



NASA Langley
Child Development Center

Operational Handbook

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WELCOME

Welcome to the NASA Langley Child Development Center. We are happy to have you and your child(ren) in our program. Our primary goal is to provide an environment which is safe and secure, and to give you confidence about the quality of care your child(ren) will receive when you leave them.

Many of our team members hold degrees in Early Childhood Education and have decades of collective experience. However, to ensure quality programming, they each receive on-going training related to the development and education of young children. Coursework includes, but is not limited to, First Aid and CPR courses, Child Abuse Recognition, Communicable Disease Prevention, Bloodborne Pathogens, and many more.

This handbook will inform you of important policies and procedures, which govern our program. Please read this handbook very carefully in order to fully understand your responsibilities as parents, your child's role as a student, and the responsibilities of the staff.

The NASA Langley Child Development Center provides the following services for NASA Langley Civil Servants and Exchange Employees as well as NASA contractors and military families on a space available basis:

- Infant/Toddler Care and Education (6 weeks – 24 months)
- Toddler Care and Education (24 – 36 months)
- Preschool Care and Education (36 – 60 months)
- School-age Summer Camp (based on availability)
- Care and education is on a full-time basis, although part-time and drop-in care are also available, subject to availability.

Thank you for allowing us the opportunity to serve you and your family. We look forward to working with you to provide the best possible program for your child(ren). Families are encouraged to visit and participate in our program as much as possible. We welcome your assistance in making this a great program.

Your LCDC Team



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ABOUT US

INTRODUCTION

The Child Development Center at National Aeronautics and Space Administration, Langley Research Center values inclusion and diversity and strives to include families from the NASA Civil Servants and Exchange personnel, as well as contractors. The Hampton Peninsula area represents a wide range of educational and economic backgrounds, so we also offer service to nearby military installations and federal agency personnel on a space available basis. Our diverse and well-qualified staff welcomes all children who can participate in and benefit from our program. The Center fulfills the very exciting and important role of supporting family life and the work mission at NASA Langley. It offers full-time (and, as available, part-time) high quality childcare and education for young children, ages six weeks through pre-kindergarten (with summer programming for school aged children as space allows).

The following handbook reflects current standards of best practice as articulated by the National Association for the Education of Young Children (NAEYC), and uses them in conjunction with Virginia Licensing Regulations, Virginia Star Quality Initiative, and Department of the Defense to ensure the health, safety, welfare, and age appropriate developmental and educational needs of each child and family. The NAEYC Code of Ethical Conduct guides all decisions regarding programming and relationships. Families are recognized and valued as active members of the Center's team and are partners in guiding the care and educational needs of their children.

The Office of Human Capital Management, Morale Welfare and Recreation Office, Exchange Operations is the responsible organization delegated the authority by the Langley Center Director and NASA Headquarters to oversee and manage the day-to-day operations of the Center. The NASA Langley Exchange Council establishes policies, approves fees and operational budgets. The Deputy Director for Office of Human Capital Management serves as the chair of the Exchange Council. There are seven additional voting members appointed by the Director and approved by the Center Director. These members represent the various stakeholder organizational units at the center.

The LCDC plays an important role in enhancing and sustaining the Langley Research Center work and family life. The LCDC welcomes all types of subject matter professionals on center with a variety of expertise in fields such as sciences, technology, education, math, music, arts, physical education, psychology, speech and hearing, nursing, medicine, and social work to participate in the Center's activities.

PURPOSE

The primary purpose of the NASA Langley Child Development Center (LCDC) is to provide high quality, educational and developmental child care services for the families of NASA Langley Research Center (LaRC) civil service, Exchange employees as well as support service contractors, allowing those individuals to work free of concern for the safety and welfare of their children. **As such 50% of enrollment must be children of NASA civil servants. It is sponsored by the NASA Langley Exchange as an employee benefit and is operated as a part of the Exchange that is a non-appropriated instrument of the United States Government.** Eligible children are admitted without regard to race, color, religion, sex or national origin.

As an employee benefit, the center contributes to the overall mission of the National Aeronautics and Space Administration in the following ways: attraction and retention of quality professionals with infants, toddlers and preschool children, reduction in employee turnover due to pregnancy and maternity leave, reduction in employee absenteeism due to child care problems, and reduction in staff training and orientation costs due to increased retention of trained staff members.

CENTER PHILOSOPHY AND GOALS

Our philosophy is based upon the belief that we have the ability and responsibility to nurture each child's social, emotional, cognitive, and physical growth through interactions and experiences that foster a zest for life and a love of learning. The practices of LCDC Program are based on current knowledge of child development and early childhood education. We offer a child-centered program, which is inspired by the Creative Curriculum because children learn best through play and active engagement with the people and materials in their environment. We believe that "care" and "education" are inseparable and view each child as a feeling, thinking and creative individual whose growth we nourish. We believe a child's positive self-esteem is paramount to emotional, social, physical, and intellectual development. We are responsible for stimulating, guiding and enhancing the development of the whole child because all areas of development are considered interrelated and equally important. Our program acknowledges that children learn through active, hands-on involvement with their environment, peers, and caring adults. The daily environment we create for our children must provide them with all the components necessary for growth and development. Developmentally Appropriate Practices encourage the children to view themselves as capable human beings. Likewise, our program respects and supports the ideals, cultures and values of families in their task of nurturing children. We are committed to supporting the parents/guardians of our children by providing a variety of quality services and by developing positive relationships between home and school.

Goals

- Foster positive identity and sense of emotional well-being
- Enhance social skills and promote school readiness
- Encourage children to think, reason, question, and experiment
- Promote language and literacy development
- Assist physical development and skills
- Support sound health, safety, and nutritional practices
- Advance creative expression, representation, and appreciation for the arts
- Appreciate and respect cultural diversity
- Develop initiative and decision-making skills
- Organize the classroom environment in ways which enhance children's optimal growth and development by selecting materials to support the curriculum
- Create ongoing opportunities for discovery, exploration and experimentation which encourage children to think, reason, question and experiment through intentional activities planned by the teachers and those which emerge from the interests and needs of the children and families.

- Create an atmosphere of acceptance, mutual respect, fairness, consistency, clear limits, appropriate expectations and encouragement.
- Create an environment which provides for active exploration, making free choices, a wide variety of hands-on experiences, and many opportunities to enhance language and early literacy development.
- Creating an outdoor environment which serves as an extension of the classroom, requiring the same level of adult planning, supervision, and involvement with children.
- Provide constant supervision and concern for each child's safety.
- Value individual needs and differences in order to promote tolerance and respect for the diversity found within the LCDC, as well as in the larger society, because each child, family and staff member is unique.

PROGRAM STANDARDS & EVALUATION

The standards implemented at the LCDC are based on National Association for the Education of Young Children (NAEYC), in conjunction with Virginia Licensing Regulations, Virginia Quality Rating Improvement System, Child and Adult Care Food Program (CACFP, and the Department of the Defense. Also included in the operating standards are specific criteria developed by the Langley Exchange Council to address the unique needs of the Langley Research Center and its employees.

The program offered at LCDC is carefully planned by the LCDC staff to meet the specific needs of the enrolled children and their families.

HOURS OF OPERATION

The LCDC is open Monday through Friday from 6:30 a.m. to 6:00 p.m., except on federally observed holidays and scheduled closures. Children enrolled in the program may use the center during hours of operation. **If children will not arrive by 9:30 am, parents should notify the center.** With the approval of The Exchange Council, LCDC reserves the right to schedule two closure days for the purpose of staff development. As a norm, closure days are posted on the annual calendar.

Although staff members may arrive at the facility prior to 6:30 a.m., they are responsible for performing housekeeping duties and are unable to care for children prior to opening. In addition, because the center closes promptly at 6:00 p.m., families should allow themselves adequate time to speak with their child's caregiver and gather their child's belongings prior to closing time.

Your child's space at LCDC includes 10 hours of care per day, any alternative arrangement must be approved by the director in advance. Inclement weather or unforeseen emergencies: The LCDC will be closed when the LaRC is closed due to inclement weather and other emergency situations as determined by the LaRC Director or designee. On such days parents should call 864-2111 for a tape-recorded message about closings or refer to local news and radio. Parents are expected to pick their child(ren) up immediately when released from work due to hazardous weather closings. If the LaRC delays opening for two hours, the LCDC will open at 8:30 am.

Delayed opening and Early Release: If the center delays opening for four hours, the LCDC will open at 10:30 am. When LaRC closes early, the LCDC will close 60 minutes after LaRC

employees are released from work. In the event the Center grants excused leave to civil servants, the LCDC will remain open until after LaRC employees are released from work. In this instance, the LCDC Director will work to ensure proper staffing which may include the Director surveying parents regarding their need for care in order to meet the varying needs of enrolled families. Designated staff will remain at the center until all children have been picked up. In the event that there are changes in the LCDC's hours of operation due to an extenuating circumstance or center closure, parents will be notified as early as possible.

ENROLLMENT PROCEDURES

ELIGIBILITY FOR ENROLLMENT

Enrollment is open to NASA children ranging in age from six weeks to five years old (with summer programming for school aged children as space allows). Children with special medical conditions or developmental needs may be enrolled with the permission of the LCDC Director after a special needs evaluation team (SNET) screening process is completed. The SNET evaluation team may be comprised of the Center Medical Director, CDC Director, and a Community Representative (i.e. Hampton Family Services Representative, Local Education Agency Representative, etc.)

ENROLLMENT PRIORITY

The LCDC utilizes the following criteria selection system to enroll children into the program:

Level	Criterion
Level 1a	NASA Civil Servant w/ currently enrolled sibling
Level 1b	NASA Civil Servant
Level 2a	NASA Contractor/On-site Employee w/ currently enrolled sibling
Level 2b	NASA Contractor/On-site Employee
Level 3a	Military/Department of Defense/Federal Employees w/ currently enrolled sibling
Level 3b	Military/Department of Defense/Federal Employees

When space does not exist in the requested classroom, the child is placed on the Waiting List according to the criterion of the enrollment priority, the date which the Registration Fee was paid and Pre-Enrollment Application was completed.

When space becomes available, the NASA Civil Servant child seeking full time or part time care will be contacted with the date available for enrollment. After all civil servants and exchange employee are placed then priority is given to other eligible families seeking full time care. They will have 24 hours to accept or decline the available space. Should they decline the space, they will be removed from the Waiting List. Missing the 24 hour deadline constitutes a declination of the available space.

If a child desiring full time care at the top of the Waiting List has not yet been born, they will remain at the top of the Waiting List and the space will be offered to the child next in line. Part time waiting list priority for NASA Civil Servant will only remain at the top of list when all other NASA Civil Servant full time slots have been offered.

Once removed from the Waiting List, a family may reapply after 90 days and must pay a new non-refundable Registration Fee at that time. The child will be placed on the Waiting List according to the criterion of the enrollment priority, the date which the new Registration Fee was paid and the Pre-Enrollment Application was completed.

Requests for Part-Time care and education are placed on the Waiting List according to criterion for enrollment priority. However, requests for Full-Time care and education for Civil Servants and Exchange Employees are given priority over requests for Part-Time care and education. Part-Time care and education requests are filled based on space availability.

WAITING LIST

When the center is operating at full capacity for any age group (infant, toddler, and preschool) a prioritized waiting list of eligible children will be maintained by age group. Interested families should complete a Pre-Enrollment Application and pay the \$80 non-refundable enrollment fee. When an opening becomes available, the LCDC Director will first determine whether any transitions should occur in accordance with the Curricula & Learning section of this handbook. After transitions have taken place, available openings will be filled from the waiting list based on their priority on the waiting list. Please speak with the LCDC Director or the office manager for more information.

REQUIRED PAPERWORK

Prior to the first day of attendance, families must submit all required enrollment paperwork. Paperwork **includes**, but is not limited to: Enrollment Form including family history and special needs, Rate & Policy Agreement, School Entrance Health Form including current immunization record, USDA Enrollment (per child) and Eligibility (per family) forms. These forms and paperwork are required to be updated annually as announced. Failure to submit updated forms within 30 days of expiration will result in the withdrawal of services for your child(ren) enforceable by the LCDC Director.

INITIAL ENROLLMENT CONSULTATION

Prior to the first day of enrollment, all families and prospective students are encouraged to schedule an Orientation Session with the LCDC Director or designee to review operating policies, meet the center staff, and to allow the child an opportunity to observe the center before the first day of attendance.

An Open House is held at the beginning of each school year to share with families the educational curriculum for the upcoming year and to highlight special events and projects planned for the year.

Families are strongly encouraged to coordinate with the LCDC administrative desk to be assigned a 6-month badge for their spouse or family member who is not a NASA employee or contractor.

FULL/PART-TIME ENROLLMENT

All permanent NASA Langley Research Center civil service employees, NASA support service contractors, NASA Langley non-appropriated funds employees, other on-site government personnel, on-site university personnel, and other contractors are eligible to enroll their children or dependents in the center on a full or part-time basis. Military Personnel may enroll on a space

available basis (not to exceed 25% of the total enrollment).

If the parent/guardian entitled to use the center services loses or changes his or her eligibility status due to an employment change, they are required to notify the LCDC Director.

Parents/Guardians will be granted two weeks to make alternative child care arrangements if withdrawal is required due to a change in employment/eligibility.

DROP-IN CARE

Available enrollment spaces may be used by eligible NASA Langley Research Center employees on a drop-in basis. Eligible parents/guardians are required to make a daily reservation with the LCDC Director and pay a daily fee for their child's care. All enrollment paperwork and fees are due prior to date of service. Subleasing of enrollment slots is not permitted.

SUMMER CAMP

During the summer months (mid-June to early September), the LCDC operates a camp to accommodate the needs of families with school-age children from grades K-rising 2nd grade. Interested families must enroll following the same procedures outlined above.

TEACHER: STUDENT RATIOS

The LCDC is committed to providing quality care and education for all children. One way to ensure this is through teacher: student ratios.

Age Group	Recommended Ratio
6 weeks – 12 months	1:4
12 – 24 months	1:5
24 – 36 months	1:7
36 – 48 months	1:10
48 – 60 months	1:10

Recommended ratios are maintained at all times. During the two (2) hour rest period, ratio may be doubled for children 12 months and above. Classroom age groups and sizes are approximate and subject to change in order to meet the enrollment needs of the LCDC. Ratios will be maintained in accordance with the above stated age groups.

STUDENT TRANSITIONS

Children enrolled in the program will be assigned to a class according to the child's age. Children are assigned to classes based on space availability and the age of the child. Efforts are made to match children up with children of like ages. Children can be transitioned to a new classroom when the LCDC Director determines that the following three criteria are met: 1) the child is developmentally ready to be transitioned to another classroom as supported by written documentation; 2) the age of the child; and 3) if there is an available opening in the classroom to which the child will be promoted and the environment is conducive to the child's developmental needs. The LCDC Director works cooperatively with classroom teachers and parents to develop transition plans for children. Transitions can occur before or after a child's birthday and/or around the beginning/end of the school year.

Tuition fees are based on the child's classroom assignment with a particular staff: child ratio and changes after a child is promoted to a new classroom with a different staff: child ratio. Should your child remain in a classroom due to lack of space in the next classroom, tuition will be charged based on the required ratio for your child's age.

INCLUSION & NONDISCRIMINATION

The LCDC believes that children of all ability levels are entitled to the same opportunities for participation, acceptance and belonging in child care. We will make every reasonable accommodation to encourage full and active participation of all children in our program based on his/her individual capabilities and needs.

At LCDC equal educational opportunities are available for all children, without regard to race, color, creed, national origin, gender, age, ethnicity, religion, disability, or parent/provider political beliefs, marital status, sexual orientation or special needs, or any other consideration made unlawful by federal, state or local laws. Educational programs are designed to meet the varying needs of all students.

FINANCIAL COMMITMENT

ANNUAL REGISTRATION FEE

Upon completion of the Pre-Enrollment Application, families are required to pay an **annual \$80 non-refundable registration fee** in order to reserve a space for their child until the first day of enrollment. An enrollment space will be reserved for two weeks for a new student, after which time the parents must pay full tuition and the child must begin attending. The Registration Fee is due upon enrollment, and annually by May 31 to reserve your child(ren)'s space for the upcoming academic school year (September – August). When not paid by May 31st, the fee becomes \$100. This fee helps defray the costs associated with, but not limited to, technology updates, cost of indoor and outdoor educational equipment, general classroom supplies, and curriculum resource materials. If a parent fails to pay the annual fee, their child(ren)'s enrollment slot will not be reserved for the upcoming academic school year.

SECURITY DEPOSIT

Families not using direct deposit payments are required to pay a **\$120 refundable security deposit** within the first 30 days of their child's attendance in the program. The payment may be made in one lump sum or in four equal weekly payments during the first month. The security deposit is refunded upon the withdrawal of the child.

TUITION FEES & CHARGES

The Exchange Services Office bills all tuition monthly on the 1st business day of each month. Invoices are printed and available for each family to review. A copy of the current rate sheet is available to parents at the LCDC front desk. Tuition is due by the 15th of the month regardless of a child's attendance. Credit is not given for vacations or illnesses. Tuition fees are evaluated annually and are subject to increase based on Exchange Council approval. Unless other 30 day advance notification is given, any approved increases are normally implemented in September with the start of the school year.

SIBLING DISCOUNTS

Parents with two or more children enrolled are eligible to receive a 3% discount on all the older siblings' tuition if they are enrolled full time. Discounts are not applicable to rates for children 12 months & younger.

LATE PAYMENT FEE

Tuition Payments are due in full by the 15th of each month. Families will be charged a **\$25 late payment fee** if payment is not received by the 15th of the month.

Families who become delinquent for 30 days will be given a notice that childcare services will be discontinued if payment in full is not received before the end of 45 days.

The NASA Exchange shall automatically refer your principal debt along with all late fees and charges to include 20% interest to the Department of the Treasury for collection, to a credit service bureau and possibly to the Internal Revenue Service (IRS) for tax refund offset unless an acceptable written repayment agreement is signed by the sponsor and Exchange Finance Office Representative.

Families with billing questions should contact the Exchange Finance Office at 864-9401 or 864-6368.

LATE PICK-UP FEE

Families who pick their child(ren) up after 6:00 p.m. will be charged a late pick up fee of \$1 for every minute late after normal closing hours (e.g. picking up children at 6:15 p.m. would incur a \$15 late fee, picking children up at 6:21 p.m. would incur a \$21 fee, etc.

RETURNED CHECK FEE

Checks returned for any reason by the families' bank or credit union will be charged a \$25.00 penalty per check. If three checks by one family are returned within a one year period, the family will be required to pay tuition with cash, money order or payroll deduction only.

ADDITIONAL FEES

LCDC reserves the right to charge additional fees (including, but not limited to: Summer Activity Fee, General Supply Fee, Field Trip Costs, Educational Experience costs) for the purpose of providing enrichment programming above and beyond the daily curriculum. When this occurs, parents will be provided adequate notice.

ATTENDANCE & WITHDRAWAL

ABSENCE OR VACATION

From time to time, your child(ren) may be absent due to illness or planned vacation. Please be sure to communicate any absences to the classroom teachers, front desk and Director. Absences due to illness or vacation should also be recorded into the Tadpoles system via the Parent App. **Full tuition is due regardless of your child(ren)'s attendance.**

FOREIGN TRAVEL

Families who plan to travel outside of the United States with their child and plan to re-admit the child after the trip should consult with the LCDC Director and the LARC Health Clinic prior to the trip to determine re-admission requirements. The LCDC Director will inform the parents of any special immunizations for infectious diseases or medical clearances for infectious diseases from the child's physician which will be required by the center before the child is re-admitted following the trip.

WITHDRAWAL PROCEDURES

A two week written notification from the family to the LCDC Director is required prior to the withdrawal of any child. If proper notification is received, the security deposit will be refunded on the last day of attendance or may be credited towards the last two weeks of tuition.

TERMINATION OF SERVICES

Families may be asked to withdraw their child under the following circumstances:

1. If it is determined that the child is unable to adjust to the program in a positive manner.
2. The child's recurring-unmanageable behavior is placing the other children's safety or well-being at risk.
3. The program offered at the center is unable to meet the special needs of the child.

When possible, the LCDC Director will provide families a two week notice when a child is required to be withdrawn.

If a child's presence significantly endangers the safety or well-being of the other children in the center, immediate withdrawal may be required by the LCDC Director. When immediate withdrawal is required, families will receive a refund of their security deposit and a pro-rated portion of any unused tuition.

If families fail to comply with operating policies of LCDC or fail to honor financial obligations to the center, they may be required to withdraw their child(ren). If families are more than 30 days behind in payment of tuition, they will be required to withdraw their child(ren) if account balance is not paid in full within 45 days.

LCDC services may be terminated when a pattern of any of the following becomes excessive:

- Habitual late pick-ups
- Requests for special accommodations that Center staff cannot meet
- Failure to pay tuition in a timely manner
- Failure to comply with Center policies concerning ill children
- Being unreachable and out of touch by phone
- Failure to provide documentation requested by Center staff and/or required by DSS regulations
- Failure to keep immunization records current
- Failure to provide emergency contact updates
- Extreme behavior that prevents the child from participating safely with peers

DROP-OFF & PICK-UP

ARRIVAL AND DEPARTURE

An authorized adult is required to pick up, drop off a child, and record the corresponding times on the posted Sign In/Out log. The LCDC must have on file the names of all individuals authorized to pick up a child. Families should notify the LCDC in writing when someone other than a parent will be picking up or dropping off a child to ensure the caregiver is aware of who is permitted to pick up or drop off the child that day.

Upon arrival, families are responsible for the supervision of their child(ren) until the child(ren) is turned over to their teacher or teaching assistant in the classroom or on the playground. Upon departure, families are responsible for the supervision of their child(ren) after they notify the teacher or teaching assistant that they are there to pick up their child(ren).

It is not permissible for children to leave the building or the playground without an authorized adult, or to be left unsupervised in the classroom or parking lot. If it appears room assignments have been changed, take your child back to the front desk for further instructions. Staff members **may not** be asked to supervise children or siblings who are not enrolled in the center or who are not visiting for the purpose of orientation for enrollment.

Families with multiple children are encouraged to drop off the oldest children first and pick up the youngest children first.

RELEASE OF CHILDREN TO FAMILY & FRIENDS

Families must notify the center in advance if someone other than a parent is going to pick up their child. Reasonable notice is important to ensure that individuals receive proper access authorization needed for the LCDC and NASA LaRC. Families must give written permission on the child's Enrollment Form to allow specific named friends or relatives to pick up their child. Staff members will release a child only to individuals, other than parents, who are at least 16 years old and who the child knows and with whom they appear to be comfortable leaving. Staff members will also require that the individual verify their identity with a pictured identification card. The name listed on the child's Enrollment Form must match the name on the person's personal identification. If the person does not have written authorization and is not on your pick-up list, **the LCDC will not release your child to that person.**

Children will be released to either parent unless the center has on file official court documents regarding custody, which specify that a particular parent is not authorized to pick up a child.

RIGHT TO REFUSE CHILD RELEASE

The safety of the child while in attendance at the center is the mutual responsibility of both the center and the family. It is the LCDC's policy to deny parental access to a child if the parent appears to be either mentally or physically incapacitated when requesting release of the child. In the event that a parent is determined incapable of taking charge of his/her child, the following steps will be taken:

1. The other parent or guardian will be called to pick up the child.

2. If the other parent cannot be reached, the designated emergency contact will be called to pick up the child.
3. If the above efforts are unsuccessful, the NASA Security Office will be contacted for assistance.

The same steps will be taken for any friend, relative, or guardian who appears mentally or physically incapacitated when requesting release of a child.

STAFF QUALIFICATIONS & REQUIREMENTS

The LCDC staff is comprised of trained childcare professionals with backgrounds and/or experience in early childhood education. Staff members with appropriate experience and training are hired to implement the educational and developmental aspects of the program.

The program seeks to hire staff that meet the following minimum requirements:

Director: Bachelor's degree directly related to this occupation (Early Childhood Education) and 2 years of specialized experience directly related to this occupation equivalent to at least the next lower grade level. Substitute for direct experience is 1 year of graduate level education, or superior academic achievement in early childhood Education. To qualify, applicants must possess one year specialized experience equivalent to the GS-09 or NF-3 level or public Child Center director with 1 year of specialized experience is defined as experience in group child care or other work that demonstrated the ability to manage the operation of a child care center.

Lead Teacher: Associate's Degree in Early Childhood Education (or related field), or Child Development Associate (CDA), and experience working in an early childhood setting. Must continue education towards obtaining Bachelor's degree - to be retained as lead teacher.

Teaching Assistant: Active pursuit of a CDA or Associate's Degree program in Early Childhood Education (or related field) and experience working in an early childhood setting.

Staff members are carefully screened during the selection process, and receive orientation training before caring for the children. All staff members receive the following background checks and training:

- Child abuse background check by the Virginia State Police and a national agency check by the Federal Bureau of Investigation.
- Certification in First Aid for Child Care Providers and Infant and Child Cardiopulmonary Resuscitation/ Automated External Defibrillator
- Orientation training in Title VI and CACFP
- Orientation training in medication administration (as needed)
- Orientation training in health screening, Bloodborne Pathogens
- Orientation training in developmental assessments
- Orientation training in curriculum development and lesson planning
- Orientation training in child guidance techniques and classroom management
- Orientation training in other topics relevant to the child care industry.

DAILY COMMUNICATION

Families and staff exchange daily feedback concerning the child's day in all classrooms during drop off and pick up times. Families of all enrolled children receive a digital account of each day via Tadpoles. Tadpoles also gives us the ability to keep families informed through Administrative Monthly Calendars. The calendar provides a monthly overview of events, closures, and recognizes children/staff birthdays. Administrative alerts, emergency closures, early/late releases, and/or any changes in our daily routine will be communicated via Tadpoles to each individual child's registered e-mail address. Parents are responsible for providing email address changes and/or updates to center administration when needed to ensure that the center has a current email address on file for their child.

Children who are six weeks and under two years old will receive more detailed information on their daily report because of their developmental needs. These details will include and are not limited to menu items, food intake, nap times, diaper/potty needs, any reminders, and curriculum lesson plans. Children who are older than two will receive curriculum lesson plans to include daily activities. If there is any specific detailed information that needs to be shared with the individual families such as potty training, special dietary needs, or behavioral concerns it will be documented in Tadpoles to ensure quality care is given to each individual child. The teacher captures special moments, take photos, and videos of the children in action. All pictures will be attached to the child's daily report. When teachers capture photos or enter data on a daily report they identify the individual child that corresponds to that information. If a photo or video has multiple children tagged by the teacher we do not allow parents to download or share that photo or video. Each child's portfolio will stay active throughout their enrollment. After a child's graduation/withdrawal from the center, Tadpoles, photos/videos/notes/reports are available to parents for 90 days within the Tadpoles Parent App & Website so they're able to save their favorite moments.

The Daily Report is available via the Tadpoles Parent app, as well as e-mail record at the end of each day. To download the app search in the App Store "Tadpoles Parent". To access this click "Sign Up" and create an account using the email where you will receive your Tadpoles messages. To confirm your account is activated check your email and set up your password. Once this has been completed you will have access to your individual child's information.

PARENT-TEACHER CONFERENCES

Lead Teachers will hold regularly scheduled conferences with families for the purpose of sharing and gathering information about the child(ren) in their care. During Parent-Teacher conference, goals and objectives for the child(ren) will also be developed and discussed. Conferences are typically scheduled in the Fall and Spring each year, but may be conducted at any time with a special request from the family or teacher. Teachers view themselves as important resources for each child and family. While parents are the child's most important teacher, sharing information about development and learning is a primary way to collaborate for success.

FAMILY PARTNERSHIPS

Families are invited to share their talents with the children as classroom volunteers, guest lecturers, and chaperones on field trips, staff trainers, parent education trainers, and assistants at seasonal center events. Parents can receive points through the “Why I’m Needed” (WIN) program which may be applied in the form of discounts toward tuition. WIN discounts are applied to tuition cost for a family’s primary child and does not apply to sibling discounts. Additional information regarding this program is available at the front desk.

CONFIDENTIALITY

All children and families have the right to expect that all information about their family will be kept confidential. A child’s health, behavior, and development should be discussed only with his or her teachers and parents. **A parent does not have the right to know who injured their child (pushing, biting, etc.);** however, parents do have a right to know the circumstances and the measures that we are taking to care for or safeguard their child. All LCDC staff members are committed to abiding by the NAEYC Code of Ethical Conduct regarding respect and confidentiality. Children’s records are stored in secure file cabinets and computer files at the Center. Only authorized personnel will be given access to personal information which includes management. Teachers are responsible for consulting management and communicating the needs of children and the classroom appropriately.

PRIVACY

We protect the privacy of our staff and the families we serve, all staff and families are expected to follow these guidelines:

- Use methods of communication (i.e. email, telephone, Tadpoles, etc.) to communicate with Center families regarding only LCDC-related matters.
- It is acceptable to email the families in your child’s class for strictly social purposes (for example to invite them to your child’s birthday party).
- Email addresses distributed by the LCDC are NOT to be used for personal financial gain (for example to invite them to a Pampered Chef party), personal business matters, or for any political purposes whatsoever. If you have any questions about the appropriate use of the Center’s email addresses, please check with the Center’s administration.
- Connections between staff and families on social media is not advised.

LCDC OPEN DOOR POLICY

We are delighted to have family members participate in our program. Parents/Guardians are welcome to visit the program any time during regular program hours. The infant room and bonding room welcomes parents/guardians to nurse or feed their children.

Our team will always do their best to speak with parents/guardians. Since staff days are devoted to supervising and caring for children, it is usually not feasible to have a long discussion with program staff during regular program hours. If a situation requires a longer discussion, kindly arrange for a parent-teacher conference or appointment.

CONFLICT RESOLUTION

When a concern arises, please discuss the concern with the teachers first to seek a resolution. The LCDC has an Open Door Policy which allows families’ access to the LCDC Director at any time

for questions, conflicts, or concerns. If a concern is not resolved, you may discuss the concern with the director and teachers together to find a resolution. A follow-up meeting will be scheduled to ensure the concern is resolved. If it is still not resolved with the Teacher and/or Director, a formal grievance may be submitted to the Exchange Operations Manager for review. After review, a final recommendation will be made and the Exchange Council and Office of Human Capital Management will be informed. Every effort is made to provide a respectful and professional environment. The expectation is to respect everyone and support each other in maintaining the NAEYC Code of Ethics.

CURRICULA & LEARNING

CREATIVE CURRICULUM

The philosophy behind our curriculum is that young children learn best by doing. Learning is not just repeating what someone else says; it requires active thinking and experimenting to find out how things work and to learn firsthand about the world in which we live.

Play provides the foundation for academic or “school” learning. It is the preparation children need before they learn highly abstract symbols such as letters (which are symbols for sounds) and numbers (which are symbols for number concepts). Play enables us to achieve the key goals of our early childhood curriculum. Play is the work of young children.

Our curriculum identifies goals in all areas of development:

- **Social:** to help children feel comfortable in school, trust their new environment, make friends, and feel they are a part of a group.
- **Emotional:** to help children experience pride and self-confidence, develop independence and self-control, and have a positive attitude toward life.
- **Cognitive:** to help children become confident learners by allowing them try out their own ideas and experience success, and by helping them acquire learning skills such as the ability to solve problems, ask questions, and use words to describe their ideas, observations, and feelings.
- **Physical:** to help children increase their large and small muscle skills and feel confident about what their bodies can do.
- **Language:** to help children develop their ability to communicate their thoughts, ideas, needs, and feelings as well as comprehend what they hear.

The activities planned for children in the program, the way the environment is organized, the selection of toys and materials, the daily schedule, and the way teachers engage and communicate with children, are all designed to accomplish the goals of our curriculum and give your child(ren) a successful start in school.

PROGRAM GOALS

1. Provide a warm, loving and secure environment staffed with trained early childhood professionals. Providing positive interactions and experiences for students in a responsive learning environment encourages each child's development of a positive self-concept, positive socialization skills, self-help skills, and a feeling of trust in other human beings.
2. Provide an environment which encourages sound health, safety and nutritional practices and offers nurturing, language-rich routines and meaningful experiences every day.
3. Provide a variety of developmentally appropriate activities and materials which are selected to emphasize concrete experiential learning in the areas of reasoning, language, visual perception, fine motor, and gross motor skills.
4. Provide open communication with families regarding their child's daily activities, individual needs, and developmental progress.
5. Provide developmental screenings to assess the mastery of skills, develop individual goals for children, and/or identify special developmental needs of individual children and make referrals for special services when appropriate.
6. Encourage creative expression and an appreciation for the arts.
7. Respect cultural diversity of children, families, and staff.

CLASSROOM ROUTINES

Each classroom is staffed with qualified teachers and assistants to comply with teacher: child ratios. A daily routine is established for each classroom to best meet the needs of the age group they serve. Lesson Plans are included each day on the Tadpoles Daily Report.

Each classroom follows a daily routine, which is planned to provide a balance of activities in the following areas:

- Indoor/Outdoor
- Quiet/Active
- Individual/Small Group/Large Group
- Child Initiated/Teacher Initiated

DEVELOPMENTAL SCREENINGS

Confidential developmental screenings may be performed with parental consent by trained staff members and professionals:

1. To identify the developmental levels of the child(ren) so that lesson plans and curricula used in each classroom can be individualized to the needs of the child; and/or
2. To identify special needs of the child(ren) which may require further diagnostic testing, medical evaluation, and referral for special educational services.

FIELD TRIPS & OUTINGS

During the program year, field trips may be coordinated to enhance the learning curricula and to provide a variety of learning experiences to students. Field trips can be on-site or off-site. When there are onsite/offsite field trips, all safety precautions will be followed and parents will be provided prior notice of the purpose and plans for the field trip. Parents and staff are reminded to ensure that they have their NASA workplace (if applicable) badge for identification purposes should it be needed.

Preschool Program may enjoy field trips to local sites of interest, including:

- The Virginia Living Museum
- Newport News Park
- Air & Space Museum
- Interpretive Center
- The Institute of Marine Science

Transportation is provided in a NASA Langley van or bus. Children of all ages may participate in walking outings around the NASA LaRC. Written parental permission is required before children are allowed to participate in off-site field trips. Any fees associated with field trips will be communicated prior to the trip. Children who have not paid required fees will be unable to participate in the trip. Alternate arrangements for care may be required if unable to participate.

SCREEN TIME

Our typical daily routine does not include television watching, however from time-to-time, we may utilize a pre-recorded program without advertisements as a teaching aid and discussion stimulator. Television consumption will not be longer than thirty (30) minutes per week and the program will be screened and approved prior to showing. Programs will consist of non-violent and high-quality educational material. Our focus is to provide your child a positive experience with increased understanding of the world. Special exceptions may be granted on occasion by the LCDC Director for the preschool classroom(s).

Electronic Media are limited to 15 minutes or less per day per child. Internet sites and software are pre-screened and approved to contain non-violent and high-quality educational content.

MULTICULTURALISM

Multiculturalism is vital for all children because it sets social goals and promotes respect for all people and the environment we inhabit. We utilize pictures, toys, books, music, games, and a wide range of activities as aids to teach our children respect for our world and the appreciation of cultural, family, and individual differences in the world.

TOILET TRAINING

The most important factor in making the toilet learning experience successful and as low-stress as possible is a family/teacher partnership that supports the child. Research indicates that children cannot successfully learn how to use the toilet until they are physically, psychologically, and emotionally ready. Most positive toilet training occurs only after children show signs of physical control or awareness of their bodily functions and when they demonstrate an interest or curiosity

in the process. We are committed to working with you to make sure that toilet learning is carried out in a manner that is consistent with your child's physical and emotional abilities and your family's concerns.

CELEBRATION OF BIRTHDAYS

Birthdays are celebrated during afternoon snack. Families are welcome to join their child(ren) for the celebration and should inform their child's teacher about birthday plans in advance. Families may bring in store-bought cake or cupcakes (no homemade items allowed) to share with their child's classmates. Though the LCDC can furnish paper plates and napkins, families may wish to provide special birthday plates and napkins. Candles, mylar balloons, latex balloons are not permitted. Parents are cautioned in bringing treat bags to the center in order to safeguard students. Parents are asked to follow up with their child's classroom teacher to ensure that all plans are safe and developmentally appropriate for all children in the classroom. -

CELEBRATION OF HOLIDAYS

The LCDC is interested in facilitating an environment that offers meaningful experiences for children reflective of family traditions from all children in the classroom. We will make every effort to celebrate holidays in a general manner. Conversations about the diversity of ways people celebrate is encouraged and will be included as part of planning for the center to create a multicultural and anti-biased curriculum and environment.

PERSONAL BELONGINGS

WHAT TO BRING FROM HOME

Families are responsible for ensuring that the items listed below are furnished to the center and on hand for their child's use each day. All items should be labeled with the child's first name and last name initial.

A. Infant Program

1. Three complete changes of labeled clothes
2. Labeled disposable diapers
3. Labeled diapering supplies (diaper wipes, powder, etc.)
4. Labeled plastic bottles
5. Special blankets, infant crib mobile, toys, etc. (optional)

B. Toddler Program

1. Two complete changes of labeled clothes
2. Labeled diapers if child is not potty trained
3. Labeled diapering supplies if child is in diapers or being potty trained (diaper wipes, powder, etc.)
4. Five labeled training pants, five labeled plastic pants, and one diaper for nap time if child is being potty trained.
5. Nap Time blanket

C. Preschool Program

1. One complete change of labeled clothes
2. Nap Time blanket
3. Backpack

TOYS FROM HOME

Because the LCDC is well equipped with educational toys, **families are asked to keep children's personal toys at home.** LCDC has limited classroom and storage space for unauthorized items. Such items can also present a safety hazard if they are not appropriate for the age group for which they are intended. The only exception when children are allowed to bring a toy to school is special show and share times, or when a child has a toy which will contribute to the educational curriculum and it relates to the specific theme being explored in the class.

If a child does bring a personal toy to the center, the labeled toy should be turned over to the teacher upon arrival to be placed in the child's cubby. The child must be willing to keep the toy in the cubby unless the teacher gives permission for the child to play with it. The child must be willing to share the toy with the other children or the toy will have to be taken home. The center cannot be responsible for items that get lost or broken. Toys that are choking hazards or toys which glorify violence are not allowed at the center such as balloons, beads, marbles, bouncy balls, and war toys such as guns, handcuffs, grenades, knives, swords, etc.

NUTRITION

MEAL TIMES

Good nutrition, the development of desirable eating habits, and learning about good food choices are vital building blocks for young children. Provisions must be made to ensure that these building blocks are in place in order to promote good health throughout life. As part of the USDA food program, the following are some responsibilities of our childcare center:

- To serve meals and snacks meeting program requirements
- To keep daily records of participants in attendance, number of meals served, and quantities of food prepared and served
- To collect household size and income information annually on required forms from all enrolled families
- To comply with all regulations and instructions relating to the Child/Adult Care Food Program (CACFP)

Breakfast is served between 8:15 a.m. – 8:45a.m.

Lunch is served between 11:15 a.m. – 11:45 a.m.

Snack is served between 2:15 p.m. – 2:45 p.m.

If your child(ren) arrives after breakfast or lunch is served, please ensure she or he has eaten prior to entering the classroom. After mealtime is over, teachers will not hold additional food in order to adhere to food serving times, safety requirements, and the daily schedule. Children enrolled in the LCDC will only be served food approved by USDA. If a child has any **allergies or religious dietary restrictions** which will restrict what she or he may eat at the LCDC, **written documentation must be provided to be placed in the child's file.** When restrictions require the elimination of any food group or cow milk, documentation must be provided from a medical physician. Restricted diets do not preclude families from completing required USDA Enrollment and Eligibility Forms. Program staff work closely with the parents of infant children (under the age of 12 months) to introduce solid foods gradually as the child is developmentally

ready for solids and has been introduced to solids foods by the parent. Children 1 years old and older must be served solid foods unless the child has a modified diet.

BREASTFEEDING

The program encourages breastfeeding and supports breastfeeding mothers. Breastmilk is a substitute for cow's milk in the meal pattern for children. Children in our care who are breastfed may be:

- Breastfed by their mothers during visits to the facility,
- Bottle-fed their mother's expressed breastmilk by teachers, and/or
- Bottle-fed the type of infant formula prescribed by the baby's doctor while at child care. LCDC will feed infants' formula only if the parent requests its use with their baby.

The LCDC provides a quiet, comfortable, and private place to breastfeed to help mother's breastfeed successfully. We encourage mothers to get their baby used to being fed expressed breastmilk by another person to assist teachers in feeding their child. Based on infants feeding frequently during the day and on demand, we also encourage mothers to provide a back-up supply of frozen or refrigerated expressed breastmilk for use at the center.

In an effort to ensure that breastmilk is handled, stored, and used safely,

- Mothers are asked to store their breastmilk in the refrigerator or freezer right after they express it and label the bottles with: — the baby's name, and — the date and time the breastmilk was collected.
- Bottles of fresh or frozen breastmilk should be brought to the facility in a cooler with an ice pack to keep the milk at a cold temperature.
- Bottles must be refrigerated immediately when they arrive and until ready to use.
- Bottles of breastmilk can only be used for the baby for whom they are intended.
- Refrigerated bottles of fresh breastmilk will be used within 48 hours from the time it was collected. Refrigerated breastmilk is discarded if it is not used within 48 hours to ensure safety. Breastmilk can be stored in our freezer based on it having a separate door from the refrigerator for up to 3 months from when it was collected.
- LCDC works to rotate frozen breastmilk using the oldest milk first. Once breastmilk is removed from the freezer and thawed, we use it within 24 hours. We do not refreeze breastmilk and do not save and reuse breastmilk leftover from bottles.

RESTRICTED/MODIFIED DIETS

Because the center is required to follow specific USDA/CACFP menu guidelines to assure a well-balanced food service program, all children will be served the food listed on the menu unless the child has a special medical condition, religious beliefs, or parent/director approved rationale which requires a restricted or modified diet. Program staff work closely with the parents of infant children (under the age of 12 months) to introduce solid foods gradually as the child is developmentally ready for solids and has been introduced to solids foods by the parent. The type of infant formula that the center offers can be discussed with the infant classroom's teacher. If the parent has a preference for a specific brand of formula to be fed to their child, the parent may bring in their formula of choice.

Modified diets may be served *only* for special medical conditions or religious beliefs as approved of the LCDC Director. Children with special dietary restrictions due to medical conditions will need the approval of the child's physician for the requested dietary modifications. Families must provide a form completed by the child's physician stating the reason for the requested modification, a list of restricted foods, a list of acceptable substitute foods, a description of the child's reaction if the restricted food is eaten, and any first aid requirements if the child eats the restricted food.

The modified diets will be developed from the regular stock items kept at the cafeteria and must be able to be prepared quickly, economically, and without undue inconvenience to the food service manager. In some circumstances where the center cannot realistically provide the modified diet, the family will be allowed to bring in food from home on a regular basis for their child. Food from home should be ready-to-serve (packed in ice or thermos to maintain safe temperature). Microwaves are not available in classrooms and may not be used to heat food to ensure compliance with food safety standards. The child's tuition will not be reduced if families bring food from home.

Parent substituted meals and snacks based on a child's health needs may be approved by the director on a case by case basis. However, once a parent chooses to substitute their child's meal or not follow the LCDC published menu, the parent must provide all of the child's meals (breakfast, lunch and snacks). Parents may not switch from substituted diet to LCDC provided meals on a revolving basis and are not eligible to participate in CACFP due to electing to provide their child's meals. Examples of health substitute meals and snack may include gluten free, dairy, food dye free, Monosodium glutamate (MSG), genetically modified organism (GMO), hydrogenated oils, etc. Parents may not dictate meal or snack time frames on substituted or modified meals due to impacts on the program's operations and ratios. All meals/snacks must be served to children within the program's designated meal/snack service times. Parents who provide substituted meals are responsible in complying with health and food safety requirements.

FAMILY MEALS

Families are welcome to join their child(ren) for meals or may pick their child(ren) up and take them out for lunch. Families are asked to notify their child's teacher or the front desk in advance in writing if and when they plan to join their child for a meal so that adequate servings can be prepared. Families are charged a nominal fee of \$2.00 for breakfast, \$3.00 for lunch, and \$1.75 for the afternoon snack.

Families who join their children for lunch at the LCDC center are asked to partake in the meal served to the children, rather than bringing their own lunch into the classroom.

GUIDANCE

CHILD GUIDANCE & DISCIPLINE

The goal of the LCDC's child guidance policy is to build self-worth, increase social competence, and enhance the dignity of each child. All guidance and discipline techniques used at LCDC will be in accordance with this positive emphasis. The purpose of any set of procedures should be to teach children to learn how to control themselves in various situations.

Positive approaches to guidance include the following:

- Staff will have a well-designed, developmentally appropriate learning environment and provide developmentally appropriate learning experiences.
- Staff will know and be sensitive to the developmental, cultural, and individual needs of each child.
- When inappropriate behavior occurs, the teacher shall examine the situation thoroughly to determine the cause; for example, a child may be reacting to something in the classroom, stress at home, a physical problem, or some other factor.
 - The teacher shall be responsible for documenting patterns of inappropriate behavior and bringing such patterns to the attention of parents and to the center director.

The goal of developmentally appropriate guidance is to help children learn to make socially acceptable choices. For this reason, teachers strive to use redirection, positive guidance, and various techniques to assist children in making acceptable choices.

Our goal and approach is to give children the tools they need to become good friends and good citizens. Staff interact with children and one another in a way that:

- Respects personal privacy;
- Respect differences in cultural, ethnics, and family backgrounds;
- Encourage decision-making abilities;
- Promote ways of getting along;
- Encourage independence and self-direction; and
- Use consistency in applying expectations.

The LCDC follows procedures as outlined below in encouraging self-discipline:

Infants and Toddlers: When working with infants and toddlers, teachers will use such strategies as prevention, distraction, encouraging, modeling, and redirecting the child to a new activity. Infants and toddlers should never be put in time out because it is developmentally inappropriate for this age group.

Three, Four, Five Year Olds and School agers: Similar techniques such as prevention, redirecting, humor, reminding, encouraging, modeling, discussing, problem solving, and conferencing will be used with preschoolers and school age children. “Cool Down” time may be used as a behavior management technique to assist in solving an on-going or habitual behavioral problem for this age group. Cool down time allows a child to release strong feelings, express himself/herself, and calm himself/herself down. Cool down time will be followed by positive reinforcement and encouragement. This behavior guidance system is a part of the 1-2-3 Magic evidence-based program encourages good behavior and contributes to the creation of a positive class climate.

The LCDC does not permit ANY FORM of corporal punishment or physical force. In addition, the following discipline techniques are NOT permitted:

- A child is NEVER to be deprived of food, water, a nap or rest, or bathroom facilities.

- Unsupervised isolation of a child is NEVER allowed! Instead, teachers will use a “cool down” time to help children compose themselves before returning to play.
- Adults are expected to always show respect for children by NEVER addressing a child harshly with intimidation or verbal threat.

Also, in accordance with the NAEYC Code of Ethics, LCDC personnel will not discuss a child’s behavior with other adults, in the presence of other children, or with other families. Written or verbal reports to families regarding children’s behaviors or incidents will guard confidentiality by not revealing the name of any other children involved in a particular incident.

Staff members will encourage families to use these same approaches to guide and address their children outside the center.

CHALLENGING BEHAVIOR

Challenging behavior is defined as any conduct that interferes with children’s learning, development and success at play, is harmful to the child, other children or adults or puts the child at risk for later social problems. Serious child misbehavior consists of repetitive breaking of rules and failure to modify this behavior when corrected by staff.

Examples of serious misbehavior or disruptive/safety issues are not limited to but include:

- Hitting, biting, or scratching
- Leaving classroom/Running in classroom
- Throwing objects and/or destruction of property
- Using (excessive) profanity
- Possession of weapons, drugs, or alcohol
- Being aggressive with other peers
- Verbal Bullying
- Creating a disruptive environment or posing a safety issues

If a child is exhibiting serious misbehavior, and/or creating safety issues, the matter will be referred to the Center Director for action. The Center Director may take the following actions:

- Contact the parent to discuss the child’s behavior.
- Coordinate a Parent observation/consultation.
- Coordinate a Child At Risk Assessment Team (CARAT)conference and develop a Behavior Intervention Plan (BIP).
- Discuss with a parent a change the child’s attendance schedule or temporary withdrawal from the program.

The LCDC Director has the discretion to follow the above actions in any given order according to seriousness of the situation. In the event the above interventions are not successful, the child’s behavior does not improve, and/or the parent is noncompliant, recommendations will be made to the Exchange Operations Manager about withdrawing the child from the LCDC. Please refer to Withdrawal for Challenging Behaviors and Withdrawal Procedures for additional information.

When children repeatedly (over 3-5 times) presents challenging behaviors as documented in incident/behavior reports, a Children At Risk Assessment Team (CARAT) may convene. In

In addition to the LCDC Director, this team may include a child's parent, the classroom teacher, and a medical and/or behavioral professional depending on the child's behavior. A Behavior Intervention Plan (BIP) will then be drafted and shared with the parents during a conference. Observations from teachers will also be included in the assessment process and in determining the best course of appropriate action in accordance with the guidance, management, withdrawal, and termination policies related to challenging behavior outlined in this handbook.

MANAGEMENT OF BITING BEHAVIOR

Biting is not uncommon when infants and toddlers respond to the discomfort of teething and when they are beginning to express their strong likes and dislikes. Biting can also occur when children are seeking adults' attention or when they are adjusting to sharing their space and their materials. Biting occurs most frequently when children's language is just emerging – it is sometimes their most effective strategy for expressing their emotions.

While biting is never an acceptable behavior, it is a developmentally appropriate behavior for both infants and toddlers. You can be assured that the LCDC staff takes biting seriously and closely supervises all children at all times. When working with a child who is using his/her teeth to solve his/her problems, our teachers and caregivers target their efforts to prevent injuries and to change this behavior as quickly as possible.

Teachers model and encourage children to "use their words" to solve their problems. They also model and encourage other appropriate ways to express strong emotions. It is important to provide words for the child, to help the child learn how to express his/her feelings, like "That's mine!" or "No! Don't push me!" Teachers and administrators also make every effort to work with families to eliminate this behavior and can suggest methods for changing the biting behavior such as reading books to children about biting, offering a child appropriate chew toys for oral stimulation, offering increased opportunities for the child to rest, etc.

If a child is bitten, these procedures are followed:

- The child who was bitten receives necessary first aid immediately. She/he is comforted and the injury is washed with soap and water.
- Appropriate discipline is implemented for the biter.
- A phone call is placed to the family of the biter and bitee to inform them of the incident.
- The teacher fills out an Incident Form for both children involved, describing what happened. It is then put in the files of the respective children.
- The NAEYC Code of Ethics requires us to carefully maintain confidentiality. That means that when we discuss issues of concern we will share information about your child ONLY with you. Teachers will use methods such as providing a wide variety of sensory-motor experiences, watching for signs of rising frustration to respond promptly, changing the environment within the room and shadowing the child with detailed documentation on the incidents in order to resolve inappropriate behavior. If needed a child may be removed from the classroom. Removal of the child from the class environment should be viewed as a positive effort on managing the inappropriate behavior.

If biting continues to occur in the classroom, the LCDC will make and carry out an ongoing prevention and intervention plan as follows:

1. Observe to try to identify patterns of instances when biting occurs.
2. Ask parents about what might be going on at home.
3. Develop a plan to address biting to include the teacher, director and parent.
4. If possible, have someone focus on the child who is biting to provide support and encourage positive behavior and intercept biting before it occurs.
5. If behavior continues or increases, an assessment by the director will be completed to determine any necessary follow up to be completed with the child's parent. This may include the coordination of a parent conference, convening of a CARAT, and/or development of a BIP so that a child's parent and LCDC staff can work cooperatively together to extinguish the behavior.

It is the goal of LCDC to resolve biting behaviors quickly. However, there may be cases where excessive biting may require a temporary withdrawal from the program. **If there is a case where a child has three biting incidents in one day, the child's parent will be contacted to pick up the child for the day. Our goal is to safeguard and protect all children in the program.** Please refer to Withdrawal for Challenging Behaviors and Withdrawal Procedures for additional information.

For resources about biting, please review these websites:

Dealing with Biting Behaviors in Young Children <http://ceep.crc.uiuc.edu/poptopics/biting.html>

Understanding Children: Biting <http://www.extension.iastate.edu/publications/PM1529A.pdf>

Chew On This: Resources on Biting

<http://www.zerotothree.org/child-development/challenging-behavior/chew-on-this-resources-on-biting.html>

Responding to Your Child's Bite

http://csefel.vanderbilt.edu/documents/biting-parenting_tool.pdf

WITHDRAWAL FOR CHALLENGING BEHAVIORS

If improvement is not shown in the child's behavior following a CARAT conference or implementation of a BIP (Behavior Intervention Plan), the LCDC Director will consult with the Langley Exchange Operations Manager to determine if withdrawal of the child from the program is appropriate. If the withdrawal is approved, the LCDC Director will notify the family that they will need to withdraw their child. When possible, the LCDC Director will provide the family two weeks' notice before the withdrawal must go into effect. If the problem behavior exhibited by the child endangers the safety or the well-being of himself/herself or other children in the program, immediate withdrawal may be required. A pro-rated portion of any paid tuition, as well as the security deposit, will be refunded when withdrawal is required. The LCDC Director will notify the parents of the earliest date when they can apply for re-admission to the program after the problem behavior has been appropriately addressed.

HEALTH**PHYSICALS & IMMUNIZATIONS**

Children are required to receive all age-appropriate immunizations recommended by the most current report of the American Academy of Pediatrics prior to the first day of attendance.

Prior to the first day of attendance, families are required to provide documentation of a physical examination for their child by a medical physician.

If a child had a physical examination prior to attendance, it shall be within the time period prescribed below:

1. Within two months prior to attendance for children six months of age and younger;
2. Within three months prior to attendance for children aged seven months through 18 months;
3. Within six months prior to attendance for children aged 19 months through 24 months; and
4. Within 12 months prior to attendance for children two years of age through five years of age.

No child is allowed to attend the program without being properly immunized according to current State Board of Health. Documentation that children have received the required doses of vaccinations is included on a child's physical examination. Immunization waivers may be given for children who have a medical condition that prevents them from receiving immunizations which must be documented. Religious and other waivers must be documented on a "Certification of Religious Exemption" form.

Immunizations must be updated according to the EPSDT (Early and Periodic Screening, Diagnostic and Treatment) guidelines set by the State Board of Health before a child can attend the center. When immunizations are updated based on the ages listed below, parents must provide documentation of additional immunizations to the LCDC. Prior to attendance

- 6 months of age
- 12 months of age
- 18 months of age
- 24 months of age
- 36 months of age
- 48 months of age
- 60 months of age
- Annually for all school agers above 60 months of age

Families of children who have a special medical or developmental condition are required to submit an annual physical examination report from the child's physician to update the information about the child's condition. Families of children who develop a special condition after enrollment are required to submit a report from the child's physician informing the center of the condition and any special instructions that need to be followed to care for the child.

All families are required to complete a Special Needs Checklist for their child which is a part of the Enrollment Form. This will inform the Child Development Center of any health problems your child may have.

Failure to provide updated health records in accordance with the above will result in the withdrawal of services for your child(ren).

CONTROL OF CONTAGIOUS ILLNESSES

In order to prevent and control the spread of communicable illnesses among the children and staff, strict health policies must be followed at the center. Cooperation between staff and families is essential to ensuring a safe and healthy environment for all of the program participants.

Teachers are required to conduct daily health checks on all children. During a daily health check, children will be visually screened by staff upon arrival for obvious symptoms of illness. Children displaying symptoms of a contagious illness and children who are not well enough to participate in the daily activities will not be admitted. Families are required to inform staff members about any symptoms of illness that their child(ren) has been exhibiting at home and to inform the staff if they received any medication before arrival.

Families are also required to notify the staff if their child(ren) has been exposed to a communicable illness so that appropriate precautions to prevent the spread of the illness can be taken. The LaRC Health Clinic Medical Director and physician assistant will determine appropriate preventative measures to be taken to reduce the spread of communicable illnesses in the LCDC. The LCDC is required to report specific contagious disease to the Health Clinic and the Virginia Health Department.

Families will be notified if their child becomes ill at the center and will be expected to pick the child up within 30 minutes of notification. Until the child is taken home, efforts will be made to isolate the sick child from the other children.

LCDC follows guidelines prescribed by the American Academy of Pediatrics in Managing Infectious Diseases in Child Care and Schools. Children displaying the following illnesses or symptoms shall be temporarily excluded from the LCDC:

- The illness prevents the child from participating comfortably in activities as determined by the staff of the child care program or school (including outdoor play); or
- The illness results in a greater need for care than the staff of the program determines they can provide without compromising their ability to care for other children; or
- The child has any of the following conditions:
 - Appears to be severely ill. This could include lethargy/ lack of responsiveness, irritability, persistent crying, difficult breathing, or a quickly spreading rash.
 - Fever (temperature above 101°F [38.3°C] orally or 100°F [37.8°C] or higher taken axillary [armpit or ear].
 - Diarrhea: defined by 3 or more watery stools or decreased form of stool that is not associated with changes of diet.
 - Blood or mucus in the stools not explained by dietary change, medication, or hard stools.

- Vomiting more than 2 times within 24 hours, unless a physician determines the vomiting to be caused by a non-communicable condition and the child is not in danger of dehydration.
- Abdominal pain that continues for more than 2 hours or intermittent pain associated with fever or other signs or symptoms.
- Mouth sores with drooling unless the child's physician or local health department authority states that the child is noninfectious.
- Rash with fever or behavioral changes, until a physician has determined that the illness is not a communicable disease.
- Tuberculosis: the child may not return until the child's physician or local health department states child is on appropriate treatment and can return.
- Thrush: the child may not return until 24 hours after medication has begun.
- Impetigo: the child may not return until 24 hours after treatment has been started.
- Streptococcal pharyngitis (i.e., strep throat or other streptococcal infection): the child may not return until 24 hours after treatment has been started.
- Head lice or nits: the child may not return until after the first treatment. (Note: exclusion is not necessary before the end of the program day.)
- Scabies: the child may not return until after treatment has been given.
- Shingles: the child may return only if the sores can be covered by clothing and/or dressing or until sores have crusted.
- Chickenpox (varicella): the child may not return until all lesions have dried or crusted (usually 6 days after onset of rash).
- Persistent abdominal pain (continues for more than 2 hours) or intermittent abdominal pain associated with fever, dehydration, or other signs or symptoms of illness.
- Rubella: the child may not return until 6 days after the rash appears.
- Pertussis: the child may not return until 5 days of appropriate antibiotic treatment.
- Mumps: the child may not return until 5 days after onset of parotid gland swelling.
- Measles: the child may not return until 4 days after onset of rash.
- Hepatitis A virus infection: the child may not return until 1 week after onset of illness or jaundice or as directed by the health department (if the child's symptoms are mild). (Note: protection of the others in the group should be checked to be sure everyone who was exposed has received vaccine or receives vaccine immediately.)
- Purulent Conjunctivitis: Defined as pink or red conjunctiva with white or yellow eye discharge, often with matted eyelid after sleep, and including a child with eye pain or redness of the eyelids or skin surrounding the eye: the child may not return until 24 hours after treatment has begun.

- RSV: the child may not return until fever free for 24 hours and until severe respiratory symptoms have subsided, allowing the child to have a normal, responsive day.
- Ringworm Infection (defined as tinea capitis, tinea corporis, tinea cruris, and/or tinea pedis): the child may not return until 24 hours after treatment has begun.
- Any child determined by the local health department to be contributing to the transmission of illness during an outbreak.

**For more details and other diseases, see the Web Site [Healthy Children-Powered by Pediatrics & Trusted by Parents](http://www.healthychildren.org/english/health-issues/conditions/Pages/default.aspx) which is part of the American Academy of Pediatrics-
<http://www.healthychildren.org/english/health-issues/conditions/Pages/default.aspx>

A child may return to the center prior to the above guidelines if the child's physician provides a statement, in writing, to the LCDC Director stating that the child is no longer contagious.

Even if a child does not display any of the above noted symptoms, the LCDC Director has the discretion to exclude a child pending a physician's written statement that the child is safely able to return to a group care environment.

READMISSION FOLLOWING ILLNESS

Children may be re-admitted after an illness only when their presence will not endanger the health of the other individuals and when the child is well enough to participate in the regularly scheduled daily activities.

A child may return to the center when:

1. Fever has been 100 degrees F or below for 24 hours, without fever-suppressing medication.
2. Nausea, vomiting, or diarrhea has subsided for 24 hours.
3. Medically prescribed antibiotics have been given over a 24 hour period for known strep infection, and the child does not complain of sore throat pain.
4. Chicken pox lesions are crusted, usually 5 to 10 days after onset.
5. Scabies is under treatment.
6. Lice are under treatment and the hair is free of nits.
7. Pinworm treatment has occurred 24 hours before time of requested re-admission.
8. Lesions from impetigo are no longer weeping.
9. Conjunctivitis treatment has occurred for 24 hours and the eyes are no longer discharging.

10. Thrush or yeast infection has been treated with prescription medication for at least 24 hours.
11. The child has completed the contagious stage of the illness as outlined by the LCDC Director.
12. The child feels well enough to participate in the daily activities at the center, including outdoor play.

Children may not be re-admitted following a communicable illness, unless they are absent for the amount of time specified by the LCDC or provide a written statement from the child's physician verifying that the child is no longer contagious.

ADMINISTRATION OF MEDICATION

Families are encouraged to administer medication to their own child(ren) at home before/after attendance at the center or to come to the center during the day and administer their own child's medication. When this is not possible, the center's MAT (Medical Administration Training) staff will administer medication under strictly monitored conditions. Staff members with MAT will administer the following medication:

- short-term prescription medication with written permission of the parent, long term prescription medication with written parental permission and written authorization by the child's physician, and/or
- over-the-counter medication for short-term illnesses with written parental permission. Use of an over-the-counter medication longer than 10 days requires a parent's written authorization and written authorization by the child's physician.

Any medication administered will be done so per the instructions on the original container of medication to the child identified on the prescription label. A prescription or physician's orders must accompany any medication to be administered contrary to original container instructions.

SHORT-TERM PRESCRIPTION MEDICATION

Written authorization from a parent to administer prescription medication for a short-term illness will be effective for no more than 10 days. Families must complete a new permission form every 10 days with instructions as prescribed by the child's physician for the duration of the illness and the medication period. When original container instructions indicate medication is to be administered for a period of time less than 10 days without seeing a physician, a prescription must accompany the medication.

LONG-TERM PRESCRIPTION MEDICATION

Written authorization from a parent and the written approval of the child's physician is required to administer prescription or non-prescription medication for a chronic illness or medical condition of duration longer than 10 days. The physician's authorization will be effective for a period not to exceed 90 days, after which the physician must reevaluate the child's condition and reauthorize the medication for its continued administration. The physician's authorization shall identify the child's long-term illness, its communicability and symptoms, any special care that the child requires during the illness, and the period for which the medication is to be given. Families must keep the

staff informed about any changes in the child's condition or changes in the physician's prescribed treatment plan for long-term illnesses.

When life-saving medications are required for documented medical conditions (i.e. asthma or allergies), written authorization from the family and physician for prescription medication will be accepted annually. If over-the-counter medication is advised (i.e. Benadryl for allergic reaction), a physician's written authorization or prescription is required.

No blanket prescriptions for over-the-counter medication, such as aspirin, acetaminophen, decongestants, or cough suppressants will be accepted for non-specific illnesses or symptoms. The child's physician must specify the illness, symptoms, or medical history, which requires the administration of the over-the-counter medication on a long-term basis. The physician must also specify the medication time span, within the 90-day limit, and designate the date within the 90-day period when the child should be reevaluated.

NON-PRESCRIPTION MEDICATION

Over-the-counter medication for short-term illnesses will be administered with the written authorization of the family and may require the written approval of the child's physician or physician's designee. Authorization to administer over-the-counter medication will be effective for the length of time indicated on the original container instructions, but not to 10 days. Should over-the-counter medication be required longer than 10 days, written permission from the physician must be obtained.

STORAGE OF MEDICATION

All medication must be current and stored in the original container. Prescription medication must have a label affixed by the pharmacy or physician's office, which states the child's name, the name of the medication, the dosage amount, the time of administration, the physician's name and the prescription number. Over-the-counter medications must be current and must be labeled by the parent with the child's name.

All medications must be kept out of the reach of the children. Medications which require refrigeration are stored in a refrigerator inaccessible by children. All medications are stored in a locked place/box.

All medications are to be taken home by the parents after the final administration. When authorization for medication expires, parent will be notified that medication needs to be picked up within 14 days or the parent must renew the authorization. All medications that are not picked up by the parent within 14 days of notifications will be disposed of safely.

DOCUMENTATION OF ADMINISTRATION OF MEDICATION

Staff members will document all medication given to a child at the center. Staff will document the day, time and dosage of each medication administered to a child specifying the staff member who administered the medication. Staff will note any adverse reactions and medication errors (if any). The medication permission forms, approval forms from the child's physician, and administration documentation shall all be filed in the child's permanent record for future reference.

EMERGENCY MEDICAL TREATMENT

The center will not admit any child whose parent has not given written authorization that emergency medical care may be administered to the child in an emergency where the child's health condition represents a serious or imminent threat to life, health, or well-being. Should such an event occur, conscious effort will be made to notify the family prior to such action. However, emergency first aid and medical treatment may be provided without additional consent under the provisions of the signed emergency medical care agreement kept on file at the center in the child's permanent file.

Children who develop conditions after admission that require immediate medical attention will receive emergency first aid from trained staff members, the NASA Langley Medical Emergency Team, or emergency medical personnel at the NASA Langley Occupational Health Center.

Two staff members shall always be present on the premises during hours of operation when enrolled children are in the facility and being supervised by staff members. In the event of a medical emergency, one staff member shall stay with the injured child while the other staff member summons emergency medical help. The LCDC has an Automated Emergency Defibrillator (AED) equipped for infant/child/adult capabilities for use in the event of cardiac arrest. Staff are trained in First Aid, CPR, and AED use. The Center has several staff that are trained Basic Life Support instructors that are qualified to train all staff members as AED/CPR responders.

SERIOUS INJURIES

Serious injuries requiring emergency first aid will be reported to the families immediately. The parent will be notified of the details of the injury and summoned to the center to meet the staff member and injured child at the designated emergency medical facility.

Conditions which require immediate medical care include, but are not limited to:

1. Convulsions
2. Marked difficulty breathing
3. Unconsciousness
4. Laceration, either significant in size or bleeding
5. Injury to an extremity with obvious deformity
6. Head trauma associated with vomiting or altered consciousness
7. Cardiac arrest

MINOR INJURIES

Minor injuries, such as small scratches, cuts, scrapes, bruises or discoloration's of the skin will be reported to the parents at the end of the day. If an injury is minor but significant, the staff will notify the parent by telephone so that the parent can come to observe the child's injury or call the child's physician for medical advice concerning non-emergency treatment. When there is a question about the course of action to be taken, the LCDC Director or designee will consult with the pediatric consultant on the Advisory Board, the NASA Langley Occupational Health Center, or the child's physician.

All injuries occurring at the center will be documented by the LCDC Director or designee and filed in the child's permanent file. If requested, parents may have a copy of the incident report. **Serious**

incidents or ones that the staff feels may be upsetting to the parents will be communicated verbally and a follow up incident report will be provided to parents.

In return, we ask that parents communicate with the classroom Teachers any unusual behavior or incident that may have occurred while the child was at home. This will ensure that Teachers are well informed, allowing them to take care of your child in the best way possible.

SAFETY

CLOTHING

Please dress your child(ren) in practical clothing that allows for freedom of movement and is appropriate for the weather. Your child(ren) will be involved in a variety of activities including: eating, painting, outdoor play, sand/water play, and other sensory activities. Our playground is used as an extension of the classroom, and daily activities are conducted outdoors whenever weather permits.

One particular aspect of concern is the risk associated with children's clothing that may become entangled with climbing or sliding equipment that could lead to choking or other serious harm. All drawstrings from children's clothes should be removed as a precaution. Be mindful of jewelry, as it can be a choking hazard as well.

Sandals and flip-flops are not appropriate for center play and make it difficult for your child to participate in some activities. Closed-toed shoes are required at all times. Tennis shoes are best so that running, jumping, and other movements are safe and children don't slip on the floor.

When dressing your child for special occasions, please dress your child comfortably so that they can still engage in play and exploration. Minimal accommodations will be made to change children's clothing specifically for special activities/events such as pictures, field trips, center activities, etc. So, please keep this in mind when dressing your child for special events/activities. It is requested that parents apply sunscreen on their children prior to arriving at school and on special event days (i.e. water play days, field day, field trips, etc) to assist us in ensuring that your child has adequate protection from the sun.

EXTREME WEATHER & OUTDOOR PLAY

Outdoor play and exploration is an integral part of our curricular experience. Children of all ages will spend time outside on a daily basis. Please ensure your child is dressed appropriately for the current weather conditions.

Outdoor play will not occur if the outside temperature or heat index/wind chill is greater than 100°F or less than 35°F degrees. Activities that require higher levels of physical exertion will not be conducted when the heat index is above 100 °F. Children will be monitored and provided proper hydration during higher than normal heat index conditions. The LCDC will exercise additional caution when planning outdoor activities for non-mobile infants.

Additionally, outdoor play will be cancelled if the air quality rating is orange or greater. Children will be prohibited from going outside on the playground when unsafe conditions exist on the playground that pose a safety concern/hazard for children. Other than the conditions named above, special accommodations that exclude children from outdoor play will not be made.

Families may complete the Request for the Administration of Medication form to give qualified staff permission to apply insect repellent and sunscreen.

LIABILITY INSURANCE

The LCDC Exchange carries liability insurance to cover incidents, injuries or accidents, proven the result of negligence by the center staff or a deficiency in the center's equipment. The liability insurance does not cover injuries which are not the result of negligence.

To ensure that all furniture and equipment (including toys) are safe and age appropriate, all donations of such must be reviewed by the LCDC Director and the Exchange Manager. If the items will not be in the center longer than 30 days, the LCDC director should give permission for their use.

Parents who have questions or wish to make a claim should contact the LCDC Director for information about the appropriate procedures to be followed for processing a claim. The LCDC Director will provide the appropriate forms for making a claim.

Although LCDC does have access to the NASA Rescue Squad and the Occupational Health Clinic for injuries involving the children, the approved access is for serious conditions which may require immediate attention or emergency first aid. While emergency responders may take a child to the Occupational Health Center for evaluation following an injury, the parents will typically be referred to their own health care provider for medical care, which does not require emergency first aid.

SUPERVISION OF CHILDREN

Active adult supervision is required at all times while children are in our care, both in the classroom and on the playground. No child is ever to be left unattended or out of a teacher's sight.

HEALTH & SAFETY INSPECTIONS

The Child Development Center is inspected on a regular basis by various internal and external officials to assure compliance with laws, regulations operating policies, and procedures regarding the health, fire, safety, facilities and the overall environment of your child's care.

Type of Inspection/Inspector	Frequency
Occupational Health Inspection of Kitchen and Food Service Operation	Annually
Organizational Safety and Facility Coordinators Inspection	Monthly
Fire/Safety Inspection	Annually
NASA/OSEMA	Random
Fire Drills	
NASA SSQR, Safety and Environment Management Services	Monthly
Janitorial Services	Daily
LCDC Director Review	Ongoing
Office of the Chief Health and Medical Director (NASA Occupational Health Program Staff)	Tri-annually
LaRC Child Care Evaluation Team	Annually

CHILD ABUSE OR NEGLECT

Child care providers are mandated by state law to immediately report any suspected child abuse or neglect to NASA Security, Office of Human Capital Management, and the Virginia Department of Social Services. A written statement is signed annually by all staff and parents in the Center indicating their awareness of this policy. Training on the detection of abuse and neglect, as well as the program's reporting procedure is reviewed annually for LCDC staff. All new employees are trained on child abuse and neglect identification and reporting during orientation. The number one priority of the Center is to protect all the children in its care and normal a CARAT is established if abuse or neglect is alleged.

PHOTOGRAPHS & RECORDINGS

All children may be photographed or recorded to develop videos, published material, or news releases, with the understanding that a family's privacy will be respected and honored. Teachers and students may also photograph or record children for the purpose of course assignments or for educational or scholarly purposes. Identifiable photographs will not be used on the Internet without prior specific approval from the parents. Photographs or recordings may also be taken throughout the day to document growth and development. These photos and recordings will be shared via Tadpoles on the digital Daily Sheets. Photographs or recordings featuring more than one child are secure from download or upload to other official or social media without written confirmation of parental consent.

PARENTAL RESPONSIBILITIES & REQUIREMENTS

Along with LCDC staff members, families play a key role in ensuring that the operating policies set forth in this handbook are followed. More importantly, families play a significant role in ensuring that the LCDC runs as smoothly as possible to provide a safe, comfortable atmosphere for all children attending LCDC. As a result, it is important that families follow a code of conduct designed to foster a high quality, safe, educational, and efficient environment.

The following basic requirements must be adhered to and acknowledged:

- Families must provide the LCDC Director with current medical information on their child(ren).
- Families must sign their child(ren) in/out every time they enter/exit the LCDC. Temporary check-outs must be communicated to both the teacher and the front desk. They will be documented in the Tadpoles system.
- Families must ensure that their child is properly clothed for the appropriate seasonal temperature, and that a weather appropriate change of clothes has been provided for their child.

- Families must ensure that their child is provided with athletic or other appropriate closed toed shoes for outdoor play or field trips. Exceptions are approved by the LCDC Director.
- Families must ensure that their child is properly fed prior to coming to the LCDC, or arrives in time for a scheduled meal at the LCDC.
- Families must inform the Director when their child has been exposed to or has a contagious disease.
- Families must inform the LCDC when their child will be absent. Absences due to illness or vacation can be recorded using the Tadpoles Parent App. However, it is also advisable to inform the Director and teachers of any planned absences.
- Families must inform the LCDC staff as soon as possible when their child's arrival/departure will vary by more than 60 minutes from normal. A child's normal arrival/ departure time is indicated on the Child Admission Form.
- Families must take each child to his/her classroom upon arrival and ensure that the teacher is aware of the child's arrival.
- Families must notify the caregiver responsible for the child when the child is departing the center.
- Families must pick up children within 30 minutes when notified by the Director (see "Control of Contagious Illnesses").
- Families are prohibited from using LCDC facilities and/or resources for personal gain.
- Families are prohibited from using any and all forms of physical and verbal abuse at LCDC, including without limitation, yelling, shouting, the use of profanity, name calling, shaming, making derogatory remarks to or about any child (including their own child), a child's family or an LCDC staff member, and/or using language that threatens, humiliates, or frightens a child, a child's family or an LCDC staff member. Corporal punishment is prohibited at LCDC.

PARENT-TEACHER ORGANIZATION

All center parents of enrolled children may become members of the NASA Langley Child Development Center Parent Teacher Organization (LCDC PTO). The PTO serves as a separate organization very similar to that of a Parent Teacher Association in the public school system, and allows parents an opportunity to participate in a variety of activities which support and enrich the programs offered at the center. Teachers may participate in PTO non-fund raising activities, PTO meetings and other events on a volunteer basis and not during duty time. For collaboration and coordination purposes, the Director is encouraged to attend PTO meetings and may authorize limited teacher participation that does not adversely impact mission operations during duty time.

The PTO has elected officers of president, vice president, treasurer, and secretary who serve one year-terms. The PTO also has an ex-officio position selected by the current and incoming board members. Visit the PTO website for more information: <http://pto.larc.nasa.gov/>

PARENT FEEDBACK PROCEDURE

Feedback is encouraged and should pertain to areas affecting services to children and families. Parents are encouraged to contact the Program Director to provide feedback or use the feedback forms available at the front desk for documentation purposes. Appropriate actions will be taken to resolve issues and may be documented. *Program administrators will not tolerate blatant disrespect of any staff member.* The LCDC staff respect parents' rights as parents. In turn, we ask that parents respect staff as Early Childhood Professionals.



PARENT ACKNOWLEDGEMENT FORM

I acknowledge that I have received a copy of LCDC's Operational Handbook, and reviewed it on the date indicated below. This acknowledgement does not constitute a contract. However, it acknowledges that I understand that it is my responsibility to read and comply with the contents and provisions of this manual, as well as any revisions or modifications made to it. In addition, I understand that I should consult the Program Director regarding any questions not answered in the manual.

Furthermore, I understand and agree that if I violate a policy set forth in the LCDC Operational Handbook, LCDC reserves the right to take appropriate action. This includes possible withdrawal from the program for my child. Please refer to Withdrawal for Challenging Behaviors and Withdrawal Procedures for additional information.

Name _____

Version/Document Date _____

Signature _____ Date _____

Center Representative _____