (Child and Youth Programs) professionals who are directly involved in providing child care in facility based programs, for food related expenses not paid by USDA or APFs, and for consumable supplies.”

QUESTION Group – Vacation/Sick/Down days:

- When a child has to go home for being sick or out due to vacation, is it possible for the rates to be reduced during these times?
- Since parents still have to pay for care when their child is ill can FCC offer a mildly ill program?
- Why do parents pay the CDC/SAP if they want to take their child on vacation for a week or two?
- Why can't you loan your child's spot to someone who really needed it?
- Why do parents have to pay for PACAF down days even if the CDC is closed?

RESPONSE: AF guidance stipulates that parents must pay for the space even if their child is not present because operating costs are not reduced; however, parents may annualize their fees or sub lease their slots. At this time AF is not offering any additional slots for mildly ill FCC homes due to high cost and minimal utilization. Ill children cannot be mixed with healthy children in regularly licensed homes to prevent the spread of illness. Parents are not charged for PACAF family days, parents are only charged

for four days those weeks. If parents must work and need care, free care is provided through the Extended Duty Care Program in a licensed Family Child Care (FCC) Home. The CDC remains open on Wing down days; therefore, parent fees are collected on those days.

REFERENCE: AFI 34-248. Para.7.2.4. Charge for weeks when the child is not present or prorate the cost across the weeks that will be charged. Air Force Frequently Asked Questions guidelines #3, “Parents must pay for the child care space they are reserving even if their child is not present because the program's costs of making that space available, whether it is used or not, do not decrease. Having one or more children absent does not decrease the cost of providing staff for the room and that is what the fees collected from parents are used to pay. The annual fee for use of the child development center is the fee that each child's parent would pay multiplied by 52 (weeks). The fees are set high enough to cover the non-appropriated costs of operating the program only if they are collected for 52 weeks of the year. Parents are required to pay for 52 weeks; however; they may pay the total annual fee in (52), (50), or (48) payments.” And #4 “The program's costs of operating the center do not decrease when one or more children are absent in a room. Unless at least half of the children are absent, the same number of staff must be present to ensure the health and safety of the children. The fees collected from parents are used to pay the care giving staff and those costs do not decrease because of the absence of a few children.”

ANTICIPATED CHANGE DUE TO JRM: The vacation policy may change after we transition to JRM depending on the level of appropriated funds provided by Commander Naval Installations Command (CNIC).

REFERENCE: OPNAVINST 1700.9E, para. 5.d.1. “Vacation discounts are not authorized for CONUS installations. OCONUS installations may authorize up to two weeks of free vacation periods.” 5.d.2. “Sick leave discounts are not authorized.”

QUESTION: Why doesn't the CDC/SAP offer reduced rates for multiple children in one family?

RESPONSE: AF guidance does not authorize reduced fees for multiple children

REFERENCE: AFI 34-248, para 7.2.77.2.7. “Do not give discounts for the second or additional children in the family.”

ANTICIPATED CHANGE DUE TO JRM: Navy offers a 20% discount for multiple children and will offset losses due to this for Andersen with additional appropriated funds.

REFERENCE: CNIC (J912) FY 08 Child and Youth Fee Policy, para 7.8., “Programs shall provide a 20 percent reduction of fees to each additional child from the same program. It will be consistent and applicable to children enrolled in the CDC, CDH (Family Child Care equivalent), SAC (School-Age Program) (e.g., first child in CDC, second child in SAC). Additional child discount is always applied to the oldest child's fees.

QUESTION: I am in category IV because they calculate my husband's pay along with mine, but when it comes to Wing Run days I am not allowed to drop off my children at 0615 because my husband is a civilian. My husband works 24 hour shifts, is there any way to change this?

RESPONSE: You can with an exception to policy, which are considered on a case-by-case basis. In this instance the family had already talked to the CDC director, explained the situation, and an exception had been made to allow early drop off on Wing Run Days.

QUESTION: Why was I charged the higher TLA rate for CDC after my TLA stopped?

RESPONSE: The CDC does not include TLA when calculating fees.

QUESTION: Why does Andersen charge for summer camps when Navy does not?

RESPONSE: Navy Base Guam's Child and Youth Programs are contracted. The contract is paid for with APF dollars so parent fees (NAF dollars) paid in for child care are available and utilized to offer additional programs such as summer camps throughout the year. Andersen must charge fees to cover the costs of offering programs.

ANTICIPATED CHANGE DUE TO JRM: Navy does not charge for these programs. We are discussing summer 2010 activities to see how we can support these programs, and what costs, if any, will be required.

QUESTION: Why can't the payment be made around the 1st and 15th of the month to coordinate with pay days?

RESPONSE: This will be included in our new contract this fall.

QUESTION: Why is the entire month charged on the 1st for automatic pay instead of breaking into 1st and 15th like other CDCs do?

RESPONSE: The option to pay once a month was implemented to provide parents with an option to the weekly payment. The option to pay twice a month on the 1st and 15th will be added in our new contract this fall.

HOURS OF OPERATION

QUESTION: What can be done to accommodate parent's who need extended hours of care during exercises?

RESPONSE: On the first day of a Wing wide exercise, the CDC/SAP will open when recalled. After that, members are encouraged to implement their AF Form 357, Dependant Care Plan, or utilize extended duty care is available *free* to parents who temporarily work outside of normal CDC operating hours through the Family Child Care program. The FCC provider is authorized to pick children up or drop them off at the center.

QUESTION: Can the CDC provide care on days when members are scheduled for PT tests at 0600 at the HAWC?

RESPONSE: Extended duty care is available free to parents who temporarily work outside of normal CDC operating hours through the Family Child Care program. The provider is authorized to pick children up or drop them off at the center.

STAFF TRAINING

QUESTION: What initial training is required for staff?

RESPONSE: All new employees receive orientation training before working with children. Within six months of employment they must complete four Air Force Training Modules, pediatric first aid including rescue breathing, and food handler's training.

REFERENCE: In accordance with AFI 34-248, para 5.5. Orientation Training. Provide new CDPAs and regular and specified volunteers the required orientation, training, and examinations.

- 5.5.1. Complete an individual training plan for all employees at the time of employment.
- 5.5.2. Have a plan for all current employees.
- 5.5.3. Have them complete 4 hours of observation prior to being assigned to work with children.
- 5.5.4. Ensure they receive at least 8 hours of orientation training including reading the program operating instructions (OIs) and Air Force child care policies and instructions prior to being assigned to work with children.
- 5.5.5. During the first 6 months of employment, require that each CDPA complete at least three of the Air Force CDPA Modules, pediatric first aid including rescue breathing, and food handler's training.
- 5.5.6. Have the director or designee observe each new CDPA at least monthly during the first 6 months of employment and discuss the observations with them.
- 5.5.7. Make satisfactory progress toward and completion of the CDPA training modules a condition of employment as a CDPA.

ANTICIPATED CHANGE DUE TO JRM: Minimal changes are anticipated.

REFERENCE: OPNAVINST 1700.9E, para.14.1.f-h.

f. "An initial training orientation shall be provided to all CYP employees prior to beginning their duties at the CYP activity. The training shall include, at a minimum, the following topics.

- (1) Position responsibility and performance standards specific for the employee's position. Employees will be provided a copy of their position description.
- (2) Child abuse/neglect, identification, reporting prevention, and touch policy.
- (3) Fire prevention, protection, emergency evacuation, and safety procedures.
- (4) Child health and safety.
- (5) Visitor requirements and child sign-in and sign-out procedures.
- (6) Applicable local instructions and SOPs.
- (7) An orientation to familiarize the employee with the entire CYP available to parents in the area. It is suggested that all employees are given an opportunity to visit and tour the other CYP facilities.
- (8) Facility control.

g. The following training must be completed within 60 days from the date of hire for all employees working in the CYP.

- (1) Infant, child and adult CPR
- (2) First aid basics as prescribed by American Red Cross or other certification program.

- (3) Navy child abuse modules
- (4) Local training requirements such as Material Safety Data Sheets (MSDS), personal protective equipment, etc.

h. Satisfactory and timely completion of the training program is a condition of employment for all CYP professionals.

QUESTION: What ongoing training is required for day to day operations as well as child development?

RESPONSE: Caregivers are required to complete the 15 Air Force training modules within their first 18 months of employment and 24 hours of training annually thereafter.

REFERENCE: AFI 34-248, para. 5.6. "Child Development Program Assistant Training and Examinations. Have all CDPAs complete the training and examinations required for their positions. Ensure:

5.6.1. CDPAs receive annual training on positive guidance techniques including training on acceptable and unacceptable ways of touching, talking to, and handling children and on how to report suspected child abuse and neglect.

5.6.2. CDPAs complete the CDPA Training Modules during the first 18 months of employment.

CDPAs remain current in pediatric first aid including rescue breathing and food handler's training

5.6.4. CDPAs at the target level are provided at least 24 hours of training annually.

5.6.5. An individual training plan is on file for each employee.

ANTICIPATED CHANGE DUE TO JRM: Some changes are anticipated.

REFERENCE: OPNAVINST 1700.9E, para. 14.2. "CYP Direct Care Staff Training."

a. In addition to the above training requirements, all paid CYP personnel working directly with children shall successfully complete a minimum of 36 hours of training within six months from the date of hire: This training shall include the following:

- (1) Communicable diseases, medication administration, hygiene, hand washing, diapering, facility sanitation, etc.
- (2) Nutrition and food service.
- (3) Growth and development, ages and stages.
- (4) Family and family relations.
- (5) Developmentally appropriate practices and age-appropriate activities and lesson planning.
- (6) Orientation to the Accreditation and Classroom Observation Tool.
- (7) Orientation to Navy Standardized Training Program.
- (8) Health and sanitation procedures, including personal hygiene and sanitation principles, back injury prevention and HIV and blood borne pathogens.
- (9) Age appropriate guidance, techniques, policy and procedures and classroom management.
- (10) Special needs awareness.

b. All paid staff who are responsible for the direct care of children must complete the Navy Standardized Training Program specific for the age group of children they are assigned. Modules must be completed in 24 months of date of hire.

QUESTION: Is there a PTA?

RESPONSE: There is a Parent Advisory Board which meets at least quarterly.

REFERENCE: AFI 34-248, para. 9.2. Parent Advisory Board. Have a parent advisory board consisting only of parents.

- 9.2.1. Include parents from all programs including parents who use hourly care.
- 9.2.2. Have a parent as the chairperson of the advisory board.
- 9.2.3. Ensure the parent advisory board meets with the flight chief and center directors at least quarterly and with the support group commander at least annually.
- 9.2.4. Forward the minutes of the parent advisory meetings to the support group commander.
- 9.2.5. Limit the board role to an advisory function, providing recommendations for improving services.

ANTICIPATED CHANGE DUE TO JRM: None

REFERENCE: OPNAVINST 1700.9E, para. 10-1 Parent Involvement Board (PIB)

- a. Parents have the primary responsibility for the health, safety, and well-being of their children. In an effort to facilitate a parent/CYP relationship for the welfare of the child(ren), CYP shall establish a PIB composed of parents of children enrolled in each type of CYP and conduct, at minimum quarterly meetings.
- b. Each installation CYP shall conduct a combined PIB meeting which will include parents and representatives from CDH, CDC, SAC and Youth (as applicable to the installation). Meetings shall be widely promoted/advertised to ensure maximum attendance.
- c. One parent shall be selected as chairperson.
- d. The majority of the members of the PIB should be parents. Other members may include family advocacy, medical, safety, fire, and preventative medicine departments.
- e. Meetings shall be open to all parents. Minutes of the meetings shall be forwarded to the responsible commander or designated representative for signature and approved minutes posted in the lobby area.
- f. The PIB shall act only in an advisory capacity and shall not engage in the management and operation of the CYP.
- g. A function of the board is to provide recommendations for improving services.
- h. The board shall meet quarterly with CYP management and the responsible commander's representation for the purpose of discussing problems and concerns and ensuring frequent communication.
- i. The PIB shall assist with the coordination of the parent participation plan.
- j. A member of the board should participate in the multi-disciplinary team inspection.

QUESTION: Can there be a way to symbolize staff's level of training for parents to see, such as something on their name tag?

RESPONSE: Staff bios posted outside of classrooms includes this information. CYP staff will work with HRO to include additional information on name tags when new name tags are made in the near future.

QUESTION: What incentives are there for completion of more advanced training?

RESPONSE: We pay for staffs CDA (Child Development Associates Credential) to include the initial package and bringing an assessor to Guam to complete the process. Upon completion of CDA or degree; most staffs are placed in lead positions.

QUESTION: Why don't the CDC transition teachers into new classrooms when one PCSs or leaves?

RESPONSE: The CDC makes every effort to transition teachers into new classrooms when we know a teacher is leaving; however, due to limited staffing and a larger than normal rotation cycle this year, that has not happened in every instance. We make sure though, whenever possible, that one staff member is assigned to the room that is familiar with the class to aid continuity for the children.

STAFFING

QUESTION: Can the ratio be changed from 1:12 to 1:6 for preschoolers?

RESPONSE: Ratios are in compliance with current AFI and OPNAV guidelines and cannot be adjusted due to financial constraints.

REFERENCE: AFI 34-248 4.1. Staff-to-Child Ratios. Have an adequate number of adults to protect the health and safety of children and implement a developmental program.

- For infants 6 weeks to 12 months - have no more than 4 children per staff member at all times.
- For pre-toddlers 12 months to 24 months - have no more than 5 children per staff member at all times.
- For toddlers, 24-36 months, have no more than 7 children per staff member.
- For preschoolers, 3-5 years have no more than 12 children per staff member.

ANTICIPATED CHANGE DUE TO JRM: None

REFERENCE: OPNAVINST 1700.9E, para. 12.1., CDC and SAC Staff/Child Ratios

- The ratio of staff to children shall be met at all times to maintain constant supervision and to quickly effect evacuation in the event of fire or other emergencies.
- The following minimum staff/child ratios shall be fully implemented and apply at all times:

6 wks to 12 mo	1 staff person per 4 children
12 mo to 24 mo	1 staff person per 5 children
25 mo-36 mo	1 staff person per 7 children
37mo-5yrs	1 staff person per 12 children
6 yr-12 yr	1 staff person per 15 children

QUESTION: What can be done to allow opening caregivers to drop off their own children and still be in their classroom at the beginning of the day?

RESPONSE: Staffs in every age group are scheduled to open their rooms 15 minutes before the center opens. Staffs have been retrained to drop their child in the opening room and be in place when the center opens.

QUESTION: Why is there so many new staff at the CDC?

RESPONSE: We have had an unusually large PCS cycle this year.

QUESTION: Why aren't staffs specialized to work with certain age groups?

RESPONSE: New staffs are assigned an age group such as infants, toddlers or pre-school, to complete specialized training modules on within 6 months of their date of hire; however, staff may be assigned to work with different age groups to meet program needs.

QUESTION: Does the staff follow AF RM protocols?

RESPONSE: Yes. In this instance, the parent stated that paperwork had been lost. Normal operating procedures are for staff to pull the file and insert paperwork immediately upon receipt. In this instance the clerk may have been assisting another customer and deviated from the routine.

SUPERVISION

QUESTION: What is being done to supervise children who go into the classroom from the playground to use the restroom? Can there be an alarm or something put on the door so that children can't go in/out without being noticed?

RESPONSE: Staff currently stands in the doorway between the classroom and the playground so that they can monitor both areas.

QUESTION: What steps are taken when children are being aggressive with others?

RESPONSE: The Training and Curriculum Specialist and Child and Youth Behaviorist Military Family Life Consultant are called in to observe the classroom and offer suggestions. Parents are notified and asked for input and informed daily if unacceptable behavior occurs. Once this happens, if the child is out of control and harms others, parents will be notified to pick up the child immediately. If behavior continues, the child may be removed from care and Family Child Care offered.

QUESTION: What are the base guidelines for children being alone?

RESPONSE:

Youth Supervision Guidelines

Age of child	Left w/out sitter in qtrs for 2 hrs or less	Left w/out sitter in qtrs for >2 hrs	Left alone overnight	Outside unattended (to include playing)	Left in car unattended	Child sit siblings	Child sit others
newborn -4	No	No	No	NO	No	No	No
Age 5 -6	No	No	No	Yes (Note 1)	No	No	No
Age 7 - 9	No	No	No	Yes (Note 2)	No	No	No
Age 10-11	Yes, (Note 3)	No	No	Yes	Yes (Note 4)	Yes (Note 5)	No
Age 12-14	Yes	Yes	No (Note 6)	Yes	Yes	Yes	Yes (Note 7)
Age 15-17	Yes	Yes	Yes (Note 8)	Yes	Yes	Yes	Yes (Note 7)

Notes:

1. Playground or yard w/immediate access (visual sight or hearing distance) to adult supervision
2. w/access to adult supervision
3. w/ready access (phone #) to adult supervision
4. Keys removed and handbrake set, not to exceed 5 min, adult in sight
5. 11 yrs old or 6th grade minimum; 2 hr max
6. Except freshman in high school may be left alone overnight
7. 12 yrs of age or 7th grade minimum
8. 16 yrs of age and older may be left alone for short TDY or leave not to exceed 72 hrs. These minors must have some type of adult supervision available to make periodic checks. 15 yrs old may be left alone overnight w/adult access available and sponsor must be in local area.

PROGRAMS

QUESTION: Do you offer 4-H clubs and activities?

RESPONSE: Yes, the School-Age Program (SAP), Youth Center (YC) and Teen Center all offer clubs and activities from the 4-H and Boys & Girls Clubs of America programs. The local 4-H personally conducts clubs at the SAP and YC. Both organizations also sent in professional trainers and trained our staff this past spring.

QUESTION: Can programs such as PE be offered for home schooled children?

RESPONSE: Yes, we just need the POC to contact Mr. Daniel Afleje or Ms. Lori Propes to coordinate.

QUESTION: Can a parent's night out program be offered in conjunction with "Give Parents a Break" (GPAB)?

RESPONSE: Yes, in order to do this cost effectively, we will offer spaces not reserved for (GPAB) on a space available basis beginning in Oct. A flat rate, due in advance to eliminate bringing in a clerical staff, will be assessed.

QUESTION: Why are Youth Center Camps so short both in number of hours during the day and in length of the camp?

RESPONSE: We realize this is an issue and are working with the Parent Advisory Board to work for next summer. Two members of the task force have volunteered to take the lead to determine what programs can be offered, the length and number of days for each camp so that community needs are met while programs still break even.

QUESTION: Is it possible for the youth center to establish some sort of web-based program that will allow parents to see what activities are up-coming, sign up for clubs and activities?

RESPONSE: We are working with Marketing on this. The calendar and sports registration are available on line, and this service will be added.

GENERAL QUESTIONS

QUESTION: The AFI on e-pubs is dated 1999 October 1, is this really the most current AFI for the CDC?

RESPONSE: Yes

REFERENCE: AIR FORCE INSTRUCTION 34-248, 1 OCTOBER 1999

ANTICIPATED CHANGE DUE TO JRM: Use of OPNAV instructions

REFERENCE: OPNAVINST 1700.9E, 10 JULY 08

QUESTION: Can outside food be brought into the SAP program? I'm told at other bases the SAP has a mini cafeteria for the kids to choose from, or they make homemade type food everyday in what they call "Cooking Club." At the very minimum can they take their own food like they do during the school year? I spoke with one of the teachers today and she said the guidance says no outside food or drink. Would we be able to change the guidance?

RESPONSE: This is an allergy and safety concern. Most other bases house the SAP program in the Youth Center, which may be why a cafeteria or snack bar was available to children. Cooking class is offered once a week so that youth have the opportunity to participate in a variety of clubs throughout the week. No outside food can be brought into the center due to regulatory and safety reasons. Many children who attend the CDC/SAP have severe food allergies and we want to make sure they do not come in contact with, or consume food which could potentially harm them. With regard to fairness, we request no outside food as children who did not have a snack from home could become upset.

REFERENCE:

AFI 34-249 A4.6. Nutrition and Food Service. Meals and snacks are served in a sanitary, pleasant way to meet children's nutritional needs and promote good food habits.

A4.6.1. Breakfast, lunch, and afternoon snack are provided depending upon the hours of operation of the program.

A4.6.4. The meals and snacks that are served by the program meet the USDA CAFP requirements for school age program.

A4.6.4.1. The amount and type of food offered is appropriate for the ages and sizes of the children and complies with the USDA CAFP guidelines.

A4.6.4.2. The program offers serving sizes appropriate for children's ages and sizes.

A4.6.4.3. Staff support children's need to self-regulate what they eat.

A4.6.4.6. The program serves healthy foods.

A4.6.4.6.1. Foods high in fats, salts, and sugars are limited.

A4.6.4.6.2. Fruit juice and milk are served instead of fruit drinks and sodas.

A4.6.4.6.3. A balance of fruits, vegetables, grains, and proteins are served.

A4.6.4.6.4. Snacks include healthy foods from various cultures.

AFMAN 34-251 12.9. Nutrition and Food Service. Follow guidance on food service in AFI 34-249. Serve meals and snacks in a sanitary, pleasant way to meet children's nutritional needs and promote good eating habits. Allow time for socializing in conjunction with meals.

12.9.1. Nutritional Requirements. Provide meals and/or snacks to meet children's nutritional requirements in proportion to the amount of time the children are in the program each day. The amount and type of food served each age group must meet U.S. Department of Agriculture's Child/ Adult Care Food Program (CACFP) requirements. Use cycle menus approved by a dietitian or MAJCOM specialist. Record food substitutions on the menu posted for parents prior to serving. Date menus and keep them on file for at least 1 year or as required by USDA. Sample breakfast menus, lunch menus, and snacks are at Attachment 14.

12.9.2. Food Preparation and Service. AFI 34-249 and AFI 48-116, *Food Safety Program*, contain policy guidance for preparing and serving food and AFMAN 34-228, *Air Force Club Program Procedures*, provides procedures on food cost controls. Serve only food prepared at or for the center by an organization approved to provide food service. This includes foods used for special celebrations. Follow Air Force and USDA CACFP food preparation requirements. Prepare, handle, and serve food in ways to ensure sanitation and disease control. If food is prepared at another facility, transport it to the program in appropriate, sanitary containers and at appropriate temperatures. Adults must wash their hands immediately before serving food or assisting with meals/snacks. See additional guidelines in **Attachment 15**. Encourage children to assist with setting up and serving the meals and with clean-up after meals.

ANTICIPATED CHANGE DUE TO JRM: None.

REFERENCE: OPNAVINST 1700.9E para. 18.6 Food Service Guidelines for SAC

- a. The SAC program shall provide meals and snacks that are appropriate for the hours the children are at the program and the kitchen facilities that are available. At a minimum, the following USDA meals and snacks shall be provided
 - Each after school program will offer a mid-afternoon snack.
 - Full day camp programs shall offer a breakfast and mid-afternoon snack. Lunch is usually brought from home due to limited kitchen facilities in SAC facilities
- b. Food brought from home may not be consumed during USDA CACFP meal times when the meal is being claimed under the USDA program.

QUESTION: Is there a monthly newsletter that keeps parents up to date on happenings?

RESPONSE: Each room has its own newsletter.

QUESTION: Will the CDC transport children to the pre-K program this year?

RESPONSE: Yes, we are working with the Principal to place all children that attend both programs in one session, either a.m. or p.m. so that we can accommodate this request.

QUESTION: Why aren't there more healthy snacks available at the Youth Center?

RESPONSE: We will add fresh and canned fruit, fresh vegetables and string cheese to the menu in Aug.

QUESTION: Why is the SAP at the CDC instead of the Youth Center like it is at other bases?

RESPONSE: There currently is no space in the Youth Center for the SAP program. We have a request in for a \$7.2M project which would build an addition linking the Youth Center and Teen Center to accommodate SAP and expand the number of available slots.

QUESTION: Why was there an immediate "effective immediately due to Navy Policy" letter forwarded to parents explaining that the 6 week to 6 month class will be increased to include up to 1 year olds?

RESPONSE: An AF Services' policy change letter was recently issued and distributed (Policy Change to AFI 34-248); it was not the Department of the Navy or part of JRM. We have not initiated the action, only provided to parents as information.

QUESTION: Can we increase the number of CDC slots?

RESPONSE: Over the past 12 months, we have opened 40 slots to accommodate community needs for care. We are also converting the space formerly utilized by the FCC program into another new classroom where we will be able to care for 24 additional children. A project has been opened to meet future needs by building an addition to the Youth Center for the SAP and FCC programs which would free up space in the CDC for their future growth. The project cost is estimated at \$7.2M and several funding strategies are currently being explored.

QUESTION: Why doesn't the CDC use a computerized tracking system for signing in, payments etc?

RESPONSE: For several years HAF Child and Youth Specialists have been working with a contractor to design a standard system for all AF programs. Bases were told not to purchase new programs in anticipation of the design being completed. In Sept, we will begin training on the Navy's system and will have that system in place as soon as possible.

QUESTION: Can speed bumps be placed in the CDC parking to slow the traffic down?

RESPONSE: The CDC is working with CE to establish a work order for this.

QUESTION: Can the CCTV in place be modified to record classrooms rather than real time streaming?

RESPONSE: We have asked for a quote from the contractor to upgrade the system to record.

QUESTION: Can the PAB (Parent Advisory Board) be combined with training on parenting?

RESPONSE: Yes, this would be up to the PAB. The next meeting is 3 Sept 09 at noon preceded by our annual luncheon at 1100.

OPEN – QoL Initiatives

The following items will continue to be studied as Andersen transitions to Navy.

QUESTION: Can the CDC parking lot be designated as a no hat, no salute area?

RESPONSE: We will need to research this further.

QUESTION: Can the CDC extend their hours?

RESPONSE: Family Child Care can be used to accommodate non-operational hours. Hours of operation are based on the availability of appropriated and non-appropriated funding resources to offset the costs to operate the facility. Commanders may extend the hours of operation; however, doing so can significantly increase the cost of doing business. Factors that need to be considered are as follows:

- In order to open the center we must bring in one caregiver from each age group (younger infants, older infants, pre-toddlers, toddlers, preschooler, kindergarten and school-age care) for a total of seven caregivers, one kitchen staff (to make bottles for any infants that require one).
- To open ½ hr earlier each morning would cost \$677.62 per week or approximately \$2913.76 per month. With fee reductions expected in Oct the CDC/SAP programs are already expecting a loss in revenue of approximately \$10K per month.
- Air Force limits the number of hours that an individual child may be in care to 10 hrs a day, as noted in AFI 34-248;
- Family member may use Family Child Care for before and after hours care.

ANTICIPATED CHANGE DUE TO JRM: Beginning 1 Oct, this will jump to two caregivers per room as Navy rules do not allow for a caregiver in a double ratio room to be alone with children for a total of 15 NAF staff.

- Average salary per hour is \$11.57 + 25% COLA +25% benefits for a total cost of (\$18.07 X 15) \$271.05 per hour.
- Navy policy does not have a limit on hours.
- We will continue to research the possibility to extend hours to meet community needs within the resource limitations.

REFERENCE: OPNAVINST 1700.9E para. 15.3.K Child Abuse,

CDC. At least two CYP professionals shall be present in each classroom at all time, or comparable measures such as video surveillance, shall be taken. CCTV cameras shall not substitute for oversight by two adults unless the activity room square footage does not allow for an entire group (2 ratios).

QUESTION: Why can't the Youth Center expand hours of operation?

RESPONSE: Hours are currently based fiscal constraints, as this operation is based on the availability of appropriated and non-appropriated funding resources to offset the costs to operate the facility. Commanders may extend the hours of operation; however, doing so can significantly increase the cost of doing business. Facts that need to be considered are a 15 to 1 ratio of children to adults with a minimum of two adults present at all times. Average salary per hour is \$11.57 + 25% COLA +25% benefits for a total cost of \$36.14 per hour (\$18.07 X 2). Members pay \$1 a week for the service and with 332 members; our average income is \$12.76 an hour.

- We will continue to research the possibility to extend hours to meet community needs within the resource limitations.