



UNITED STATES MARINE CORPS
MARINE CORPS AIR STATION
POSTAL SERVICE CENTER BOX 8003
CHERRY POINT, NORTH CAROLINA 28533-0003

ASO 1710.30C w/CH1
MCCS
3 Mar 10

AIR STATION ORDER 1710.30C w/CH1

From: Commanding Officer, Marine Corps Air Station Cherry Point
To: Distribution List

Subj: FAMILY CHILD CARE PROGRAM (FCCP)

Ref: (a) MCO 1710.30E
(b) MCO 5500.18
(c) DoD 7000.14R
(d) National Fire Protection Assn 101

Encl: (1) MOA btwn State of NC and CO, MCAS Cherry Point
(2) SOP for Off Base Family Child Care (OFCC)
(3) SOP for FCC Special Purpose Homes
Evaluation Team (SNERT)
(4) Family Child Care (FCC) Application
(5) SOP for Children with Allergies
(6) SOP for Administration of Medication
(7) Child Abuse, Neglect Reporting Policy
(8) Child Guidance, Discipline and Touch Policies
(9) SOP for Family Child Care in the Event of a Base
Evacuation
(10) SOP for Safe Transport of Children by Vehicle/
Walking
(11) DoD Family Child Care Standards
(12) SOP for Family Child Care Infant/Pre-Toddler/Toddler
Direct Cash Payments
(13) Quality Review Board (QRB)

1. Situation. To promulgate the policies, standard operating procedures and instructions governing the establishment and functioning of Family Child Care Homes (FCCH) aboard Marine Corps Air Station (MCAS), Cherry Point and Off Base Family Child Care (OFCC) in the surrounding community of Havelock, NC.

2. Cancellation. AirStaO 1710.30B.

3. Summary of Revision. This Order has been completely revised and should be reviewed in its entirety.

DISTRIBUTION STATEMENT A: Approved for public release,
distribution is unlimited.

3 Mar 10

4. Mission. While the installation Child Development Center (CDC) meets the majority of the daytime child care needs of those military families residing in the local area, it cannot always accommodate the myriad of needs often required by single parents, dual military families, and/or shift workers/deployed personnel. To meet such needs the Commandant has authorized installation commanders to establish the FCC/OFCC Programs. These programs permit individuals lawfully residing in government quarters/private-owned/rented homes to care for children of military personnel, Department of Defense (DoD) civilian personnel paid from Non Appropriated Fund (NAF) and Appropriated Fund (APF), reservists on active duty or inactive duty for training, and DoD contractors.

5. Execution

a. Commander's Intent and Concept of Operations

(1) Commander's Intent. The Commanding Officer, MCAS Cherry Point has designated the Director, MCCA and the Director, Marine and Family Programs to advise and conduct the FCC/OFCC Programs.

(2) Concept of Operations

(a) The FCC/OFCC Programs, as established by reference (a), and enclosure (1), provide for quality child care in military family housing units and privately-owned/rented homes. It mandates extensive background checks, specific training, adherence to strict guidelines, provisions for unannounced inspections, and licensing/registration of FCC/OFCC providers while permitting the maximum flexibility in arranging terms between the child's sponsor and the provider. These programs are established aboard the Air Station to augment, not replace, the CDC. Responsibility for monitoring the program rests with the Director Marine Corps Community Programs (MCCA) and the Director, Marine and Family Programs, for administrative and operational oversight through the Child Development Program Administrator (CDPA), and for daily management with the FCC Director (FCCD).

(b) An FCC/OFCC home is a government family housing unit/private owned/rented home, other than the child's home, in which care is provided for one or more unrelated children for more than 10 hours per week. A child care hour is defined as the care of one child for one hour. Maximum capacity for

FCC/OFCC homes remains at six children, including the provider's own children and any guests, under the age of eight years. Childcare is authorized for children six weeks through twelve years in FCC/OFCC homes. FCC/OFCC homes will be limited to no more than two infants under two years of age (with only one child under two months with the exception of twins). The status of the sponsor determines the eligibility of children enrolled in FCC as stated in reference (a). Special purpose homes will be established in accordance with enclosure (3).

(c) In contrast to FCC/OFCC homes, babysitting is considered to be an agreement to care for children of other individuals on an occasional basis, for less than ten child care hours per week, either in the sitter's or the child's home. Regulations governing babysitting are not covered in this order.

b. Coordinating Instructions

(1) When child care is provided in government housing in excess of ten child care hours per week, certification of the provider by this program is required.

(2) Provider homes are subject to unannounced inspections by the FCC Director, installation agencies, Multidisciplinary Inspection Team, CYTPA and HQMC Inspection Team.

(3) The following requirements will be met before authorization will be granted to operate a FCCH:

(a) The potential FCC/OFCC provider must attend the Introductory Class.

(b) Providers Qualifications.

1. Each FCC/OFCC provider must be at least 18 years old and hold a high school diploma or equivalent.

2. Each FCC/OFCC provider will be able to speak, read and write English sufficiently to execute program requirements.

3. Each provider will comply with standard medical immunization requirements. Appropriate medical personnel should sign provider's immunization records.

(c) A family interview(s) will be conducted by the FCCD.

3 Mar 10

(d) An application, shown as enclosure (4), must be submitted to the FCCD/Resource and Referral for CYMS registration. Each applicant will complete a questionnaire and undergo a rigorous screening and background investigation process. The Security Manager will coordinate the local/national background checks of applicants living in government quarters.

(e) FCC/OFCC providers are required to attend and complete all training courses established and announced by the FCCD. Initial training will be completed before conditional enrollment in the program. Providers transferring from other installations will be required to attend the initial training prior to providing care. This training will include: Provider orientation, applicable regulations and installation policies, CPR, basic first aid, USDA requirements, health and sanitation, fire prevention, safety, administering medication as cited in enclosure (6), recognizing and reporting child abuse and neglect as cited in enclosure (7), appropriate guidance and discipline/touch as cited in enclosure (8). Failure to fully certify within 90 days will terminate the initial certification process, including training. Additional training will be offered and may be required of providers periodically based on their individual education plan (IEP). The training records will be reviewed quarterly. The Marine and Family Programs Director will be advised if providers are in non-compliance.

(f) FCC/OFCC providers may be personally liable for negligence in the operation of their FCCH. Personal liability insurance is required. Specific insurance requirements/program information is contained in reference (a)

(g) The names of all FCC applicants recommended for approval by the QRB will be forwarded to the Director, MCCS for signature of the Conditional Letter of Permission/Letter of Permission.

(4) Program Requirements.

(a) A planned age appropriate program of daily activities based on the National Association for the Education of Young Children (NAEYC) will be provided. These plans shall be in writing and approved by the FCC Program Manager/Monitor or Training & Curriculum Specialist (T&C).

(b) During the hours in which the provider is offering care to children outside her own family, his/her own children under age eight are considered family child care

children and the requirements for providing care must be followed with his/her own children.

(c) Consumption of alcohol is forbidden during the operation of the FCC/OFCC home.

(d) Smoking is prohibited during the hours children are present.

(e) Per reference (b), firearms must be unloaded and secured; the ammunition must be stored separately. Parents will affirm in writing they are aware of and have no objection to their presence.

(f) Children will be directly supervised at all times. No provider's children under age 10 or FCC patrons will be allowed to be on the second floor during the day care day (except where the only bathroom is upstairs).

(g) Children will not be released to anyone except the parents, unless duly authorized in writing by the parent.

(h) Providers will maintain accurate business, administrative and program records for their FCC home. Providers are required to give their tax identification number to all patrons at the beginning of care. This tax identification number will be on all receipts given to the patrons.

(i) Visitation by friends and neighbors should be limited to after day care hours. Contact with other certified providers should be planned, written on the activity plan and conducted outside the FCC home.

(5) Annual Re-certification Requirements. FCC providers must recertify annually, meeting the following requirements:

(a) Complete and submit an application at least one month in advance of re-certification date.

(b) Participate in family interview with FCC Director.

(c) Complete local installation record checks.

(d) Complete annual medical screening requirements for self and family members.

3 Mar 10

- (e) Comply with FCC health requirements.
- (f) Comply with fire and safety requirements.
- (g) Comply with all training requirements of at least 24 hours per year.
- (h) Receive at least a "5" on all Family Day Care Rating Scale (FDCRS) criteria.
- (i) Pay annual insurance fee.
- (j) Provide a developmentally and age appropriate program based on NAYEC guidelines and evidenced by the unannounced monthly visit.
- (k) Maintain accurate business, administrative and program records for their FCC home.

(6) Inactive Status. Certified providers may go on inactive status for a period of no more than 90 days. After that period, FCC certification will be terminated and all requirements for annual recertification will be met before caring for children again. Lending library equipment and resource material will be returned during this period. The providers will continue to attend monthly training while on inactive status.

(7) Denial, Suspension and Revocation of FCC Certification. Becoming an FCC provider is a privilege, not a right, which is extended to family members of military members at the discretion of the installation commander. Only the most qualified among those who meet the minimum qualifications will be certified as providers. The policies set forth in this order are to ensure that children are not put in an "at risk" situation. In the event a situation is deemed "at risk" for children, the FCC Director will inform the CYTPA and the Director, Marine and Family Programs, who will determine whether suspension or revocation is in order.

(a) An applicant may be denied certification based on, but not limited to:

- 1. Failure to submit all required information and forms.
- 2. Failure to meet all background clearance requirements.

3 Mar 10

3. Failure to meet minimum health, fire and safety standards.

4. Failure to successfully complete required training.

5. Health or medical conditions that might interfere with the providers ability to perform necessary duties.

(b) A provider may be suspended based on, but not limited to:

1. Suspected child abuse/neglect by the provider or a family member.

2. Suspected or reported domestic violence.

3. Suspected or reported substance or alcohol abuse by the provider or a family member.

4. Any violations of regulations that may endanger the life, health or safety of children in care that must be corrected within a specified time frame.

(c) A provider's certificate may be revoked based on, but not limited to:

1. Substantiated child abuse/neglect by the provider or a family member.

2. Substantiated or reported domestic violence.

3. Substantiated or reported substance or alcohol abuse by the provider or a family member.

4. Substantiated incidences where children were left unattended.

5. Failure to provide a healthy and safe environment.

6. Failure to meet the requirements for re-certification.

(d) In cases of a suspension or revocation, the FCC Director will, with a witness if necessary (e.g., CYTP Administrator, housing representative, PMO official), verbally

3 Mar 10

inform the provider the home is closed and will assist parents in finding alternative child care. Following any investigation which results in suspension, the provider's certification document and home identification sign will be returned to and retained by the FCC Director during the period of suspension or revocation within 24 hours of verbal notification. Written notification will include information on the appeal process. Once providers receive written notice of suspension or revocation, they have 30 days to submit a written appeal to the MCCS Director.

(e) The decision of the MCCS Director is final.

c. Tasks. A FCC Program is hereby formally established at MCAS, Cherry Point. The following responsibilities and actions apply:

(1) The FCC Director

(a) Compile and maintain information on all certified and/or in process FCC homes and provide a monthly report to the CYTP Administrator.

(b) Follow-up on all allegations of unauthorized childcare in housing under the control of the installation commander.

(c) Market the program to ensure full opportunity to participate and to maximize the use of existing resources to expand the availability of childcare Programs for eligible patrons.

(d) Ensure local FCC Orders and SOP's are in compliance with this Order.

(e) Ensure all background checks for providers and family members are completed in accordance with reference (a).

(f) Establish and maintain files for each provider.

(g) Document introductory, initial, and on-going training and copies of any training certificates issued to the provider.

(h) Maintain sample program information (e.g., daily schedule, parent contract, and home fire/emergency evacuation plan).

3 Mar 10

(i) Maintain documentation of initial visits, monthly visits, quarterly inspections and annual inspections.

(j) Maintain copy of command approval certificate, liability and car insurance forms.

(k) Maintain documentation for subsidy agreement and payments as cited in enclosure (12).

(l) Maintain USDA Child and Adult Care Food Program records.

(m) Maintain Family Day Care Rating Scale (FDCRS) score sheets and records.

(n) Maintain Quality Review Board (QRB) decisions regarding the provider.

(o) Monthly visits will be unannounced and documented in writing.

(p) Quarterly inspection report will include date, length of visit, name and ages of children present and a description of activities taking place.

(q) Quarterly inspection reports will address non-compliance areas, milestones for correction, documentation when corrective action is completed, and date of verification.

(r) Ensure parents of FCC children are included on the PAB.

(s) Provide information and assistance to families using FCC programs.

(t) Maintain all required records to complete semi-annual report.

(u) Conduct FCC patron survey on an annual basis.

(v) Maintain up-to-date list of children enrolled with parent's name, home and work phone numbers.

(w) Ensure any monies collected from FCC providers are handled in accordance with cash handling procedures as cited in reference (c).

(x) Require FCC providers to participate in the USDA Child and Adult Care Food Program.

(y) Ensure providers prepare and serve meals in accordance with USDA criteria. Refer to reference (a) for further guidance.

(z) Ensure that all requirements for certification are followed.

(aa) Ensure all certified FCC providers maintain a visitor's log to document any visitors during the day care day.

(2) The Fire Department

(a) Conduct initial inspection of all applicant homes using this order and reference (d), noting any discrepancies and issuing directives for corrective action.

(b) Provide a signed and dated statement recommending approval/disapproval of individual applicants following completion of required corrective action.

(c) Conduct inspections at least annually.

(d) Provide fire safety training for FCC providers and FCC staff.

(e) Support the FCC Director with consultations, resources and technical assistance relating to fire prevention.

(3) The Safety Office

(a) Provide oversight of safety training for facility safety inspections. Per reference (a), provide specialized training for the Director/Monitor.

(b) Provide oversight of safety training conducted for FCC providers by the CDP safety officer or FCC Director. Training to be given will be reviewed and approved by the local Safety Officer.

(c) Randomly select a representative sampling (10 percent) of certified FCC homes for on-site safety inspection annually.

(d) Support the FCC Director and/or the FCC Safety Officer with consultations and technical assistance relating to

3 Mar 10

safety issues, e.g., correction of identified safety problems or hazards.

(4) The Security Manager

(a) Coordinate with the Provost Marshal to conduct initial local background check and the DCII of all FCC provider applicants for evidence of any condition(s) that would reflect on the suitability of the applicant or a household member.

(b) Provide a signed/dated statement recommending approval/disapproval of applicant's suitability for certification based on the local background check.

(c) Support the FCC Director with consultations, resources and technical assistance relating to background checks.

(5) The Housing Manager

(a) Verify the assignment of quarters in terms of family status.

(b) Screen housing records of provider applicants for incidents that may reflect on the suitability of the applicant or a household member.

(c) Provide a signed/dated statement recommending approval/disapproval of applicants based upon screening results of their file.

(d) Inform occupants that childcare for non-family members will be allowed only with the approval of the installation commander, when in compliance with this order.

(e) Support the FCC Director with consultation, and resources relating to housing in military quarters.

(f) Provide verbal assistance in investigating unauthorized homes.

(6) Preventative Medicine Programs

(a) Conduct initial inspection of all applicants' homes, noting any discrepancies and issuing recommendations for corrective action.

3 Mar 10

(b) Provide a signed and dated statement that recommends approval/disapproval of applicants based on inspection.

(c) Conduct individual home inspections at least annually.

(d) Verify that provider's immunizations are current and issue the provider an annual health card.

(e) Provide the FCC Director direct support when investigating disease control and provide the length of time FCC homes must be closed as a result of inspections.

(f) Support the FCC Director with consultation, resources, and technical assistance relating to children and family issues.

(g) Conduct FCC health training for providers and FCC staff to include: Personal hygiene, food handling, preparation, and sanitation; administering medication; and identifying communicable diseases.

(7) The Family Advocacy Program Manager (FAPM)

(a) Serves as the point of contact for the FCC Director regarding allegations of child abuse/neglect and proper reporting procedures.

(b) Review available records of FCC providers and household members for previous history of domestic violence, child abuse and/or neglect, or any other conditions that would reflect upon the suitability of the applicant or a household member.

(c) Provide a signed and dated statement recommending approval/disapproval of applicants based on screening.

(d) Support the FCC Director with consultations, resources and technical assistance relating to child and family issues.

(8) The Marine and Family Programs Department (MFS). Support the FCC Director with consultations, resources and technical assistance relating to child and family issues.

3 Mar 10

(9) The Substance Abuse Counseling Center (SACC)

(a) Review records for any reports of drug or alcohol abuse by FCC provider or household members, or incidents that may reflect on the suitability of the applicant or a household member.

(b) Support the FCC Director with consultations, resources and technical assistance relating to child and family issues.

(c) Provide a signed and dated statement recommending approval/disapproval of applicants based on screening.

(10) Quality Review Board (QRB). A QRB will be established to assist the FCC program in making recommendations to the Marine and Family Programs Director on FCC certification, denial or revocation. The QRB should include a chairperson (chosen by the group), the FCC Director, representatives from

Marine and Family Programs, Preventative Medicine, Security, Housing Office and the Fire Department. If the QRB is recommending denial or revocation, the QRB will forward their recommendation to the Marine and Family Programs Director for determination. In the case of approval, the QRB will forward its recommendation to the Director MCCA for signature.

6. Command and Signal

a. Command. This Order is applicable to all personnel.

b. Signal. This Order is effective the date signed.



ROBERT D. CLINTON
Executive Officer

DISTRIBUTION: A



UNITED STATES MARINE CORPS
MARINE CORPS AIR STATION
POSTAL SERVICE CENTER 8003
CHERRY POINT, NORTH CAROLINA 28533-0003

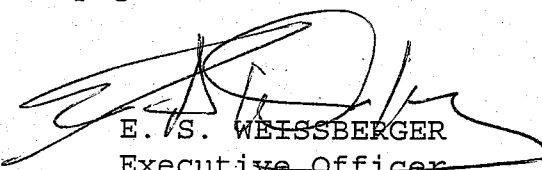
ASO 1710.30C Ch 1
MCCS
4 MAY 2012

AIR STATION ORDER 1710.30C Ch 1

From: Commanding Officer, Marine Corps Air Station, Cherry Point
To: Distribution List

Subj: FAMILY CHILD CARE PROGRAM (FCCP)

1. Situation. To direct pen changes to the basic Order.
2. Execution
 - a. Change Marine and Family Services to Marine and Family Programs throughout the entire Order.
 - b. Change CYP to CYTP throughout entire Order.
 - c. Change CYO Administrator to CYTPA throughout entire Order.
 - d. Under The Security Manager sub section (c) Support the FCC director change to read Support the FCC director.
3. Administration and Logistics. File this Change transmittal directly behind the signature page of the basic Order.


E. S. WEISSBERGER
Executive Officer

DISTRIBUTION: A

UNITED STATES MARINE CORPS
MARINE CORPS AIR STATION CHERRY POINT
CHERRY POINT, NC 28533-0009

5300
30 Sep 08

MEMORANDUM OF AGREEMENT
BETWEEN
COMMANDING OFFICER, MARINE CORPS AIR STATION CHERRY POINT
AND
DIRECTOR OF THE DIVISION OF CHILD DEVELOPMENT, NORTH CAROLINA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

Subj: OFF-BASE FAMILY CHILD CARE (OFCC) HOMES

Ref: (a) Marine Corps Order 1710.30E
(b) North Carolina Child Care Requirements for Family
Child Care Home, North Carolina General Statute
110, Division of Child Development Family Child
Home Handbook
(c) Air Station Order 1710.30B
(d) 5 U.S.C. 552a (b), The Privacy Act of 1974

1. Purpose. To establish a Memorandum of Agreement (MOA) for the joint oversight of OFCC homes located within Havelock, Craven County, North Carolina.

2. Parties. The parties to this agreement are Marine Corps Air Station Cherry Point Child Development Program, hereinafter referred to as CDP, and North Carolina Department of Health and Human Service, Division of Child Development, hereinafter referred to as DCDHHS.

3. Background. Marine Corps Air Station, Cherry Point provides child care in private homes on the installation through the Family Child Care (FCC) Program. To augment the child care available to eligible military and Department of Defense civilian population, the OFCC extends child care to privately owned homes of eligible providers, in Havelock, Craven County NC.

4. Scope. This MOA is entered into by the parties in order to establish responsibilities and procedures necessary to effectively recruit qualified providers and monitor operations of OFCC homes per references (a), (b) and (c).

ENCLOSURE (1)

3 Mar 10

Subj: OFF-BASE FAMILY CHILD CARE (OFCC) HOMES

4. Scope. This MOA is entered into by the parties in order to establish responsibilities and procedures necessary to effectively recruit qualified providers and monitor operations of OFCC homes per references (a), (b) and (c).

5. Responsibilities

a. NCDHHS hereby agrees to:

(1) Issue a child care license to all eligible child care providers in the civilian community per reference (b).

(2) Provide oversight of all applicable child care requirements.

(3) Notify CDP of DCDHHS's decision to disqualify potential and current providers or household members based on the results of their criminal records check.

(4) Provide CDP of a copy Visit Summary and Complaint report of licensing violations observed and documented against an OFCC provider registered with the CDP office.

(5) Provide an electronic copy of the Notice of Administrative Action taken by the Division against an OFCC provider registered with the CDP office.

(6) Notify CDP of an investigation of child abuse and neglect being conducted jointly with the local Department of Social Services (DSS).

(7) Provide CDP with a case closure document, including letters and Final Notice of Administrative Action, at the conclusion of the joint investigation.

b. CDP hereby agrees to:

(1) Provide training to eligible child care providers on the OFCC standards. Training provided by state/local agencies may be considered in meeting CDP requirements. Credit for training from non-CDP sources will be at CDP discretion. Eligible child care providers who are denied credit for non-CDP training may attend CDP training. For child care providers who are ineligible to receive CDP training, CDP's decision to grant

Subj: OFF-BASE FAMILY CHILD CARE (OFCC) HOMES

or deny credit for non-CDP training is administratively final. Eligible child care providers are defined in 10 U.S.C. 1798.

(2) Inspect homes unannounced on a monthly basis during the first six (6) months of participation in the program to ensure an appropriate developmental program and adherence to nutrition, safety, fire, health and sanitation regulations. Such inspection shall only be conducted by a non-uniformed civilian Federal employee who is not under the direct supervision of an active duty military Federal employee or activated reservist. Unannounced inspection is contingent upon the property owner signing a waiver allowing such inspections to take place. After six months, if programs are in compliance with all requirements and providing an acceptable level of care, visits may be made on a quarterly unscheduled basis.

(3) Report suspected child abuse or neglect to DSS according to North Carolina General Statute 7B-301. The report may be made orally, by telephone, or in writing. In addition, a report suspecting child abuse or neglect must be reported to DCDHHS.

c. Both Parties hereby agree to:

(1) Maintain files on OFCC providers and share information ensuring adherence to confidentiality requirements. Dissemination of information provided by CDP to NCDHHS is subject to the routine use provisions of reference (d). Information shared will include the following:

(a) list of providers who successfully complete OFCC training;

(b) data on training received by provider;

(c) a copy of any substantiated materials related to investigations of licensing and abuse/neglect complaints;

(d) a copy of any administrative actions taken against the OFCC home;

(e) a copy of any settlement agreement negotiations.

3 Mar 10

Subj: OFF-BASE FAMILY CHILD CARE (OFCC) HOMES

6. Effective Date: This MOA will become effective upon its execution and shall remain in force until terminated by mutual agreement of the parties or by thirty (30) days prior written notification from one party to the other party. Either party may initiate reviews and/or modifications to this agreement whenever conditions warrant. Any changes, modifications or amendments to this agreement shall be in writing and subject to the approval of both parties.

CYNTHIA L. BENNETT DATE
Division of Child Development
North Carolina Department of
Health and Human Services
Raleigh, North Carolina

D. A. DENN DATE
Commanding Officer
Marine Corps Air Station
Cherry Point, North Carolina

3 Mar 10

CHILD DEVELOPMENT PROGRAM
FAMILY CHILD CARE
MARINE CORPS AIR STATION
CHERRY POINT, NORTH CAROLINA

OFF BASE FAMILY CHILD CARE WAIVER OF NOTICE OF INSPECTION

For purposes of participation in the Off Base Family Child Care Program, I, _____, hereby agree to allow the Family Child Care Director, Marine Corps Air Station, Cherry Point, and/or, his/her representative, to enter my home (and surrounding areas) for the purpose of monthly, unannounced inspections, to ensure an appropriate developmental program, and adherence to nutrition, safety, fire health and sanitation regulations.

After six months, if programs are in compliance with all requirements and providing an acceptable level of care, visits may be made on a quarterly, unscheduled basis.

I agree to abide by the guidelines set forth in MCO 1710.30E, with regard to the administration of my program.

Provider's Signature

Date

PRIVACY ACT ADVISEMENT

AUTHORITY: 10 U.S.C. 5013, Secretary of the Navy; 10 U.S.C. 5041, Headquarters, Marine Corps; OPNAVINST 1700.9, Child Youth Programs; and E.O. 9397(SSN)

PRINCIPAL PURPOSE: To develop child care programs that meet the needs of children and families, provide child and family programs eligibility and background information; and verify health status of children and verify immunizations.

ROUTINE USES: In addition to the disclosures generally permitted under 5 U.S.C. 552a (b) of the Privacy Act, these records or information contained therein may specifically be disclosed outside the DoD as a routine use pursuant to 5 U.S.C. 552a(b) (3) as follows:

Information in this system comes from individuals either applying as child care providers or as participants of the child development homes; background checks from State and local authorities or Naval Criminal Investigative Service; housing officers; information from the Family Advocacy program; base security officers and base fire, safety and health officers; and local family child care monitors and parents of children enrolled; and health care providers, employers, and others providing information identified in the categories of records in the system.

To Federal officials involved in Child Care Services, including for child abuse reporting and investigations.

The DoD 'Blanket Routine Uses' that appear at the beginning of the Navy's compilation of systems of records notices apply to this system.

Further dissemination of this information is not authorized. Subsequent requests for release of information must be forwarded to the Privacy Act Office, Marine Corps Air Station, Cherry Point.

DISCLOSURE: Voluntary; however, failure to furnish the requested information will result in an incomplete record and possible inability to participate as an off-base family child care provider.

Providers signature

3 Mar 10

STANDARD OPERATING PROCEDURES FOR
OFF BASE FAMILY CHILD CARE (OFCC)

Ref: (a) MCO 1710.30E
(b) ASO 1710.30C
(c) MOA btwn State of NC and CG, MCAS Cherry Pt

1. Purpose. OFCC is a means to increase available child care spaces to meet the demand for affordable, quality care. As specified in references (a) through (c), this program will allow state certified FCC providers residing within the city limits of Havelock to participate in training, the USDA food program, and the Direct Cash Payment (DCP) Program. It will also permit them to utilize the MCAS Cherry Point FCC lending locker.

2. Information

a. Overview. Reference (a) promulgated detailed guidance for the implementation of the OFCC Program. This program allows "registration" of state certified FCC providers residing off base in order to increase the availability of quality, affordable child care for the installation. Responsibility for monitoring the program rests with the Director, Marine Corps Community Services (MCCS) and the Director, Marine and Family Programs, for administrative and operational oversight through the Child Development Program Administrator (CDPA), and for daily management with the FCC Director (FCCD).

b. Scope/Definition. An OFCC home is a privately-owned/rented home within close proximity of MCAS Cherry Point providing child care for eligible patrons of USMC Children and Youth Programs (CYTP). OFCC providers are dependent spouses of active duty/retired military members. Maximum capacity for OFCC homes is six children, including the provider's own children under the age of eight, with no more than two children under two years of age. Child Care is authorized for children age six weeks through twelve years of age. Child care services are permitted only on the first floor of the dwelling. Special purpose homes will be established in accordance with references (a) and (b). OFCC providers will be state certified with monthly unannounced inspections, training, and related services being provided by the MCAS Cherry Point FCC Director and staff.

c. Policy

(1) Provider quarters are subject to unannounced inspections by the FCC Director, and annual inspections by the Multidisciplinary Inspection Team, CYTPA, and HQMC Inspection

ENCLOSURE (2)

3 Mar 10

Team. Monthly inspections will be conducted for the first six months and quarterly thereafter as long as there are no problems. FCC staff will visit the home monthly for purposes of mentoring/training.

(2) The following requirements will be met before an OFCC provider may be registered on base and for continued registration. The provider must:

(a) Meet all requirements for state certification and be duly certified.

(b) Comply with state/local standards or OFCC policy, whichever is more stringent.

(c) Participate in the USDA food program.

(d) Purchase and maintain \$500,000 in liability insurance.

(e) Comply with provider requirements for training, state/local provider certification and appropriate developmental programming.

(f) Maintain up-to-date certification in infant/child CPR and first aid.

(g) Agree to maintain ratios mandated by reference (b) and (c).

(h) Maintain records to comply with requirements set forth in references (a) and (b).

(3) Quality Review Board (QRB). The FCC Quality Review Board (QRB) will have final approval authority of all applicants. Registration, suspension, and revocation of providers will be at the discretion of the QRB as cited in references (a) and (b).

3. Action

a. FCCD (or representative)

(1) Ensure the OFCC provider has an unannounced inspection monthly for the first six months and quarterly

3 Mar 10

thereafter. Ensure mentoring visits are conducted on non-inspection months.

(2) Plan and implement initial/annual training to ensure OFCC providers have an opportunity to meet initial/annual requirements.

(3) Make available to the OFCC provider toys and equipment from the FCC Lending Locker.

(4) Allow OFCC providers to participate in local MCAS USDA sponsorship, if desired. (Participation in the USDA food program is mandatory.)

(5) Maintain on-going liaison with state/local regulatory agencies.

(6) Maintain records to comply with reporting requirements.

b. Security Manager

(1) Coordinate with PMO to conduct an initial local background check of all OFCC registration applicants for evidence of any condition(s) which would reflect on the suitability of the applicant or a household member.

(2) Provide a signed/dated statement documenting the results of the local background check.

(3) Support the FCCD with consultations, resources, and technical assistance relating to background checks.

c. Family Housing Office. Support the FCC Director with consultation, resources, and technical assistance relating to former residence in government quarters.

d. Family Advocacy Program Manager

(1) Serve as the point of contact for the FCC Director regarding allegations of child abuse/neglect or any other conditions which would reflect upon the suitability of the applicant or a household member.

(2) Review available records of OFCC applicants and household members for previous history of domestic violence,

3 Mar 10

child abuse and/or neglect, or any other conditions which would reflect upon the suitability of the applicant or a household member.

(3) Provide a signed and dated statement recommending approval/disapproval of applicants based on screening.

(4) Support the OFCC program with consultation, resources, and technical assistance relating to child and family issues.

e. Substance Abuse Counseling Center (SACC)

(1) Review records for any reports of drug or alcohol abuse by the applicant or household members, or incidents which may reflect on the suitability of the applicant or a household member.

(2) Support the FCC Director with consultations, resources, and technical assistance relating to substance abuse.

(3) Provide a signed and dated statement that recommends approval/disapproval of applicants based on screening.

f. Fire Department, Joint Safety Office, and Preventive Medicine Services. The Fire Department, Joint Safety Office, and Preventive Medicine Services, will provide fire, safety, and sanitation training for OFCC providers.

3 Mar 10

CHILD DEVELOPMENT PROGRAM
FAMILY CHILD CARE
STANDARD OPERATING PROCEDURE FOR
FCC SPECIAL PURPOSE HOMES

Ref: (a) MCO 1710.30E

1. A variety of FCC homes may be established to help meet the unique child care needs of eligible patrons per reference (a). Examples are:

- a. Mixed Age Group Homes
- b. Extended Hours Homes
- c. Mildly Ill Homes
- d. Special Needs Homes
- e. Infant/Pre-toddler Homes
- f. Before and After School Homes
- g. Foster Care Homes
- h. Bilingual/Bicultural Homes
- i. Religious Training Homes

Admission of any special needs child will follow the SOP for care of special needs children

2. Regular certification procedures will be followed for all except mildly ill homes and special needs homes. For mildly ill homes, applicants must follow the regular certification process and be approved by the QRB. In addition, liaison and necessary training will be coordinated through Preventive Medicine and our POC at the Naval Health Clinic prior to providing care. Care for acutely ill children (needing total bed rest) or those with highly contagious conditions is not authorized. With special needs homes, providers must meet regular certification requirements and receive additional training in care for special needs children. This training will be specific to the children enrolled in care and will be coordinated by the FCC Director prior to caring for children. The FCC Director, parents, provider, child's physician and the preventive medicine representative will participate as a team to plan for the needs of the child prior to placement.

ENCLOSURE (3)

3 Mar 10

3. The Special Needs Evaluation Team (SNERT) local command will decide on a case-by-case basis, the number of children each special needs provider may care for. This decision will be based on the recommendations of the FCC Director, and the SNERT Team members.

3 Mar 10

FAMILY CHILD CARE (FCC) APPLICATION

Personal Information:

I. 1. Applicant's Name: (Last, First, MI)		2. Maiden Name:	
3. Other Names Used:		4. SSN:	
5. Date of Birth:		6. Place of Birth:	
7. Home Address:		8. Telephone:	
II. 1. Sponsor's Name: (Last, First, MI)		2. Rank:	
3. Unit:		4. SSN:	
Previous Unit:			
5. Date of Birth:		6. Place of Birth:	
III. References (Non-family members), two personal, one previous supervisor (if applicable):			
Name	Address	Telephone	
IV. Members of Immediate Household			
Name	SSN	Date/Place of Birth	Relationship

Personal Information:

Data required by the Privacy Act of 1974. Authority: Title 10, United States Code, Section 3012. Principal purpose: Information is used to conduct background investigations necessary to certify FCC providers. Routine uses: No information is disclosed outside DoD. Disclosure: Disclosure of required information is voluntary; however, if information is not provided, certification may be denied.

OTHER PERSONAL INFORMATION

NOTE: A conviction does not necessarily mean you cannot be a FCC provider. The circumstances of the occurrences and how long ago it occurred are important. Give all the facts so that a decision can be made by the Quality Review Board. When answering the following questions, you may omit traffic fines, any offenses committed before your 18th birthday which were finally adjudicated in a juvenile court or under a youth offender law, any conviction set aside under the Federal Youth Correction Act or similar authority. If you answer yes to any of the following questions, give details for each offense (1) date (2) charge (3) place (4) court, and (5) action taken.

1. Have you ever been convicted, forfeited collateral, or are you now under any charges for any felony or any firearms or explosives offense against the law? (A felony is defined as any offense punishable by imprisonment for a term exceeding one year, but does not include any offense classified under the laws of a state as a misdemeanor which is punishable by a term of imprisonment of two years or less).
Yes _____ No _____
2. During the past seven years, have you been convicted, imprisoned, on probation or parole or forfeited collateral, or are you now under charges for ANY offense against the law not included in the previous question (i.e., misdemeanor)? _____
Yes _____ No _____
3. While in the military service, were you ever convicted by a General Court-martial?
Yes _____ No _____
4. Have you ever been arrested for or charged with a crime involving a child?
Yes _____ No _____

This Application Must Be Signed

Read the following paragraph carefully before signing this application. A false answer to any question in this application or supplemental information may be grounds for not certifying you or revoking your certification later. All the information you give will be considered when the Quality Review Board reviews your application.

Authority For Release of Information

I have completed this application with the knowledge and understanding that any or all items contained herein and in supplement may be subject to investigation prescribed by law or regulation and I consent to the release of information concerning my capacity and fitness as a Family Child Care Provider by former employers, educational institutions, law enforcement agencies and other individuals and agencies to duly accredited investigators and other authorized employees of the Federal Government for that purpose.

Certification

I certify that all of the statements made by me are true, complete, and correct to the best of my knowledge and belief, and made in good faith.

Applicant Signature/Date _____

Sponsor Signature/Date _____

Acknowledgements:

1. We will request permission in writing to make any modifications of the facility (house or surrounding yard). We will return the facility to its original state before vacating the premises, unless the next occupant accepts responsibility for modifications.
2. We will be responsible for any negligence in the operation of our Family Child Care facility.
3. We will be financially responsible for all damages to family quarters beyond normal "wear and tear."
4. Maximum capacity for FCCs is six children, including the provider's own children under the age of eight. Child care is authorized for six-week-old infants in FCCs. FCCs shall be limited to no more than two infants under two years of age (with only one child under two months, twins being the only exception).
5. We agree that our quarters are subject to an initial inspection and thereafter monthly unannounced inspections by the Family Child Care Director and other inspections as appropriate by Station agencies. Information will be released by the following offices: PMO, Station Inspector, Family Advocacy Representative, Substance Abuse Counseling Officer, and Family Housing Officer.
6. We acknowledge that the privilege to use our assigned military quarters for a Family Child Care facility may be withheld or withdrawn by the Commanding General, Marine Corps Air Station, Cherry Point for failure to comply with ASO 1710.30C, and MCO P1710.30E.

Signature of Sponsor

Date

Signature of Provider

Date

Data required by the Privacy Act of 1974. Authority: Title 10, United States Code, Section 3012. Principal purpose: Information is used to conduct background investigations necessary to certify FCC providers. Routine uses: No information is disclosed outside DoD. Disclosure: Disclosure of required information is voluntary; however, if information is not provided, certification may be denied.

INFORMATION RELEASE AUTHORIZATION

I, APPLICANT: _____, and SPOUSE: _____
(PRINT NAME) (PRINT NAME)

hereby authorize SACC, its director or designee, to release information contained in my client records to the individuals or organizations and only under the conditions listed below:

1. Name of person(s) or organization(s) to whom disclosure is to be made:

SHEILA DABROWSKI, FAMILY CHILD CARE, DIRECTOR

2. Specific type of information to be disclosed:

SUBSTANTIATED CASES OF DRUG AND/OR ALCOHOL ABUSE.

3. The purpose and need for such disclosure:

CERTIFICATION AS A FAMILY CHILD CARE PROVIDER.

4. This consent is subject to revocation at any time.

5. Without expressed revocation, this consent expires for the following specified reasons:

a. Date: _____

b. Event: _____

c. Condition: _____

Spouse: _____

Applicant: _____

Witnessed by: _____

Date Signed: _____

Date Witnessed: _____

CHILD DEVELOPMENT PROGRAM
FAMILY CHILD CARE
STANDARD OPERATING PROCEDURE FOR
CHILDREN WITH ALLERGIES

Each child (including drop-in) identified as having a food allergy and/or allergy common to play areas (insect bites, grass etc) will wear a bracelet as a means of immediate alert to anyone that the child has an identified allergy. The Family Child Care Program provides these bracelets to all providers. The bracelet will indicate any known food allergies and any other related allergies. Upon arrival daily, the provider will affix the appropriate bracelet to the child's wrist. A green band will indicate common play area allergies, and the orange band will indicate food allergies. It is standard operating procedure for all providers to check the child's medical enrollment form, and to make appropriate food substitutes before any foods are served to children.

Allergic reactions are a **SERIOUS** medical condition. In all situations, the first response is to contact the appropriate medical authority by calling 911, stating the location of the child, your address, the child's name, age, and the reason for the call. After medical authorities have been contacted, the child's parent or guardian and the FCC Director will be contacted immediately to notify them of the incident and action taken.

I have read, understand, and agree to abide by the above SOP for allergies.

Provider's Signature

Date

CHILD DEVELOPMENT PROGRAM
FAMILY CHILD CARE
STANDARD OPERATING PROCEDURE FOR
ADMINISTRATION OF MEDICATION

1. Designated personnel are authorized to administer medication within FCC Homes according to physician's instructions. Individuals administering medication will have received prior specialized training and will update that training annually. For guidance on the administration of an EPIPEN, see MCO 1710.30E.

2. Medication will be:

- a. In the original container with a child-proof cap.
- b. Dated with the physician's name and instructions for use.
- c. Labeled with the child's name, name of medication, and dosage strength.
- d. Stored according to instructions.
- e. All medication will be kept in one centrally-located and monitored locked cabinet; out of the reach of children.
- f. Medication requiring refrigeration will be isolated within the refrigerator in a separate, secured container.
- g. Medication will be returned to parents when no longer needed, or upon termination of child's attendance in the FCC.
- h. All medication administered will be recorded using the attached form.
- i. Each medication to be administered will require a separate form which may be used for a one-month period. The form will be maintained and filed in each child's folder monthly or upon completion of the medication period.
- j. Forms will be re-issued as needed for long-term medication and should follow the calendar month for record-keeping purposes.
- k. The time of each dosage and the initials of the person administering medication will be entered at the time the dosage is administered.

ENCLOSURE (6)

[illegible]

CHILD DEVELOPMENT CDC(CDC)/FAMILY CHILD CARE (FCC)
RELEASE OF LIABILITY TO ADMINISTER MEDICATION

(To be completed by Health Care Provider)

Child's Name: _____
Authorized Medication: _____
Reason For Medication: _____
Dosage: _____ Time Administered: _____
Dates Authorized: _____ to _____

I _____, hereby certify that no reasonable
(Health Care Provider's Name)
alternative is available to satisfy the medical requirement for
the aforementioned child. Further, I certify that it is not
reasonable or medically sound to adjust the medication schedule
so that the prescribed medication need not be administered by
Children and Youth Program staff or FCC providers.

(Health Care Provider's Signature, Date)

~~~~~  
(To be completed by Parent or Guardian)

In consideration of the authorized personnel of Marine Corps Air  
Station, Cherry Point, North Carolina, Children and Youth  
Program dispensing medication to my child, I, the undersigned,  
do hereby release the United States, Department of Defense,  
Department of the Navy, United States Marine Corps, and their  
subdivisions, military and civilian personnel, agents and  
assigns from any and all liability for any sickness, physical or  
mental injuries, death or any and all damages that result to  
\_\_\_\_\_ which occurs from said personnel

(Name of Child, Age)  
administering \_\_\_\_\_  
(Name of Medication)

I understand, and have been instructed by my child's Health Care  
Provider, about the potential side effects and negative  
reactions that could result from the use of the medication named  
herein. I have provided the personnel at the CDC/FCC the  
following restrictions and instructions in administering the  
above referenced medication to my child.

Restrictions:

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I understand that by signing this document, I am:

WAIVING MY RIGHT, AND THE RIGHTS THAT MIGHT BE ASSERTED BY MY CHILD, OUR FAMILY, HEIRS, EXECUTORS, SUCCESSORS, AGENTS, ASSIGNS, AND ALL OTHER RESPONSIBLE PARTIES ACTING ON OUR BEHALF, TO SEEK RECOVERY FOR INJURIES UNDER THE FEDERAL TORT CLAIMS ACT, OR OTHERWISE THAT MY CHILD MAY INCUR AS A RESULT OF RECEIVING THIS MEDICATION FROM CHILD DEVELOPMENT PROGRAM PERSONNEL, WHO MAY OR MAY NOT BE MEDICALLY LICENSED OR CREDENTIALLED, AND THAT I ASSUME ALL RISKS OF INJURY ASSOCIATED THEREWITH.

\_\_\_\_\_  
(Printed Name of Parent/Guardian)

\_\_\_\_\_  
(Parent/Guardian Signature, Date)

\_\_\_\_\_  
(Printed Name of Witness)

\_\_\_\_\_  
(Witness Signature, Date)

3 Mar 10

CHILD ABUSE/NEGLECT REPORTING POLICY  
FAMILY CHILD CARE HOMES

When Child Abuse/Neglect is suspected, FCC providers are required to report the suspected/alleged abuse/neglect immediately to the FCC Director. The FCC Director will report the incident to the Family Advocacy Program Manager (FAPM). The following procedure will be followed:

1. Immediately notify and report the circumstances to the Family Child Care Director at 466-4847.
2. The provider will complete the Internal Child Abuse/Neglect Report.
3. After receiving the initial telephone call, the FCC Director calls the CYTPA to advise a report has been received and must immediately visit the FCC home in question to further discuss the allegation and obtain the written report.
4. The FCC Director delivers a copy of the report to the CYTPA for signature.
5. The FCC Director hand carries the signed report to the FAPM for further action.
6. Should there be an allegation made against a Family Child Care provider, the FCC Director must immediately visit the home and stand by until the provider calls all parents to remove their children. The FCC home will be closed until such time as all allegations can be investigated and a determination is made as to whether the abuse occurred or did not occur.

**NOTE:** Should the suspected abuse/neglect be reported after working hours and the FCC Director is not available, the FCC provider should contact PMO who will in turn notify the FAP Representative on call.

CHILD DEVELOPMENT PROGRAM  
FAMILY CHILD CARE  
INTERNAL CHILD/ABUSE NEGLECT REPORT

Name of Child: \_\_\_\_\_  
Last First Middle

Sex: \_\_\_\_\_ Home Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

Sponsor's Name: \_\_\_\_\_  
Last First Middle

SSN: \_\_\_\_\_ Work Address: \_\_\_\_\_

Rank/Rate: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Describe in detail why you suspect child abuse/neglect:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Where is the child at this time? \_\_\_\_\_

Does the child need medical attention? \_\_\_\_\_

\_\_\_\_\_

Reported by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

FCC Director: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

CYTPA: \_\_\_\_\_  
Date: \_\_\_\_\_  
(Signature)

FAP Manager: \_\_\_\_\_ Date: \_\_\_\_\_  
(Signature)

Copy to:  
Marine and Family Programs Director

3 Mar 10

CHILD GUIDANCE, DISCIPLINE AND TOUCH POLICIES

We are interested in promoting self-control and appropriate social behavior in children. We use positive methods to encourage development of these behaviors. Positive guidance helps children learn to make their own decisions.

Behavior limits for children are set by child care providers based on positive guidance and redirecting children toward desired activities and focuses on teaching rather than punishing. Time out should only be used if the child is in the situation of hurting themselves, hurting others or destroying property. Aggressive behaviors are most often present when children lack the skills to cope with frustrating situations and are to be handled by validating the child's feelings and/or redirecting the child toward another activity.

Slapping and hitting, verbal abuse, including yelling or raised voices, threats and derogatory remarks, restricting a child's movement or placing a child in a confined space are forbidden and are grounds for immediate decertification. Withholding or forcing meals, snacks, or naps is also forbidden.

Our guidance strategies include:

- \* Use of clear directions
- \* Communication of age appropriate, positive expectations/ consequences
- \* Modeling appropriate verbal responses to conflicts
- \* Positive reinforcement
- \* Listening to the child
- \* Avoiding labeling of children
- \* Providing challenging activities or redirecting to alternate activities
- \* Ignoring behavior when appropriate to do so
- \* Recognizing and dealing with strong emotions
- \* Helping children "save face" and preserve dignity

TOUCH POLICY

Physical contact is important for a young child's development. Children's self esteem grows when they are cared for in a loving manner. Hugs, holding hands, a pat on the back, a lap to sit on, a reassuring rub at nap time are all nurturing to young children. These expressions of affection are natural for adults who work with young children.

ENCLOSURE (8)

Some obvious examples of inappropriate touch are:

- \* Shoving
- \* Squeezing
- \* Head and/or arm twisting
- \* Fondling
- \* Pinching
- \* Corporal punishment
- \* Biting

Inappropriate touching is that which is bad and harmful to children, and is grounds for decertification.

DISCIPLINE OF A CHILD BY A PARENT WHILE ON FCC PREMISES

At no time will a parent or guardian discipline a child by striking, shaking, or any form of physical or verbal punishment while on FCC premises. Violation of such prohibition may result in disenrollment of the child(ren) from the FCC program.

---

I have read, understand and agree to abide by the Family Child Care Abuse, Guidance, Discipline and Touch Policies to include the prohibition against physical punishment of children by parents or guardians while on the premises of the FCC provider and agree to abide by the policies and regulations contained therein. I understand that violation of the prohibition against physical punishment by parent or guardians may result in disenrollment of my child(ren) from the FCC program.

---

(Sponsor's Signature)

---

(Date)

---

(Spouse's Signature)

---

(Date)

CHILD DEVELOPMENT PROGRAM  
FAMILY CHILD CARE  
STANDARD OPERATING PROCEDURE IN EVENT OF  
BASE EVACUATION

1. Upon notification of the CDC by the EOC, the CDC managers or the Children and Youth Administrator will notify the FCC Director.
2. The FCC Director will contact the home providers by work or cell phone. If the FCC Director is unable to make contact, the providers have been instructed to adhere to the mandatory evacuation for each housing area and they will follow the evacuation route to the safe haven as prescribed by EOC.
3. Providers will obtain and maintain their daily roster, emergency kit, diaper bags, and needed belongings throughout the process. Providers will post a sign on the door stating they have evacuated to the safe haven. FCC providers transporting children will have a sign clearly visible in the windshield that states, "FCC Child Transport." The FCC Provider will transport all children to the Safe Haven. All FCC providers will assemble at the Safe Haven with the rest of the Children and Youth Program personnel. The area will be clearly identifiable and the parents will be required to sign out their children on the attendance sheet.
4. Providers will be responsible for reporting status of children to the FCC Director. An account of FCC providers and children is required at all times.
5. The FCC Director will remain with the providers until the last child is picked up.
6. If there are still children under the care of the FCC Provider when the "all clear" has been given by the EOC, the remaining children and provider will return to the FCC Provider's home.
7. The release of providers upon reaching the safe haven will be at the discretion of the FCC Director. All personnel should be accounted for before the release of providers begins.



3 Mar 10

CHILD DEVELOPMENT PROGRAM  
FAMILY CHILD CARE  
STANDARD OPERATING PROCEDURE FOR  
SAFE TRANSPORT OF CHILDREN BY VEHICLE/WALKING  
MARINE CORPS AIR STATION  
CHERRY POINT, NORTH CAROLINA

1. The following safe practices should be followed when transporting children in vehicles:

a. A child shall be transported only if the child is fastened in an approved safety seat, seatbelt, or harness appropriate to the child's weight, and the restraint is used in accordance with the manufacturer's instructions; each child must have an individual seatbelt.

b. A child under the age of five and under 40 lbs shall be transported only if the child is securely fastened in a child passenger restraint system that meets federal motor vehicle safety standards contained in Code of Federal Regulations, title 49, section 571.213, and this compliance is so indicated on the safety restraint device.

c. If small buses or vans have safety belts installed, the belts shall be used by the children.

d. Children shall be supervised during boarding and exiting all vehicles by an adult.

e. Children, as both passengers and pedestrians, shall be instructed in safe transportation conduct with terms and concepts appropriate for their ages and stages of development.

f. Never use a carrier seat as a car seat.

2. The following guidelines should be followed when taking children on walking field trips or in emergencies:

a. All children shall be instructed on the safe way to walk in public places. The provider should practice this with the children prior to any walking field trip. NO walking field trip should take place in a high traffic area.

b. When utilizing a stroller, providers should perform a safety check prior to leaving home to ensure the stroller is in good operating condition. Any other means of "foot" transportation, such as wagons, bicycles, tricycles, etc., should be safety checked prior to use.

ENCLOSURE (10)

3 Mar 10

c. Providers will carry emergency information on each child during the field trip.

d. Do not use back carriers until a baby is 4 or 5 months old, by which time the baby's neck is able to withstand jolts and not sustain an injury.

3 Mar 10

## DEPARTMENT OF DEFENSE FAMILY CHILD CARE STANDARDS

I. Operational Standards

It is DoD policy that the Family Child Care (FCC) system is operated and maintained to provide quality child care for all children enrolled. The FCC Administrator is responsible for ensuring FCC providers comply with FCC Standards.

OS 1. All providers are at least 18 years of age; have the ability to speak, read and write English: are physically and mentally capable of providing care for children: re free of communicable disease; are willing to undergo prescribed training and meet initial, quarterly and annual Service-specific inspection requirements.

OS 2. All FCC provider applicants and household members over 12 years of age and other persons living in the potential FCC homes are screened in accordance with DoD Instruction 1402.5.

OS 3. Substitute providers or persons who serve as backup providers have been screened and complete a basic orientation that includes child abuse identification, reporting and prevention, safety and health procedures, CPR and first aid training.

OS 4. All FCC applicants and/or providers complete DoD and Service-required training and inspections for DoD certification.

OS 5. There is a signed contract between each family and provider. Parents are informed of changes in the FCC provider's household composition. Children are cared for by the provider or an approved substitute.

OS 6. Parents and the Family Child Care Administrator are informed when a substitute provider will be caring for their child(ren). Except for long term care, members of the provider's household are never used as substitute providers.

OS 7. All providers have purchased current liability insurance at a reasonable cost.

OS 8. The maximum group size in a FCC home is 6 children including the provider's own children under the age of 8. When

3 Mar 10

all children are under the age of 2, the maximum group size at any one time is 3. In mixed age groups, the number of children under 2 years of age is limited to 2 children. When all children are school-age, the maximum group size is 8.

OS 9. The provider has a prominent place to display information for parents.

OS 10. Parents sign children in-and-out of the FCC home on a daily basis. Children are only released to persons parents have authorized in writing. Children may sign themselves out of the FCC home consistent with the installation home alone policy.

OS 11. Information on each child in the FCC home is on file (immunization, health, assessment, emergency contact, copy of family care plan, medical dispensation, transportation agreement, and Service-specific requirements).

The maximum number of children in a FCC home should be reduced if safety, fire, health and the FCC Administrator determine the housing unit is too small.

## II. Safety Standards

It is DoD policy that FCC homes are operated and maintained to provide for the safety of providers and children. The FCC administrator is responsible for ensuring providers meet safety requirements.

SS 1. Children are protected from hazardous substances and equipment. Equipment and play areas used by children are safe and properly maintained.

SS 2. There is a working telephone within the FCC housing unit. Emergency numbers and instructions are posted by the telephone.

SS 3. The FCC provider notifies parents, the FCC Administrator, and health consultants of medical emergencies, communicable diseases or illness of either the children or the provider.

SS 4. The provider conducts a daily safety walk through the FCC home and yard. Problems are identified and corrected immediately or put off limits to children until they can be corrected.

SS 5. The following items are not allowed in FCC Homes: infant cushions, infant walkers and swings, bean bag chairs, restraint

3 Mar 10

equipment for children under three years of age, toy boxes, trampolines or wading pools.

SS 6. If there are firearm(s) in the home, the ammunition must be removed from the firearm. Both firearm(s) and ammunition are stored separately in a locked cabinet that is inaccessible to children.

SS 7. Areas used for care of children are free from asbestos and lead base paint.

SS 8. Hand washing sinks used by children have hot and cold water. Hot water outlets used by children are 110 degrees Fahrenheit or less.

SS 9. Cleaning materials and hazardous materials are locked up and not stored with food items.

SS 10. Electrical outlets in children's areas have protective outlet covers.

SS 11. Providers supervise children in and out doors.

SS 12. Surfaces under family and installation playground equipment are soft and free from stones, debris and obstructions.

### III. Fire Standards

It is DoD policy that FCC homes comply with the requirements in NFPA 101 Life Safety Codes, reference (pp), for the appropriate occupancy load except as modified by this Instruction. The FCC Administrator is responsible for ensuring FCC providers comply with fire standards.

FS 1. Providers are trained in fire prevention, reporting and evacuation procedures.

FS 2. Fire drills are conducted monthly at different times of the day or evening when children are in care. Provider documents monthly fire drills.

FS 3. There is a battery-operated or hardwired smoke detector on each living level of the FCC home.

FS 4. There is an operable ABC multi-purpose dry chemical extinguisher in the FCC home.

FS 5. Smoking is not permitted in the FCC home while children are in care.

#### IV. Health Standards

It is DoD policy that FCC homes are operated and maintained to promote the health of providers and comply with health standards.

HS 1. Using Service-specific criteria children are screened daily for illness and denied admission based on specific criteria. Children are re-admitted after illness only when their presence does not endanger the health of the other children.

HS 2. All Children are immunized in accordance with Center for Disease Control recommendations.

HS 3. Providers are trained in the administration of medications. Only physician prescribed medications are administered. Medications are given with approval of the child's parents and are documented on the Service form.

HS 4. Providers can apply basic care items (sunscreen without DEET, diaper ointment) without a prescription but must have parental permission.

HS 5. Each child under 5 years of age has a place with a mat, cot or crib to rest on with a sheet or blanket.

HS 6. Menus are posted for meals and snacks. All food served meets United States Department of Agriculture Child and Adult Care Food Program requirements for meal patterns and quantity served.

HS 7. All children present are served meals and or snacks.

HS 8. Food is prepared, served and stored in a sanitary manner.

HS 9. As possible, children participate in the meal service.

HS 10. Meals and snacks for toddlers, pre-school and school-age children are conducted using family style dining.

HS 11. Bottles are never heated in a microwave oven. Infants are held for bottle feeding. Bottles are never propped. Infants are never put to sleep with a bottle.

HS 12. Young infants are placed in sleeping positions recommended by their physician. They are not placed face down on soft cushions, pillows or comforters.

HS 13. When possible, sinks used for diapering should not be co-located with food service areas or the sink used for dishwashing.

HS 14. Homes are maintained in a sanitary manner.

HS 15. Personal hygiene standards, to include the Center for Disease Control procedures for diapering, hand washing, and toileting are followed.

HS 16. All toys, cots, linen, diapering areas and food service surfaces are sanitized following Center for Disease Control recommended frequency and procedures.

HS 17. All windows used for ventilation are properly screened.

HS 18. A minimum temperature of 68 degrees (winter) and maximum of 78 degrees (summer) are maintained.

HS 19. The uses of prescription drugs that may impair the provider's judgment or alertness are not permitted while children are in care. Providers may not consume alcohol while children are in care.

HS 20. First aid supplies are available for emergencies.

#### V. Child Abuse Standards

It is DoD policy that FCC homes are operated and maintained to prevent child abuse and to promote early identification and reporting of alleged child abuse. The FCC Administrator is responsible for ensuring providers comply with child abuse standards.

CA 1. Using the DoD FCC Child Abuse Training Modules, FCC providers receive training annually in child abuse prevention, reporting and identification.

CA 2. The DoD Child Abuse and safety Violation Hotline number (poster) is displayed in the provider's home where parents can see it.

CA 3. The provider is trained in appropriate ways of touching children.

CA 4. The provider uses only positive guidance techniques and has appropriate expectations for children in care. The provider never uses corporal punishment.

CA 5. Parents have access to their children at all times of the day and night.

VI. Program Standards

It is DoD policy that FCC providers offer quality care in a safe and nurturing learning environment that supports individual children's growth and development. Providers encourage parents to be involved in the activities offered in the home and the installation Child Development Program. The FCC Administrator is responsible for ensuring FCC homes meet program standards.

PS 1. There is adequate space indoors and outdoors for the number of children in care to play, rest, and eat. Developmentally appropriate activities are provided indoors and outdoors.

PS 2. The provider directly supervises all children in care.

PS 3. Activities and experiences are provided daily that enhance children's physical, social, emotional and cognitive development.

PS 4. Children's routines are handled in a relaxed and individual manner that promotes life experiences, respect, and opportunities to develop self-esteem, self-discipline and learning by doing.

PS 5. The provider is alert to signs of children's undue stress and provides appropriate support and or activities to reduce stress levels. The provider observes and evaluates each child's growth and development for program planning.

PS 6. The provider interacts frequently with the children and shows them affection and respect. The provider speaks to children in a friendly, courteous manner.

PS 7. Toys, games, and materials are provided that are appropriate for the ages and levels of children's development.

PS 8. Toys and materials are arranged and or displayed so children are able to select and put toys and materials away with little or no assistance.



PS 9. A variety of daily activities are planned for indoors and outdoors. There is a balance between child initiated and adult-directed activities. A daily schedule is posted for parents to see.

PS 10. Television and or video viewing are developmentally appropriate for the ages of children in care and are limited to one hour per day. Children in extended hour care may view TV with the provider's family as a family activity.

PS 11. Activities include multi-cultural experiences and are non-sexist for all age groups in care.

PS 12. The provider communicates with parents and recognizes them as partners in the care of children. The provider respects family cultural differences.

#### VII. FCC Staff Standards

It is DoD policy that the FCC system is fully implemented to support the installation's need for child care. It is the responsibility of the Children and Youth Program Administrator to ensure that the FCC Program is budgeted for and the staff are trained to implement the FCC system in compliance with this Instruction and applicable to Service regulations.

FSS 1. The FCC Administrator ensures the installation FCC program complies with this Instruction and applicable Service guidance.

FSS 2. The FCC Administrator has developed a marketing plan to recruit potential providers and inform installation residents that the provision of child care in government quarters is a privilege, not a right.

FSS 3. The FCC Administrator and staff maintain a consistent caseload of FCC providers that supports the installation's need for child care.

FSS 4. The FCC Administrator has established procedures to ensure that all FCC providers and household members over 12 are screened in accordance with DoD Instruction 1402.5, to include in home interviews with the potential provider and household members.

FSS 5. The FCC Administrator maintains information on each provider, including, results of family interview, background

3 Mar 10

checks, inspections, insurance, training, monitoring visits and other pertinent information.

FSS 6. FCC staff provides and coordinates required training (orientation and annual) for providers. FCC staff ensures all providers complete orientation training before caring for children, and receives a minimum of 24 hours of annual training using the DoD Child Abuse Training Modules and DoD Training Modules.

FSS 7. FCC staff works with providers to complete the FCC training modules.

FSS 8. At a minimum, FCC staff conduct quarterly home visits and frequent training and or technical assistance visits, observation and interview techniques.

FSS 9. FCC Administrator coordinates with proponents from safety, fire and health to train FCC providers and conduct required home inspections.

FSS 10. As needed, the FCC Administrator recruits special-purpose homes (infant and or toddler, special needs, extended hour homes).

FSS 11. The FCC Administrator should develop a plan to implement direct cash subsidies to expand the availability of FCC spaces and meet specialized child care needs (special needs care, extended hours, etc.).

FSS 12. The FCC Administrator ensures FCC parents are represented on the Children Youth Parent advisory board, parent participation program and the annual evaluation of the FCC program.

FSS 13. FCC staff receives annual training related to the latest techniques and best practices in childcare, child abuse prevention, identification and reporting procedures, and program administration.

CHILD DEVELOPMENT PROGRAM  
FAMILY CHILD CARE  
STANDARD OPERATING PROCEDURE FOR  
FCC INFANT/PRE-TODDLER/TODDLER DIRECT CASH PAYMENTS

Ref: (a) MCO 1710.30E

Encl: (1) Application for Participation  
(2) Child Attendance Roster  
(3) Invoice for Direct Cash Payment

1. Purpose. To promulgate procedures for Family Child care Direct Cash Payments (FCCDCP). The FCCDCP program is a function of the Family Child Care (FCC) component and is subject to all requirements of reference (a).

2. Definitions. FCC is defined as care provided by a military family member in housing under the control of the installation commander for one or more unrelated children on a recurring basis for more than 10 child care hours per week. FCCDCP program provides direct cash payments to expand the availability of child care services and enables FCC services to be offered to eligible patrons at a cost comparable to services provided by military child development centers.

3. Authority. The operation of FCC homes and FCCDCP program is authorized by reference (a). Providing child care in government quarters is a privilege extended at the discretion of the installation commander to the most qualified among those who meet the minimum qualification to become FCC providers.

4. Administrative Procedures

a. The FCCDCP program will be under the administrative control of the Children and Youth Program (CDP) and specifically the FCC component.

b. The FCC Director responsibilities include:

(1) Publicizing the FCC direct cash program.

(2) Recommending approval/denial of FCC provider applications for participation in FCCDCP, see enclosure (1).

(3) Ensuring each provider receiving direct cash payments is in compliance with all policies and regulations governing the FCC Program.

ENCLOSURE (12)

3 Mar 10

(4) Reviewing and certifying all documents and invoices and forwarding for payment.

(5) Ensuring all FCC providers are paid according to direct cash payment administrative procedures.

(6) Maintaining records of accounts payable and FCC requirements for direct cash payments.

(7) Ensuring that expansion goals for the FCC program are achieved; maintaining program documentation and evaluating the FCCDCP program's effectiveness and efficiency.

(8) Ensuring the division of functions of certifications and cash payment between the FCC Director and the CYTP Administrator.

c. FCC provider qualifications. To be considered for participation in the FCC program, FCC providers will have demonstrated ability to care for infant/pre-toddlers/toddlers, comply with all standards required in reference (a) and apply for participation using enclosure (1).

d. Fees. FCC providers participating in the FCCDCP will charge fees as established by the installation commander.

5. Submission for payment of direct cash assistance

a. FCC providers will submit child attendance roster, enclosure (2), and signed invoice for direct cash payment, enclosure (3), to the FCC Director on the first working day after the month claimed.

b. Within five working days of receipt, the FCC Director will validate submitted rosters and invoices and certify for payment. The FCC Director will forward, via the CYTPA, to Comptroller's office for payment.

c. Monies will be direct deposited into the FCC provider's checking account by the Defense Finance Accounting Service (DFAS), Kansas City, MO.

FAMILY CHILD CARE  
MARINE CORPS AIR STATION  
CHERRY POINT, NORTH CAROLINA

APPLICATION FOR PARTICIPATING IN FAMILY CHILD CARE DIRECT CASH  
PAYMENT PROGRAM (FCCDCP)

1. I understand that I may be eligible to receive direct cash payments for children under 3 years of age enrolled in my home. I hereby request to participate in the FCCDCP beginning \_\_\_\_\_.
2. I understand FCCDCP is subject to change or may be discontinued.
3. I understand that to be eligible for direct cash payments I must be in compliance with all DoD, Marine Corps, and local installation policy.
4. I understand that the FCC Director, in conjunction with the Quality Review Board, may limit the number of children I may care for, as well as the extent of my participation in the FCCDCP.
5. I understand that I will receive direct cash payments only for children six weeks to 36 months of age.
6. I understand that my own children will not be eligible for direct cash payments but will be counted in the ratio required.
7. I understand that only eligible patrons, as defined by the installation Commander are eligible for FCCDCP.
8. I understand that any contract I have with parents of children under 3 years of age I claim for direct cash payments may not contain a fee which exceeds \_\_\_\_\_ (based on CDC fees) per child.
9. I understand the command reimbursement I receive per child will not exceed \_\_\_\_\_ (To be established by the Commanding Officer).
10. I understand that I must maintain accurate child attendance records on which parents will record that children enter and leave my care. I will keep copies of these attendance records submit the originals signed by myself, and parents to the FCC director.

3 Mar 10

11. I understand that I will submit a monthly invoice for payment to the FCC director and that such direct cash payments will be paid to me, after verification by the FCC director.

12. I understand that signing this application does not make me an employee of the U.S. government nor does it constitute a contract with the U.S. government or the FCC office indicated below.

\_\_\_\_\_  
(Provider's Signature)

\_\_\_\_\_  
(Provider's SSN)

\_\_\_\_\_  
(Date)

Provider's Mailing Address: \_\_\_\_\_

INVOICE FOR FAMILY CHILD CARE DIRECT CASH PAYMENT

|                                                                             |                        |         |
|-----------------------------------------------------------------------------|------------------------|---------|
| Provider's Name (Last, First, MI)                                           | SSN                    |         |
| Sponsor's Name (Last, First, MI)                                            | SSN                    | Command |
| Home Phone#                                                                 | Sponsor's Duty Phone # |         |
| Mailing Address (Qtrs Address, City, State, Zip Code)                       |                        |         |
| I have cared for the following children per the attached attendance sheets. |                        |         |
| Signature                                                                   | Date                   |         |

| Child's Name             | Age<br>(Months) | Care<br>Category | Fee<br>Level | DCP<br>Amount | #<br>Weeks | Cash<br>Amount |
|--------------------------|-----------------|------------------|--------------|---------------|------------|----------------|
|                          |                 |                  |              |               |            |                |
|                          |                 |                  |              |               |            |                |
|                          |                 |                  |              |               |            |                |
|                          |                 |                  |              |               |            |                |
| Total Amount of<br>Claim |                 |                  |              |               |            |                |

|                                                                               |
|-------------------------------------------------------------------------------|
| Comments: Note absences due to vacations (provider's or child's) and illness. |
|                                                                               |
|                                                                               |
|                                                                               |
|                                                                               |
|                                                                               |

RECEIVING REPORT

Date Received \_\_\_\_\_ Statement of certifying Officials  
I certify that the information on the number, ages, and hours of care for  
children claimed is correct and that the amount of direct cash payment due  
the FCC Provider is correct.

Signature of Verifying Official  
(FCC Coordinator): \_\_\_\_\_ Date \_\_\_\_\_

I certify that this is correct and proper for payment.

Signature of CYTP  
Administrator: \_\_\_\_\_ Date \_\_\_\_\_

3 Mar 10

QUALITY REVIEW BOARD (QRB)  
FAMILY CHILD CARE  
MARINE CORPS AIR STATION  
CHERRY POINT, NORTH CAROLINA

A QRB will be established to assist the FCC program in making recommendations to the installation commander on FCC certification, denial, suspension or revocation. Refer to MCO 1710.30E for further guidance.

1. The QRB should include a chairperson (chosen by the group), the FCC Director, representatives from Marine and Family Programs, preventative medicine, safety, security, housing office and the fire department.
2. It is recommended that the QRB meet at least quarterly or more frequently on an as-needed basis.
3. The QRB will forward its recommendation to the installation commander or designee for signature.
4. The QRB is also the mechanism for hearing appeals made by providers/applicants.
5. All decisions of the QRB will be given to the provider/applicant in writing (i.e., signed certificate, letter of denial, letter of revocation).