

**Air Force (AF) Child Development Center (CDC) Criteria**  
**20<sup>th</sup> Year Inspection**  
**Revised as of Jan 11**

The AF CDC Criteria may be obtained on the Headquarters Air Force Services (AFSVA) Community of Practice. AF CDC/Annexes, and Part-day Preschool Programs are responsible for compliance with all AF CDC Criteria. In case of a conflict between the source documents listed below, this version of the AF CDC Criteria is used as AF policy until the next update of the AF Instruction governing this program.

CDC criteria are based on the following:

- Air Force Policy Directive (AFPD) 34-7, Child Development Programs
- AF Policy 2009/10 Recommended Immunization Schedules for Child and Youth Programs, 20 Oct 09
- AF Policy CDC/School-Age (SA)/Youth Programs (YP) Drinking Water, 3 Oct 05
- AF Policy Cleaning Standards for CDC, YP and SA
- AF Policy on the Developmental Training Model (DTM) and Standardization
- AF Policy on Diaper Changing Procedures
- AF Policy on Sudden Infant Death Syndrome (SIDS) Prevention for AF CDCs and Family Child Care (FCC) Programs, 5 Jan 09
- Child and Youth (CY) Pay System Program Guidance, Oct 08
- HQ Air Force Civil Engineering Support Agency (AFCESA) Inspection Guide for AF Child Development Facilities
- The National Fire Protection Association (NFPA) 101, Life Safety Code
- The National Association for the Education of Young Children (NAEYC) Early Childhood Program Standards and Accreditation Criteria
  - \*Additional guidance is provided to clarify some of the NAEYC Accreditation Criteria
- United States Department of Agriculture Child and Adult Care Food Program (USDA CACFP) Guidelines

***Changes/Additions to the 20<sup>th</sup> Year CDC Criteria are indicated by italicized red font***

***Criteria/Standard Findings revised to mirror all CYP Programs are indicated by italicized blue font***

- C1 Teaching staff are consistent and predictable in their physical and emotional care of all children. (NAEYC 1.B.03)
- C2 For Toddlers/Twos, Preschoolers, and Kindergartners with persistent, serious, challenging behavior, teachers, families, and other professionals work as a team to develop and implement an individualized plan that supports the child's inclusion and success. (NAEYC 1.E.01)
- C4 Teaching staff facilitate positive peer interaction for Toddlers/Twos, Preschoolers, and Kindergartners, who are socially reserved or withdrawn and for those who are bullied or excluded. (NAEYC 1.C.06)
- C5 Teaching staff foster children's emotional well-being by demonstrating respect for children and creating a positive emotional climate as reflected in behaviors such as frequent social conversations, joint laughter, and affection. (NAEYC 1.B.01)
- C6 Teaching staff function as secure bases for children. They respond promptly in developmentally appropriate ways to children's positive initiations, negative emotions, and feelings of hurt and fear by providing comfort, support, and assistance. (NAEYC 1.B.05)

- C7 Teaching staff coach and support Toddlers/Twos, Preschoolers, and Kindergartners, as they learn to participate in daily cleanup and maintenance of the classroom. (NAEYC 3.D.08)
- C8 Teaching staff join Toddlers/Twos, Preschoolers, and Kindergartners in learning centers to extend and deepen children’s learning. They observe children, engage in conversations, and position themselves at eye level with the children. (NAEYC 3.G.10)
- C9 Teaching staff support Toddlers/Twos, Preschoolers, and Kindergartners as they practice social skills and build friendships by helping them enter into, sustain, and enhance play. (NAEYC 1.C.03)
- C10 Teaching staff use varied vocabulary and engage in sustained conversations with children about their experiences. (NAEYC 3.F.07)  
\*Teachers do not talk down to children; teachers occasionally use words that the children may not understand and provide explanations of these words.
- C11 Teaching staff foster independence, as children are ready, in routine activities such as picking up toys, wiping up spills, personal grooming (toileting and hand washing), obtaining and caring for materials, and other self-help skills.
- C12A Indoor space is designed and arranged to accommodate children individually, in small groups, and in a large group; divide space into areas that are supplied with materials organized in a manner to support children's play and learning; provide semiprivate areas where children can play or work alone or with a friend; provide children with disabilities full access (making adaptations as necessary) to the curriculum and activities in the indoor space. (NAEYC 9.A.12)
- C14 In each activity room there is hard surface flooring for eating and play.
- C15 Each room for Preschool children is divided into interest centers. There are interest areas (not centers) for Toddlers/Twos.
- C16 Clear pathways are available for children to move from one area to another without disturbing other children's work and play. (NAEYC 9.A.11)
- C17 Staff organize and group materials on low, open shelves to encourage children to use them independently. Staff rotate and adapt materials to promote learning and extend children’s play opportunities. (NAEYC 9.A.07)
- C18A A variety of age and developmentally appropriate materials and equipment are available indoors for children throughout the day. Equipment may include: dramatic play equipment, sensory materials, blocks, materials that support curriculum goals and objectives in literacy, math, science, social studies and other content areas and gross motor equipment. Materials and equipment that facilitate focused individual play or play with peers are available in sufficient quantities to occupy each child in activities that meet his or her interests. (NAEYC 9.A.04/9.A.08)
- C19 A variety of age and developmentally appropriate materials and equipment are available outdoors for children throughout the day. Equipment may include: dramatic play equipment, sensory materials, blocks, materials that support curriculum goals and objectives in literacy, math, science, social studies and other content areas and gross motor equipment. (NAEYC 9.A.04)  
\*Some combination of each are needed indoors and outdoors but not all are needed both indoors and outdoors.
- C20 The indoor environment includes washable, soft elements that allow groups of children or adults and children to sit in close proximity for conversations or comforting. (NAEYC 9.A.10)
- C21 The outdoor play area permits a variety of activities to be conducted throughout the year.

- C22 Outdoor play areas accommodate exploration of the natural environment, including a variety of natural and manufactured surfaces, and areas with natural materials, such as nonpoisonous plants, shrubs, and trees. (NAEYC 9.B.01)
- C23 There is a variety of age appropriate equipment for riding, climbing, balancing, and individual play.
- C24 Areas with natural materials, such as nonpoisonous plants, shrubs, and trees are available. (NAEYC 9.B.01)
- C25 Adults have a comfortable place to sit, hold, and feed Infants. Staff place the rocking chairs and glider chairs in locations that will avoid injury to children who may be on the floor. (NAEYC 9.A.14)
- C26 When more than one group (two ratios) occupies a room, each group has its own clearly defined space and its own basic interest centers/areas.
- C27A For each child over the age of one year, a chair with a back and a seating height that allows the child to sit with his or her feet on the floor or ground is provided. The tables are at a height that allows a child to sit comfortably with the table between his or her underarm and waist. (NAEYC 9.A.01)
- C29 Non-disposable materials are durable and in good repair. Equipment, materials, and furnishings are available that provide access for children with disabilities to the program's curriculum and activities. (NAEYC 9.A.03)
- C30A The posted daily schedule is followed, accurately reflects the events of the day, is predictable, yet flexible and responsive to the children's individual needs. The posted daily schedule includes both indoor and outdoor experiences and is responsive to a child's need to rest or be active.
- C36 Teachers provide time and materials daily for children to select their own activities. (NAEYC 3.D.03)
- C37 Teachers organize time and space on a daily basis to allow children to work or play individually and in pairs, to come together in small groups, and to engage as a whole group. (NAEYC 3.D.10)
- C38 The Standardized Weekly Planning Form, that has been reviewed and initialed by the Training and Curriculum (T&C) Specialist (or designee during absences or vacancies) prior to implementation, is current, complete, posted, and followed. (Standardization)
- C39 Teaching staff help Toddlers/Twos, Preschoolers, and Kindergartners follow a predictable but flexible daily routine by providing time and support for transitions. (NAEYC 3.D.09)  
 \*Support for transitions includes predictability, verbal or visual cues, staff engagement in clean up, staff ability to fill time effectively (for example, if lunch is late). The spirit of this criterion also has to do with staff being willing to suspend their agenda in an effort to be responsive to children's interests and needs.
- C40 There are realistic weekly activity plans based on the needs and interests of individual children, consistent with the developmental goals and philosophy.
- C41 Teaching staff, program staff, or both work as a team to implement daily teaching and learning activities, including Individualized Family Service Plans (IFSPs), Individualized Education Programs (IEPs), and other individual plans as needed. (NAEYC 3.A.01)
- C42 Infants and Toddlers/Twos are provided varied opportunities and materials to use their senses to learn about objects in the environment, discover that they can make things happen, and solve simple problems. (NAEYC 2.G.01)
- C43 Teachers interact with children to assess their strengths and needs to inform curriculum development and individualize teaching. (NAEYC 4.D.03)
- C44 Teachers use their knowledge of individual children to modify strategies and materials to enhance children's learning. (NAEYC 3.E.04)

- C45/66 *Toddlers/Twos, Preschoolers, and Kindergartners are provided varied opportunities and materials to build understanding of numbers, number names, their relationship to object quantities and to symbols, and to integrate mathematical terms into everyday conversations. (NAEYC 2.F.02/2.F.04)*
- C46 Teaching staff are active in identifying and countering any teaching practices, curriculum approaches, or materials that are degrading with respect to gender, sexual orientation, age, language, ability, race, religion, family structure, background, or culture. (NAEYC 3.B.04)
- C47 Toddlers/Twos, Preschoolers, and Kindergartners are provided varied opportunities and materials that encourage good health practices such as serving and feeding themselves, rest, good nutrition, exercise, hand washing, and tooth brushing. (NAEYC 2.K.01)
- C48 Teachers create classroom displays that help Toddlers/Twos, Preschoolers, and Kindergartners reflect on and extend their learning. They ensure that children’s recent work is predominately displayed in the classroom (e.g., art, emerging writing, graphic representation and three-dimensional creations) and that some displays are at children’s eye level. (NAEYC 3.A.06)
- C49 A variety of developmentally appropriate hands-on activities to foster a positive self-concept are offered.
- C50A Preschoolers and Kindergartners are provided varied opportunities and materials that encourage them to discuss scientific concepts in everyday conversation; to learn key content and principles of science such as: the difference between living and nonliving things (e.g., plants versus rocks) and life cycles of various organisms (e.g., plants, butterflies, humans); the earth and sky (e.g., seasons, weather, geologic features, light and shadow, sun, moon, and stars); structure and property of matter (e.g., characteristics that include concepts such as: hard and soft, floating and sinking); the behavior of materials (e.g., transformation of liquids and solids by dissolving or melting). (NAEYC 2.G.07)
- C52 Infants have varied opportunities to experience songs, rhymes, routine games and books through individualized play that includes simple rhymes, songs, and interactive games (e.g., peek-a-boo); daily opportunities for each child to hear and respond to various types of books including picture books, wordless books, books with rhymes, and access to durable books that enable independent exploration. (NAEYC 2.E.01)
- C53 Toddlers/Twos have varied opportunities to experience books, songs, rhymes, and routine games through individualized play that includes simple rhymes, songs, and sequence gestures (e.g., finger plays, peek-a-boo, patty cake, This Little Piggy); daily opportunities to hear and respond to various types of books including picture books, wordless books and books with rhymes; access to durable books that enable independent exploration; experiences that help them understand that pictures represent real things in their environment. (NAEYC 2.E.02)
- C54A Preschoolers and Kindergartners have varied opportunities to be read books in an engaging manner in group or individualized settings at least twice a day in full-day programs and at least once daily in half-day programs. Children are read to regularly in individualized ways including one-to-one or in small groups of two to six children. Children can explore books on their own and have places that are conducive to the quiet enjoyment of books. Children have access to various types of books, including storybooks, factual books, books with rhymes, alphabet books, and wordless books and are read the same book on repeated occasions. Children are encouraged to retell and reenact events in storybooks; engage in conversations that help them understand the content of the book; identify the parts of the book; and differentiate print from pictures. Children are assisted in linking books to other aspects of the curriculum. (NAEYC 2.E.04)

- C60 Infants and Toddlers/Twos are provided an environment that allows them to move freely and achieve mastery of their bodies through self-initiated movement. They have multiple opportunities to practice emerging skills in coordination, movement, and balance, as well as perceptual-motor integration. (NAEYC 2.C.01)
- C61 Toddler/Twos, Preschoolers and Kindergartners are provided varied opportunities and materials that support fine-motor development. (NAEYC 2.C.03)
- C62 Preschoolers and Kindergartners have varied opportunities and are provided equipment to engage in large motor experiences. (NAEYC 2.C.04)
- C63 Children have varied opportunities to develop a sense of competence and positive attitudes toward learning, such as persistence, engagement, curiosity, and mastery. (NAEYC 2.B.04)
- C64 Toddlers/Twos, Preschoolers, and Kindergartners have varied opportunities to develop skills for entering into social groups, developing friendships, learning to help, and other pro-social behaviors. (NAEYC 2.B.05)
- C65 Preschoolers and Kindergartners are provided varied opportunities and materials that encourage them to engage in discussions with one another. (NAEYC 2.D.07)
- C67 Toddlers/Twos, Preschoolers, and Kindergartners are provided varied opportunities and materials to build their understanding of diversity in culture, family structure, ability, language, age, and gender in non-stereotypical ways. (NAEYC 2.L.03)
- C68 Preschoolers and Kindergartners are provided varied opportunities to build an understanding of time in the context of their lives, schedules, and routines. (NAEYC 2.F.07)
- C74 Children have varied opportunities to develop competence in verbal and nonverbal communication by responding to questions; communicating needs, thoughts, and experiences; and describing things and events. (NAEYC 2.D.03)
- \*For Infants and Toddlers/Twos, the development of competence includes adults' narration of things and events.
- C75 Children are provided varied opportunities to gain an appreciation of art, music, drama, and dance in ways that reflect cultural diversity. (NAEYC 2.J.01)
- C76 Families have ongoing opportunities to share the results of observations from home to contribute to the assessment process. (NAEYC 4.E.01)
- C77 Staff engage Infants in frequent face-to-face social interactions each day. These include both verbal behaviors (e.g., talking, cooing, repeating Infant sounds, singing) and nonverbal behaviors (e.g., smiling, touching, and holding). (NAEYC 1.B.11)
- C78 Teaching staff reorganize the environment when necessary to help children explore new concepts and topics, sustain their activities, and extend their learning. (NAEYC 3.E.01)
- C79 Teachers offer children opportunities to engage in classroom experiences with members of their families. (NAEYC 3.F.06)
- C80 Teachers and others who know the children and are able to observe their strengths, interests, and needs on an ongoing basis conduct assessments to inform classroom instruction and to make sound decisions about individual and group curriculum content, teaching approaches, and personal interactions. (NAEYC 4.D.01)
- C81 Teaching staff counter potential bias and discrimination by treating all children with equal respect and consideration, initiating activities and discussions that build positive self-identity and teach the *value* of differences, intervening when children tease or reject others, providing models and visual images of

adult roles, differing abilities, and ethnic or cultural backgrounds that counter stereotypical limitations, and avoiding stereotypes in language references. (NAEYC 1.D.01) \*Evidence may include diversity within the program itself, for example: a male teacher, staff and enrollment reflecting multiple ethnicities, multiple languages spoken, enrollment of a child in a wheelchair.

- C82 Teaching staff guide Toddlers/Twos, Preschoolers, and Kindergartners who bully, isolate, or hurt other children to learn and follow the rules of the classroom. (NAEYC 1.C.05)
- C83 Teaching staff talk frequently with Toddlers/Twos, Preschoolers, and Kindergartners and listen to children with attention and respect. They respond to children's questions and requests, use strategies to communicate effectively and build relationships with every child and engage regularly in meaningful and extended conversations with each child. (NAEYC 1.B.15)
- C84 Staff follow the AF Standardized Screening and Assessment Plan. They use the standardized *Age Appropriate Assessment and Planning Form* to set goals for each child by targeting specific objectives selected based on observations of children's needs and/or interests, parental observations/requests, or areas of development not yet observed. (Standardization)
- C85 Staff orient children and parents to the program at the time of initial enrollment and when transferred to a different room.
- C86 Parents are informed about policy or regulatory changes and other issues concerning the program and their child.
- C87 Staff talk about childrearing practices in the home and program to ensure smooth transitions during the day and minimize potential conflicts and confusion for children, and meet children's individual needs.
- C88 Staff keep information about children, families, and other staff confidential.
- C89 The Director and Flight Chief consult with agencies and organizations on and off the installation to provide information, obtain resources, and coordinate services.
- C90A Parents are provided information about child abuse prevention, how to promote learning at home, and how to promote their children's healthy development. (Examples include: pamphlets, brochures, training, a listing of community resources, newsletters, etc.)
- C93 Teaching staff individualize routine care (e.g., learning to use the toilet and to feed oneself) for Infants and Toddlers/Twos by incorporating family practices whenever possible and by respecting the home culture and the family's preferred language.
- C94A There is a Parent Advisory Board (PAB) consisting only of parents. Parents from all programs, including parents who use hourly care, are included. The PAB acts only in an advisory capacity, providing recommendations for improving services. The chairperson of the PAB is a parent. The PAB meets with the Flight Chief and the CDC Director at least quarterly and with the Mission Support Group Commander (MSG/CC), at least annually. The minutes of the PAB meetings are forwarded to the MSG/CC.
- C96 A Parent Involvement Plan (PIP) is prepared annually. The PAB and staff implement the PIP. A staff member has primary responsibility for the Parent Involvement Program.
- C97 Parents are surveyed at least annually to determine if the hours of operation and opening of the main facility during deployments, exercises, and inspections are appropriate.
- C98 Parents are encouraged to be involved in the program and in their children's care. Parents are welcome in the program at all times.
- C99 The program invites parents and other visitors to share arts, crafts, music, dress, and stories from various cultures.

- C100 Parents are notified of the date, time, and destination of field trips that require the use of a vehicle.
- C101 Parents are offered the opportunity for a formal conference at least once a year. Both formal and informal conferences are documented on children's *Age Appropriate Assessment and Planning Form*. (Standardization)
- C102 The program helps families by connecting them with needed resources and agencies to support the child's needs and developmental goals.
- C103 Staff work in partnership with families, establishing and maintaining regular, ongoing two-way communication.
- C104 *The Annual Unannounced Multidisciplinary Team Inspection (MTI), required by the Military Child Care Act, of all facilities used by the CDC has been conducted within the last 12 months. The MTI includes an expert in each of the following areas: child abuse protection, staffing, and a parent representative who has a child enrolled in the CDC. The results of the Annual Unannounced Higher Headquarters and Comprehensive Fire, Health, and Safety Inspections are reviewed as part of the MTI and the review is documented. The results are provided to the program staff in a timely manner – preferably within 1 month.*
- C106 All non-life-threatening deficiencies identified in any inspections required by the Military Child Care Act have been corrected within 90 days and remain corrected or a waiver is on file from the Assistant Secretary of the Air Force Manpower and Reserve Affairs (SAF/MR). All life-threatening deficiencies are corrected immediately.
- C107 The work environment for staff, including classrooms and staff rooms, is comfortable and clean and is in good repair. The work environment includes:
- A place for adults to take a break from children
  - An adult-sized bathroom
  - A secure place for staff to store their personal belongings
  - An administrative area for planning or preparing materials that is separated from the children's areas
- For primary CDCs and annexes serving more than 48 children:
- A reception area
  - Offices
  - Kitchen
  - Laundry area
  - Janitorial closets
  - Storage closets
  - Isolation area with toileting facilities and at least one crib/cot/mat with a sheet and blanket
- NOTE: These areas are not required if the activity rooms are located in a multi-use facility and fewer than 49 children are served. (NAEYC 9.C.02)
- C108 There is a minimum of 35 square feet of usable space per child in each activity room, with an additional 15 square feet for crawling and protected play for children 6 weeks to 24 months.
- C109 There is a minimum of 75 square feet of outdoor play area for each child playing on the playground.
- C110 There is a separate playground area for children under 2 years of age.
- C111 The exterior of the outdoor play area is enclosed by a fence at least 5' high; any fence installed after 1 June 94 is chain link fencing, except in climates with extreme wind conditions. Horizontal slat fencing is not used.

- C112 Gates to playground areas used by children 5 years and under can be securely fastened, are not locked during hours of operation, and can be opened by adults only.
- C113 The current DoD Certificate, standardized AF philosophy and goals, the mission statement, the guidance policy, and a copy of the current week's menu are posted in each lobby.
- C114 Substitutions (nutritionally comparable to the food substituted) are recorded on the posted menu before they are served.
- C115 Staff have the opportunity to meet together and with management at least monthly (may be small or large group meetings).
- C116 Sufficient Appropriated Funds (APF) are provided to operate the program and to minimize Non-Appropriated Funds (NAF) subsidy and parent fees. APF support for the program (personnel, supplies, equipment, and training) is at least equal to the parent fees collected.
- C117 The program fees are based on Total Family Income (TFI) and the annual DoD fee ranges and policies.
- C118 At least 75% of the hours paid to caregivers, APF or NAF, are paid to employees receiving benefits.
- C119 If there is a waiting list for full or part-day care for employed parents and the space could be used to meet this need, the SA Program and Part-Day Preschool have been moved to the YP or other appropriate facility.
- C120 If organizations other than the Force Support Squadron provide short-term care in other facilities, it is provided intermittently, the parents remain in the facility, the parents do not pay for the care, and volunteers (not employees) are used to supervise the children.
- C121 Surge or on-site care is provided in compliance with the AF requirements for this type of care.
- C122 An AF Form 1181, *Youth Flight Program Patron Registration*, is on file and has been completed and updated within the last 12 months for each child accepted for care. The emergency contacts have been authorized to sign the child in/out. Parents have signed the Authorization for Field Trips block on the AF Form 1181, for their child(ren) to be taken away from the CDC for walks, field trips, lessons, etc. Current and up-to-date immunizations have been transcribed to the AF Form 1181. Children without immunizations required by AF policy are not accepted for care unless it is an emergency.
- C123 Children's arrivals and departures are supervised.
- C124 Children are released only to persons listed on the child's AF Form 1181 or for whom the parents have provided written and verbal authorization.
- C125 Children are not permitted to leave unaccompanied, are not released to siblings under 14 years of age, and are permitted to leave for school and regularly scheduled activities only with written parent permission.
- C126 Parents or the emergency contact (if parents are not available) are contacted when children who arrive by bus or by walking do not arrive at the program when expected.
- C127 A copy of the completed AF Form 357, *Family Care Plan*, (or other branch of Service equivalent) is on file for all children whose parent(s) are single or dual military.
- C128 Parents sign children in and out on the AF Form 1182, *Youth Flight Register*, (or comparable tool approved by Headquarters United States Air Force Airman and Family Services (HQ USAF/A1SA) upon arrival and departure.
- C129 The DD Form 2652, *Application for Department of Defense Child Care Fees*, is completed in its entirety for families requesting a reduction in fees. All financial documentation to determine TFI is kept on file.
- C130 There is an additional charge for any care more than 50 hours per week.

- C131 No child is in care for more than 10 hours per day unless the Squadron Commander/Director has granted a waiver to the individual family because the parent is in school or works longer shifts. If the parent is on 12-hour shifts, the child may be in the Center no more than 60 hours per week.
- C132 The AF Form 1929, *Child Development Center Daily Reservation Log*, or equivalent is used to record requests for hourly reservations.
- C133 If there is a waiting list for care, no more than 5% of the child care spaces are set-aside for hourly care and no more than 5% of the child care spaces are set-aside by volunteers.
- C135 If applicable, the USDA CACFP *Income Eligibility and Enrollment Forms* are obtained and maintained for programs in the states and territories.
- C136 The desk staff use AF Form 1183, *Child Development/Enrichment Program Hourly Record of Attendance Instructions*, to record the number of children and staff in each room each hour.
- C137 Active Duty and DoD civilian employed parents are given a higher priority for enrollment for full-day and part-day care. Commanders may give single parents and dual military higher priority than other families. A policy has been established and implemented to terminate, within a reasonable time, the enrollment of children in families where the spouse is no longer employed, actively seeking employment, or is no longer a full-time student, if there is a waiting list. Full-time students who are enrolled for a minimum of 12 semester hours during the school year and 6 semester hours during the summer or the equivalent quarter hours, parents who are self-employed, or who telecommute are considered employed.
- C139 Parents requesting care complete DD Form 2606, *DoD Child Development Program Request for Care Record*. Parents are provided information about available FCC Programs. If interested in using FCC, the DD Form 2606 is annotated. Parents with a child on the waiting list are contacted at least every 2 months to keep the waiting list up-to-date. The DD Form 2606 is documented each time contact is made with the parent.
- C140 If there is a waiting list, a written plan for meeting the additional need has been developed and implemented. If the Program is not able to serve them, families are referred to the FCC Program. If FCC is unavailable, the Program refers families to AF sponsored Outreach/Subsidized Programs. The current monthly FCC Provider List is posted where it can be viewed by parents.
- C141 Parents are informed immediately when their child is injured, exposed to disease, experiencing distress or becomes ill.
- C142 All CDC facilities have been inspected by HQ AFCEA or an approved designee and are certified by HQ AFCEA as meeting the structural requirements of NFPA 101, Life Safety Code (current edition) and the AF for the type of program for which they are used. Full-day and hourly care facilities must comply with the day care standards. Part-day Preschool facilities must comply with the standards for educational facilities. Any deficiencies identified by HQ AFCEA or their designee have been corrected within 90 days and remain corrected or a waiver is on file from SAF/MR. A copy of the HQ AFCEA certification inspection for each CDC facility (if available) is on file and the certificate posted. NOTE: If the facility usage has changed or alterations have been made to the facility since it was first certified, the facility has been recertified for the current use by HQ AFCEA. (HQ AFCEA A-1)
- C143A *An Annual Unannounced Comprehensive Fire, Safety, and Health Inspection of each CDC facility has been conducted within the last 12 months by a Fire Specialist, the Installation Safety Office, and by a Public Health Specialist. The inspections are signed and dated. The most current version of the CDC Fire Prevention/Inspection Guide provided by HQ AFCEA was used.*

- C144 A fire inspector or fire task-certified/trained staff member conducts monthly Fire Inspections using Sections A and C of the most current CDC Fire Prevention/Inspection Guide provided by HQ AFCESA. The inspection is signed and dated. Deficiencies identified are corrected, remain corrected and documentation is kept on file. A copy of the last inspection is posted in the lobby of the facility. (HQ AFCESA A-2/C-2/D-5)
- C145 A fire task-certified/trained staff member conducts daily Fire Inspections prior to use. All doors, stairs, and other exits are in proper condition, unobstructed, unlocked to egress, easy to open, and all egress paths are free from debris, ice, snow, etc. The inspection is signed/initialed and dated with time of completion. Deficiencies identified are corrected, remain corrected and documentation is kept on file. (HQ AFCESA C-1)
- C146 Written emergency procedures and diagrams of evacuation routes are posted in a conspicuous location in each area of the facility. A fire inspector or fire task-certified/trained staff member conducts monthly fire drills. The recommended procedures for fire drills are followed and the children and staff evacuate safely and within a reasonable time. Fire drills are conducted at different hours of the day, including when children are resting/sleeping. No more than 2 months may pass between fire drills. (HQ AFCESA E-1)
- C147 Interior door and cabinet hardware in areas used by children is operable from either side. They are kept locked or children cannot enter them, and they are free from dangerous protrusions.
- C149 A safety inspector or safety task-certified/trained staff member conducts monthly Safety Inspections for indoor/outdoor areas and equipment. The inspection is signed and dated. Deficiencies identified are corrected, remain corrected and documentation is kept on file.
- C150 A safety task-certified/trained staff member conducts daily Safety Inspections for indoor areas and equipment, prior to use. The inspection is signed/initialed and dated with time of completion. Deficiencies identified are corrected, remain corrected and documentation is kept on file.
- C151 Teaching staff supervise children at all times.
- C153 There is a telephone with DSN and commercial capability able to reach residences and work locations of parents on and off the installation.
- C154 The building is well maintained. Walls, floors, furnishings, the outdoor play area, and equipment are kept in good repair and are safe, with no sharp edges, splinters, protruding or rusty nails, or missing parts. (NAEYC 9.C.07)
- C155 All areas, both indoors and outdoors, are free from glass, trash, sharp or hazardous items, and visible soil, and are in a clean condition. (NAEYC 9.C.07)
- C156 A task-certified/trained staff member conducts daily Playground Inspections for outdoor areas and equipment, prior to use. The inspection is signed/initialed and dated with time of completion. Deficiencies identified are corrected, remain corrected and documentation is kept on file. The outdoor play area protects children from injury from falls (resilient surfacing should extend 6' beyond the limits of stationary equipment), catch points, sharp points, and protruding hardware, entrapments (openings should measure less than 3.5" or more than 9"), tripping hazards, and excessive wind and direct sunlight. (NAEYC 9.B.06)
- C157 Children are protected from unsafe equipment. There are no merry-go-rounds, narrow steep slides, trampolines, animal figure and hard seat swings, infant walkers, infant cushions and pillows, playpens, and toy boxes or other large hinged items. Toys not recommended by the United States Consumer Product Safety Commission (US CPSC) are removed.

- C158 Climbing equipment, swings, shelving and large pieces (both inside and outside), which could fall over, are securely anchored.
- C159 There is adequate space between the playground equipment. Play zones are defined by boundaries that set them apart functionally and visually. The fall zones are of sufficient size and are in compliance with US CPSC guidelines.
- C160 Heating elements, electrical appliances, tools, and other dangerous equipment are not accessible to children except when they are being used for cooking experiences under direct staff supervision.
- C161 Infants and Toddlers/Twos do not have access to large buckets that contain liquid. (NAEYC 5.A.15)
- C162 Children are not exposed to hazards related to asbestos, lead-based paint, and toxic fumes. The radon level in the building is within limits.
- C163 Low exterior windows, which could be reached by children, are made of tempered safety glass, barriers are placed over them, or they are covered with safety film. Windows above the first floor are secured and protected by a barrier.
- C164 Stairways with over three steps, which are used by children, have handrails.
- C165 Toxic substances (used only as directed by the manufacturer) are stored in original labeled containers and kept in a locked room or cabinet, inaccessible to children, and away from medications and foods. Matches and lighters are not accessible, and gasoline and other flammable materials are stored (when needed) in a separate building. (NAEYC 9.D.09)
- \*Toxic substances are defined as those that can produce personal injury if inhaled, swallowed, or absorbed through the skin (includes cleaning supplies and pesticides). The Federal Hazardous Substances Act requires products that can cause substantial personal illness or injury to be labeled. Toxic, combustible, and flammable substances are covered by this provision. (NOTE: Combustible materials are any substances that can burn. Flammable materials give off vapors that can ignite at a lower temperature (under 100° F) than combustible materials). Note labels carefully, some sun protection products or insect repellents are labeled as flammable and should not be used in early childhood programs. Bleach should be in the original container and kept in a locked room or cabinet. Bleach is corrosive; liquid bleach is not considered flammable. Bleach water of the appropriate strength is clearly labeled and dated and stored out-of-the reach of children. NOTE: Bleach water does not need to be in a locked room or cabinet.
- C166A Infants are placed flat on their backs to sleep unless there is an up-to-date physician signed sleep position medical waiver, reviewed by the installation medical advisor, on file. The waiver notice is posted in the Infant's crib. The full waiver is maintained in the Infant's file.  
(Sudden Infant Death Syndrome Prevention Policy, 5 Jan 09)
- C166B Cribs meet the US CPSC guidelines. Crib slats will be less than 2 3/8" apart. The top of the crib mattress will be more than 20" from the top of the crib rail. Sides of Infants' cribs are in a locked position when cribs are occupied. Crib mattresses are firm and tight-fitting. Pillows, quilts, comforters, sheepskins, stuffed toys, and other soft items are not allowed where Infants sleep. If a blanket is used, the Infant is placed at the foot of the crib or mat with a thin, single layer blanket tightly tucked around the sides and the foot of the crib mattress or mat, reaching only as far as the Infant's chest. The Infant's head remains uncovered during sleep. After being placed down for sleep on their backs, Infants may then be allowed to assume any comfortable sleep position when they can easily turn themselves from the back position. Bibs and pacifiers are not tied around the Infant's neck or clipped to an Infant's clothing

during sleep. Infants who use pacifiers are offered their pacifiers when they are placed to sleep. A copy of the AF Infant Safe Sleep Practices is posted in each Infant sleeping area.

(Sudden Infant Death Syndrome Prevention Policy, 5 Jan 09)

- C167 Teaching staff are aware of, and positioned so they can hear and see, any sleeping Infants and Toddlers/Twos for whom they are responsible, especially when they are actively engaged with children who are awake. (NAEYC 3.C.03)  
\*Teaching staff should check on sleeping Infants and Toddlers/Twos by standing near and looking into the child's crib at least 3 times each hour. Checking on a sleeping Infant should not disrupt the Infant's sleep or interrupt the teaching staff member's interactions with children who are awake. The frequency of checks should reflect knowledge of an individual child's characteristics (for example, a child with reflux may need more frequent checks). Teaching staff should use natural transitions to check on sleeping Infants or Toddlers/Twos, for example, when placing another child down for a nap, responding to a waking child, or at the end of an activity with a child or children who are awake. Timers or buzzers to remind teaching staff to check on children every 5 minutes are neither required nor recommended as they are not only likely to disrupt children's sleep but also the flow of interactions with children who are awake.
- C169 A health inspector or health task-certified/trained staff member conducts monthly Health Inspections of the facility. The inspection is signed and dated. Deficiencies identified are corrected, remain corrected and documentation is kept on file.
- C170 A health task-certified/trained staff member conducts daily Health Inspections prior to use. The inspection is signed/initialed and dated with time of completion. Deficiencies identified are corrected, remain corrected and documentation is kept on file.
- C171 The appropriate strength bleach water is prepared daily and bottles are clearly labeled and dated. Bleach water is kept out of reach of children.
- C172 The facility and outdoor play areas are entirely smoke free. No smoking is permitted in the presence of children. (NAEYC 9.D.06)
- C173 All rooms that children use are heated, cooled, and ventilated to maintain room temperature and humidity level. The maintenance staff or contractor certifies that facility systems are maintained in compliance with national standards for a facility used by children. (NAEYC 9.D.05)  
\*Heating, Ventilating and Air-Conditioning (HVAC) systems should be maintained in accordance with national standards for a facility used by children. The accepted national standard is American Society of Heating, Refrigerating, Air-Conditioning Engineers (ASHRAE) Standard 62.1-200, Ventilation for Acceptable Indoor Air Quality (available online via [www.ashrae.org](http://www.ashrae.org)) and its published addenda. See the Environmental Protection Agency's website for additional guidance:  
<http://www.epa.gov/iaq/schooldesign/hvac.html#Codes%20and%20Standards>
- C174 The program has taken measures in all rooms occupied by children to control noise levels so normal conversation can be heard without raising one's voice. (NAEYC 9.D.04)
- C175 Individual space is provided for each child's belongings. (NAEYC 9.A.02)
- C176 Toilets/sinks for children 5 and younger are located within or near each activity room.
- C177 There is at least one flush toilet for every 15 children over 2 years.
- C178 If sinks are too high for children to reach, a safe platform or steps are provided. Provide a platform or steps to help staff lift children onto the diaper-changing surface.

- C179 A sink and an area for diapering and a separate area and sink for food service for each group (two ratios) of children is provided.
- C181 APF custodial support is provided during the hours of operation to ensure sanitation and cleanliness. All surfaces surrounding toilets, diaper changing areas, and tables and chairs are disinfected at least daily. Hard surface floors are swept and disinfected prior to children's arrival and after breakfast and lunch. All carpets are vacuumed each day and shampooed at least quarterly. Infant room carpets are shampooed at least monthly. Rooms and surfaces are kept clean and are disinfected to reduce the spread of disease. Any mouthed toys are washed and sanitized before use by another child. Infant equipment is washed and disinfected daily. (Cleaning Standards for CDC, YP and SA Programs)
- C187 Require that each caregiver complete cardiopulmonary resuscitation (CPR) and pediatric first aid including rescue breathing during the first 6 months of employment and training remains current.
- C188 At least one staff member who has a certificate showing satisfactory completion of pediatric first aid training, including managing a blocked airway and providing rescue breathing for Infants and children, is always present with each group of children. (NAEYC 5.A.03)  
 \*Courses that specifically address first aid for young children are considered pediatric first aid. A general first aid course that does not address the specific needs of young children is insufficient to meet this criterion.
- C189 Fully equipped first aid kits are readily available and maintained for each group of children. Staff take at least one first aid kit to the outdoor play areas as well as on field trips and outings away from the site. (NAEYC 9.C.10)  
 (Inspectors will specifically check for the following contents: gloves, materials to clean wounds, and materials to stop bleeding).
- C190 Adults follow universal precautions to prevent transmission of blood-borne diseases. Disposable latex or non-porous vinyl gloves are worn when adults come into contact with blood, including blood in feces, and articles contaminated with blood are carefully disposed of, or cleaned and disinfected, or sent home with parents in a plastic bag.
- C191 Signs are posted near hand washing sinks reminding staff and children of hand washing procedures. Proper hand washing procedures are followed: wash with liquid soap and running water for at least 10 seconds; use disposable towels; and avoid recontamination by turning off faucets with the disposable towel.
- C192 Children, staff and volunteers wash their hands upon arrival, when transitioning to a new room, before and after eating or handling food, before and after water play, after diapering/toileting, after handling bodily fluid (e.g., mucus, blood, vomit), after outside play, and after handling animals. Staff also wash their hands before and after feeding a child, before and after administering medication, and after handling garbage or cleaning. (NAEYC 5.A.09)
- C193 Diapering procedures are in accordance with AF guidelines. (AF Diaper Changing Procedures)
- C194A *Medications are administered in a way that protects children. Only administer medications with daily written direction of parents on the AF Form 1055, Youth Flight Medication Permission Form, and approval from a medical professional. Consistent staff, who have been trained within the last 12 months by a medical professional, administer medication. No over-the-counter medications, including aspirin or aspirin-like products, antihistamines, decongestants, or cough syrup, are administered without approval from a medical authority for the child receiving them. Emergency "as needed" medications, for asthma or allergies, (inhalers, nebulizers, and EpiPens)*

*are accepted and used on an emergency basis. A current and complete action plan outlined by the prescribing health care provider is required. Parents initial monthly to authorize administration of emergency asthma medication and annually authorizing the use of an EpiPen. If it is necessary to administer the medication, parents are contacted. The need for such medication must be reverified every 12 months.*

- C198A On an annual basis, parental permission to apply diaper ointments/salves, sunscreen, insect repellent, lip balms, over-the-counter hand lotions, and hand sanitizer is obtained. Diaper ointments/salves are only used for treatment purposes. Sunscreen, insect repellent, and hand sanitizer are approved by the Program Medical Advisor and purchased by the Program.
- C200 *An AF Form 1187, Youth Flight Accident Report, is completed for any injury and any fatality in the program. Do not use this form to record behavior incidents. Injuries are recorded on AF Form 1023, Youth Flight Record of Injuries, within 24 hours of when they occur. Accidents and injuries which require medical attention, hospitalization, or death of a child are recorded and reported on the AF Child and Youth Programs (CYP) Reportable Incidents Report within 24 hours of the event to the Flight Chief, Squadron Commander/Director, MAJCOM Specialist, HQ AFSVA SVPY, and HQ USAF/AISA.*
- C201 The program maintains facilities so they are free from harmful animals, insect pests, and poisonous plants. Pesticides and herbicides, if used, are applied according to the manufacturer's instructions when children are not at the facility and in a manner that prevents skin contact, inhalation, and other exposure to children. The program uses the techniques known as Integrated Pest Management (IPM) so the least hazardous means are used to control pests and unwanted vegetation. (NAEYC 9.D.08)  
\*Programs should document that all plants that are accessible to children (indoors and outdoors) are safe. See Healthy Young Children for a list of safe plants; see this website for plant pictures:  
<http://www.plantcare.com/catalog/tepSearchByPlantName.php>  
See the EPA website for more information on integrated pest management:  
<http://www.epa.gov/pesticides/ipm/index.htm#bkmrk2>
- C202 There are screens on windows or doors that are left open.
- C203 All classroom pets and visiting animals brought into the CDC have been checked by a veterinarian and are certified as safe and healthy to be with children. No amphibians (toads, frogs, newts, salamanders, etc.), reptiles (includes ALL snakes, iguanas, lizards, turtles, etc.), birds of the parrot family, baby chicks or ducklings, aggressive fish species, ferrets, bats, cats, dogs, wild, exotic animals, and other animals not recommended for child care settings are present.
- C204 Children are screened by the desk staff or primary caregiver at the time of entry and during care for signs of illness.
- C205 Children or adults with contagious illnesses have restricted access to the program.
- C206 A crib, cot, or mat and bed linens are available for each child in rooms where rest time is provided.
- C207 Cribs, mats, and cots are placed at least 18" apart when in use unless they have closed sides and children sleep head-to-toe.
- C208 Cribs, mats, cots, and bed linens are disinfected/laundered before use by another child and at least weekly.
- C209 The names of children with allergies are posted in every room where the child has meals/snacks in the same way and similar location. Staff maintain areas used by staff or children who have allergies or any

other special environmental health needs according to the recommendations of health professionals.  
(NAEYC 5.C.04)

C210 The results of the initial water testing for lead contaminants from each faucet/drinking fountain used by the children or staff are on file in the CDC. The Installation's Bioenvironmental Engineer (BE) has been informed when plumbing lines or fixtures are modified, added or replaced. Based on a health risk assessment by BE, these plumbing lines or fixtures are tested for lead contaminants and the risk assessment and/or results are on file in the CDC. Water from the facility has been tested for bacterial contaminants at least annually and the results are kept on file. It has been determined that the water is safe for consumption, or another source of safe water has been provided. For CONUS: The most recent annual installation-wide Consumer Confidence Report (CCR) is kept on file. For OCONUS: Results of the installation-wide water quality report are kept on file.

(AF Policy CDC/SA Program/YP Drinking Water, 3 Oct 05)

C211 At least once daily in programs where children older than 1 year receive two or more meals, staff provide an opportunity for tooth brushing and gum cleaning to remove food and plaque. (The use of toothpaste is not required.) (NAEYC 5.A.16)

C212 Dirty linen, trash, mops, brooms, and cleaning buckets are inaccessible to children.

C213 Small outdoor sandboxes (less than 100 square feet in area) are covered when not in use.

C214 The food program is administered in accordance with and meets DoD, AF, and USDA CACFP requirements. The Program participates in the USDA CACFP, if it is available.

C215 Cycle menus are used; a dietitian or MAJCOM has approved all menus. Only creditable foods are purchased and served. Menus include a variety of foods. Menus are dated and kept on file for at least 1 year or as required by USDA CACFP (3 years).

C216 Processed foods/foods high in sugar, salt, and chemical additives are not served frequently.

C217 Dishes and eating/serving utensils for meals are made of melamine or other material that is easy for children to use and contributes to a home-like environment. No Styrofoam products are used.

C218 Food for meals and snacks is prepared, handled, transported, served, and stored in accordance with AF and USDA CACFP guidelines. The program takes steps to ensure food safety in its provision of meals and snacks. Staff discard foods with expired dates. The program documents compliance and any corrections that it has made according to the recommendations of the program's health consultant, nutrition consultant, or a sanitarian that reflect consideration of federal and other applicable food safety standards. (NAEYC 5.B.01/5.B.03)

C219 Second helpings of vegetables, fruits, bread, and milk are offered.

C220 Staff do not offer children younger than 4 years these foods: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonfuls of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole. Staff cut foods into pieces no larger than 1/4" squares for Infants and 1/2" squares for Toddlers/Twos, according to each child's chewing and swallowing capability. (NAEYC 5.B.14)

C221 Only food prepared at or for the CDC is served for meals, snacks, and special events.

C222 Food with expired dates is discarded. (NAEYC 5.B.03)

C223 Water is provided in single service cups or by a water fountain.

C225A Accept human milk in ready-to-feed sanitary containers labeled with the Infant's name and date, and store it in a refrigerator for no longer than 48 hours (or no more than 24 hours if the breast milk was previously frozen) or in a freezer at 0° F or below for no longer than 3 months. Ensure that staff gently

- mix, not shake, the human milk before feeding to preserve special infection-fighting and nutritional components in human milk. (NAEYC 5.B.09)
- C227 Provide a comfortable place for breastfeeding and coordinate feedings with the Infant's mother. (NAEYC 5.B.09)
- C228 The program serves meals and snacks at regularly established times. Meals and snacks are at least 2 hours apart but not more than 3 hours apart. (NAEYC 5.B.16)  
\*The time span is measured from the ending time of the previous meal or snack and the beginning time of the next meal or snack.
- C229 Formula is prepared in the facility kitchen or before children are present for care.
- C230 If staff warm formula or human milk, the milk is warmed in water at no more than 120°F for no more than 5 minutes. No milk, including human milk, and no other Infant/Toddler foods are warmed in microwave ovens/bottle warmers/crock pots/heated pans of water.
- C231 Teaching staff who are familiar with the Infant feed him or her whenever the Infant seems hungry. Feeding is not used in lieu of other forms of comfort. Feeding times and food consumption information are provided to parents of Infants at the end of the day. (NAEYC 5.B.12)
- C232 ***Bottle-feeding is done in such a way as to minimize disease, promote interaction, and protect Infants. Solid foods are not added to bottles. If Infants fall asleep while feeding, the bottles are removed. Bottles are not propped for Infants who cannot hold their bottles.***
- C233 Infants, if unable to sit or less than 8 months old, are held for bottle and spoon-feeding.
- C234 Children are not allowed to carry bottles, sippy cups, or cups with them while crawling or walking.
- C235 Food Service staff delivers food in a timely manner and in a way that minimizes the need for preparation by the caregivers. Meals and snacks are served family style, and staff sit and eat with children and engage them in conversation. Adults eating with children eat only food served to children. Toddlers/Twos and older children are encouraged to serve and feed themselves based on their abilities. Preschoolers and older children assist with table setting and clean up. (NAEYC 3.D.07)
- C236 An adult is present at the main entrance of the facility during all hours of service. Only those on official business are permitted in the facility.
- C237 All visitors are required to enter and depart at the main entrance (except for approved kitchen deliveries); sign in and out; wear identification; are monitored while in the facility.
- C238 Exterior doors, with the exception of the front entrance and kitchen door, not opening onto fenced play areas, are alarmed. NOTE: This is not required in a multi-use facility.
- C239 All staff, contract workers (CWs), and specified volunteers (SVs) wear a nametag or other identifying apparel. There is a visually recognizable system that identifies staff with completed National Agency Checks (NAC)/National Agency Checks with Inquiries (NACI).
- C240 Children are under the care of two adults with completed criminal history background checks at all times. If, due to limited room capacity or utilization, this is not feasible, Closed Circuit Television (CCTV) surveillance of the room is maintained continuously. When CCTV surveillance is used instead of a second adult, the one adult in the room and the desk staff monitoring the CCTV have completed NACs/NACIs. When CCTV surveillance is used instead of the second adult, set the camera and monitor on the room, and ensure rotation through all other rooms continues.
- C241 Properly functioning CCTV is installed in each activity room. NOTE: Not required in annexes of less than 49 capacity. CCTV monitors are located where the desk staff can clearly view and regularly observe each room.

- C242 The **current** Child Abuse/Neglect and Safety Violations in DoD CYPs signs are posted in highly visible areas in each facility where parents, children, youth, and staff have easy access to the telephone numbers.
- C243 *The Director/Designee reports all suspected cases of inappropriate guidance and child abuse and neglect telephonically and in writing, using the AF Child and Youth Programs (CYP) Reportable Incidents Report, to the Flight Chief, Family Advocacy Office (FAO) (or other locally determined action officer), Squadron Commander/Director, MAJCOM Specialist, HQ AFSVA SVPY, and HQ USAF AISA within 24 hours of occurrence.*
- C244/245 ***When a staff member is under investigation of suspected child abuse or neglect, he/she is placed on administrative leave or assigned to a position that does not involve contact with children until the case is resolved. Staff who violate the guidance policy are not permitted access to children until they are retrained or they are terminated.***
- C245B ***All staff have read the guidance policy and signed a written statement of understanding.***
- C247 Staff who commit, or have committed, substantiated child abuse or neglect are not permitted to be employed in the program.
- C248 There is a written guidance policy.
- C250 Staff never use physical punishment such as shaking or hitting and do not engage in psychological abuse or coercion. (NAEYC 1.B.09)
- C251 Staff use only positive techniques of guidance, including logical or natural consequences applied in problem situations, redirection, anticipation of and elimination of potential problems, and encouragement of appropriate behavior.
- C252 Staff never use threats or derogatory remarks and neither withhold nor threaten to withhold food as a form of discipline. (NAEYC 1.B.10)
- C253 Volunteers, non-management interns, and students are supervised while interacting with children and are not counted in staff:child ratios.
- C254 Through proper use and close attention to the AF Form 1930, *Daily Attendance in Youth Programs*, each child is under the care of a specific adult and the adult knows where the child is at all times. Parents drop off and pick up their child from his/her assigned room. Parents sign their children in and out on the AF Form 1930.
- C255 The physical design of the building permits visual monitoring of care.
- C256 It is possible to view into each room used for care through a window in the doors or walls.
- C257 It is possible to view into closets, storerooms, etc, or they are kept locked during hours of operation.
- C258 The lights are kept on in all rooms, closets, toilets, offices, and storage areas, when the building is in use.
- C259 There are no doors on toilet stalls for children under 5 years of age; or only half doors are used as approved by USAF/AISA, except when the toilet room is for a single toilet and it is used by children 5 years or older or adults, or opens onto a hallway or entrance used by the public.
- C260 Evening and weekend care is offered near the front entrance.
- C261 Convex mirrors or other means of providing visual access are used (indoors and outdoors), where needed, to improve supervision.
- C262 Child and Youth Program Assistants (CYPAs) are qualified to provide child care. They must be at least 18 years of age, have a high school degree or the equivalent, have the ability to speak, read, and write English, be physically and mentally capable of providing care, be free of communicable diseases, be

able to satisfactorily complete the required training, and selected and promoted based on the CY Pay Plan.

- C263 Caregivers have the opportunity to evaluate their own performance. Semi-annual evaluations are conducted by the Director or designee and include written observations, with the results summarized on page 2 of the Individual Training Plan (ITP). (DTM and Standardization)
- C264A An Installation Records Check (IRC) has been completed on all staff, CWs, and SVs. The IRC consists of a records check of all installations on which the individual has lived or worked for 2 years before the date of the application. The IRC includes a file check of Security Forces Management Information System (SFMIS), Family Advocacy's AF Central Registry (which includes all drug and alcohol program files, medical treatment facility files, mental health, and life skills files) and Family Housing. A check of SFMIS and Family Advocacy's AF Central Registry will satisfy the requirement for IRCs from current and former installations. Results are maintained in the employee work folder.
- C264B The Dru Sjodin National Sex Offender Registry Check has been completed prior to employment. NOTE: Applicable for those hired after October 2008. (CY Pay Plan Program Guidance, Oct 08)
- C265 A State Criminal History Repository Check (SCHRC) has been completed from all the states the individual staff or CW has lived in during the last five years. NOTE: Only required if a completed NAC or NACI is not on file. Results are maintained in the employee work folder.
- C266 A NAC or NACI has been requested for each individual staff member. NOTE: As of 21 May 08, all **newly hired** employees must have a NACI. An FBI fingerprint check has been requested for each CW. An individual with a Secret Clearance meets the requirement of a NAC or NACI but does not meet the SCHRC requirement. If the results of the NAC, NACI, or FBI fingerprint check were not completed and adjudicated, follow-up action has been conducted and documented every 6 months, until the checks are completed and adjudicated. Results are maintained in the employee work folder.
- C267 Record reverification of the IRC and a Defense Central Index of Investigations (DCII) has been completed for all staff, SVs, and CWs every 5 years. Results are maintained in the employee work folder.
- C268 All staff, SVs, and CWs have signed a statement indicating whether or not they have been arrested or convicted of any crime involving children, drugs, or alcohol.
- C269 Employee work folders are kept in the Center office for each employee. The folders include the employment application, results of two reference calls (personal, professional, or educational), a record of previous experience (if not on the employment application), the most recent performance evaluation, results of criminal history background checks, current physical examination (initial and every 3 years), medical tests, recommended immunizations, and a copy of their high school diploma and/or college transcripts.
- C270 There is a Center Director. Each facility or group of facilities with 99 or more children has a Director. There is an Assistant or Annex Director for facilities with 49-98 children.
- C271 Each CDC has a T&C assigned; there is at least one T&C for each 200 CDC capacity.
- C272 In the absence of a Director, a person at that grade or higher, provides daily oversight and is responsible for the Center.
- C273 There is a GS-05 **or** NAF equivalent in pay and job responsibilities or higher supervisor in each facility during all hours of operation and the name of the current on-site supervisor is posted at all times.
- C274 For children, 6 weeks to 12 months, there are never more than 4 children per staff member.

- C275 For children, 12 months to 24 months, there are never more than 5 children per staff member.
- C276 For children, 24 months to 36 months, there are never more than 7 children per staff member.
- C277 For children 3 years and older, there are never more than 12 children per staff member.
- C278 The number of children in a group is limited to double the staff:child ratio for that age group. During rest time, the staff:child ratios for children over 24 months of age does not exceed twice the required staff:child ratio and staff remain in the building to assist with emergencies, or staff with no other evacuation duties are assigned to perform their duties. For mixed age groups, the staff:child ratio for the youngest age group is followed if the children in the youngest age group make up 20% or more of the group.
- C279 The program is organized and staffed to minimize the number of groups, teaching staff, and classroom transitions experienced by an individual child during the day and program year. Every attempt is made to maintain continuity of relationships between teaching staff and children among groups of children. (NAEYC 10.B.13)
- C280 Staff are provided paid planning time to plan and consult with each other (may be during children's rest time if the children are 2 years and older).
- C281 When staff are scheduled to work with children 4 or more consecutive hours, they are provided 15 minutes away from children in each 4 hour period.
- C282 If children with special needs are present the required staff:child ratio has been adjusted, as recommended by the Program Medical Advisor, to ensure children's needs are met.
- C283 In general, children over 12 months of age are not moved to a new age group more frequently than once every 12 months.
- C284 All training is documented on the AF Form 1098, *Special Task Certification and Recurring Training*. An AF Form 1098 is initiated on each employee every January. (DTM)
- C285 Directors, Assistant Directors, and T&Cs receive at least 12 hours of annual training on supervision, administration, curriculum development, child abuse prevention, disease control, and other child care topics.
- C286 Administrative and Food Service staff receive at least 6 hours of New Employee Orientation (NEO) training in accordance with the standardized orientation AF Form 1098. An ITP is developed during the NEO and goals are updated annually or as training needs are identified. The ITP is on file. (DTM and Standardization)
- C287 Administrative staff receive at least 6 hours of annual training on administrative procedures, customer service, child abuse prevention, and position-related topics.
- C288 During the first 6 months of employment, Administrative staff complete the Administrative Staff Modules and the Child Abuse Modules 14 and 15. (Standardization)
- C289 Food Service staff receive at least 6 hours of annual training on sanitation, nutrition, food preparation and service, child abuse prevention, and position-related subjects. (Standardization)
- C290 During the first 6 months of employment, Food Service staff complete the Food Service Modules and the Child Abuse Modules 14 and 15. (Standardization)
- C291 ***Child and Youth Program Assistants (CYPAs)*** receive at least 12 hours NEO training in accordance with the standard orientation AF Form 1098. An ITP is developed for ***CYPAs*** during the NEO and goals are updated as training needs are identified during observations and/or debriefs. (DTM and Standardization)

- C292 **CYPAs** receive annual training on positive guidance techniques including acceptable and unacceptable ways of touching, talking to, and handling children, reporting suspected child abuse and neglect, and AF Infant Safe Sleep Practices. **CYPAs**, who have completed the modules, are provided at least 24 hours of training annually. (DTM and Standardization)
- C293 Assistance and training is provided to help **CYPAs** become Child Development Associates.
- C294 During the first 6 months of employment, **CYPAs** complete 3 of the AF Child Development Program Assistant Modules (14, 15 and module of choice), pediatric first aid including rescue breathing and food service training. Satisfactory progress toward and completion of the modules is a condition of employment. After fulfilling the initial 6 months requirement of completing 3 modules, **CYPAs** must complete a minimum of 3 modules every 3 months, completing all modules within the first 18 months of employment.
- C295 An ITP is developed for **CYPAs** during the NEO and goals are updated as training needs are identified during observations and/or debriefs. (Standardization)
- C296 A plan for staff training is generated from the evaluation process. For **CYPAs**, goals identified as part of the semi-annual evaluations are identified by an asterisk on page 1 of the ITP. (DTM)
- C297 SVs receive at least 10 hours of orientation including at least 1 hour overview of policies and practices, 1/4 hour pre-brief for Observation and Mentorship, 4 hours of Observation, 4 hours hands-on Mentorship and 3/4 hour of debrief for Observation and Mentorship prior to being assigned to volunteer in the center. (Standardization)
- C298 All CWs receive annual training on child abuse prevention, identification, and reporting.
- C299 **CYPAs** are engaged in on-going staff development and professional goal setting through regular observations and DTM debriefs (10 within the last 12 months). Debrief trainings are recorded on the AF Form 1098. Observation debrief forms are kept on file. (DTM and Standardization)
- C300 New **CYPAs** are observed 3 times (at least every other month) by the Director or designee and monthly by the T&C during the first 6 months of employment. Observations must include a debrief with the employee and/or classroom team. (DTM and Standardization)