



**KENNEDY**  
**SPACE CENTER**  

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**CHILD DEVELOPMENT CENTER**

A Avenue & 5<sup>th</sup> Street

Kennedy Space Center, Florida 32899

(321) 867-5437

Parent Handbook

March 2022

# Welcome

Welcome to the NASA Kennedy Space Center Child Development Center (KSC CDC). We are happy to have you and your child(ren) in our program. It is the goal of the KSC CDC to provide high quality, affordable, and developmentally appropriate childcare to the children of active, badged NASA KSC/CCAFS/PSFB civil service, military, and contractor families and assist their families in balancing the competing demands of family life and career.

The NASA Exchange is an instrumentality of the United States which has as its objective the operation of activities that contribute to the welfare and morale of NASA and KSC personnel. The Exchange is a non-appropriated fund activity (no tax dollars) and its scope of activity, rules, or business practices is delegated to the KSC Exchange Council. The KSC Exchange Operations Manager is responsible for overseeing, directing, and managing the daily business operations of the KSC Exchange activities.

The CDC has a staff of sensitive, loving, and caring individuals, and demands the highest standards in the education and training of staff members for providing the daily care of the children. Staff members, with appropriate experience and training, are hired to implement the educational and developmental aspects of the program.

Thank you for giving us the opportunity to serve you and your family. We look forward to working with you to provide the best possible program for your child(ren). Parents are encouraged to visit and participate in our program as much as possible. We welcome your assistance in making this a great program. The CDC is located at A Avenue and 5<sup>th</sup> Street. The phone number is (321) 867-5437.

The handbook is provided to inform parents of the KSC CSC policies and procedures, which governs the program. If you do not understand our policies and or procedures or have a concern, please let us know and we are always open to suggestions.

Visit our website at <http://nasaexchange.ksc.nasa.gov>.

KSC CDC Administrators

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## Section 1: General

### 1.1 Purpose

The purpose of the Kennedy Space Center Child Development Center (KSC CDC) is to provide childcare to families with children between the ages of six weeks and five years of age in a safe and stimulating environment in which children can develop mentally, physically, socially, and emotionally.

### 1.2 Mission

The CDC provides high quality childcare to families with children between the ages of 6 weeks through five years of age. Children are nurtured and supported in a way that promotes self-esteem and provides the opportunity for optimal growth in all areas of development.

### 1.3 Philosophy

Our philosophy is that all children will be afforded the opportunity to participate in a variety of experiences from which the child can learn and grow, be child oriented, be “hands-on” and allow freedom of choice whenever possible.

### 1.4 Sponsor

The CDC is sponsored by the NASA Exchange Council as an employee benefit for active, badged NASA/KSC/CCAFS/PAFB civil service, military, and contractor families of NASA’s Kennedy Space Center.

### 1.5 Accessibility

Consistent with the Americans with Disabilities Act, the CDC will make reasonable efforts to accommodate eligible children with disabilities.

### 1.6 Equal Opportunity

The CDC does not discriminate against individuals on the basis of sex, age, religion, natural origin, color, race, marital status, physical or mental disability, or veteran status in the administration of its admission policies, employment policies, and educational program

### 1.7 Special Needs

Our goal is to meet the individual needs of each child within the structure of our program, while maintaining a safe and healthy environment for all the children and staff. Children with significant medical, emotional, psychological, physical, or mental conditions may tax the CDC capabilities to ta point that endangers the health, safety, and wellbeing of that child or other children at the CDC.

With respect to the children with significant medical conditions, monitoring, or treatment (emergent or routine) of the illness often involves specialized training. Further, when controlled medications are used, special attention must be paid to monitoring patient response as well as watching for medication side effects. Improper administration of medication, poor patient response to medication, or unrecognized significant side effects can have severe or even potentially catastrophic effects on the child. Further, this increased attention to the individual child can take away from proper monitoring and oversight of the other children.

In view of this, the CDC may refuse a child based on the following:

- Children with medical conditions that require care beyond the staff's capabilities and reasonable accommodations cannot be made.
- Discharge a child whose medical conditions have grown to the point that required care is beyond the staff's capabilities and reasonable accommodations cannot be made.

Parents may come to the CDC to administer medications or treatments that require care beyond the staff's capabilities and reasonable accommodations cannot be made.

Under no circumstance should the CDC accept a parental stipulation that "911" is not to be called for a particular condition. At any time that the staff believes a medical condition is beyond their capability and a potential emergency exists, "911" should be called immediately and every attempt should be made to contact the child's parent or guardian.



## Section 2: Administration

### 2.1 License

The CDC is licensed and inspected by the Florida Department of Children and Families. The CDC complies with all applicable state licensing regulations and standards which relate to facility, staff, health, and safety procedures, nutrition, child ratios, and recordkeeping and complies with KSC health, safety, and fire standards and regulations.

### 2.2 Accreditation

The CDC has obtained accreditation from the Accredited Professional Preschool Learning Environment (APPLE). In addition, the CDC was awarded by the State of Florida the Gold Seal Award which recognizes outstanding centers within the state.

### 2.3 Staff

Employees are carefully screened in accordance with Florida Statute 435 and in compliance with the Crime Control Act of 1990- Public Law 101-647, Section 231; the NASA Procedural Requirements 1600.3, and the Kennedy NASA Procedural Requirements 1600.1A, all Child Care Providers, and other employees having direct contact with the children are the subject of a Child Care NACI Investigation initiated by the KSC NASA Protective Services Office and conducted by the Office of Personnel Management (OPM). The Child Care Provider investigation is an enhanced NACI which includes a search of the State Criminal History repositories of all states where the employee has resided.

Staff members receive orientation before caring for children. Staff members must be enrolled in or have already completed the 45-hour State Child Care Training course within 90 days of employment. New staff members are encouraged to work towards and receive their CDA (Child Development Associate) or FCCPC (Florida Child Care Professional Credential) certification during their first year of employment. All employees must attend a minimum of twenty-four annual in-service training hours.

### 2.4 Facility

The CDC is located on the Kennedy Space Center at "A" Avenue and 5<sup>th</sup> Street. The facility is well lighted and ventilated. There are no stairs located in or around the CDC. Windows are permanently affixed, and facility doors are never propped open other than for the purpose of entering and exiting the facility.

### 2.5 Hours of Operation

The CDC is open Monday through Friday from 6:00 am to 6:00 pm. Actual service hours for a child are based on a **ten-hour** workday. If changes are made to the general operating hours, parents will be notified two weeks in advance (minimum) in writing.

### 2.6 Holidays

The Center will be closed on New Year's Day, Memorial Day, July 4<sup>th</sup>, Labor Day, Thanksgiving, the day after Thanksgiving, and a week at Christmas time. No tuition will be billed the week at Christmas. All other holidays will be billed as normal.

### 2.7 Closures for Emergency Situations

The CDC will also be closed due to hazardous or other emergency situations, as determined by the KSC Center Director. Parents are expected to pick up their child(ren) immediately (within one hour) upon notification of the closure of the CDC. If you are an essential employee or other designated personnel,

you will need to make plans to have your child(ren) picked up from the CDC. This may include having an individual badged onto the center to do so. If this is the case, or if a situation arises where the time limit cannot be met, please notify the KSC CDC Administrator.

No discount will be offered for days the CDC is closed due to adverse weather or other emergency situations.

In the event that the staff of the CDC, due to poor weather conditions or some emergency, cannot open the center on time the following apply:

- Every attempt will be made to notify parents as soon as possible. An emergency alert will be sent out via Tadpoles, followed by a phone call from the CDC Administration. The Tadpoles alert will come as a text and email.
- If no written notification is posted on the door that the CDC is closed, assume that the center is making every effort to open as quickly as possible.
- Wait with your child until a staff member arrives.
- Call the emergency number posted on the CDC door or call the NASA/KSC Status Number at (321) 861-7900.

## 2.8 Supplies Needed

Parents are responsible for supplying diapers/pull-ups, wipes, diaper creams, weather appropriate clothes, a change of clothes, lace-up or Velcro closure shoes (no flip-flops), pacifier (if needed), sunscreen and insect repellent (if needed), bathing suit and water shoes (for scheduled water play days). We are not responsible for replacing stained or soiled clothing. Please label all clothing items with your child's name on the tag to avoid any clothing mix-ups.

For the other children sleeping on a mat or cot: a crib sheet, a blanket, and a pillow are needed and if necessary, a comfort item for rest-time. Your child's crib sheet, blanket, and pillow should be taken home every Friday and washed and returned to daycare the following Monday.

Please periodically check your child's cubby or classroom designated area to ensure they have all of their necessary items needed at daycare.

## 2.9 Daily Schedule

Daily schedules are posted in the individual classrooms and pre-school schedules are posted in the cubby hallway. Times and activities may vary and be flexible depending on the weather, age, and temperament of the children.

## 2.10 Open Door Policy

The CDC has an "Open Door Policy" that gives the parents access to the Administrator at any time. Parents are welcome and encouraged to visit their children any time during the day. Feel free to ask questions and consult with the Administrators in regard to any issues or concerns with your child whether at home or at the CDC.

## 2.11 Communication

Open communication between each family and the CDC is encouraged. The staff will make every effort to communicate with the parents on a daily basis to let them know how their child's day went. Parents can utilize the Tadpoles app to leave information for the staff such as if a child needs to leave early, etc., or

for one staff member to leave information for another staff member working in the same room at a different time. Staff members will check the Tadpoles app for messages each day and will write down important information to be passed on to other staff members.

The Administrator prepares and distributes a monthly newsletter that provides information on events, changes, staff, etc. associated with the CDC. Staff members also prepare and distribute a monthly newsletter that provides information on monthly activities and weekly lesson plans are provided to the parents. The Administrator will notify parents in writing of prospective new employees before their start date and of any pending staff resignations.

Any questions or problems a parent has concerning their child should be directed to the child's teacher first, and then, if necessary, the Administrator. All concerns, problems, or issues should be discussed with the Administrator prior to any further action. If a question or problem cannot be satisfactorily resolved with the Administrator, you may bring the matter to the Exchange Operations Manager for resolution.

## 2.12 Discipline and Child Guidance

All discipline and child guidance techniques used by the staff at the CDC will be of a positive, non-punitive nature. The goals of the CDC staff will be:

- To ensure that the classroom is a safe, secure environment for all the children.
- To teach the children that our society has acceptable and unacceptable social behaviors.
- To teach self-respect and respect for the rights of others.
- To teach the children self-control and inner discipline.
- To teach the children to take responsibility for their actions and the consequences of their actions.
- To strengthen the children's self-esteem and feelings of self-worth.

Children will be treated with courtesy, respect, and patience. Staff members will use positive techniques of guidance including redirecting the child to participate in another activity, anticipating and eliminating potential problems, providing positive reinforcement for appropriate behaviors, talking and providing reflective listening with the child, temporarily removing the child from a stressful situation, and limiting the child's participation in some activities until the child is able to cooperate and follow the rules associated with that particular activity. If redirection is unsuccessful, a time out of one minute per age will be given. Older children will be given time-outs depending on the severity of the offense (almost always one minute per age, never to be more than fifteen minutes). All techniques used will be age appropriate for the child and will be accomplished by a rational explanation of expectation on the child's level of understanding.

At no time will a child be subjected to discipline which is severe, humiliating, frightening, threatening, or associated with food, rest, or toileting. Spanking or any other form of physical punishment is prohibited. Parents are asked to follow the same disciplinary guidelines with their children while at the center.

Should you have difficulty in providing for your own child's emotional or physical needs or safety, you are encouraged to ask for help. Our staff can help you find a community resource that can offer assistance.

## 2.13 Record Keeping

All records on CDC staff members and enrolled children are stored both in file folders and in electronic form and are maintained and disposed of in accordance with the Privacy Act of 1974 as amended.

### 2.14 Confidentiality

Parents should keep all information regarding any child, other than their own, attending the CDC or any CDC staff member confidential. Staff members have been instructed that issues relating to a child should only be discussed with that child's parents and the appropriate personnel. Staff members not working directly with a child will not be given information about that child; likewise, parents will not be given information on other children. Parents should discuss issues related to staff members or other children only with the Administrator, Assistant Administrator, Exchange Operations Manager, or individuals participating in an official investigation.

### 2.15 Family Interaction

The CDC staff makes every effort to interact and encourage dialogue with families in a positive manner to strategize, address concerns or issues, and provide resolution and/or assistance in a timely and effective manner.

Parents are welcome to visit the CDC anytime to observe their child in the classroom. Observation allows you to observe your child's interaction in a social environment and participation in the classroom. Feel free to discuss any questions or concerns you may have regarding your observation with your child's teacher or Administration.

### 2.16 Program Survey

Parents are encouraged to participate in an annual program survey. The survey feedback is utilized to measure the CDC progress toward program goals and objectives, and overall effectiveness of the program.

### 2.17 Parent Meetings

The CDC parent meetings are held on an annual basis for the purpose of discussing a variety of topics, issues concerns, suggestions for improvement, planning activities, and overall CDC operations.

### 2.18 Photos, Film, and Videotape

On occasion, the Kennedy Space Center and the CDC hold events to include, but not limited to birthday parties, special visits from community members, special activities, and public relations activities. During these events, photographs, film, or videos may be taken of your child and may be used for publication in the Spaceport News, on the KSC webpage or an informative brochure. The enrollment package contains a Consent and Release for Photos, Film, and Videotape form to give or withhold permission from your child participating in any activity involving photos, film and or videotape.

### 2.19 Parking

Parking spaces for families dropping off and picking up children are located on the south side of the CDC. Parents may pull under the canopy beside the sidewalk to drop off or pick up children, these spots are for temporary parking only, violators will be ticketed.

Please do not leave your car running or leave an unattended child in your vehicle when arriving or leaving the CDC. It is considered child abuse and neglect to leave a child who is six years old or younger unattended in a motor vehicle. Children are at risk for bodily harm or death due to extreme heat or cold temperatures, kidnapping, and tampering with the vehicle's gear setting or ignition.

## 2.20 Tuition Payment

Tuition payment is due in full for each week's tuition no later than 12:00 pm every Tuesday of each week. Effective September 1, 2021, the CDC will send out invoices weekly on Thursdays and are due by the following Monday for the current week of service. Invoices will be sent to the email on file, and you must utilize the link to pay via debit/credit card or a checking/savings account.

Rate changes take effect the Monday following the child's birthday. If the child's birthday falls on a Monday, the rate change will take effect that week. Occasionally a child will be promoted to the next class early, however the tuition will not change with the class change, only with a child's birthday.

In the event of a discounted week, vacation, or COVID quarantine week, there will be no additional discounts given (sibling discount).

## 2.21 Late Payment Fee

Tuition payments received after 12:00 pm on Tuesday of each week will be late and parents will be charged a \$10.00 per week late fee. The fee may be paid separately or included in the next week's payment.

Parents with an unpaid balance of two weeks will **NOT** be allowed to bring their children back to the CDC until a balance is paid in full. A late fee will be added each week to the unpaid balance owed until the balance is paid in full.

## 2.22 Late Pick-Up Fee

Parents who pick up their children up after closing time (6:00 pm) will be charged a late pick-up fee of \$15.00 per child for each 15-minute increment. Payment may be made at the time of pick-up or included in the next week's tuition.

## 2.23 Sibling Discount

Parents with two children enrolled and attending on a full-time basis will receive a 10% per week discount on the oldest child's weekly tuition. Parents with three or more children enrolled and attending on a full-time basis will receive a 15% per week discount on the oldest child's weekly tuition. No discount will be given for part-time children or their siblings.

## 2.24 Vacation Weeks

Each September 1, all children who are enrolled full time receive two vacation weeks to be used throughout the school year, through August 31, of the following year. All children who are enrolled part time receive one vacation week to be used throughout the school year, through August 31, of the following year. These vacation weeks will be billed at 50% of your normal weekly tuition rate. Parents must complete and turn in a Vacation Request Form two weeks in advance. Forms not submitted two weeks in advance will result in normal billing with no discount applied. The following will apply:

- Child must attend the CDC a minimum of four weeks before they are eligible to receive credit weeks.
- After the two discounted weeks are utilized, parents will be required to pay full-price tuition for any additional absence in order to reserve the child's enrollment slot.
- Vacation weeks must be taken in full week increments. No partial weeks, single days, or hourly increments will be allowed.

- The two discounted weeks will not be carried over from year to year if not used.
- Families with children enrolled on a part-time basis will receive one vacation week and the above guidelines also apply.

### 2.25 Sick Days

Sick days will be considered regular days. Tuition will not be pro-rated for sick days.

### 2.26 Grievances

Parents are encouraged to visit, observe, and participate whenever they have time. Though parents are generally encouraged to discuss a concern first with their child's teacher, they are welcome to talk to the Administrator at any time. If parents are unsatisfied after talking with the Administrator, they should express their concerns to the NASA Operations Manager in writing, in person, or by calling (321) 867-8025. Parents may also use the Suggestion Box in the CDC Lobby.

## Section 3: Enrollment and Removal

### 3.1 Programs Available

#### Full-Time (4-5 days weekly)

Infants I, II, and III (6 weeks – 12 months)

Toddler 1 (12 months- 24 months)

Toddler II (24 months- 36 months)

Preschool (3-5 years as of September 1)

#### Part-Time (3 days or less per week or 5 half-days)

Part-time enrollment is 1-3 full days per week or 5 4-hour days (8:00 am- 12:00 pm OR 2:00 pm- 6:00 pm). Each request will be reviewed on a case-by-case basis and decided upon based on the current operational position of the CDC. Decisions will be made based on the condition that part-time enrollment will have no negative impacts on CDC operations or expenses. Part-time schedules shall be set on weekly schedules as determined at time of enrollment. Any deviation shall be coordinated and approved by the CDC Administrator no less than two weeks in advance.

### 3.2 Staff to Child Ratios

The CDC offers developmental childcare to children ranging in age from 6 weeks to five years old. The children are grouped according to age and abilities with the following staff to child ratios:

#### State Ratios

Age Group	Staff/Child Ratio
6 weeks - 12 months	1:4
12 months – 24 months	1:6
24 months – 36 months	1:11
3 year olds	1:15
4 year olds	1:15
5 year olds	1:20

### 3.3 Eligibility

All NASA/CCAFS/PAFB/Civil Service employees, military, and on-site NASA support service contractors are eligible to use the center on a full-time basis or part-time basis (see above exception to part-time). Employee must be a badged birth parent, legal guardian, or grandparent. Eligible children are admitted without regard to sex, age, religion, national origin, color, race, or physical or mental disability.

### 3.4 Waiting List

The waiting list exists for the purpose of creating a record of an eligible parent, legal guardian, or grandparent expressing interest in enrolling his or her child in the CDC and an opening is not available at the desired time. The waiting list also exists to provide a vehicle for parents to enroll an unborn child during pregnancy. Families who are adopting may be placed on the waiting list. The desired start date

may be set as TBD and updated as specific information from the adoption agency is received for child placement. The waiting list can be found at <http://nasaexchange.ksc.nasa.gov>

Priority for enrollment from the waiting list will be given to children or dependents of NASA civil service employees. Parents enrolling their children on a full-time basis will also be given priority over part-time enrollment. Priority will also be given to families who already have a child enrolled at the CDC. Placement on a waiting list does not guarantee that a slot will ever be available for your child.

Slots will be offered in priority order to families on the waiting list as space becomes available. The official waiting list will be maintained and updated by the Administrator. The Assistant Administrator will support the Administrator in updating and maintaining the waiting lists. Priority within the various waiting lists is based on the date the request is received by the Administration and the desired start date. The desired start date is the parent/guardian may request that the Administrator withhold his/her name from the posted waiting list. The "Anonymous" status will not be changed unless approval is received from the parent/guardian.

It is the parent/guardian's responsibility to keep the Administrator up to date when a due date or adoption date is known or if contact information changes. As long as the desired start date is TBD, no slot will be offered to that member.

Parents will be offered an enrollment opening when their child's name is at the top of the waiting list for a given age group and will be given 48 hours to decide if they want to accept or decline the enrollment slot. Upon acceptance of the slot, the slot will be reserved free of charge for five business days after which the parents must pay full tuition and the child must begin enrollment.

If the child is unborn, or is not old enough to be enrolled, the slot will be offered to the next eligible family on the waiting list, and the child's name will remain at the top of the waiting list.

If an applicant declines an available opening after two opportunities, the applicant will be dropped from the waiting list and will have to re-apply for the waiting list and list date will change.

The Administrator reserves the right to manage the waiting list in the best interest of the CDC.

### 3.5 Enrollment

The following is a priority listing of eligibly into the CDC:

First Priority:

- Families with siblings
- NASA Civil-Service employees
- NASA Exchange employees

Second Priority:

- NASA Contractors

Third Priority

- All others



Parents are requested to complete all appropriate enrollment paperwork and submit it to the CDC Administrator or Assistant Administrator prior to the first day of enrollment.

State law requires that HRS-H Form 3040 (Student Health Examinations) and HRS Form 680 (Florida Certificate of Immunization) be on file at the CDC. It is necessary that this record be completed by the child's physician and provided to the center within 30 days of enrollment. Children are required to receive all age-appropriate immunizations recommended by the most current report to the American Academy of Pediatrics proper to the first day of attendance.

### 3.6 Registration Fee

Upon enrollment, parents must pay a one-time, non-refundable registration fee of \$75.00. Parents enrolling more than one child at the same time will only pay one registration fee. However, if the second child is enrolled at a later date, parents must pay another \$75.00 registration fee.

### 3.7 Supply Fee

Upon enrollment and each September 1<sup>st</sup> thereafter, each child will incur a \$50 supply fee.

### 3.8 Facility Visits

We welcome scheduled or drop-in visits to familiarize parents and children with the CDC and staff before the child begins attending. The parents may stay in the classrooms or observe the room through a window while the child visits his or her classroom. Insurance constraints prohibit parents from leaving an un-enrolled child at the CDC. Parents are encouraged to ask questions or address concerns with the Administrators or classroom staff.

### 3.9 Arrival and Departure

Parents are required to check their child in with their teacher upon arrival and check their child out with their teacher upon departure, daily. Parents are responsible for bringing their child into the building each morning and escorting them to their appropriate classroom and releasing them to the staff. Be sure the classroom staff sees you and greets your child before you leave. The child's teacher must sign them in upon arrival and sign them out upon departure to document that that have received and/or dismissed the child in their care. Parents must come into the building in the evening when picking up their child and sign them out with the classroom staff member.

Parents will be responsible for putting their child's belongings in their assigned cubby or designated classroom area. Each child will be assigned a cubby in the hallway outside his or her classroom or in designated areas in the classroom for storing jackets, backpacks, and nap items. Personal toys need to remain at home unless requested for "show and tell" or for a special activity. Weapons, real or pretend, are never permitted at the CDC. All clothing items should be clearly and permanently labeled to minimize loss or confusion. Please check your child's cubby or classroom designated area daily.

### 3.10 Release of Children

Parents must give written permission on the child's enrollment form as to what persons are permitted to remove their child from the CDC. Staff members will release a child only to individuals, other than parents, who are at least 16 years old and whom the child knows and appears to be comfortable leaving with. Staff members will also require that the individual verify their identity with a picture identification card. Children will be released to either parent unless the CDC has official court documents on file regarding

custody specifying that a particular parent is not authorized to pick up a child. Otherwise, we cannot prevent the non-custodial parent from picking up the child.

CDC Administration or staff member in charge will not release a child to a parent, legal guardian, or person designated to pick up a child that appears to be under the influence of a substance (drug, alcohol, etc.) that would cause them to have poor motor control, be disoriented, or have slurred speech. The Administrator or staff member in charge will contact the other parent or emergency contact to pick up the child. If the parent insists on removing the child from the CDC, KSC Security will be contacted for assistance to remove the impaired individual from the CDC.

### 3.11 Withdraw

A two-week advance written notice will be required of parents choosing to withdraw their child from the CDC. If advance notice is not given, the parents will be required to pay for those two weeks. A withdraw is considered to be a minimum of a four-week time period. If a child is withdrawn for less than a four-week time period and the parents decide to re-enroll the child, parents will be required to pay full tuition for the period of absence in order to maintain their enrollment status at the CDC. For any child returning after a withdraw of four weeks or longer, a new registration fee will be required, and the child will be given priority on a space available basis.

### 3.12 Voluntary Removal

CDC parents who voluntarily remove their child(ren) for extended periods must place their child(ren) back on the waiting list before re-admission can be considered. The CDC is a non-profit organization and operates as economically, efficiently, and fairly as possible. Any parent who voluntarily removes a child is accepting the risk that their re-admission may be delayed due to slot unavailability. Parents may not hold the Administrators, the Exchange Operations Manager, or the NASA Exchange Council accountable for failure to re-admit a child who has been removed knowing that the waiting list precludes giving the removed child any priority consideration.

### 3.13 Biting Incidents

The KSC CDC recognizes that although biting isn't "abnormal" in the sense that one out of ten toddlers bite, it is a disturbing and potentially harmful behavior. When a child bites another child or staff member, time out will be used as the method for discipline. The child will return to the group if they are willing to cooperate and agree to stop biting. Efforts will be made to have the biting child comfort the child that was bitten and mend any hurt feelings between the two children. The Administrators or staff members will provide appropriate medical care to the bitten child.

Biting will be discouraged from the very first episode and the following will apply:

- The first time and every time a child bites, the parents of the child who bit and the parents of the child who got bitten will be called.
- If a child bites or attempts to bite three times in one day, the parent will be called to remove the child from the KSC CDC.
- If a second biting incident occurs within two weeks, a staff member will observe the child closer.
- If biting persists, it may be necessary to terminate the child's enrollment at the CDC.

In the event that biting continues three times in one week, the parents of the child who bit will be required to pick up their child and the parents will have a formal meeting with the Administrator to discuss behavior modifications and or strategies that the staff will be using at the CDC and ways the parents can facilitate correction of the behavior at home.

CDC Administration or staff member in charge will notify parents of both children by phone of the incident. The parents will be informed of the circumstances under which a child bites another child and upon determination of the severity of the bite (skin marks or breaks), advise or encourage parents to seek medical treatment.

Staff members observing the incident will fill out an Accident or Incident Report for Daycare Facilities form on the child doing the biting. Staff member will record the date, time, site of bite, and an explanation of the biting incident on the report. The parents of the child who bit will be required to read and sign the report and will be given information about children and biting. The original form will be given to the parent and one copy placed in the child's file.

The parent of the child who has received the bite will also be notified by phone. Staff member will record the date, time, site of bite and an explanation of the biting incident on the report. The parents of the child will be required to read and sign the report. The original form will be given to the parent and one copy placed in the child's file.

Administration and staff members will not release the names of the children involved.

### 3.14 Behavior

The CDC Administration and staff members are responsible for providing a safe and welcoming environment for the children, parents, and visitors. If a parent observes a behavior problem of another child that is disruptive or potentially harmful to their child or other children, then the parent should notify the Administrator.

Unfortunately, when an individual's, child or adult, physical or emotional well-being is threatened, we must address the situation and take action, and depending on the severity of the behavior, may result in terminating the child's enrollment at the CDC.

The disruptive behavior below is not all inclusive but can be summarized as:

- Dangerous: Throwing chairs, kicking, biting teachers and children, punching, tripping teachers and children, etc.
- Disruptive: Not listening to teacher, disrupting class or school activities by picking on other children, talking while the teacher is talking, leaving his class without permission, etc.
- Offensive: Spitting, inappropriate language, etc.

Therefore, the following levels of action will apply:

- The first time and every time your child exhibits any of the disruptive behaviors, the parents will be called.
- If such behavior continues, the Administrator will call and meet with the parents to come up with a plan to discourage such behavior and at their discretion, and depending on the seriousness of the behavior, may ask the parents to remove the child from the CDC for the day.

- If such behavior continues, the parents will be called to remove the child from the CDC and the child will be suspended from attending the CDC for three workdays.
- If the behavior persists, and depending on the severity of the behavior, it may be necessary to immediately terminate the child's enrollment at the CDC. If termination is imminent, the parent will receive a one-week prior written notice with its decision and reason for the termination.

The Administrator or Assistant Administrator, with concurrence from the NASA Exchange Operations Manager or the NASA Exchange Council will determine any further action that will be needed depending on the age of the child and on the situation. The parents are required to pay full tuition for the days the child is out.

It is our goal to continue to work with you to develop appropriate and effective interventions to address and improve the child's behavior. Parents should notify their child's teacher and the Administrator of situations at home such as a new baby, death, illness of family members, etc., which might affect their child's behavior at the CDC. When a child exhibits aggressive behavior toward another child or staff member, time out will be used as the method for discipline. The amount of time the child will spend in time out is one-minute times the child's age. If timeouts in the classroom setting are not successful, the child may be removed to the office to calm down and allow the rest of the class to continue with their activities. The child will return to the group if they are willing to cooperate and agree to stop acting aggressively. A staff member will provide appropriate medical care to the hurt child or refer the child to the Administrator's office if the injury is serious. It is essential that we work cooperatively together to minimize and/or resolve this disruptive behavior.

The Administrator will notify parents by phone and inform them of the circumstances under which a child was aggressive towards another child or staff member. The Administrator or staff member observing the behavior will fill out an Accident or Incident Report for Daycare Facilities form on the child exhibiting the aggressive behavior. The parents of the child will be required to read and sign the report. The original form will be placed in the child's file and a copy will be given to the parent if requested.

The parents of the child who was the victim of the aggressive behavior will also be notified by phone. Staff member will record the date, time, and an explanation of the behavior on the report. The parents of the child will be required to read and sign the report. The original form will be placed in the child's file and a copy will be given to the parent if requested. Administration and staff members will not release the names of children involved.

If the parent does not feel the Administrator has adequately addressed the issue, then the parent should contact the NASA Exchange Operations Manager for appropriate resolution.

### 3.15 Involuntary Removal

Continued use of the CDC facility and resources is a privilege, not a right. If the Administration with concurrence from the NASA Exchange Operations Manager and the NASA Exchange Council determines in its sole discretion that a child's and/or parent's continued presence at the CDC disrupts the safety and or well-being of other children, parents or CDC staff, the child may be removed enrollment at CDC.

Re-admission is not guaranteed. If re-admission is granted, a mandatory probationary period to monitor the child's behavior will be required. If the behavior problem still exists at the end of the probationary period, the CDC reserves the right to permanently terminate the child's enrollment.

Alternatively, a parent may be barred from entering CDC premises for a period of time to be determined by the NASA Exchange Operations Manager, the NASA Exchange Council, and/or KSC Protective Services Office.

### 3.16 Termination

The CDC reserves the right to immediately end care for nonpayment; failure to respect Administrators and staff; behavior of the child, which is harmful to the physical or emotional well-being of the CDC staff and children; failure to abide by established CDC policies; and/or abuse of operating hours.

**The CDC has the right to terminate enrollment without notice in the case of harm to other children and/or staff, or a dangerous situation due to an action that the child has caused intentionally or otherwise.**

Termination is the last resort as we are dedicated to working with and providing families the best possible care.

## Section 4: Educational Curriculum

### 4.1 Program

A planned program of developmentally appropriate activities that promote the cognitive, language, social, emotional, and physical development of the children is provided for each age group. The activities we plan for children, the way we organize the environment, select toys and materials, plan the daily schedule, and talk with children, are all designed to accomplish the goals of our curriculum. Daily schedules and weekly lesson plans are available in each classroom for the benefit of parents and center staff.

### 4.2 Program Goals

- Provide a warm, loving, and secure environment staffed with trained child-care professionals that encourage each child's development of a positive self-concept, positive socialization skills, self-help skills, and a feeling of trust in other human beings.
- Provide an environment that encourages sound health, safety, and nutritional practices.
- Provide a variety of developmentally appropriate activities and in the areas of reasoning, language, visual perception, fine motor, and gross motor skills.
- Provide open communication with parents regarding their child's daily activities, individual needs, and developmental progress.
- Provide developmental screenings to identify special developmental needs of individual children and make referrals for special services when appropriate.
- Encourage creative expression and an appreciation for the arts.
- Respect cultural diversity of children, parents, and staff.

### 4.3 Room Assignment

Placement of a child in a classroom is determined by age and developmental level. We want your child to be placed where his/her needs are met, and interests are challenged. While we do accept input from parents about room assignments, the CDC Administrators and teachers will make the **final decision** based on what is best for the child.

### 4.4 Classroom Routines

Each age group is staffed with a full-time lead and two or more teachers depending on the enrollment ratios. A daily schedule of activities is posted in each classroom, along with weekly lesson plans scheduled for the class. Lesson plans are sent home at the beginning of each week. The posted daily schedules are considered to be guidelines only; each program leader will determine the specific activities for their classroom.

Children will be given the opportunity for supervised independent play on the playground when the weather permits. Playground time is usually in the early morning and late afternoon. Infants and toddlers have a separate fenced-in playground area where they can play and enjoy the outdoors safely. Parents are responsible for providing non-aerosol insect repellent and sunscreen for their child during the summer months. Please label insect repellent and sunscreen container with the child's name.

The CDC is well equipped with educational toys and parents are asked to keep children's personal toys at home unless the child needs a special toy to sleep with or unless the child has a toy that will contribute to the educational curriculum and relates to the specific subject matter being explored in the class. (All items from home must be legibly labeled). We cannot be held responsible for lost or broken personal belongings

at school.

#### 4.5 TV/Video

Television and video viewing will not be a regular occurrence. Movies will only be shown when used as a supplement to the weekly theme or lesson plan and are educational in nature. Videos must be submitted with the lesson plan and approved by the CDC Administrators. Educational videos may be shown, with Administration approval, due to inclement weather.

#### 4.6 Lesson Plans

Each teacher develops their own lesson plans around the emerging skills of the children in their classroom. The CDC has embraced the Creative Curriculum and their goals and will maintain current training with up-to-date materials. Teachers are required to submit lesson plans every Tuesday prior to the teaching week to the Administrator. Lesson plans are submitted to the CDC Administrator for review. If the Administrator has any concerns or questions, she will address them with the teacher and necessary changes will be made to the plan. Lesson Plans will be provided to the parents on the Thursday prior to the teaching week. Teachers are encouraged to allow the child to learn through play and devise lesson plans that are both enriching and interesting to the children.

Teachable moments will be utilized as opportunities arise or as an addition or enhancement to lesson plans. A teachable moment is a fleeting opportunity seized by the teacher to explain a concept that could evolve into a lesson or instruction (i.e., arguing and fighting – teacher will seize the opportunity to teach kindness and respect). Teachable moments are extremely effective as they help a child grasp the concept in real time.

Teacher collaboration is strongly encouraged to deliver a highly effective learning environment for the CDC children. Collaboration improves professional development and communication skills by working together to exchange ideas, develop common goals, and to offer innovative approaches in enhancing or improving classroom practices.

#### 4.7 Assessments

Assessment components are naturally integrated into the course of each day at the CDC. A more structured assessment is administered bi-annually to determine and communicate your child's developmental progress and learning and is used as a tool for program enhancement or improvement. Any concerns in regard to developmental or learning progress will be addressed and parents will be provided information and/or contact information for early intervention resources.

#### 4.8 Portfolios

Portfolios, containing samples collected over time, chronicle where children begin when they first entered the classroom, what their interests are, what their challenges are, how much they have grown, and who their friends are. Families have ongoing opportunities to share results of observations from home to contribute to the assessment process. Portfolios can be a wonderful bridge between home and school. Teachers document observations in their own unique ways such as recording anecdotes, taking photographs, and collecting samples of the children's work.

#### 4.9 Promotions

Children are promoted to new classrooms when the Administrator and the child's program lead teacher determines that the child is developmentally ready to be promoted, and when there is an available

opening in the classroom to which the child will be promoted. Promotion notices will be sent out at least two weeks in advance. To ensure a smooth transition, the child will visit their new classroom for one week (half days) prior to being permanently moved.

#### 4.10 Graduation

Children who are four to five years of age and entering Kindergarten in the Fall are invited to participate in the CDC graduation exercises at the close of the academic year (usually in May/June) and include a presentation of learned activities, songs, and plays.

#### 4.10 Parent Conferences

Parents and staff exchange daily feedback concerning the child's day in all classrooms. Parents with children in the Infant and Toddler Programs will receive daily oral reports and an electronic daily report specifying diaper changes, meals, special activities, outdoor time, nap time, and medications. Parents of children in the Preschool Program will receive daily oral reports and an electronic report. Parents are welcome to request a conference with their child's teacher or the Administrator at any time.

Formal parent conferences will be offered twice a year to allow parents and teachers an opportunity to discuss each child's developmental progress and adjustment to the program. Parents are also provided with an opportunity at the parent conferences to evaluate the services of the CDC and give recommendations for improvement in the services offered.

All parents are encouraged to participate in parent/ teacher conferences. These conferences are held during CDC hours and will be scheduled at a time that is convenient for both the parent and the teacher. Occasionally a teacher may request a parent conference if there is a special concern in the classroom.



## Section 5: Developmental Stages

### 5.1 Infants, I, II, and III

The primary concern for infants is to satisfy their physical and emotional needs. Each child will be provided safe opportunities to develop control of their body such as rolling over, sitting, and crawling. Infants are loved, cuddled, rocked, talked to, played with, sung to, and stimulated throughout the day. The developmental level of each child will be assessed, and activities designed to help strengthen their fine and gross motor skills.

The Infant rooms are supplied with the following items: cribs, floor toys, play mats, swings, exersaucers, and highchairs. The teachers are required to be diligent and consistent throughout the day in disinfecting all areas of the Infant Department. The Infant Department offers a private and comfortable environment to assist nursing mothers.

Parents must supply:

- Crib sheets - Must be taken home daily to be washed
- Blankets
- Disposable diapers and/or cloth diapers and other diapering products (wipes, lotion, etc.)
- At least two changes of clothing
- Formula or breast milk (at least 2-4 bottles prepared for each day), cereal, baby food, and baby juice

Please ensure that all personal belongings are labeled legibly with the child's first and last name.

Children's diapers are checked every two hours and are changed as needed.

Parents may bring in special toys or stimulation items for their child. Please specify if the items you bring in are for the department or solely for your child. Parents are welcome to donate toys to the center that their children have outgrown.

Infants will be allowed to nap and eat as their individual schedule demands. Infants will be held when being fed, and bottles will not be propped at any time. Mothers who are breast-feeding are welcome to come to the center and nurse their child. Parents are asked to update their child's individual schedule, as it changes.

Infants II and III will follow a more structured schedule when napping and eating based on the activities provided by the teachers and the meal program provided by the school. As your child begins eating solid foods, please highlight the items on our menu that you would like your child to try. Menus come out the beginning of each month. Please provide a sippy cup (labeled legibly with child's first and last name) for your child in the Infant II room.

Socks are required for all children in the Infant II and III rooms and shoes are required as they begin walking.

Please do not bring children to school in previous night's pajamas and diaper.

## 5.2 Toddler 1/1B and Toddler II (12 months - 36 months)

Children are moved into the Toddler I room when they have learned to walk steadily or are close to doing so, can feed themselves, and are eating table food. Toddlers will participate in activities such as creative arts, crafts, music, exploration movement, exercise, and creative drama. Toddlers will be encouraged to practice language skills and will be talked to and read to often. Social interaction, sharing, and relating well with others will be emphasized. Many activities involving social interaction, music, creative art experiences, etc. are encouraged in this room.

Parents must supply:

- Disposable diapers and/or cloth diapers and other diapering products (wipes, lotion, etc.)
- Change of clothing
- Nap time blanket and/or pillow (if needed). For safety and fire hazard reasons, items brought in must fit into the child's cubby. Nap items are to be taken home on Friday of each week to be washed.
- A sippy cup for drinks throughout the day as the children in the Toddler I room will be weaned from bottles.

All items must be legibly labeled with the child's first and last name. The CDC will provide 2" thick sleeping mats for Toddler 1/1B children to nap on and are sanitized daily. The CDC will provide a cot for Toddler II children to nap on and are sanitized daily.

Pacifiers may be sent to school with Toddler I children and will only be given at nap time. For Toddler II children, please keep all bottles and pacifiers at home as this will help eliminate confusion and conflicts with children who are no longer using them.

Closed toe shoes and socks are required for all children each day. As a safety measure, no flip-flops or open toed sandals are to be worn.

Please do not bring children to school undressed or in previous night's pajamas and diaper. Children's diapers are checked every two hours and changed as needed. Potty training will start and encouraged in the Toddler II room.

## 5.3 Preschool (3 – 5 years)

The purpose is to provide an atmosphere that encourages social, emotional, physical, and intellectual growth. Children will also be encouraged to practice language skills and will be read to and talked to often. Hands on activities will be used as much as possible in order to allow the children to experience a variety of learning methods. The center is divided into six preschool centers with curriculum activities that enhance the developmental level of the children in the immediate group. These groups begin with the young threes and end with the fives who will begin Kindergarten in the fall.

Parents must supply:

- Change of clothing
- Nap time blanket and/or pillow (if needed). For safety and fire hazard reasons, items brought in must fit into the child's cubby. Nap items are to be taken home on Friday of each week to be washed.

All items must be legibly labeled with the child's first and last name. The CDC will provide a cot for

preschool children to nap on and are sanitized daily.

Shoes and socks are required for all children each day. As a safety measure, no flip-flops or open toed sandals are to be worn. Please do not bring children to school undressed or in previous night's pajamas.

#### 5.4 Nap Time

The infants sleep in provided cribs, the one-year-olds sleep on provided mats, and older children sleep on cots. Nap time for children ages 12-18 months is from 11:00 am to 1:00 pm. Nap time for children ages 18-36 months is from 11:30 am until 1:30 pm. Typically, children 12 months and younger will take a morning nap as well, moving toward a one nap a day schedule. Typically, children 6 months and younger may need a third nap during the day, which can be incorporated into their schedule as needed. During nap time we dim the lights, play soft music, read to, and help soothe each child. Children are not required to sleep but must remain quietly on their mat. Children may bring a favorite stuffed animal for nap time only. Please be sure to label your child's belongings with his or her name.

#### 5.6 Toilet Training

We encourage and support potty training if the child is ready (typically between 2 and 3 years old). Parents will be required to supply pull-ups and wipes. Children will be allowed to come to daycare in cotton training pants/underwear and please bring in 2 to 3 changes of training pants/underwear each day. Communication and cooperation between parents and the CDC staff is imperative for a successful transition from diapers to toilet.

## Section 6: Health and Safety Policies

### 6.1 Meals

The center provides a well-balanced nutrition program for all enrolled children. The CDC serves breakfast from 7:15 am to 8:00 am, lunch, and a mid-afternoon snack daily. Breakfast ends at 8:00 am regardless if breakfast is provided from the CDC or provided by a parent. A monthly menu is prepared and posted on the main bulletin board and sent via Tadpoles. Copies of the menu are also available for parents to take home.

Children will be encouraged to try each food served, but never forced. Liquids will be always made available to children.

All allergies must be noted on the child's health form and will be communicated verbally to the staff. A sign is posted in the classrooms and kitchen to remind the teachers and cook of allergies. A list of children's allergies is available via Tadpoles.

If food is supplied by the child's parent, there shall be a written agreement kept on file at the CDC. HRS-CYF Form 5019 (Alternative Nutrition Plan Agreement) defines the responsibilities of the parent and the center for meeting the child's nutritional needs. Food items brought from home must be clearly labeled with the child's name and stored in the café. Items requiring refrigeration and reheating should be left with kitchen staff to ensure they are properly stored.

Parents are welcome to eat lunch with their children. Just let your child's teacher know that morning so you can include you in the lunch count.

### 6.2 Restricted Diets

If your child has any particular dietary needs resulting from being a vegetarian, having allergies, or based on religious beliefs, etc., then we must be informed so that we can work with you and parents must provide foods to meet their child's dietary needs.

### 6.3 Formula and Baby Food

Formula or breastmilk (prepared in bottles daily), cereal and baby food required for infants shall be provided and labeled by the parents. Prepared bottles may not contain cereal as it makes it difficult to warm formula to an appropriate temperature. Any formula/breastmilk products for bottles must be prepared by, legibly labeled, and provided by the parents. Mothers who are breast-feeding are welcome to come to the KSC CDC and nurse their child. No cow's milk will be served to children under 12 months. Solids can be offered to infants once they reach 6 months of age.

### 6.4 Minimum Standards for Meals

	Children <u>1 - 2 years</u>	Children <u>3 - 5 years</u>
<b><u>Breakfast</u></b>		
- Milk, fluid	1/2 cup	3/4 cup
- Juice or fruit or vegetable	1/4 cup	1/2 cup

- Bread and/or cereal (whole grain or enriched)	1/2 slice	1/2 slice
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Cereal

Cold, dry or	1/4 cup	1/3 cup
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hot, cooked	1/4 cup	1/4 cup
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**Lunch**

- Milk, fluid	1/2 cup	3/4 cup
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- Lean meat or meat alternate

lean meat, poultry, or fish, cooked

(lean meat without bone)	1 oz	1 1/2 oz
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or cheese or egg	1 oz	1 1/2 oz
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or cooked dry beans or peas	1/4 cup	3/8 cup
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- Fruit and/or vegetable	1/4 cup	1/2 cup
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(two or more total)

- Bread or bread alternate	1/2 slice	1/2 slice
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(whole grain or enriched)

**Snack** - Select 2 of the four components (midmorning and afternoon supplement)

- Milk, fluid	1/2 cup	1/2 cup
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- Lean meat or meat alternate	1/2 oz	1/2 oz
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or yogurt	1/4 cup	1/4 cup
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- Juice or fruit or vegetable	1/2 cup	1/2 cup
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- Bread and/or cereal (whole grain or enriched)

Bread	1/2 slice	1/2 slice
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Cereal Bar

## 6.5 Cleanliness

We take the well-being of your child very seriously and work hard to provide an environment that is as healthy as possible. In order to help minimize and/or prevent the spread of germs hand washing is the single most effective practice in preventing the spread of germs. The CDC staff and parents will be required

to wash their hands as well as their children's hands upon arrival at the CDC and before dropping off child in their designated classrooms. Hand washing practices will also be required:

- Before and after meals, handling food, or feeding a child
- Before and after administering medication
- Before water play, playing with water used by more than one person/child, and anytime the hands become soiled during outdoor or indoor play
- After diapering and toileting
- After handling body fluids (e.g., mucus, blood, vomit)
- Wiping noses, mouths, and sores
- After playing in sandboxes
- After handling pets
- After cleaning (handling garbage)

## 6.6 Hand Washing

- Wet hands with water
- Apply hand soap
- Lather and wash for at least 15 seconds
- Rinse both sides of hands with water
- Dry hands and shut off faucet with towel
- Dispose of paper towel in lined trash container

## 6.7 Diapering

- Have supplies ready including paper liner, fresh diaper, wipes, plastic bag for soiled diaper, disposable gloves
- Clean the child's diaper area
- Carry or help lift the child onto the changing table and always keep a hand on the child
- Unfasten the diaper
- Lift the child's legs as needed to clean skin with disposable wipes
- Wipe with a front to back motion
- Slide the fresh diaper under the child, fasten the diaper, and dress the child
- Put soiled wipes and diaper in plastic bag to be put in a plastic lined, covered can
- Remove the soiled surface by folding liner inward
- Clean the diaper changing surface with spray sanitizer
- Wash both your hands and the child's hands using hand washing procedures
- Record diaper change in the child's daily log

## 6.8 Safety Helmets

Your child's safety is a top priority at the CDC. To encourage safe practices, any child wanting to ride a tricycle must wear a safety helmet. The NASA Exchange has purchased safety helmets and parents will have the option to use the helmets supplied by the CDC or provide their own helmet. Safety helmets will be sanitized after every use.

## 6.9 CDC Security Measures

The CDC takes every precaution to ensure a safe environment for all who attend. The following are security measures that have been taken to ensure a stable and secure environment:

- **Facility** – Fencing surrounds the CD
- **Partition** – A physical barrier was installed to deny immediate access to the children once an individual enters the CDC. This allows employees an extra moment to notice individuals who should not be in the facility and challenge their presence.
- **Lock and Combination Door** – The outer and inner doors to the CDC are equipped with a Lenel card reader. To enter the facility, parents and staff must scan their badge at the Lenel reader to gain access. Parents and employees are added and removed from area access as needed. The side door to the CDC is used by staff members only and is also equipped with a cipher lock. The combination code is provided only to the staff members.
- **Marshalling area** – located on the southwest side of the building for evacuation.
- **Classroom Procedures** – Staff members use constant visual supervision of children in their care and are required to know how many children are in their care at all times. Staff members will provide an hourly count to the Administrator for documentation purposes.
- **Motion Activated Sensor** – A motion sensor is located in front of the partition (physical barrier). Whenever something crosses its path, a bell sounds letting one know that someone has entered or exited the CDC.
- **Checks and Balances for Removal of Children** – When an unknown individual enters the CDC and requests to pick up a child, the child's file will be checked to see if the individual is authorized, or the parent has submitted written permission for the individual to pick up their child. If the individual is not listed, or the parent has not submitted written permission, removal of the child will not be permitted.
- **Visitors** – Individuals who are not parents or staff members will be required to sign in and out on the Visitor Log located at the front door. Individuals will be escorted during their entire visit to ensure supervision of individuals who are not cleared through the offices of Environmental Health and NASA Security.

When a badged parent is unable to pick up or drop off their child(ren), arrangements must be made with the Administration to obtain a temporary CDC specific badge and placard for the unbadged individual to access the CDC and transport the child(ren) to and from the CDC. Temporary badges are not to be used to access any buildings or areas outside of the CDC.

## 6.10 Missing Child

Children are continually supervised at all times. If a child should be reported missing, the Administration or staff member in charge will:

- Search the environment to ensure the child has not hidden or been locked anywhere on the premises
- Notify the KSC Protective Services Office
- Notify the child's parents or guardian

### 6.11 Suspicious Circumstances

“If you see something, say something”. Suspicious activity or circumstances observed by the CDC staff and/or parents should be reported immediately to the Administration or staff member in charge who will immediately notify the KSC Protective Services Office to handle the situation. Suspicious activity or circumstances could be:

- Person wandering around with no legitimate purpose
- Unauthorized individuals in surrounding areas
- A group or individual sitting in a parked vehicle that appear to be monitoring facility activity
- Abandoned or unfamiliar parked vehicles

### 6.12 Abduction

A child is more likely to be abducted by someone he or she knows and trusts (parent, family member, and/or family friend). Concerned parents or guardians should contact the Administration and alert them to their concerns of a possible abduction attempt by the child’s other parent or individual. It is imperative you provide copies of court documents to establish lawful custody. Copies of court documents will be kept in the child’s file. Threatening comments or potentially violent actions will be taken seriously and reported immediately to the KSC Protective Services Office.

### 6.13 Child Custody Disputes

Parents experiencing difficult situations such as divorce, separation, or remarriage should notify the Administration and provide pertinent legal documents establishing custody. The CDC cannot legally restrict an authorized non-custodial parent from visiting the child, reviewing their records, or picking up the child from the CDC. Copies of court documents will be kept in the child’s file.

### 6.14 Discipline and Child Guidance

All discipline and child guidance techniques used by the staff at the KSC CDC will be of a positive, non-punitive nature. The goals of the KSC CDC staff will be:

- To ensure that the classroom is a safe, secure environment for all the children.
- To teach the children that our society has acceptable and unacceptable social behaviors.
- To teach self-respect and respect for the rights of others.
- To teach the children self-control and inner discipline.
- To teach the children to take responsibility for their actions and the consequences of their actions.
- To strengthen the children's self-esteem and feelings of self-worth.

Staff members will use positive techniques of guidance, including redirecting the child to participate in another activity, anticipating and eliminating potential problems, providing positive reinforcement for appropriate behaviors, talking and providing reflective listening with the child, temporarily removing the child from a stressful situation, and limiting the child's participation in some activities until the child is able to cooperate and follow the rules associated with that particular activity. All techniques used will be age appropriate for the child and will be accompanied by a rational explanation of expectation on the child's level of understanding. Staff members will abstain from corporal punishment. Discipline which is severe, humiliating, frightening, or associated with food, rest, toileting or spanking or any other form of physical



punishment is prohibited. Parents are asked to follow the same disciplinary guidelines with their children while at the center.

### 6.15 Reporting Child Abuse

All employees are mandated reporters of suspected child abuse or neglect. The Administration or staff member in charge will be alerted to any suspected case of child abuse or neglect. The Administration or staff member in charge will report all pertinent information to the Florida Department of Children & Families by phone.

### 6.16 Emergency Preparedness

The KSC Protective Services Office provides security, law enforcement, fire, and emergency medical services to the CDC which include but are not limited to locating a missing child; abduction by estranged parent; responding to a hostage situation; an intruder; altercations on the CDC grounds; and chemical or hazardous material incident. The CDC is also integrated into all KSC emergency management planning. The CDC will follow the instructions given by the KSC Emergency Management team and take appropriate actions to ensure the safety of the children.

The CDC has an Emergency Plan that defines procedures and responsibilities for all emergency personnel, CDC staff, and visitors. The Center-wide Paging and Area Warning System includes the Tornado Area Warning System, and the Emergency Notification System (ENS) is utilized to warn employees and families of impending adverse weather and emergencies. Should normal systems not be in service, the KSC Emergency Team will assist CDC Administration in contacting the parents.

An emergency evacuation diagram of safe evacuation routes for staff and children is posted in each room of the facility, including restrooms, in the event of a fire or other emergency requiring evacuation.

Each classroom (except Pre-school) has a phone to call or alert the office immediately in an emergency. Walkie-talkies are used in the playground areas to alert the office immediately in an emergency.

### 6.17 Fire Drills

Fire Drills are conducted monthly. Drills are conducted by the KSC Fire Inspector at varying times and conditions to meet the State of Florida requirements. Drills are never pre-announced to the staff and full evacuation occurs within 90 seconds on average. The fire drills are used as an opportunity to teach basic skills to the 3- and 4-year-old children, for example, how to call “911” during an emergency, understanding what an emergency is, and how to respond to smoke alarms at home such as “Don’t Hide, Go Outside”. Staff members are required to keep and maintain a current attendance record of their assigned class during an evacuation. The attendance record is to be used to account for all children.

### 6.18 Tornado

In the event of a tornado warning, the staff and children will gather into the children’s restrooms. Staff members will remain with children until the inclement weather has passed and it is safe to return to their classrooms.

### 6.19 Shelter-In-Place

Shelter in place is the response when it is safer to stay where you are than try to relocate. Staff will bring children and visitors inside to a designated safe area, according to the type of emergency, in the CDC and

will not leave the CDC until directed to by the Administration or the KSC Emergency Team. Parents will be notified of the situation and status.

### 6.20 Lockdown

Lock down is the response to a potentially violent situation (intruder, non-custodial parent/guardian, parent/guardian under the influence of a substance, hostage situation, suspicious individual or car in the vicinity, individual with a weapon). KSC Protective Services Office will be notified immediately. Staff will close and lock all doors. Staff will direct children and visitors to a designated secure area in the CDC and will not leave until directed to by the Administration or KSC Emergency Team. Parents will be notified of the situation and status.

### 6.21 Evacuations

Infants are evacuated using special evacuation cribs. Evacuation marshaling areas are in designated safe areas, away from roads and traffic. In the event a full evacuation of the facility is required, teachers will collect their iPads and calmly escort their class to the closest exit and designated marshaling areas. The west marshaling area has direct access to the bus pick-up loop for off-site evacuation, if required. NASA Security, Fire, and Rescue will respond immediately to assess the situation and assist as necessary to assure a safe transition. CDC Administration will take a total count to assure that all staff members, children, and visitors have left the building safely.

The CDC Emergency Plan provides for pick-up and transport of the children and staff to an alternate location for the safety and comfort of all. Alternate locations that have been used in the past are the Kennedy Learning Institute and the KSC Training Auditorium. Transportation from the CDC to the alternate location is accomplished through agreements with the KSC Visitor Center concessionaire, Delaware North Parks and Recreation Service. The plan includes transporting the infants and the emergency cribs along with all mobile children and adults to the alternate location for pick-up by the parents. CDC Administration will be responsible for emergency supplies, “ready to go” files and accountability of all staff members, children, and visitors. A notice will be posted on the CDC door with information on the alternative evacuation site as well as an alert sent out via the Tadpoles app.

### 6.22 Administration of Medication

The CDC Administrators or staff member in charge will be the only staff members allowed to administer prescription medication. Administrator or staff member in charge will not administer any medication **without a written prescription from the child’s doctor**. Parents or legal guardians will be the only ones allowed to administer prescription or over the counter medication if a written prescription is not provided to the CDC. Exception will be made for diaper ointments, creams, and teething medication which will be administered by the child’s assigned departmental employees and stored in the child’s assigned department. Departmental employees will document all pertinent information on the Authorization for Medication form each time diaper ointments, creams, or teething medication is administered. The child’s parent or legal guardian must come to the CDC to administer any other medications or nebulizer treatments.

All medication must be delivered to the CDC Administrator or staff member in charge in the original container with proper identification and documentation. Expired medication will not be kept on site and will be returned directly to a parent or guardian. Any error in the giving or applying of medication shall be reported immediately to the KSC Emergency Medical Team and the parent.

- **Authorization of Medication:**
  - o All medications, both prescription and over the counter, will require a form to be filled out by the parent. This form must indicate a designated time for the medication to be given, not “as needed”. Any over-the-counter medications require a note from the child’s physician indicating the name of the medication and appropriate dosage for the child. Prescription medications must be in the original container with prescription label attached.

The KSC CDC reserves the right to refuse administration of any medication that appears to pose potential harm to the child, as well as any non-traditional medications. Medications that are expiring will need to be picked up from the Assistant Administrator’s office and replaced. Any medication that expires and is not picked up by the parent will be disposed of properly.

- **Epi-Pen:**
  - o If your child has an allergy that may require the use of an Epi-pen, a parent or guardian must provide the child’s own Epi-pen. The Epi-Pen will be kept on site and stored in a secured drawer in the Assistant Administrator’s office. If your child should require the use of the Epi-pen while in attendance, the following steps will be taken:

1. Administrator or staff member in charge will inject Epi-Pen.
2. Administrator or staff member in charge will call 911 after the Epi-pen is injected.
3. The parent or guardian will be contacted.

### 6.23 Medication Record

An Authorization for Medication form will be completed with the child’s name, name of medication, date and time medication was dispensed, amount and dosage, and the name of the person dispensing the medication.

### 6.24 Medication Storage

All medications and first aid supplies are kept on site and stored and/or refrigerated in a secured drawer in the Assistant Administrator’s office.

### 6.25 Confidentiality

The CDC Administrator or staff member in charge who gives or applies medication will not disclose information about a child’s medication and/or treatment unless such information is needed to protect the health of other children or staff.

### 6.26 CPR/First Aid

All the CDC staff members are CPR/First Aid certified. A first aid supply kit is always available and is in the Assistant Administrator’s office. Non-latex gloves are worn by the CDC staff when administering first aid. Please inform the Administration and indicate on your child’s enrollment form if your child has a latex allergy.

### 6.27 Control of Contagious Illnesses

In order to prevent and control the spread of communicable illnesses among the children and staff, strict health policies must be followed at the CDC. Cooperation between staff and parents is essential to

ensuring a safe and healthy environment for all the program participants. The Administrator and staff will use a commonsense approach to make the best judgment call possible in determining if parents need to pick up their children due to illness.

At the Administrator's or Assistant Administrator's discretion, they may advise parents to seek medical attention for their child and request that parents provide a note from their doctor to determine if child is well enough or no longer contagious to participate in the KSC CDC regularly scheduled daily activities.

Staff members will visually screen all children upon arrival for obvious symptoms of illness. Children displaying symptoms of illness, contagious illness, or who are not well enough to participate in the daily activities (lethargic, wanting to sleep) will not be admitted. Parents are asked to inform staff members about any symptoms of illness that the child has been exhibiting at home and to inform the staff if the child received any medication before arrival.

Parents are also required to notify the staff if their child has been exposed to a communicable illness so that appropriate precautions to prevent the spread of the illness can be taken.

Parents will be notified if their child becomes ill at the KSC-CDC and will be expected to pick the child up within an hour from the time parent is notified. Until the child is taken home, the sick child will be isolated from the other children. If your child develops a fever of 101 degrees parents will be expected to pick their child up and the child will not be admitted back to the KSC CDC until their temperature is normal for 24 hours without fever suppressing medication.

#### 6.28 Illness Criteria for Denial of Service

Children in care shall be observed daily for signs of communicable disease. Any child, childcare employee or other person in the childcare facility suspected of having a communicable disease shall be removed from the facility or placed in an isolation area until removed. Such child, childcare employee or person may not return to the facility without written medical authorization or until the signs and symptoms of the disease are no longer present. With a child, the condition shall be reported to the custodial parent or legal guardian. Child, childcare employee, or other person may be denied admission based on, but not limited to, the following symptoms:

- Temperature of 101 degrees F or more.
- Not being temperature free for 24 hours without fever-suppressing medication.
- Persistent Vomiting: Parents will be notified if the child vomits once and will be required to pick the child up if the child vomits a second time during the same day.
- Persistent Diarrhea: Parents will be notified if a child has one abnormally loose stool in one day and will be required to pick the child up if the child has a second abnormally loose stool in one day.
  - The Administrator may allow infants ranging in ages from 6 weeks to 12 months to remain at the center following three abnormal stools if there are no other symptoms of gastroenteritis or viral diarrhea such as fever, vomiting, irritability, dehydration, or lethargy. This exception is made because young infants frequently exhibit symptoms of diarrhea when adjusting to dietary changes in formula and food, on medication, and when teething.
- Severe Cold Symptoms - accompanied by persistent coughing, fever, sore throat, or yellow or green mucous discharge from the nose or mouth.

- Impetigo – blistery rash – when blisters open, they produce a thick, golden-yellow discharge that dries, crusts, and adheres to the skin.
- Scabies - crusted wavy ridges and tunnels in the webs of the fingers, hands, wrist, and trunk.
- Ringworm - Flat, spreading, ring-shaped lesions
- Head Lice - Nits (white dots) attached to the hair shafts.
- Culture-proven strep throat that has not been under treatment for at least 24 hours.
- Conjunctivitis (pink eye) - red, watery eyes with thick yellowish discharge.
- Pinworm - Intestinal round worm; itching near anal area; worms may be observed in the child's stool.
- Hand-Foot-and-Mouth (Coxsackie A) – blisters in the mouth, on the gums and tongue, on the palms and fingers of the hand, or on the soles of the feet.
- Roseola – high fever (when fever disappears, a rash appears), runny nose, irritability, eyelid swelling, and tiredness.
- Respiratory Syncytial Virus (RSV) – bronchiolitis/pneumonia – fever, runny nose, coughing, and sometimes wheezing.
- Unexplained or unusual skin rashes, skin eruptions, or discharges.
- A child who does not feel well enough to participate in the usual daily activities, including going outside to the playground.
- A child who needs more attention or individual care than the staff can give without neglecting the other children in their care.

Any contagious disease such as chicken pox, mumps, measles, polio, diphtheria, meningitis, pertussis, tetanus, hepatitis, giardiasis, and rubella. These contagious diseases must also be reported to the Florida State Department of Health.

### 6.30 Emergency Medical Treatment

The center will not admit any child whose parent has not given written authorization that emergency medical care may be administered to the child in an emergency. Conscious efforts will be made to notify a parent prior to such action. However, emergency first aid and medical treatment may be provided without additional consent under the provisions of the signed emergency medical care agreement kept on file at the KSC-CDC in the child's permanent file.

Serious injuries requiring emergency first aid will be reported to the parents immediately. The parent will be notified of the details of the injury and be asked to:

- Come to the center or
- Meet the staff member and injured child at the designated emergency medical facility.

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

- Convulsions
- Marked difficulty breathing
- Unconsciousness
- Laceration, either significant in size or bleeding
- Injury to an extremity with obvious deformity
- Head trauma associated with vomiting or altered consciousness

In case of a serious accident or sudden illness requiring immediate medical attention, the Administrator or staff member in charge will:

1. Call to 911
2. Contact child's parent, guardian, or emergency contacts
3. Separate the child from the other children and appropriately care for them
4. Administrator or staff member in charge, parent/guardian, or ambulance team takes the child and health records to the doctor or hospital.

**It is very important that all emergency contact information is kept up to date and correct. Please inform us immediately of any changes to keep your information current.**

### 6.31 Minor Injuries

The initial assessment of an injury will be performed by the child's teacher. The Administrator will be consulted and advised of the injury. Injuries of a clearly minor and superficial nature will be treated by the child's teacher utilizing the first aid kit. Minor injuries, such as small scratches, cuts, scrapes, bruises, or discolorations of the skin will be reported to the parents at the end of the day. If an injury is minor but significant, the staff will notify the parent by telephone so that the parent can come to observe the child's injury or call the child's physician for medical advice concerning non-emergency treatment. All injuries occurring at the CDC will be documented by the child's teacher on an Accident or Incident Report Form. The form is to be signed and dated by the parent and left in the front office for filing in the child's permanent file. Upon request, parents may obtain a copy of the incident report.

## Section 7: Extracurricular Activities

### 7.1 School Pictures

School pictures are usually taken of the children at least once each year by a professional photographer with prior approval from the parents. These pictures may include individual, sibling, and group poses. Participation is optional and may require a sitting fee. Purchase of finished pictures is optional.

### 7.2 Birthday Celebrations

Parents are welcome to join their child to celebrate their birthday. Parents may bring in special treats to share with their child's classmates (these items must be store bought). The CDC can furnish paper plates, utensils, and napkins, although parents may wish to provide special birthday plates and napkins. Please let your child's teacher know in advance, so an appropriate time can be scheduled.

### 7.3 Holiday Celebrations

It is the policy of the CDC to avoid interfering with religious beliefs. Should holiday celebrations run counter to your personal beliefs, please talk with your child's teacher to determine an alternative arrangement. However, children may share their own individual holiday experiences with teachers and other children without censure. Children learn to respect and appreciate cultural differences through child-initiated sharing.

### 7.4 Parents Getting Involved (PGI) Association

The PGI was established in January 1997 as the PTA and changed names in 2000. It is comprised of parents who work with the center to promote understanding and suggest ideas for improvement that will affect the lives of all the children. The PGI allows parents an opportunity to participate in a variety of activities that support and enrich the programs offered at the CDC. Periodic meetings will be posted a week in advance and all parents are invited and encouraged to attend. For additional information, contact the CDC Administrator.

### 7.5 Family Involvement

The CDC hosts a variety of events throughout the year and encourages families to come and participate in events or activities such as Valentine's Day, Mother's Day Tea, Father's Day Tea, Spring Fling, Graduation, Back-to-School activities, Fall Festival, and Holiday Celebrations.

## Section 8: Parental Responsibilities

### 8.1 Family Information

If there is a change in your address, home or work telephone number, emergency contacts, family status or care and/or custody arrangements, please notify Administration in writing so that the changes can be noted or changed in your child's file. It is important that we have correct information on file in the event of an emergency. It is especially helpful to know of new family situations such as separations, divorce, remarriage, a new baby, family illness, etc. as such changes may affect your child's mood or behavior. We can often help your child deal effectively with a new family condition if we are informed in advance. If your child has special health problems, unusual stresses, or obsessive fears, please let us know.

### 8.2 Parent/Guardian

- Notify Administration if your child will not be attending.
- Notify Administration if anyone other than the parent or guardian will pick the child up (in writing)
- Notify Administration of any special needs your child may have.
- Update the Tadpoles app with any pertinent information about your child throughout the day
- Honor operating hours by not dropping your child off before 6:00 am and picking your child up by 6:00 pm.
- Update your child's records as changes occur.
- Address questions or concerns with CDC staff or policies with the Administrator
- Have your tuition account current.
- Notify Administrator in writing of any changes to your child's enrollment status or intention to withdraw from the CDC.

### 8.3 Custodial and Non-Custodial Parents

If parents are experiencing difficult situations such as a divorce, separation, or remarriage, the CDC Administration **cannot legally restrict** an authorized non-custodial parent from visiting the child, reviewing the child's records, or picking the child up unless the CDC Administration has been furnished with a legal court order directing otherwise. A copy of the court order will be retained in the child's file.

### 8.4 Conflict Resolution

- Always keep the lines of communication open. Advise your child's teacher or Administrators if there is something going on in your child's life that may be affecting behavior.
- Discuss concerns or issues when they first arise. Putting off a discussion may be harder to discuss at a later time.
- Do not confront CDC staff members in front of other parents or children. Instead, request to set up a time to speak to the individual privately, in person, over the phone or in the Administrator's office.
- Be specific and provide examples about your concerns or things that have happened or that you have observed.
- Conflicts can usually be resolved if individuals involved remain calm and in control of their emotions.