

Air Force (AF) Child Development Center (CDC) Criteria
20th Year Inspection
Revised as of Jan 11

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

CDC criteria are based on the following:

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

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

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

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facilitate positive peer interaction for Toddlers/Twos, Preschoolers, and Kindergartners, who are socially reserved or withdrawn and for those who are bullied or excluded.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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

C220 Staff do not offer children younger than 4 years these foods: hot dogs, whole or sliced into rounds; whole grapes; nuts; popcorn; raw peas and hard pretzels; spoonfuls of peanut butter; or chunks of raw carrots or meat larger than can be swallowed whole. Staff cut foods into pieces no larger than ¼" squares for Infants and ½" squares for Toddlers/Twos, according to each child's chewing and swallowing capability. (NAEYC 5.B.14)

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

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

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

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

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

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

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

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

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

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

Air Force (AF) Family Child Care (FCC) Criteria
20th Year Inspection
Revised as of Jan 11

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

FCC criteria are based on the following:

- AF Policy 2009/10 Recommended Immunization Schedules for Child and Youth Programs, 20 Oct 09
- AF Policy on FCC Developmental Training Model (DTM) and Standardization
- AF Policy on FCC Subsidy
- *AF Policy on Sudden Infant Death Syndrome (SIDS) Prevention for AF CDC and FCC Programs, 5 Jan 09*
- Headquarters Air Force Civil Engineering Support Agency (HQ AFCESA) Inspection Guide for AF FCC Homes
- The National Fire Protection Association (NFPA) 101, Life Safety Code
- The National Association for Family Child Care (NAFCC), *Quality Standards for NAFCC Accreditation*
- United States Department of Agriculture Child and Adult Care Food Program (USDA CACFP) Guidelines

Changes/Additions to the 20th Year FCC Criteria are indicated by italicized red font

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

- F1A There is a Parent Advisory Board (PAB) consisting only of parents, that in part, or in total, is for the FCC Program. Parents have been informed of the opportunity to serve on the PAB and to attend PAB meetings. Written notices of PAB meeting times and dates have been given to all FCC Providers to hand-out to parents. Parents from all FCC homes, including parents who use any of the specialty FCC Programs, are invited. The PAB acts only in an advisory capacity, providing recommendations for improving services. The chairperson of the PAB is a parent. The PAB meets with the Flight Chief and FCC Program staff at least quarterly and with the Mission Support Group Commander (MSG/CC) or designee at least annually. The minutes of the PAB meetings are emailed/forwarded to the MSG/CC or designee.
- F3 Parents are informed about parent education activities offered by the Airman & Family Readiness Center (A&FRC), Family Advocacy Office (FAO), and other installation agencies.
- F4 At least two events are held each year to which parents using FCC are invited. At least annually, the FCC Program offers or co-sponsors a parent education activity for parents using FCC.
- F5 There is a quarterly parent newsletter for parents using FCC.
- F6 Newly enrolled parents are provided folders of parent education materials that are prepared and distributed to each provider. At a minimum, the folders should include information on: FCC, the local FCC Program, and child abuse prevention and reporting.
- F7 Copies of parent education information including reading lists, books, brochures, articles, videos, and tapes are on display in the FCC Office where they can be picked up, taken, and read/viewed by parents.

- F8 There is an exterior sign at the FCC Program that informs the installation population of the location of the program.
- F9 The FCC Program is open at least 1 hour per day to provide assistance to parents. There is a means by which parents are informed about the hours of operation.
- F10 The FCC Program has an answering machine to provide information to parents and providers when the FCC office is closed.
- F11 The FCC Program has a way (notebook, video, folder, etc.) of making more detailed information about the FCC Providers available to parents; such information is only provided with the FCC Provider's consent.
- F12 Parents requesting care complete DD Form 2606, *DoD Child Development Program Request for Care Record*, if care is not immediately available in an FCC Licensed/Affiliated home. Parents with a child on the FCC waiting list are contacted at least every 2 months or as spaces become available. The DD Form 2606 is documented each time contact is made with the parent.
- F13 The FCC staff work with the CDC and School-Age (SA) Program who have parents on the waiting list to let them know when space becomes available in FCC.
- F14 The parents on the CDC waiting list have been surveyed during the last 12 months to find out if they are interested in using FCC, and if not, why not.
- F15 Parents using FCC have been surveyed in the last 12 months to determine their level of satisfaction with the care provided. The FCC Form 25, *AF FCC Parent Survey* is used. The results are compiled and kept on file.
- F16 *The Annual Unannounced Multidisciplinary Team Inspection (MTI), required by the Military Child Care Act, of the FCC Program Administration and at least 10%, but no fewer than 2 homes, has been conducted within the last 12 months. The MTI includes an expert in each of the following areas: child abuse protection, staffing, and a parent representative who has a child enrolled in the FCC Program. The results of the Annual Unannounced Higher Headquarters and Comprehensive Fire, Health, and Safety Inspections are reviewed as part of the MTI and the review is documented. The results are provided to the program staff in a timely manner – preferably within 1 month.*
- F17 Appropriated Funding (APF) is provided to operate the program. FCC Providers are not charged for applying for a license, training, training materials, Cardiopulmonary Resuscitation (CPR) Certification, Pediatric First Aid Certification, licensing, background investigations, normal wear-and-tear on equipment, or lost equipment. If charges are imposed by other agencies or organizations for health and safety training or fulfilling other requirements related to becoming/remaining licensed or affiliated, use APF funding to pay for these fees.
- F18 Installation officials do not regulate the fees that FCC Providers charge for their services except for those FCC Providers who have parents participating in the AF FCC Subsidy Program. AF FCC Subsidy rates are based on the DoD fee ranges, are not annualized, and are changed no more than once per year. (AF FCC Subsidy)
- F19 The DD Form 2652, *Application for Department of Defense Child Care Fees*, is completed in its entirety for families participating in the AF FCC Subsidy Program. All financial documentation to determine Total Family Income (TFI) is kept on file. Ensure TFI recalculations coincide with the CDC and SA Programs. (AF FCC Subsidy)
- F20 Quarterly, the FCC Program notifies all installation housing residents of the requirement for those providing child care on a regular basis (more than 10 hours per week) to be licensed.

- F21 The FCC Program has written procedures for following up on reports of unlicensed care. The procedures have been coordinated with other installation agencies that may be involved, such as the Housing Office, Security Forces, etc.
- F22 An unannounced visit to individuals, who are not licensed and suspected of providing child care on a regular basis (more than 10 hours per week), is made by the FCC Coordinator, accompanied by either the Flight Chief, Squadron Commander/Director or Security Forces. The individual is provided with a written request asking them to complete the licensing procedures and to cease providing care until they become licensed.
- F23 The FCC Program has notified installation agencies that individuals who have not been approved AF FCC Providers should not be permitted to advertise or post notices in installation publications and/or bulletin boards.
- F24 There is a current written FCC Marketing Plan and there is evidence that it is being implemented.
- F25 The FCC Program has a local brochure or an insert for the AF brochure to recruit providers living on the installation and to encourage affiliation of providers living off the installation. The brochure/insert describes the requirements and advantages for becoming a Licensed/Affiliated FCC Provider.
- F26 The installation website and/or television channel is used to recruit new FCC Providers and to inform parents about the FCC Program.
- F27 There is evidence that the FCC Program recruits providers to provide care for the Expanded Child Care Programs. These individuals are given priority for licensing/affiliation, if there is a waiting list for training and approval.
- F28 There is evidence that the FCC Program recruits providers to care for children with special needs including children with asthma, allergies, cerebral palsy, physical impairments, etc.
- F29 If the installation has fewer FCC homes than needed, the program has a written remediation plan in effect to increase the number of FCC homes. (FCC Standardization)
- F30 If there is a need for additional FCC homes, the FCC Program has implemented a program to affiliate providers.
- F31 The FCC Program has a brochure for parents describing the FCC Program and the advantages of using FCC.
- F32 Written materials or briefings about FCC are provided to parents who are new to the installation.
- F33 The brochures/inserts about the FCC Program provide information on applicable AF initiatives including:
- Extended Duty Care (EDC)
 - Missile Care Program (MCP)
 - Returning Home Care (RHC)
 - AF Subsidy Program
 - Child Care for Permanent Change of Station (PCS)
 - Child Care for Volunteers
 - Air National Guard (ANG)/Air Force Reserve (AFR) Home Community Care
 - Military Child Care in Your Neighborhood (MCCIYN)
 - Operation Military Child Care (OMCC)
- F34 If the FCC Program does not participate in the Air Force Aid Society FCC for Volunteers and PCS Programs, there is a written statement on file signed by the Chief, A&FRC stating that FCC for Volunteers and PCS is not required or the need is met in other ways.

- F35 The *FCC Monthly Listing* is used. FCC Providers, who do not have current vacancies, may be excluded from the list. Outdated lists are disposed of when new monthly lists are provided. (FCC Standardization)
- F36 An updated list of all currently Licensed/Affiliated FCC Providers is provided each month to the following individuals/organizations:
- Squadron Commanders
 - First Sergeants
 - A&FRC
 - Civilian Personnel Office
 - Non-Appropriated Funds (NAF) Human Resource Office
 - Housing Office
 - Security Forces
 - FAO
 - Lodging
 - Presidents of the Spouses' Clubs
 - Other appropriate installation offices
- F37 The current list of Licensed/Affiliated FCC Providers is available to parents and posted in each CDC, SA Program, Youth Programs Facility, Community Center, Housing Office, A&FRC and outside the FCC Program Office.
- F39 The FCC Program has a map showing the location of each licensed/affiliated provider and copies are available for parents.
- F40A The AF FCC Licensed/Affiliated Sign is displayed on the front door or window of all licensed/affiliated FCC homes.
- F42 Publicity materials contain a statement about the FCC Program's acceptance of children, employment of staff, and approval of FCC Providers with chronic health problems.
- F43 The FCC Panel has been appointed by the MSG/CC. The FCC Panel includes the following members: Deputy MSG Commander or equivalent (Chair), Squadron Commander/Director or their Deputy, and the Flight Chief or equivalent (Recorder). The FCC Coordinator(s) and the Training and Curriculum (T&C) Specialist(s) attend the FCC Panel meetings in a non-voting capacity.
- F44 A representative from each of the following offices has been appointed by the MSG/CC to assist the FCC Panel when needed: the Legal Office, FAO, Safety, Fire, Mental Health, the Program Medical Advisor, Security Forces, and Public Health.
- F45 The FCC Panel convenes at least quarterly or when:
- One or more individuals are ready for review of licensing/affiliation or relicensing/reaffiliation
 - There is a complaint against an FCC Provider
 - There is an allegation of child abuse or neglect involving an FCC Provider
 - An FCC Provider fails to correct significant deficiencies identified in the monthly visit
 - An FCC Provider fails to make satisfactory progress towards completing the required training
- F47 Semi-annually, the FCC Panel determines whether or not there is a need for additional FCC homes and the type of care needed.
- F48 The FCC Panel reviews individuals' applications and supporting documents for initial licensing/affiliation, relicensing/reaffiliation, including results of home inspections, screenings, interviews, recommendations, etc. and recommends approval or disapproval for initial licensing/affiliation and relicensing/reaffiliation to the MSG/CC.

- F49 The FCC Panel determines the number of children that each provider may care for at one time, limited to no more than 6 children including the provider's own children under the age of 8 years, and no more than 2 children under 2 years of age. A provider may not care for more than two children or adults at one time who are not able to evacuate themselves from the home; this includes older children and adult household members of the provider. The FCC Panel uses the following factors to determine the number of children that each provider may care for:
- Number and ages of the provider's household members
 - Any special needs of the provider's household members
 - Home schooling of the provider's household members
 - Additional employment of the provider
 - The provider's education/experience
 - Usable play space (35 square feet per child) in each home so that each child can play, rest, and eat
 - Number of children the provider's insurance policy permits (FCC Standardization)
- F50 The FCC Panel reevaluates the number of children that each provider may care for at the request of the FCC staff and/or the provider. If the FCC Panel determines a new number to license/affiliate the provider for, Page 2 of FCC Form 3, *AF FCC Approval Record*, is completed and a new license/affiliation certificate is issued. (FCC Standardization)
- F51 The FCC Panel does not make recommendations to license/affiliate individuals as FCC Providers or Substitutes if they have had their FCC License/Affiliation revoked on another military installation, or in a county, state, or country. NOTE: A license/affiliation certificate may be issued if there is evidence to suggest the reason the license/affiliation was revoked would not be a factor in the operation of an FCC home in the future.
- F52 The FCC Panel does not make recommendations to license/affiliate individuals as FCC Providers or Substitutes if they or any of their household members have been convicted of child abuse or neglect, a criminal act involving violence, or other acts which would make them unsuitable to care for children.
- F53 The FCC Panel does not make recommendations to license/affiliate individuals as FCC Providers or Substitutes if they or any of their household members have a history of domestic violence or mental or physical illness that would suggest they are not suitable to care for children.
- F54 The FCC Panel does not make recommendations to license/affiliate individuals as FCC Providers or Substitutes, if they or any of their household members have been the perpetrator in a substantiated case of child abuse or neglect.
- F55 The FCC Panel approves the FCC Marketing Plan.
- F56 Quarterly, the FCC Panel reviews the results of the home visits for non-compliance with AF requirements and recommends which providers should be given written warnings and have their license/affiliation suspended or revoked.
- F57 The FCC Panel recommends to the MSG/CC the providers whose licenses/affiliations should be suspended or revoked for any reason
- F58 The FCC Panel reviews the results of the Annual Unannounced Higher Headquarters Inspection of the homes and FCC Administration and ensures corrective actions were accomplished
- F59 The FCC Panel reviews the results of the Annual Unannounced Comprehensive Fire, Safety, and Health Inspections of the homes and ensures corrective actions were accomplished. (FCC Standardization)
- F60 The FCC Panel reviews the results of the Annual Unannounced MTI of the homes and FCC Administration and ensures corrective actions were accomplished. (FCC Standardization)
- F61 The FCC Panel reviews the results of the annual survey of parent satisfaction with FCC.
- F62 Quarterly, the FCC Panel reviews each provider's training status.
- F64 Quarterly, the FCC Panel reviews a list of when each provider's insurance expires. (FCC Standardization)
- F65 The FCC Panel selects the FCC Provider of the Year. (FCC Standardization)

- F66 The MSG/CC suspends the licenses/affiliations of FCC Providers who:
- Violate the guidance policy
 - Are under investigation for child abuse or neglect
 - Have a household member under investigation for child abuse or neglect
 - Are under investigation for a criminal act
 - Have a household member under investigation for a criminal act
 - Have life-threatening deficiencies in their homes
 - Have not corrected deficiencies identified in monthly home visits
 - Have a long-term communicable illness that could affect the health of children
 - Are experiencing extreme stress
- F67 The MSG/CC revokes the licenses/affiliations of FCC Providers who:
- Have committed substantiated child abuse or neglect
 - Have a household member who has committed substantiated child abuse or neglect
 - Have been found to have a history of substantiated child abuse or neglect
 - Exhibit a pattern of using inappropriate guidance techniques
 - Exhibit a pattern of non-compliance with AF requirements for FCC homes
 - Have committed a criminal act that impacts their ability to provide in-home care
 - Have a household member who has committed a criminal act that impacts the provider's ability to provide in-home care
 - Do not correct life-threatening deficiencies in their homes
- F68 When an FCC Provider's License/Affiliation is suspended or revoked, the FCC staff help parents find another source of care.
- F69 A binder or 6-part folder is kept on each active and inactive FCC Provider. The FCC Provider Portfolio is arranged according to FCC Standardization of Provider Portfolios. (FCC Standardization)
- F70 The FCC Provider Portfolio is retained in accordance with AFMAN 37-139.
- F71 A copy of Tabs 1, 3 (current only), 4 (current only), 5, 8, and 9 of each FCC Provider's Portfolio is express-mailed to their new installation when there is a PCS. This is required whether or not the FCC Provider requests it. The FCC Program helps the receiving installation obtain completed previous Installation Records Check (IRC). (FCC Standardization)
- F72 A copy of each FCC Provider's insurance policy is on file; the copy of the insurance policy is in English. Each licensed/affiliated provider has at least \$300,000 personal liability insurance and the policy is current.
- F73 Each Licensed/Affiliated FCC Provider who transports children in their vehicles has current automobile liability insurance and a copy of the policy(ies) is on file.
- F74 Licensed/Affiliated FCC Providers' insurance policies are reviewed by the Legal Office for adequacy.
- F75 The FCC Program offers the providers information on potential sources for FCC insurance; information is provided on no less than three insurance carriers. The FCC Program avoids recommending any specific carrier.
- F76A An Annual Unannounced Comprehensive Fire, Safety, and Health Inspection of at least 10%, but no less than 2 FCC homes, has been conducted within the last 12 months by a Subject Matter Expert using the most current version of the *FCC Home Fire Prevention/Inspection Guide* provided by HQ AFCESA/AF *FCC Home Safety Inspection Tool/AF FCC Home Public Health Inspection Tool*. The inspection is signed and dated. Any deficiencies identified have been corrected within 14 days and remain corrected.
- F77A Prior to initial licensing/affiliation, a Fire Inspection of the home is conducted using the most current version of the *FCC Home Fire Prevention/Inspection Guide* provided by HQ AFCESA. If the home is located on the installation, the inspection is conducted by a Fire Specialist. If the home is located off the

installation, the inspection is conducted by the FCC Coordinator, who is task-certified or trained to conduct fire inspections.

- F79A Prior to relicensing/reaffiliation, a Fire Inspection of the home is conducted using the most current version of the *FCC Home Fire Prevention/Inspection Guide* provided by HQ AFCESA. If the home is located on the installation, the inspection is conducted by a Fire Specialist. If the home is located off the installation, the inspection is conducted by the FCC Coordinator, who is task-certified or trained to conduct fire inspections.
- F82A Prior to initial licensing/affiliation, a Safety Inspection of the home is conducted using FCC Form 32, *FCC Home Safety Inspection Tool*. If the home is located on or off the installation, the inspection is conducted by a person who is task-certified or trained. (FCC Standardization)
- F84 Prior to relicensing/reaffiliation, a Safety Inspection of the home, is conducted using FCC Form 32, *FCC Home Safety Inspection Tool*. If the home is located on or off the installation, the inspection is conducted by a person who is task-certified or trained. (FCC Standardization)
- F86A Prior to initial licensing or affiliation, a Health Inspection of the home, is conducted using FCC Form 33, *FCC Home Health Inspection Tool*. If the home is located on or off the installation, the inspection is conducted by a person who is task-certified or trained. (FCC Standardization)
- F88 Prior to relicensing/reaffiliation, a Health Inspection of the home, is conducted using FCC Form 33, *FCC Home Health Inspection Tool*. If the home is located on or off the installation, the inspection is conducted by a person who is task-certified or trained. (FCC Standardization)
- F89 Prior to initial licensing/affiliation, a Program Inspection of the home, is conducted using FCC Form 34, *FCC Home Program Inspection Tool*. If the home is located on or off the installation, the inspection is conducted by a person who is task-certified or trained. (FCC Standardization)
- F90 Prior to relicensing/reaffiliation, a Program Inspection of the home, is conducted using FCC Form 34, *FCC Home Program Inspection Tool*. If the home is located on or off the installation, the inspection is conducted by a person who is task-certified or trained. (FCC Standardization)
- F91 The FCC Coordinator makes monthly, unannounced visits to each licensed/affiliated home and quarterly, unannounced visits to each accredited home. (FCC Standardization)
- F92 The FCC Coordinator varies the hours of the day, days of the week, and days of the month when unannounced home visits are conducted.
- F93 For those providers offering evening and/or weekend care, the FCC Coordinator conducts at least two of the unannounced home visits during these hours.
- F94 The FCC Coordinator checks all areas of the home, both inside and outside, during the unannounced visit.
- F95 During the unannounced home visits, the FCC Coordinator verifies the provider's *Detailed Bi-Monthly Self-Assessment (DBMSA)* using FCC Form 31, *AF FCC Home Verification of Detailed Bi-Monthly Self Assessment*. (FCC Standardization)
- F96 During the unannounced home visits, the FCC Coordinator conducts an observation and debriefs the provider within 5 days of the observation. (FCC Standardization)
- F97 A letter is sent to each FCC Provider from the Flight Chief with repeat/recurring deficiencies notifying him or her of the deficiencies and the deadline for correcting them.
- F98 If a deficiency is observed for a third time, the provider's records are reviewed by the FCC Panel and a recommendation for retraining, suspension, or revocation is made.

- F99 If life-threatening deficiencies are identified in any home visit/inspection, the deficiencies have been corrected immediately or the FCC Panel recommends that the MSG/CC close the home. Children are not left in a life-threatening situation.
- F100 There is evidence that the Flight Chief is monitoring the home visits and ensures thorough and accurate observations are being conducted.
- F101 If the FCC Coordinator is consistently failing to identify deficiencies during the FCC home visits, retraining and appropriate disciplinary actions are taken.
- F102 The FCC Resource Center is divided and labeled into the following sections:
- Health/Sanitation
 - Safety
 - Fire
 - Food and Nutrition
 - Business Operations
 - Training Materials
- Materials for the areas listed below are divided into the following applicable age groups: Infants, Toddlers, Preschool, Younger School-Age (6-9 years) and Older School-Age (10-14 years)
- Homework Materials
 - Small Outdoor Play
 - Large Outdoor Play
 - Multicultural Materials
 - Science/Mathematics
 - Music
 - Reading/Literacy
 - Manipulatives
 - Games
 - Dramatic Play
 - Arts/Crafts Supplies
 - Other
- F103 The Resource Center maintains materials and books to help FCC Providers offering care for children with special needs.
- F104 There is adequate space available for the FCC Resource Center. There is enough shelving in the FCC Resource Center to display the required items with the exception of large equipment. If there is not enough space to display at least one of each of the types of large equipment, a full-page, 8" x 11" photo/picture, is available.
- F105 There is a picture catalog describing all the items in the FCC Resource Center. For each item, there is a description including the ages for which it is appropriate and its intended use or areas of development that would be promoted by playing with the item.
- F106 The FCC Office maintains a computerized inventory of all non-consumable items in the FCC Resource Center. The list includes the original purchase price of each item.
- F107 Each non-consumable item in the FCC Resource Center is numbered and labeled in some way related to the inventory.
- F108 Each FCC Provider receives a list of all items checked out and their value, each time they check out a new item.

- F109 The FCC Office delivers large equipment to the FCC Providers' homes when requested.
- F110 The FCC Resource Center is open ~~at least 1 hour per day or 5 hours per week~~, at least 2 hours after 1800 hours each month, and at least 2 hours during a weekend each month.
- F111 The program serves as the sponsor for the USDA CACFP where it is available and sponsorship is not prohibited by state policies. If the program is not serving as the USDA CACFP sponsor, seek a waiver from Headquarters USAF Airman and Family Services (HQ USAF/A1SA) explaining the reasons why the FCC Program cannot serve as the sponsor.
- F112 The program requires all providers to serve meals and snacks that meet the USDA CACFP and AF requirements. The program requires all providers to submit their menus prior to the start of the month and they are reviewed for compliance.
- F113 At least quarterly, the program informs providers who are not enrolled in the USDA CACFP, that the program is available.
- F114 The Child Abuse/Neglect and Safety Violations in DoD Child/Youth Programs sign is posted on the parent board in each FCC home and in each FCC office(s).
- F115 *The FCC Coordinator reports all suspected cases of inappropriate guidance and child abuse and neglect telephonically and in writing, using the AF Child and Youth (CYP) Reportable Incidents Report, to the Flight Chief, FAO (or other locally determined action officer), Squadron Commander/Director, Major Command (MAJCOM) Specialist, HQ AFSVA SVPY, and HQ USAF AISA within 24 hours of occurrence.*
- F116 *All FCC staff and Providers read the guidance policy and sign a written statement of understanding.*
- F117A An IRC has been completed on all FCC Program staff. The IRC consists of a records check of all installations on which the individual has lived or worked for 2 years before the date of the application. The IRC includes a file check of Security Forces Management Information System (SFMIS), Family Advocacy's AF Central Registry (which includes all drug and alcohol program files, medical treatment facility files, mental health, and life skills files) and Family Housing. A check of SFMIS and Family Advocacy's AF Central Registry will satisfy the requirement for IRCs from current and former installations. Results are maintained in the employee work folder.
- F117B The Dru Sjodin National Sex Offender Registry Check has been completed prior to employment. NOTE: Applicable for those hired after October 2008. (CY Pay Plan Program Guidance, Oct 08)
- F118 A State Criminal History Repository Check (SCHRC) has been completed from all states that each FCC Program staff has lived in during the last 5 years. NOTE: Only required if a completed National Agency Check (NAC) or National Agency Check with Inquires (NACI) is not on file. Results are maintained in the employee work folder.
- F119 A NAC or NACI has been requested for each individual FCC Program staff member. NOTE: As of 21 May 08, **all newly** hired employees must have a NACI. An FBI fingerprint check has been requested for each Contract Worker. An individual with a Secret Clearance meets the requirement of a NAC or NACI but does not meet the SCHRC requirement. If the results of the NAC, NACI, or FBI fingerprint check were not completed and adjudicated, follow-up action has been conducted and documented every 6 months, until the checks are completed and adjudicated. Results are maintained in the employee work folder.
- F120 Record reverification of the IRC and Defense Central Index of Investigations (DCII) has been completed for all FCC Program staff every 5 years. Results are maintained in the employee work folder.

- F121 All FCC Program staff have signed a statement indicating whether or not they have been arrested or convicted of any crime involving children, drugs, or alcohol.
- F122 All FCC Program staff have a current physical examination (initial and every 3 years) and recommended immunizations.
- F123 FCC Form 1, *FCC License/Affiliation Application*, is used to obtain information from individuals interested in becoming a licensed/affiliated or substitute provider. (FCC Standardization)
- F124 Processing of applications for new licensed/affiliated or substitute providers begins within 15 days of the FCC Office receiving the application.
- F125 Each applicant to become a licensed/affiliated provider is at least 18 years of age, has the ability to read, speak, and write English, is physically and mentally capable of providing care, is willing and able to complete the training required of FCC Providers, is willing to agree in writing to the requirements for FCC Providers, and is able to obtain the required insurance coverage. NOTE: Active duty members are prohibited from being licensed/affiliated providers.
- F126 Each applicant to become a substitute provider is at least 18 years of age, has the ability to read, speak, and write English, is physically and mentally capable of providing care, has completed New Provider Orientation (NPO), is willing to serve as a substitute for more than 1 FCC Provider, and is covered by the provider's insurance policy or has their own insurance policy.
- F127 Individuals are not permitted to provide care until they are licensed.
- F128 Prior to being recommended for approval of an FCC License/Affiliation, FCC Form 5, *AF FCC Background Investigations*, is completed by the active duty member's supervisor or commander stating that he/she has no information about the active duty member which would suggest that the individual's spouse should not be licensed/affiliated to provide child care in their home. The results are recorded on FCC Form 3, *AF FCC Approval Record*. (FCC Standardization)
- F129 Prior to being recommended for approval of an FCC License/Affiliation, FCC Form 9, *AF FCC Statement of Conviction*, is signed by the applicant and all household members 12 years and older. (FCC Standardization)
- F130 Prior to being recommended for approval as an FCC Substitute Provider, FCC Form 9, *AF FCC Statement of Conviction*, is signed by the substitute applicant. (FCC Standardization)
- F131 Prior to being recommended for approval of an FCC License/Affiliation, an IRC has been completed on each applicant and their household members, ages 12 years and older, using FCC Form 5, *AF FCC Background Investigations*. The IRC consists of a records check of all installations on which the individual has lived or worked for 2 years before the date of the application. The IRC includes a file check of SFMIS, Family Advocacy's AF Central Registry (which includes all drug and alcohol program files, medical treatment facility files, mental health, and life skills files) and Family Housing. A check of SFMIS and Family Advocacy's AF Central Registry will satisfy the requirement for IRCs from current and former installations. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F132 Prior to being recommended for approval as an FCC Substitute Provider, an IRC has been completed on each applicant, using FCC Form 5, *AF FCC Background Investigations*. The IRC consists of a records check of all installations on which the individual has lived or worked for 2 years before the date of the application. The IRC includes a file check of SFMIS, Family Advocacy's AF Central Registry (which includes all drug and alcohol program files, medical treatment facility files, mental health, and life skills files) and Family Housing. A check of SFMIS and Family Advocacy's AF Central Registry will satisfy

- the requirement for IRCs from current and former installations. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F133 An IRC is conducted annually on each FCC Provider and their household members, ages 12 years and older, using FCC Form 5, *AF FCC Background Investigations*. NOTE: The IRC is conducted when a household member turns 12 years old. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F134 An IRC is conducted annually on each FCC Substitute Provider, using FCC Form 5, *AF FCC Background Investigations*. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F135 Prior to being recommended for approval of an FCC License/Affiliation, a DCII is conducted on each applicant and their household members, ages 18 years and older, using FCC Form 5, *AF FCC Background Investigations*. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F136 Prior to being recommended for approval as an FCC Substitute Provider, a DCII is conducted on each applicant, using FCC Form 5, *AF FCC Background Investigations*. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F137 The DCII is conducted every 5 years on each FCC Provider and their household members, ages 18 years and older, using FCC Form 5, *AF FCC Background Investigations*. NOTE: The DCII is conducted when a household member turns 18 years old. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F138 The DCII is conducted every 5 years on each FCC Substitute Provider, using FCC Form 5, *AF FCC Background Investigations*. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F139 Prior to being recommended for approval of an FCC License/Affiliation, a statement from each school, that the children, ages 12 years and older in the applicant's household attend, using FCC Form 5, *AF FCC Background Investigations*, stating that the school knows of no reason why the applicant should not be approved to provide child care in their home. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F140 The School Statement is conducted annually on each child(ren) in the provider's household, ages 12 years and older, using FCC Form 5, *AF FCC Background Investigations*. NOTE: The School Statement is conducted when a household member turns 12 years old. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F141 An IRC and School Statement (if applicable) are conducted on any new household members, ages 12 years and older and a DCII is conducted on any new household member, ages 18 years and older who remain in the household for more than 30 days, using FCC Form 5, *AF FCC Background Investigations*. Results are maintained in the provider's portfolio and annotated on FCC Form 3, *AF FCC Approval Record*.
- F142 Prior to being recommended for approval of an FCC License/Affiliation, the applicant and all household members are interviewed using the FCC Form 7, *FCC Family Interview*. (FCC Standardization)
- F143 Prior to being recommended for licensing/affiliation or as a substitute provider, two professional or educational references on each applicant are on file using FCC Form 6, *Reference Checks*. (FCC Standardization)

- F144 Licensed/Affiliated and Substitute Providers have a health assessment, initially and every 2 years, and recommended immunizations. The ***FCC Form 8, Provider's Health Assessment*** is required. The FCC Form 11, *Provider's Immunizations* or a copy of the provider's shot records inclusive of all required immunizations listed on FCC Form 11 is required. (FCC Standardization)
- F145 Licensed/Affiliated Provider's household members have the recommended immunizations. The FCC Form 12, *Household Members over 18 years of Age Immunizations*, AF Form 1181, or a copy of their shot records inclusive of all required immunizations listed on FCC Form 12 is required. (FCC Standardization)
- F146 All licensed/affiliated and substitute providers have signed FCC Form 20, *FCC Provider Agreement*. (FCC Standardization)
- F147 All Licensed/Affiliated FCC Providers meet all local, state, county, country, and AF requirements prior to licensing/affiliation.
- F148 Each Licensed FCC Provider has a current FCC Form 4A, *FCC License*. (FCC Standardization)
- F149A An FCC License/Affiliation Certificate is not issued until the MSG/CC has signed the FCC Form 3, *AF FCC Approval Record*. The date on the FCC Form 3 is not later than the date on the license/affiliation certificate. (FCC Standardization)
- F150 Each Affiliated FCC Provider has a current FCC Form 4B, *FCC Affiliation Certificate*. (FCC Standardization)
- F152 A License/Affiliation Certificate is not issued until the applicant provides evidence that the effective date on the required liability insurance is before or on the date they begin providing care.
- F153 A License/Affiliation Certificate is valid for 12 months. (FCC Standardization)
- F154 FCC Providers licensed/affiliated on another installation within the last 12 months are permitted to become relicensed/reaffiliated after a review of their file from their last installation, inspections of their home, proof of insurance, and approval of the MSG/CC.
- F155 Licensed/Affiliated FCC Providers who move from one residence to another are relicensed/reaffiliated as soon as inspections of their new home are complete, they show proof that their insurance has been transferred to their new residence, and approval of the MSG/CC. Page 2 of FCC Form 3 must be completed. (FCC Standardization)
- F156 Licensed/Affiliated FCC Providers who have been on an inactive status for less than 3 months are permitted to return to active status after inspections of their home are completed.
- F157 Employ at least 1 APF FCC Coordinator for every 30 FCC homes approved or in training to ensure oversight of each home.
- F158 If any FCC Coordinator is responsible for fewer than 30 homes, he or she has been assigned other duties within the Flight. ***Note: The additional duties must align with the responsibilities and level of work of a 1701 series position.***
- F159 The Flight T&C(s) assist the FCC Program based on the number of children served in the CDC(s), SA Program, and FCC.
- F160 All training is documented on the AF Form 1098, *Special Task Certification and Recurring Training*. All FCC Program staff and FCC Providers start an annual AF Form 1098 in January. (FCC Standardization)
- F161 FCC Program staff receive at least 12 hours of annual training.
- F162 Prior to being recommended for approval of an FCC License/Affiliation or as an FCC Substitute Provider, applicants are required to complete at least 24 hours but no more than 36 hours of NPO

training, including FCC Module #3, *Environments*, Pediatric First Aid, CPR*, Regulations/Policies, Business Operations (Family Relations), Health, Food Service Training, USDA CACFP Guidelines, Safety, AF Infant Safe Sleep Practices, Child Abuse, Appropriate Guidance, and Fire.
(FCC Standardization) *CPR - must be certified for ages 2 weeks - 12 years

- F163 All licensed/affiliated/substitute providers are making satisfactory progress toward completing the required FCC Training Modules, at least one module for every month licensed/affiliated until all modules are completed.
- F164 Licensed/Affiliated/Substitute providers, who are more than 1 month behind in completing an FCC Training Module, have been notified in writing that their licenses/affiliations will be suspended unless they become current within 30 days of notification.
- F165 Licensed/Affiliated/Substitute providers, who are more than 3 months behind in completing FCC Training Modules, have their licenses/affiliations revoked.
- F166 Each Licensed/Affiliated FCC Provider participates in at least 24 hours of annual training per year.
NOTE: At all times, each provider must remain current in Pediatric First Aid and CPR Certification for ages 2 weeks to 12 years.
At a minimum, this training includes:
- Child Abuse
 - Appropriate Guidance
 - Child Development/Activity Planning
 - USDA CACFP Guidelines
 - AF Infant Safe Sleep Practices
- F167 All licensed/affiliated FCC Providers providing care for children with special needs have received training on how to provide care for the specific needs of the children and this training is recorded on their AF Form 1098.
- F168 FCC Coordinators/T&Cs/APF Contractors:
- Prepare training materials
 - Conduct monthly and/or quarterly training sessions
 - Conduct in-home training
 - Conduct module training, observations and assessments
 - Conduct pre-licensing/affiliation and other training
 - Prepare curriculum guides and other materials
 - Train FCC Providers on how to conduct developmentally appropriate activities
 - Help FCC Providers use appropriate guidance
 - Provide support for FCC Providers interested in accreditation
 - Conduct training for FCC Providers interested in obtaining their Child Development Associate Credential for FCC settings.
- F169 The USDA CACFP Sponsorship Reimbursement covers personnel costs, provider reimbursements, and other expenses associated with the administration of this program.
- F170 All non-life-threatening deficiencies identified in any inspections required by the Military Child Care Act have been corrected within 90 days and remain corrected or a waiver is on file from the Assistant Secretary of the Air Force Manpower and Reserve Affairs (SAF/MR). All non-life-threatening deficiencies identified during the visits to the homes have been corrected within 14 days and remain corrected. All life-threatening deficiencies are corrected immediately.

Air Force (AF) School-Age (SA) Program
20th Year Inspection –Criteria
Revised as of Jan 11

The AF SA Criteria may be obtained on the Headquarters AF Services (AFSVA) Community of Practice. AF SA Programs are responsible for compliance with all AF SA Program Criteria. In case of a conflict between the source documents listed below, the most recent version of the AF SA Criteria is used as AF policy until the next update of the AF Instruction governing this program.

SA Criteria are based on the following:

- AF Policy on the Developmental Training Model (DTM) and Standardization
- AF Policy Child Development Center (CDC), SA, Youth Programs (YP) Drinking Water, 3 Oct 05
- AF Policy Cleaning Standards for CDC, YP, and SA Program
- AF Policy 2009/10 Recommended Immunization Schedules for Child and Youth Programs, 20 Oct 09
- Council on Accreditation (COA)
- Child and Youth (CY) Pay System Program Guidance, Oct 08
- Headquarters (HQ) AF Civil Engineering Support Agency (HQ AFCESA) Inspection Guide AF Youth Programs Facilities
- National Fire Protection Association (NFPA) 101, Life Safety Code
- United States Department of Agriculture Child and Adult Care Food Program (USDA CACFP) Guidelines
- Caring For Our Children - Second Edition

Changes/Additions to the 20th Year SA Criteria are indicated by italicized red font

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

- S1A Staff relate to all youth in positive ways by treating them with respect and listening to what they say. Staff make youth feel welcome, comfortable and respond with acceptance and appreciation.
- S6A Staff respond appropriately to the individual needs of youth, knowing that each youth has special interest and talents. Staff are able to recognize the range of youth's abilities and respond to youth's feelings and temperaments. Staff relate to a youth's culture and home language.
- S11A Staff encourage youth to make choices and to become more responsible. Staff offer assistance in a way that supports a youth's initiative, assist without taking control and encourage youth to take leadership roles. Staff give youth chances to choose what they will do, how they will do it, and with whom. Staff help youth make informed and responsible choices.
- S16A Staff interact with youth to help them learn. Staff ask questions that encourage youth to think for themselves, share skills and resources to help youth gain information and solve problems. Staff vary approaches they use and help youth use language skills through frequent conversations.
- S21A Staff use positive techniques to guide the behavior of youth. Staff set appropriate limits for youth and give attention when they cooperate, share, care for materials or join activities. Staff encourage youth to resolve their own conflicts, step in only if needed to discuss the issues and do not use harsh discipline methods.

- S26A Youth generally interact with one another in positive ways. Youth appear relaxed and involved with each other. Youth show respect, cooperate and work well together. Youth try to discuss their differences and work out a solution.
- S26B Staff strive to eliminate negative or unsafe peer interactions such as teasing, bullying, harassment, and relational aggression.
- S31A Staff and families interact with each other in positive ways. Staff make families feel welcome and comfortable by sharing the language and cultures of the families they serve, and the communities they live in. Staff and families work well together to make arrivals and departures between home and the program go smoothly.
- S36A Staff work well together to meet the needs of youth. Staff communicate to ensure the program flows smoothly and are cooperative with each other. Staff are respectful of each other and model positive adult relationships.
- S41 Devices such as intercoms, two-way radios, and cordless phones are used to make communication possible between different areas within the program.
- S42 Staff keep the information about youth's special health needs confidential sharing it only with those with a need to know it.
- S43A Program materials are well organized. The space is arranged so that various activities can go on at the same time without much disruption. There is adequate space and convenient storage for the equipment, materials and personal possessions of youth and staff. Program space meets the requirements for square footage as directed in the Design Guide for School-Age in Youth Programs.
- S44 The décor portrays people from different ethnic and racial backgrounds engaged in a variety of roles.
- S46 The heat ventilation, noise level, and light in the indoor space are comfortable. The building temperature is maintained between 68°F and 82°F.
- S47A Youth can get materials out and put them away by themselves with ease. The indoor space reflects the work and interests of the youth currently in the program. Displays feature youth's artwork and other pictures of interest to them. Some areas have soft, comfortable furniture on which youth can relax.
- S48 The furnishings and supplies within the environment are appropriately sized for youth enrolled in the program.
- S51A Materials are complete and in good repair. There are enough materials for the number of youth in the program and to support program activities. Materials are developmentally appropriate for the age range of youth in the program.
- S54A There are costumes, puppets, and props on hand for dramatic arts. The program has a wide variety of art mediums and craft materials. There are math games and materials to explore.
- S59 Permanent playground equipment is suitable for the sizes and abilities of all youth. Older youth have access to more challenging equipment. Younger youth can reach most of the climbing structures.
- S60 There is shade available in areas used for outdoor play or the amount of outdoor play during hot weather is restricted by the program medical advisor.
- S61 There is a hard surface for basketball, roller-skating and bike riding. There is a large field area. There is an open area where youth can run, jump and play. Fencing is provided when needed to ensure the safety of the youth.

- S62 Storage areas indoors/outdoors are kept open so that youth may select play equipment. Outdoor games and sports equipment are stored close to the play space or are easily accessible. Staff rarely has to carry heavy equipment long distances or large amounts of materials for set-up and clean-up.
- S64 The standardized School-Age (SA) Program activity plans are completed for each room/area each week the program is in session. The area(s) of development are identified and supported by the featured activity(ies). Written plans are based on the needs and interests of the youth. Written plans with clearly stated goals are available to staff and substitutes.
- S65 Page 2 of the standardized SA Activity Plan is used and posted to document specific weekly program areas (long-term projects, family involvement, visitors, clubs, community involvement/service, and field trips). (DTM)
- S66 The SA Activity Plans in use are current, posted and visible to parents, youth and staff. Staff record information about an activity's success on the SA Activity Plans so future staff can learn from past experiences.
- S67 Staff involve youth, families, and community members in planning activities, snack and special events. Staff invite youth to share recipes, songs, stories, and photos that represent their culture and experiences. Staff ask youth to help select new materials, supplies, and equipment.
- S69A The daily schedule is flexible, and it offers enough security, independence, and stimulation to meet the needs of all youth. The routine provides stability without being rigid. Youth meet their physical needs in a relaxed way, move smoothly from one activity to another, usually at their own pace. When it is necessary for youth to move as a group, the transition is smooth.
- S70A Youth can choose from a wide variety of activities. There are regular opportunities for creative arts, dramatic play and fine arts. There are regular opportunities for quiet activities and socializing.
- S82 Youth have a chance to join enrichment activities that promote basic skills and higher-level thinking.
- S70A State-of-the-art information technology is available to enhance programs, processes and productivity. Computers have Internet access with software needed to control access to undesirable sites. A sufficient number of computers are available to support ongoing programs.
- S71 Staff modify activities as needed so that all youth, including those with disabilities, can participate.
- S72 There are daily opportunities for active physical play. Each youth has a chance to play outdoors for at least 30 minutes out of every three-hour block of time at the program. Outdoor play can be offered as an open-ended choice, when weather permits.
- S73 Youth can use a variety of outdoor equipment; participate in a wide variety of activities and games for both active and quiet play.
- S74 Youth have a chance to attend educational outings and field trips.
- S75 Use of television, video viewing, and video games (if offered) is limited to appropriate choices and amount of time is limited for the age of the youth. Other play choices are offered.
- S76 Physical games and sports offer varying levels of challenge to suit the players.
- S83 There are opportunities to observe and care for plants and animals.
- S84 Youth have opportunities to create a newspaper, write plays, do homework, or use computers.
- S85 Youth are provided opportunities to participate in programming from Boys & Girls Club of America (BGCA) & 4-H.

- S86 Projects for younger youth can be completed within a week and projects for older youth may last eight to ten weeks.
- S87 Activities reflect the languages, cultures and interests of the youth served.
- S88 The program offers opportunities for youth, especially older youth, to do community service.
- S89 Activities are offered to help youth develop an appreciation for multicultural diversity, and develop their language abilities.
- S90 Activities are offered to promote youth's participation in recreational and leisure activities and develop an appreciation for the arts.
- S91 Youth have the opportunity to join installation or local groups (e.g., sports, drama, music) and interact with adult coaches and mentors.
- S92 Activities are offered to help youth be successful in school.
- S93 The Parent Advisory Board (PAB) meets at least quarterly with the Flight Chief, Youth Director and SA Coordinator. A staff member has been assigned to provide support to the PAB. Minutes of the PAB meetings are kept on file for 1 year.
- S94 The Flight Chief, Youth Director, and SA Coordinator involve staff, the PAB, families, installation agencies, the installation community, and youth in both long-term planning and daily decision-making. Parents, staff, and youth are involved in evaluating the program.
- S95 The program maintains accreditation by the NAA or the COA and maintains an active working group committed to program improvement. The team consists of program staff, parents, community educators and youth. The team maintains a current action plan. The team meets at least quarterly and documentation is kept on file.
- S96 The program asks parents at least annually if the hours of operation meet their needs. The results are compiled, analyzed and acted upon as required. The program makes a reasonable effort to provide service on school holidays.
- S97 The program has built links to the installation and civilian community. The staff has developed a list of community resources and uses this list to expand program offerings. The program maintains a parent library of relevant books and articles. There are bulletin boards and newsletters that contain information about community events and resources. When needed, staff are able to refer families to installation and local agencies for assistance.
- S98 The program coordinator or designee meets with school personnel to inform them about the program and offer cooperation.
- S99 Staff keep informed about ongoing curriculum, special school projects and events in which the youth may be involved.
- S100 Staff offer orientation sessions for new families.
- S101 The staff work with families and the schools as a team to set goals for each youth; they work with outside specialists, when necessary.
- S102 Staff encourage families to share their skills, hobbies, or family traditions, participate in special events and share recipes, songs, stories, and photos that represent their culture and experiences.
- S103 The program hosts visitors and special events from the installation and community.
- S106 Staff discuss any concerns they have about a youth's development with the family; when appropriate, youth are included in these discussions.

- S107 Staff do not talk about confidential matters in front of the youth or other adults.
- S108 Staff keep families informed and encourage families to give input and to become involved in the program. Staff regularly choose materials that reflect the language, music, stories, games, and crafts from various cultural traditions.
- S109 Staff use newsletters, phone calls, or other means to remind parents that they are welcome in the program.
- S110 Staff work closely with other adults to provide consistency for youth with behavior issues.
- S111 *The Annual Unannounced Multidisciplinary Team Inspection (MTI), required by the Military Child Care Act, of all facilities used by the SA has been conducted within the last 12 months. The MTI includes experts in each of the following areas: child abuse protection, staffing, and a parent representative who has a youth enrolled in the SA. The results of the Annual Unannounced Higher Headquarters and Comprehensive Fire, Health, and Safety Inspections are reviewed as part of the MTI and the review is documented. The results are provided to the program staff in a timely manner – preferably within 1 month.*
- S111B All non-life threatening deficiencies identified in any inspections required by the Military Child Care Act have been corrected within 90 days and remain corrected or a waiver is on file from the, SAF/MR. All life-threatening deficiencies are corrected immediately.
- S112 The current DoD Certificate, guidance policy and mission statement are posted in each facility.
- S113 The posted, written Mission Statement (philosophy) clarifies the purpose of the program and is consistent with the mission of the SA Program.
- S114 Each family is provided a current parent handbook or a copy of written policies, which include the program’s mission and philosophy and no-smoking in or near the facility policy. Written material is translated for families who do not speak or read the majority language.
- S116A *There are written operational instructions or policies on hours of operation; financial policies; reporting inappropriate guidance, suspected child abuse or neglect; transporting youth; guidance and discipline; emergency procedures; and medical/health. They have been updated and coordinated with applicable agencies.*
- S119 Youth with special needs are provided service when the program can reasonably accommodate their needs and their presence does not endanger the health and safety of other youth and the staff. No youth identified with a special need is denied service without approval from the program's Higher Headquarters.
- S120 Direct Appropriated Funds support is provided for personnel, equipment, supplies, where required. APF custodial support is provided during the hours of operation to ensure sanitation and cleanliness. At a minimum the AF Cleaning Standards Chart for CDC, YP and SA is followed.
(AF Cleaning Standard Chart for CDC, YP and SA)
- S121A The program fees are based on Total Family Income (TFI) and the annual DoD fee ranges and policies. No special fees are charged. Parents are charged to pay for the admission of their youth to entertainment events and may be charged for special instructional classes. (This restriction does not apply to the YPs annual registration fee). The established program fees are not changed more often than once per year. The fees include meals and snacks.
- S122 If transportation fees are charged, they are clearly defined separately from the DoD fee ranges.

- S123 No more than 10 percent of parent fees are used to support other Youth Programs or Service's programs.
- S125 There is a copy of a completed AF Form 1181, *Air Force Flight Program Patron Registration*, on file for each youth and it has been updated in the last 12 months. Emergency contacts have been authorized to pick up the youth. In block 27, parents have authorized participation in field trips by signing their full name.
- S126 Parents requesting care complete DD Form 2606, *DoD Child Development Program Request for Care Record*. Parents are provided information about available Family Child Care (FCC) Programs. If interested in using FCC, the DD Form 2606 is annotated. Parents with youth on the waiting list are contacted at least every 2 months to keep the waiting list up-to-date. The DD Form 2606 is documented each time contact is made with the parent.
- S127 The DD Form 2652, *Application for Department of Defense Child Care Fees*, is completed in its entirety as needed for families requesting a reduction in fees. All financial documentation to determine TFI is kept on file.
- S128 *A copy of the completed AF Form 357, Family Care Plan, (or other branch of Service equivalent) is on file for all youth whose parent(s) are single or dual military.*
- S129 AF Form 1187, *Youth Flight Accident Report*, is completed for any injury or accidents in the program. Injuries are recorded on AF Form 1023, *Youth Flight Record of Injuries*, within 24 hours of when they occur. Families are contacted immediately in the event of an emergency.
- S129B *Accidents/injuries which require medical attention, hospitalization, or death of a youth are recorded/reported on the AF Child and Youth Programs (CYP) Accident/Incident/Illness Report within 24 hours of the event to the Flight Chief, Squadron Commander/Director, MAJCOM Specialist, HQ AFSVA /SVPY, and HQ USAF/AISA.*
- S130 *Active duty and DoD civilian employed parents are given a higher priority for enrollment. Commanders may give single and dual military higher priority than other families. A policy has been established and implemented to terminate, within a reasonable time, the enrollment of youth in families where the spouse is no longer employed, actively seeking employment, or is no longer a full-time student, if there is a waiting list. Full-time students who are enrolled for a minimum of 12 semester hours during the school year and 6 semester hours during the summer or the equivalent quarter hours, parents who are self-employed, or who telecommute are considered employed.*
- S131 If there is a waiting list, a written plan for meeting the additional need has been developed and implemented. If the Program is not able to serve them, families are referred to the FCC Program. If FCC is unavailable, the Program refers families to AF sponsored Outreach/Subsidized Programs. The current monthly FCC Provider List is posted where it can be viewed by parents.
- S132 All SA facilities have been inspected by HQ AFCESA or an approved designee and are certified by HQ AFCESA as meeting the structural requirements of NFPA 101 Life Safety Code (current edition) and AF. Any deficiencies identified by HQ AFCESA or their designee have been corrected within 90 days and remain corrected or a waiver is on file from SAF/MR. A copy of the HQ AFCESA certification inspection report for each SA facility (if available) is on file and the certificate posted. NOTE: If the facility usage has changed or alterations have been made to the facility since it was first certified, the facility has been recertified for the current use by HQ AFCESA.
- S133A *An Annual Unannounced Comprehensive Fire, Safety, and Health Inspection of each SA facility has been conducted within the last 12 months by a Fire Specialist, the Installation Safety Office, and by a*

Public Health Specialist. The inspections are signed and dated. The most current version of the YP Fire Prevention/Inspection Guide provided by HQ AFCESA is used to conduct the inspection.

- S134 A fire inspector or fire task-certified or trained staff member conducts monthly Fire Inspections using sections A&C of the most current YP Fire Prevention/Inspection Guide provided by HQ AFCESA. The inspection is signed and dated. Deficiencies are corrected and documentation is kept on file. Staff or the fire department checks smoke detectors, fire alarms and fire extinguishers monthly. The smoke alarms and emergency lighting are functioning properly.
- S135B A fire/safety/health task-certified or trained staff member conducts daily Fire/Safety/Health Inspections prior to use. The inspection is signed/initialed and dated with time of completion. Deficiencies identified are corrected, remain corrected and documentation is kept on file.
(HQ AFCESA YP Checklist, C-1)
- S136 Emergency procedures for evacuating during a fire are posted, and are practiced at least monthly and twice during the first week of the school year and summer program. A fire inspector, fire task-certified or trained staff member conducts fire drills. Results are kept on file.
- S138 A safety inspector or safety task-certified or trained staff member conducts monthly Safety Inspections for indoor/outdoor areas and equipment. The inspection is signed and dated. Deficiencies are corrected and documentation is kept on file.
- S140 All playground equipment and fall zones comply with the US Consumer Product Safety Commission (CPSC) guidelines and American Society for Testing and Materials (ASTM) standards. Manufacturer's instructions for maintenance and sanitation of indoor/outdoor playground equipment are followed.
- S141 All vehicles used for transporting youth on field trips to and from school are registered, inspected, and maintained as required by state, county and AF. Government Vehicles must have a fully charged fire extinguisher and first aid kit.
- S141A When youth are transported off the installation, a minimum of two adults must accompany the group.
Note: The only exception to this policy is when youth are transported on the installation and two or more vehicles are used. When on the installation the vehicles may travel in tandem with one adult in each vehicle. The vehicles must travel directly behind each other.
- S142 The facilities used do not expose youth to hazards related to asbestos, lead-based paint, and toxic fumes. The radon level in the building is within the limits set by the Environmental Protection Agency (EPA).
- S143 Youth do not have unsupervised access to medicine, poisons, or cleaning agents such as undiluted bleach. Toxic substances are kept in a locked cabinet, out of reach of youth.
- S145 A health inspector or health task-certified or trained staff member conducts monthly Health Inspections. The inspection is signed and dated. Deficiencies are corrected and documentation is kept on file.
- S147 The results of the initial water testing for lead contaminants from each faucet/drinking fountain used by the youth or staff are on file in the SA. The Installation's Bioenvironmental Engineer (BE) has been informed when plumbing lines or fixtures are modified, added or replaced. Based on a health risk assessment by BE, these plumbing lines or fixtures are tested for lead contaminants and the risk assessment and/or results are kept on file in the SA. Water from the facility has been tested for bacterial contaminants at least annually and the results are kept on file. It has been determined that the water is safe for consumption, or another source of safe water has been provided. For CONUS: The most recent

annual installation-wide Consumer Confidence Report (CCR) is kept on file. For OCONUS: Results of a installation-wide water quality report are kept on file.

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

- S148 *Medications are administered in a way that protects children. Only administer medications with daily written direction of parents on the AF Form 1055, Youth Flight Medication Permission Form, and approval from a medical professional. Consistent staff, who have been trained within the last 12 months by a medical professional, administer medication. No over-the-counter medications, including aspirin or aspirin-like products, antihistamines, decongestants, or cough syrup, are administered without approval from a medical authority for the child receiving them. Emergency "as needed" medications, for asthma or allergies, (inhalers, nebulizers, and EpiPens) are accepted and used on an emergency basis. A current and complete action plan outlined by the prescribing health care provider is required. Parents initial monthly to authorize administration of emergency asthma medication and annually authorizing the use of an EpiPen. If it is necessary to administer the medication, parents are contacted. The need for such medication must be reverified every 12 months.*
- S149 Youth are not permitted to administer prescription or non-prescription medications to themselves unless there is a written statement on file from their parents permitting them to do so. When youth administer their own medications, it must be done under the supervision of an adult and away from other youth. Until the medication is given, it must be retained in the program administration offices out of reach of other youth.
- S150 Staff protect youth from communicable diseases by separating youth who become ill during the program. There is a designated area for ill youth to rest until they are picked up by their parents.
- S151 Staff and youth wash their hands frequently, especially after using the toilet or before preparing food. Youth and staff wash their hands when soiled, before setting the table, after returning from outdoors, after handling pets, and after wiping their nose.
- S152 There are adequate supplies and facilities for hand washing. Signs or pictures are posted at each sink to show proper hand washing procedures.
- S153 The SA Coordinator consults with the program medical advisor on health and medical issues for all youth enrolled in the program. If youth with special needs are present, the required staff: youth ratio has been adjusted (if needed), as recommended by the program medical advisor, to ensure youth needs are met.
- S154 When a youth is known to have special needs, the staff meets with the youth's family, and, if the family agrees, with the youth's teacher or others working with the youth. If a youth has a special need, the staff supports the goals set by the youth's Special Education Team.
- S155 When youth with special needs are accepted, the program adapts the space and activities so they can participate. Emergency information and information about special health needs of the youth is taken on field trips.
- S156 Staff and substitutes are aware of food allergies and religious food preferences.
- S157 The program has received a rating of satisfactory or higher on the last three Military Public Health inspections (MPH). All deficiencies noted have been corrected and no current deficiencies are identified.
- S158 The indoor and outdoor facilities are clean.

- S159 Youth wear appropriate protective gear for active sports.
- S160 Animals in the program have been checked annually or as specified in writing by the veterinarian and certified as safe and healthy to be with youth.
- S161 A first aid kit is available at all times. First aid supplies include: scissors, bandages, cold packs, sterile gauze, tape, anti-bacterial soap, disposable gloves, tweezers, thermometer, and other items determined by the installation medical advisor.
- S162 The food program is administered in accordance with and meets DoD, AF, and USDA CACFP requirements. The program participates in the USDA CACFP if it is available.
- S163 Cycle menus are used; a dietician or Major Command Specialist (MAJCOM) has approved all menus used in program facilities. Menus are dated and kept on file as required by USDA CACFP.
- S164 A balance of fruits, vegetables, grains, and proteins are served. Foods high in fat, salt, and sugar are limited. Fruit juice and milk are served instead of fruit drinks and sodas. The number of prepackaged foods is limited. Foods indicative of various cultures are served several times a month.
- S165 The weekly menu is posted where parents and youth can see it. Substitutions are recorded on the posted menu before being served.
- S166 The amount and type of food offered is appropriate for the ages and sizes of the youth and complies with the USDA CACFP guidelines. Staff support youth's need to self-regulate what they eat.
- S167 Youth do not complain that they are served the same foods all the time.
- S168 Only food prepared at or for the program is served at all meals including birthday celebrations and other special events.
- S169 Youth can have a snack as an activity choice instead of eating together as a large group. Snacks are available for youth when they arrive at the program. Youth have enough time to eat without rushing. All youth are notified before snacks are put away.
- S170 Drinking water is readily available at all times, including outdoors and on field trips.
- S171 Surfaces used for eating are sanitized before and after each use.
- S172 Youth assist with table setting, clean up and help prepare and/or serve their own food.
- S173 The **current** Child Abuse/Neglect and Safety Violations in DoD Child/Youth Programs signs are posted in highly visible areas in each facility where parents, children, youth, and staff have easy access to the telephone numbers. The numbers are included in all parent handbooks and other brochures.
- S174 *The Director/Designee reports all suspected cases of inappropriate guidance, child abuse and neglect telephonically and in writing, using the AF Child & Youth Programs (CYP) Reportable Incidents Report, to the Flight Chief, Family Advocacy Office (FAO) (or other locally determined action officer), Squadron Commander/Director, MAJCOM Specialist, HQ AFSVA/SVPY and HQ USAF/AISA within 24 hours of occurrence.*
- S175 *All staff have read the guidance policy and sign a written statement of understanding.*
- S176A *When a staff member is under investigation in a case of suspected child abuse or neglect, he/she is placed on administrative leave or assigned to a position that does not involve contact with youth until the situation is resolved. Staff who violate the guidance policy are not permitted access to youth until they are retrained or they are assigned to another position outside of youth care or they are terminated.*

- S177 When a staff member is under investigation in a case of suspected child abuse or neglect, he/she is placed on administrative leave or assigned to a position that does not involve contact with youth until the situation is resolved.
- S178 If staff do not have a completed National Agency Check (NAC), National Agency Check with Inquiries (NACI), then at least two staff members are present with each group of youth, or are in nearby areas, or are within line of sight, or the area is monitored by a Closed Circuit Television System (CCTV). The staff member that is responsible for monitoring the CCTV has a completed NAC/NACI.
- S179 An adult is present at the main entrance of the facility during all hours of service. Only those persons on official business are permitted in the facility.
- S180 All visitors are required to enter and depart at the main entrance except for approved kitchen deliveries, sign in and out, wear identification, and are monitored by staff while in the facility.
- S181 The lights are left on in all rooms, including closets with windows, toilets, offices, and storage areas, when the building is in use. It is possible to view into closets, storerooms, etc. or they are kept locked during the hours of operation.
- S182 Systems are in place to protect youth from harm, especially when they move from one place to another or use the restroom.
- S183 Parents and staff check youth into or out of the program on the AF Form 1930, *Youth Flight Daily Attendance Record*, by noting the time of arrival/departure or the parents have given written permission for the youth or the staff to check him or herself in/out from home or school.
- S184 Staff have a system to ensure that they pick up all of the youth that they are required to from school. Staff have a system to identify which youth have not arrived as expected and to contact the parents, the school or a responsible adult listed on the AF Form 1181, *Air Force Flight Program Patron Registration*.
- S185 Youth are released only to persons listed on the youth's AF Form 1181, *Air Force Flight Program Patron Registration*, or for whom the parents have provided written or verbal authorization.
- S186 Youth are not permitted to leave unaccompanied, are not released to siblings under 14 years of age and are not permitted to leave for school and regularly scheduled activities without written parental permission.
- S187 Staff know where youth are during transitions. Staff know where youth are as they move from room to room, to the restroom, or from inside to outside. Staff know where the youth are and what they are doing. Staff position themselves in a way that allows them to watch as many youth as possible.
- S188 When older youth are permitted more independence, for example to leave the program for lessons and other activities, there is written parental permission on file including a transportation agreement. When older youth have permission to be out of direct supervision (such as in specified areas), staff know where they are and check on them at regular intervals.
- S189 An Installation Records Check (IRC) has been completed on all staff, CW, and specified volunteers (SV). The IRC consists of a records check of all installations on which the individual has lived or worked for 2 years before the date of the application. The IRC includes a file check of Security Forces Management Information System (SFMIS), Family Advocacy's AF Central Registry (which includes all drug and alcohol program files, medical treatment facility files, mental health, and life skills files) and Family Housing. A check of SFMIS and Family Advocacy's AF Central Registry will satisfy the

requirement for IRCs from current and former installations. Results are maintained in the employee work folder.

- S189A The Dru Sjodin National Sex Offender Registry Check has been completed prior to employment. Note: Applicable for those hired after October 2008.
- S190 A State Criminal History Repository Check (SCHRC) has been completed from all the states the individual staff or CW has lived in during the last five years. NOTE: Only required if a completed NAC/NACI is not on file. Results are maintained in the employee work folder.
- S191 A NAC or NACI has been requested for each individual staff member. Note: As of 21 May 08, all newly hired employees must have a NACI. A FBI fingerprint check has been requested for each CW. An individual with a Secret Clearance meets the requirement of a NAC or NACI but does not meet the SCHRC requirement. If the results of the NAC, NACI, or FBI fingerprint check were not completed and adjudicated, follow-up action has been conducted and documented every 6 months, until the checks are completed and adjudicated. Results are maintained in the employee work folder.
- S192 Record re-verification of the IRC and a Defense Central Index of Investigations (DCII) has been completed for all staff, SV, and CW every 5 years.
- S193 All staff, CWs, and SVs wear a nametag or other identifying apparel. There is a visually recognizable system that identifies staff with completed NAC/NACIs.
- S194 New CWs and SVs are given comprehensive 8 hour orientation training to the program prior to working with youth.
- S195 The CYPAs are paid based on the AF pay plan for CYPAs.
- S196 All staff have read and signed that they understand the guidance, confidentiality, ethical standards and emergency procedures.
- S197 All persons working or volunteering regularly in the program, who have contact with youth, have signed a statement that they have no history of, conviction of, admission to, or evidence of acts of child abuse, molestation or neglect, and drug or alcohol abuse.
- S198 At least two positive, professional references are obtained on staff, contractors, or specified volunteers before they are allowed to work with youth. (Exclude contracted custodial workers) Documentation is kept in the employee's work folder.
- S199 A copy of a current drivers license and results of a positive driving record for all employees who transport youth are on file in the employee's work folder and updated annually.
- S200 Staff have a physical examination every 3 years and the tests recommended by the program medical advisor. All staff and volunteers have the immunizations required by AF Joint Instruction 48-110, Immunizations and Chemoprophylaxis and AFI 48-105, Surveillance, Prevention, and Control of Diseases and Conditions of Public Health or Military Significance. Results are maintained in the employee work folder.
- S201 Staff are provided paid time to participate in training and to plan the program of activities.
- S202 The supervisor and staff regularly meet (for at least an hour, twice a month) to discuss activities and interactions with youth. The supervisors and staff work together to set goals for the program.
- S203 There is a SA Coordinator or supervisor at each location who administers the program and maintains contact with the staff and youth. If the SA has 24 or fewer youth enrolled, the supervision may be provided by the Youth Director or program manager.

- S204 There is a GS-05 **or** NAF equivalent in pay and job responsibilities or higher in the building at all times youth are present. If there are 24 or fewer youth, this individual may be a CY-03, NF-02, or higher grade individual.
- S205 A Training and Curriculum Specialist (T&C) is assigned to work with the program to ensure the health and safety of youth and to assist in staff training and development. This position may be shared with other programs.
- S206 Adequate administrative and clerical support staff are available to provide patron service and maintain required records.
- S207 The program has substitutes available to replace regular staff. The responsibilities and procedures for substitutes are defined and carried out. Substitutes are observed and evaluated by the SA Coordinator or senior staff. If a staff member becomes ill during the program, there is another staff member available to remain with the youth until a substitute can be obtained.
- S208 If the program is having difficulty recruiting and retaining staff, a plan has been developed to address this problem and is being implemented.
- S209 The AF Form 1930, *Youth Flight Daily Attendance Record*, is used to assign youth to staff. There is one staff member accountable for every 12 youth present in the program.
- S210 Volunteers or youth under age 18 are not included in staff:youth ratios, and may not be left alone with youth.
- S211 If one staff member is sufficient to supervise a group of youth, a second staff member is in the building to assist in case emergencies occur.
- S212 The number of youth in a specific room or area is determined based on the room or area capacity not by staff:youth ratio.
- S213 Staff:youth ratios and group sizes vary according to the type and complexity of the activity and staff knowledge and ability.
- S214 All training is documented on the AF Form 1098, *Special Task Certification and Recurring Training*. Every employee starts an annual AF Form 1098 in January.
- S215A All staff have current certification in Cardiopulmonary Resuscitation (CPR) and First Aid (***inclusive of blood-borne pathogens***) if employed over 6 months or sooner if the program is awaiting an endorser visit.
- S216 All staff, SVs and CWs receive annual training on child abuse prevention, identification, and reporting.
- S218 The SA Coordinator receives at least 12 hours of training in each 12-month period. This training includes attending AF and Regional or National School-Age and Youth development conferences. This training also includes information in areas such as: program management, staff supervision, curriculum, child abuse, disease control, cultural issues, financial management, risk management, quality assurance and other school-age topics. They have access to supervisory, management books and periodicals. They have opportunities to visit other programs and share best practices with their peers.
- S219 Site directors receive at least 12 hours of training in each 12-month period addressing topics similar to that of the SA Coordinator.
- S220A Administrative and food service staff receive at least 6 required hours of New Employee Orientation (NEO) training in accordance with the standardized orientation AF Form 1098. An Individual Training Plan (ITP) is developed during the NEO and goals are updated annually or as

identified by training. During the initial 6 months of employment staff complete the modules applicable to their position and the Child Abuse Modules (14/15). Administrative staff receive at least 6 hours of annual training such as: administrative procedures, customer service, and position-related topics. Food service staff receive at least 6 hours of annual training such as: sanitation, nutrition, food preparation and service, and position-related topics.

- S224 New CYPAs receive at least 12 hours of NEO training in accordance with the standardized orientation and training is documented on the AF Form 1098. An Individual Training Plan (ITP) is developed during the NEO and goals are updated as training needs are identified during observations/debriefs. (DTM)
- S225 CYPAs who have completed the DoD School-Age Training Modules receive at least **24** hours of training in each 12-month period. CYPAs receive annual training on positive guidance techniques including training on acceptable and unacceptable ways of touching, talking to, and handling youth and on how to report suspected child abuse and neglect. This training also includes information such as: how to work with families, how to relate to youth in ways that promote their development, how to set up program space and design activities, and how to promote the safety, health, and nutrition of youth.
- S226 During the first 6 months of employment, CYPAs complete three of the AF School-Age Modules (Module 14 &15 and module of choice), First Aid, CPR, food handler's training, and monthly observations. Satisfactory progress toward and completion of the SA training modules is a condition of employment. After fulfilling the initial 6 month requirement of completing three modules, CYPAs must complete a minimum of 3 modules every 3 months, completing all modules within the first 18 months of employment.
- S227 New CYPAs are observed three times (at least every other month) by the Director or designee and monthly by the T&C during the first six months of employment. Observations must include a debrief with the employee and/or program team.
- S228 Staff receive training or consult with specialists on how to help youth with special needs or with diverse physical abilities and disabilities.
- S229 CYPAs are engaged in on-going staff development and professional goal setting through regular (ten within the last 12 month period) observations and observation-based small group debrief sessions based on DTM. An ITP based on observations and DTM debriefs is maintained for each CYPAs. Debrief trainings are recorded on the AF Form 1098. Observation Debrief Forms are kept on file. (DTM)
- S230 Semi-annual staff evaluations are conducted by the Director or designee and include written observations with the results summarized on page 2 of the ITP. (DTM)
- S231 A plan for staff training is generated from the evaluation process. (Goals identified as part of the annual/semi-annual evaluation are identified by an asterisk on page 1 of the ITP). (DTM)

Air Force (AF) Youth Programs (YP)
20th Year Inspection –Criteria
Revised as of Jan 11

The AF YP Criteria may be obtained on the Headquarters Air Force Services (AFSVA) Community of Practice. AF YP/annexes, Pre-teen/Teen and Youth Sports & Fitness Programs are responsible for compliance with all AF YP Criteria. In case of a conflict between the source documents listed below, the most recent version of the AF YP Criteria is used as AF policy until the next update of the AF Instruction governing this program.

YP criteria are based on the following:

- AF Policy Child Development Centers (CDC)/School-Age (SA)/YP Drinking Water, 3 Oct 05
- AF Policy Cleaning Standards for CDC, YP, and SA Program
- AF Policy 2009/10 Recommended Immunization Schedules for Child and Youth Programs, 20 Oct 09
- Council on Accreditation (COA)
- Headquarters Air Force Civil Engineering Support Agency (HQ AFCESA) Inspection Guide AF Youth Programs Facilities
- National Fire Protection Association (NFPA) 101, Life Safety Code
- National AfterSchool Association Standards
- Child and Youth (CY) Pay System Program Guidance, Oct 08
- United States Department of Agriculture Child and Adult Care Food Program (USDA CACFP) Guidelines
- Caring For Our Children - Second Edition
- Boys & Girls Clubs of America - Military Standards of Organizational Effectiveness

Changes/Additions to the 20th Year YP Criteria are indicated by italicized red font

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

- Y1 Positive guidance and conflict resolution techniques are followed by all Staff, Volunteers (V) and Contract Workers (CW).
- Y2 Staff/Vs/CWs ensure consequences of inappropriate behavior are consistent, clear, and in accordance with program policies.
- Y3 Staff/Vs/CWs greet each youth by first name when he or she enters the facility or area or soon after and use youths' first names in communicating with them.
- Y4 Staff/Vs/CWs identify and use opportunities to praise youth for good deeds by frequently providing encouragement and praise.
- Y5 Staff/Vs/CWs reinforce youth's positive self-identities and competencies.
- Y6 Staff/Vs/CWs encourage youth to establish and achieve personal goals and develop competencies by participating in daily program activities.
- Y7 Staff/Vs/CWs interact with youth to provide motivation and encouragement.
- Y10 Staff/Vs/CWs act as models for positive adult relationships.
- Y12 Staff/Vs/CWs respond appropriately to the individual needs of youth, assisting youth to pursue their interests and improve their skills.
- Y13 Staff/Vs/CWs encourage youth to make choices and to become more responsible.

- Y14 Staff/Vs/CWs encourage youth to practice basic life skills.
- Y15 Youth generally interact with one another in positive ways. Youth appear relaxed, respectful, and cooperative with each other.
- Y16 Staff/Vs/CWs make families feel welcome and comfortable.
- Y17 Staff/Vs/CWs work well together to meet the needs of youth.
- Y18 The Youth Center capacity is fully utilized and open during the hours youth are not in school, on school holidays, and on weekends. (*Defined as: 20-23 or 24+ hours per week based on the results of the installation needs assessment.*) (Exclusive of the SA hrs of operations).
- Y19 The Youth Center and its annexes include adequate space for all program areas.
- Y20 Indoor spaces are clean, bright, in good repair, well ventilated, well lit, and maintained at a comfortable temperature. The heat, ventilation, noise level, and light in the indoor spaces are comfortable. The building temperature is maintained between 68°F and 82°F.
- Y21 The space is arranged so that various activities can go on at the same time without much disruption. There is adequate and convenient storage for the equipment, materials, and personal possessions of youth and staff.
- Y22 Youth are involved in the planning, creation, design, and decoration of their designated space.
- Y23 Separate program areas are provided for younger and older youth and/or there are scheduled times for different age groups to participate in programs each day.
- Y25 The indoor space reflects the *current* work and interests of the youth currently in the program. Displays feature youth's artwork and other pictures of interest to them.
- Y26B Staff strive to eliminate negative or unsafe peer interactions such as teasing, bullying, harassment, and relational aggression.
- Y27 An accurate, current, written schedule for the day is prominently displayed.
- Y28 Expectations for youth behavior are posted in clear, positive, and concise language.
- Y29 There are sufficient materials and supplies available, well maintained and in good condition to support youth development and the Boys & Girls Club of America (BGCA) Core program areas.
- Y30 Printed materials displayed are current, accurate and informative for youth and parents. The staff and parent information bulletin boards articulate the vision, mission and primary goals of the program.
- Y31 State-of-the-art information technology is available to enhance programs, processes and productivity. Computers with e-mail capability are available to help youth maintain contact with duty-separated parents. Computers have Internet access with software needed to control access to undesirable sites. A sufficient number of computers are available to support ongoing programs.
- Y32 Only video or amusement machines appropriate for youth ages 6-17 are provided. Use of specific machines is restricted to the appropriate age youth. No violent or mature subject matter that would constitute a teen rating (T) is accessible to younger youth.
- Y33 Equipment is controlled, in serviceable condition, inventoried and stored properly when not in use. Pilferable items are inventoried daily (e.g. video games, players, and controllers).
- Y34 The names and photos of the key staff are posted near the front entrance.
- Y35 Instructional classes are age appropriate and include instruction on technique, safety, injury prevention and demonstration of proper form/technique.
- Y36 Staff and youth are involved in planning activities which are diverse, engaging, and appealing to youth of all ages and backgrounds.

- Y37 Programs are planned to have clearly defined outcomes related to youth development.
- Y38 Written program plans are available for each day of operation, week, month, season and year.
- Y39 Activities are offered to help youth with all aspects of military life (exercises, transfers, inspections, deployments, conflicts and wars) that impact on their life and their family.
- Y40 Computers are available to enable youth to use technology to create original works of: art, multi-media presentations; digitally manipulated graphics; photographs; video clips; etc.
- Y41 During all hours of operation self-directed opportunities are offered in at least three of the five core program areas. (Character & Leadership; The Arts; Health & Life Skills; Sports, Fitness & Recreation; and Education & Career Development)
- Y42 Each of the program core areas is supervised and led by a qualified staff member or specified volunteer. NOTE: One adult may be responsible for more than one program area.
- Y43 Character and leadership development programs are offered weekly which empower youth to support and influence the YP, installation, school and community such as a chartered Keystone Club and Torch Club.
- Y44 Character and leadership development programs are offered quarterly which empower youth to support and influence the YP, installation, school and community such as a center, installation, or community service project. Activities are provided that promote the American democratic process and responsibilities of citizenship. Offer activities to help with decision-making, school work, and personal issues, and that promote the wise use of natural resources, center, installation, school, or community beautification projects.
- Y45 Character and leadership development programs are offered annually which empower youth to support and influence the YP, installation, school and community. (i.e. Public speaking on behalf of the YPs and youths, Leadership activities as part of clubs, committees, etc., Youth Council, providing input on programs and special events, Youth of the Year Program).
- Y46 Education and career development programs are offered daily which enable youth to become proficient in basic educational disciplines, applying learning to everyday situations and embracing (using) technology to optimize school success and employability. Provide resource materials and supplies such as computer software, reference, textbooks, and magazines. Provide homework assistance or tutoring Monday – Thursday. Provide opportunities to observe and care for plants and animals. Offer informal computer instruction.
- Y47 Programs are offered quarterly which enable youth to become proficient in basic educational disciplines, applying learning to everyday situations and embracing (using) technology to optimize school success and employability. Offer formal computer instruction. Conduct an activity to recruit youth for the program. Offer a special event to reward and recognize youth. Support educational goals with field trips, guest speakers, and hands-on experience.
- Y48 Programs are offered annually which enable youth to become proficient in basic educational disciplines, applying learning to everyday situations and embracing (using) technology to optimize school success and employability. Throughout the year offer assistance on becoming employable is provided, such as the YES Program.
- Y49 Health and life skills programs are offered daily which develop youth’s capacity to engage in positive behaviors that nurture their own well being, set personal goals and develop the competencies to live successfully as self-sufficient adults. Help youth seek ways to solve differences and disputes without

- force or violence. Have a staff member available to help youth with special needs or make referrals. Provide accurate information about drugs, alcohol use, and adolescent sexuality.
- Y50 Programs are offered weekly which develop youth's capacity to engage in positive behaviors that nurture their own well being, set personal goals and develop the competencies to live successfully as self-sufficient adults. Offer health and life skills programs and activities that are fun and inviting to all youth from different backgrounds. Integrate opportunities for youth to establish personal goals within program activities and recognize youth achievement goals.
- Y51 Programs are offered quarterly which develop youth's capacity to engage in positive behaviors that nurture their own well being, set personal goals and develop the competencies to live successfully as self-sufficient adults. Offer programs and activities to help youth develop skills in independent living and life planning (budgeting, healthy lifestyle choices, resist peer pressure, etc.) Offer health education activities to promote positive health practices (display health posters, pamphlets, etc).
- Y52 Informal youth sports, fitness, and recreation programs are offered daily which provide and support: fitness development, positive use of leisure time skills, stress management, and social and interpersonal skills. Offer youth the opportunity to participate in activities that support the development of fundamental motor skills needed for different sports and non-competitive physical activities.
- Y53 Programs are offered weekly which provide and support: fitness development, positive use of leisure time skills, stress management, and social and interpersonal skills. Offer intramural team sports for all youth to encourage teamwork, offer a variety of age-appropriate sports and fitness programs. Offer one-on-one attention to individual youth who need assistance in fitness and motor skill development.
- Y54 Programs are offered quarterly which provide and support fitness development, positive use of leisure time skills, stress management, and social and interpersonal skills. Offer instruction and opportunities for participation in leisure sports (bowling, racquetball, tennis, golf, rollerblading, etc).
- Y55 The Arts program is offered weekly which enable youth to develop their creativity and cultural awareness through knowledge and appreciation of visual and tactile arts, performing arts, and creative writing. Provide literacy art activities *such as open mic, poetry reading, improv, reading aloud*, poetry writing, and newsletter.
- Y56 Programs are offered monthly which enable youth to develop their creativity and cultural awareness through knowledge and appreciation of visual and tactile arts and crafts, performing arts, and creative writing. Provide youth opportunities to display their work and/or perform at the Youth Center, on installation, or in the community (exhibits, talent shows, recitals, etc). Conduct special events to generate enthusiasm for the arts (exhibits, performances, field trips, celebrations, etc).
- Y57 Programs are offered quarterly which enable youth to develop their creativity and cultural awareness through knowledge and appreciation of visual and tactile arts and crafts, performing arts, and creative writing. Provide the opportunity to attend performances and interact with professional artists (theater, ballet, trips to art studios, museums, and guest performers) Acquaint youth with their heritage by attending historical sites, monuments, and museums.
- Y58 Programs are offered annually which enable youth to develop their creativity and cultural awareness through knowledge and appreciation of visual and tactile arts and crafts, performing arts, and creative writing. Participation in the ImageMakers Photography Exhibit, Fine Arts Program, and family & teen talent contests and shows are encouraged.

- Y59 Youth are offered the opportunity to participate in the required AF programs: AF and BGCA Fine Arts Program, AF and BGCA Photography, Program Keystone Club, *AF Teen Council*, Torch Club, AF Youth of the Year, three 4-H programs *using official 4-H curriculum* (one must be in the Health, Nutrition and Fitness area), FitFactor, Excellence in Youth Sports Award through the National Alliance for Youth Sports, AF Specialty & Residential Camps (as applicable).
- Y60 At a minimum, quarterly recognition programs are available to support the Youth of the Year program.
- Y61 Youth are recognized for their participation, improvements, and achievements in all program areas and for installation and community activities. Notable awards are used to honor outstanding members and reinforce their involvement in programs.
- Y62 A Youth Sponsorship Program that provides pre-arrival, arrival, and pre-departure services for youth relocating to and/or from the installation has been initiated and is ongoing. Documentation on the sponsorship program is on file in the program. The sponsorship program may be combined or coordinated with the Airman & Family Readiness Center or other agencies responsible for sponsorship.
- Y63A Parents, staff, and youth are involved in evaluating the program. The program conducts an assessment of the needs and interests of the youth and the community at least annually (to include Youth Sports & Fitness). The results are compiled, analyzed and acted upon as required.
- Y64 Parents of youth shall be included on the existing installation Parents Advisory Board (PAB).
- Y65 Staff use youth's given names; avoid using nicknames and terms of endearment to address youth.
- Y67 Parents are required to attend an annual league orientation meeting conducted by the YP staff, or a one-on-one meeting. The orientation should include at a minimum: program philosophy; code-of-ethics; by-laws; roles of the staff; volunteers; officials and parents; transportation policies; health, safety and guidance guidelines.
- Y68 All teams have at least one team/parent meeting each season, separate from the required Parent Orientation.
- Y69 Parents are required to sign a code of ethics, pledging their commitment to providing an enjoyable experience, as well as the responsibility parents play in supporting the youth sport's experience.
- Y70 The program regularly plans and schedules programs and events with youth that include parents and other family members.
- Y71 An orientation is conducted and information shared for all new members and their parents/guardian. A tour of the facility, a review of the program expectations and policies, an overview of the program offerings and an introduction to staff, volunteers or contract workers is included in orientation.
- Y72 There is a recognition program for YP volunteers or they are recognized as part of the installation volunteer program.
- Y74 Each League follows required National Alliance for Youth Sports (NAYS) guidelines as established for youth ages 5-6, 7-8, 9-10, 11-12, and 13-18.
- Y75 No more than a two-year age range is used to establish and conduct league play, beginning with age 5. All participants must be 5 years of age prior to the start of the first practice. In no case may an age range greater than three years be used without documented approval of the Major Command Youth Specialist.
- Y76 Each program has a method for recruiting, selecting, screening and assigning coaches.
- Y77 A written system is in place for league and team division, in which weight and skills are assessed in establishing a fair and equal league for youth age 11 years and up.

- Y78 In all leagues, a minimum play rule is required for all youth regardless of ability. Ages 5-12 years must be permitted to play at least half of every game.
- Y79 Youth below the age of 11 years are not permitted to participate in activities that result in significant or frequent collisions involving the head or neck.
- Y80 If participation awards are given, they are to be kept to a minimum.
- Y81 Only youth ages 11 years and up are permitted to participate in out of community post-season play.
- Y82 A coach's handbook has been developed and issued to every volunteer coach. The handbook includes, at a minimum, the following information: mission; philosophy; key contacts; emergency procedures; inclement weather procedures, inclusion policy; prohibition of substance abuse and smoking by coaches, officials, spectators, and players; child abuse prevention, identification and reporting; excused absences; positive guidance; administration of first aid; minimum play rules; and sportsmanship to include removal procedures and suspension.
- Y84 Equipment and supplies are age appropriate and safe for use. Equipment designed to ensure injury reduction for participants is used for each youth sports activity (e.g. baseballs designed to reduce injuries, soccer shin guards, approved protective equipment in contact sports).
- Y85 Equipment must carry the National Operating Committee for Standards in Athletic Equipment (NOCSAE) or American Society for Testing and Materials (ASTM) approval for safety.
- Y86 Appropriate attire must be worn to promote the safety of all participants and spectators.
- Y87 An inspection timetable and procedures for ensuring continual safety of all equipment is implemented for each sport.
- Y88A *The Annual Unannounced Multidisciplinary Team Inspection (MTI), required by the Military Child Care Act, of all facilities used by the YP has been conducted within the last 12 months. The MTI includes experts in each of the following areas: child abuse protection, staffing, and a parent representative who has a child enrolled in the YP. The results of the Annual Unannounced Higher Headquarters and Comprehensive Fire, Health, and Safety Inspections are reviewed as part of the MTI and the review is documented. The results are provided to the program staff in a timely manner – preferably within 1 month.*
- Y88B All non-life-threatening deficiencies identified in any inspections required by the Military Child Care Act have been corrected within 90 days and remain corrected or a waiver is on file from the SAF/MR. All life-threatening deficiencies are corrected immediately.
- Y89 A copy of the most recent AF Higher Headquarters' DoD Inspection certificate is posted in all facilities.
- Y90 The YPs' posted written mission statement is consistent with Air Force standards for YPs and is reflected in all policies and procedures established for the program.
- Y91 Each family is provided a current parent handbook or a copy of the written policies and the program's mission and philosophy and no-smoking in or near the facility policy. Written material is translated for families who do not speak or read the majority language.
- Y93 Participation is limited in YPs to eligible youth up to 18 years old or who are still in high school. Married and active duty youth are not allowed to participate as youth participants.
- Y94A *Programs have a written policy or Operating Instruction (OI) to protect youth from exposure to the use of alcohol, illegal drugs, and tobacco products; dealing with injuries, hazards, unsafe conditions, weather conditions, and natural disasters, which are specific to the geographic location of the event; transportation of youth; usage of the facility by outside programs; meeting program expectations;***

operational issues, such as hours of operation, registration procedures, program areas and objectives, fees and charges, recognition of staff achievements, safety requirements, health requirements, emergency procedures, fire prevention, and evacuation requirements. Policies and operating instructions have been updated and coordinated with applicable agencies.

- Y98 There are written personnel policies and practices for staff. The policy includes information on the program's expectations for the position. There is a staff handbook that outlines this information; the handbook is distributed to each employee.
- Y101 Direct Appropriated Funds support is provided for personnel, equipment, supplies, where required. APF custodial support is provided during the hours of operation to ensure sanitation and cleanliness. At a minimum the AF Cleaning Standards Chart for CDC, YP and SA is followed.
(AF Cleaning Standard Chart for CDC, YP and SA)
- Y102 The program develops an annual budget that reflects the program's priorities.
- Y103 There is evidence that the program seek funds from the Combined Federal Campaign, the United Way, BGCA and other charitable organizations. Funding from any grants earned has been used to support the grant request.
- Y104 If a registration fee is charged, it is collected on an annual basis. Fees are charged based on current AF policy.
- Y105 Youth 5 years of age and younger are allowed to participate only when they are under the continuous, direct supervision of an adult, and when the activity is organized specifically for their age group, such as part-day preschool, lessons, classes, special events, etc.
- Y106 Youth 6-8 years are allowed to participate only when they are in an activity that involves continuous direct supervision by an adult or they are accompanied by a parent or sibling 16 years or older.
- Y107 Youth with special needs are provided service when the program can reasonably accommodate their needs and their presence does not endanger the health and safety of other youth and the Staff/V/CW. Service is not denied without the approval of the Major Command Chief of Services or Major Command Services Division Chief.
- Y108 The YPs has developed a written annual, year round marketing and communications plan supportive of the organization's mission, goals, and objectives. The marketing plan is current and in use.
- Y109 At all YPs facilities including sports fields, an attractive exterior sign clearly communicates it is a YP. Signs are posted at all youth facilities/fields prohibiting the use of alcohol, illegal substances, or tobacco.
- Y110 The hours of operations are posted and easily seen from the outside.
- Y111 YPs collaborate with other installations or programs to provide ongoing opportunities for parent information and education.
- Y112 Youth are provided with a membership card printed with the program name. A current, completed AF Form 88, *Air Force Youth Programs Registration*, is on file for each youth participating in the program except for one-time events that include direct parental supervision.
- Y113B *Accidents/injuries which require medical attention, hospitalization, or death of a youth are recorded/reported on the AF Child and Youth Programs (CYP) Reportable Incidents Report within 24 hours of the event to the Flight Chief, Squadron Commander/Director, MAJCOM Specialist, HQ AFSVA SVPY, and HQ USAF AISA.*
- Y114 During self-directed recreation, youth are required to sign in and out of the program upon arrival and departure.

- Y115 Daily attendance for all programs is recorded on AF Form 2043, *Recreation Daily Attendance and Program Record* or similar form and kept on file for 3 years.
- Y116 A system is in place for all youth staff to have access to the information such as coaches' names and phone numbers, team rosters, practice locations and times, and game schedules.
- Y117 When youth are transported off the installation, a minimum of two adults must accompany the group. Note: The only exception to this policy is when youth are transported on the installation and two or more vehicles are used. When on the installation the vehicles may travel in tandem with one adult in each vehicle. The vehicles must travel directly behind each other.
- Y118 Transportation of youth has been authorized by the parent on the AF Form 88, Air Force Youth Programs Registration (or other authorized form) which includes permission for medical treatments and a copy is taken on all field trips.
- Y119 Staff/Vs/CWs are not permitted to transport youth in their personal vehicles.
- Y120 Youth are not permitted to participate in the sports program unless they have had a physical exam within the previous 12 months and it remains current throughout the season. The coaches are aware of the chronic health problems of any youth they coach. The results are kept on file.
- Y121 Personal service contractors are required to provide proof of personal liability insurance of at least \$300,000 before establishing a contract to provide high-risk services such as, but not limited to gymnastics, wrestling, and karate instruction. If the contractor cannot obtain personal liability insurance, the contract must include an acknowledgment of personal liability signed by the contractor and the contractor's signed agreement to compensate the Government for any expenditure necessary because of the contractor's conduct and activities.
- Y122 All YP facilities have been inspected by HQ AFCESA or an approved designee and are certified by HQ AFCESA as meeting the structural requirements of NFPA 101 Life Safety Code (current edition) and AF. Any deficiencies identified by HQ AFCESA or their designee have been corrected within 90 days and remain corrected or a waiver is on file from SAF/MR. A copy of the HQ AFCESA certification inspection report for each YP facility (if available) and certificate are on file and posted. Note: If the facility usage has changed or alterations have been made to the facility since it was first certified, the facility has been re-certified for the current use by HQ AFCESA.
- Y123A *Annual Unannounced Comprehensive Fire, Safety, and Health Inspections of each YP facility has been conducted within the last 12 months by a Fire Specialist, the Installation Safety Office, and by a Public Health Specialist. The inspection is signed and dated. The most current version of the YPs Fire Prevention/Inspection Guide provided by HQ AFCESA was used.*
- Y124 A fire inspector or fire task-certified or trained staff member conducts quarterly Fire Inspections using sections A&C of the most current YP Fire Prevention/Inspection Guide provided by HQ AFCESA. The inspection is signed and dated. Deficiencies are corrected and documentation is kept on file. Staff or the fire department checks smoke detectors, fire alarms and fire extinguishers quarterly. The smoke alarms and emergency lighting are functioning properly.
- Y125B A fire, safety, and health task-certified or trained staff member conducts daily Fire, Safety, and Health Inspections prior to use. The inspection is signed/initialed and dated with time of completion. Deficiencies identified are corrected, remain corrected and documentation is kept on file. (HQ AFCESA YP Checklist, C-1)

- Y126 Fire occupancy loads for each room are established and posted. Emergency procedures for evacuating during a fire are posted, and are practiced at least monthly during various times of day/evening/*weekend, when youth are present*. A fire inspector, fire task-certified or trained staff member conducts fire drills. Documentation is kept on file.
- Y128 A safety inspector or safety task-certified or trained staff member conducts monthly Safety Inspections for indoor/outdoor areas and equipment. The inspection is signed and dated. Deficiencies are corrected and documentation is kept on file.
- Y130 Sports facilities are free of observable safety hazards. Prior to the start of each sports season, pre-inspection of fields and facilities are completed by a safety specialist before any practices and/or games are conducted. Any identified hazards are corrected prior to the start of the season and the results are kept on file.
- Y131 All playground equipment and fall zones comply with the US Consumer Product Safety Commission (CPSC) guidelines and American Society for Testing and Materials (ASTM) standards. Manufacturer's instructions for maintenance and sanitation of indoor/outdoor playground equipment are followed.
- Y132 All vehicles used for transporting youth on field trips and to/from school are registered, inspected, and maintained as required by state, county and AF. Government vehicles must have a fully charged fire extinguisher and first aid kit.
- Y133 The facilities used do not expose youth to hazards related to asbestos, lead-based paint, and toxic fumes. The radon level in the building is within limits.
- Y134 Youth do not have unsupervised access to medicine, poisons, or cleaning agents such as undiluted bleach. Toxic substances are kept in a locked cabinet, out of reach of youth.
- Y135 Sports facilities are free of observable safety hazards. During the season, playing facilities used for practices and games are inspected daily for safety hazards and documented. The results are kept on file.
- Y137 A health inspector or health task-certified or trained staff member conducts monthly Health Inspections. The inspection is signed and dated. Deficiencies are corrected and documentation is kept on file.
- Y139 The results of the initial water testing for lead contaminants from each faucet/drinking fountain used by the youth or staff are on file in the YP. The Installation's Bioenvironmental Engineer (BE) has been informed when plumbing lines or fixtures are modified, added or replaced. Based on a health risk assessment by BE, these plumbing lines or fixtures are tested for lead contaminants and the risk assessment and/or results are on file in the YP. Water from the facility has been tested for bacterial contaminants at least annually and the results are kept on file. It has been determined that the water is safe for consumption, or another source of safe water has been provided. For CONUS: The most recent annual installation-wide Consumer Confidence Report (CCR) is kept on file. For OCONUS: Results of a installation-wide water quality report are kept on file.
(AF Policy CDC/SA/YP Drinking Water, 3 Oct 05)
- Y140 Healthy foods are offered during program provided meals and snacks. Resale menus and vending machines include healthy food choices.
- Y141 If youth or adults have contagious illnesses, they are not permitted to participate in YP events during the period when the disease could be transmitted to others.
- Y142 There are adequate supplies and facilities for hand washing. Signs or pictures are posted at each sink to show proper hand washing procedures.
- Y143 Food is stored, prepared, transported and served in accordance with AFI 48-116, Food Safety Program.

- Y144 Drinking water is readily available at all times, including outdoors and on field trips.
- Y145 Animals in the program have been checked annually or as specified in writing by the veterinarian and certified as safe and healthy to be with youth.
- Y146 A first aid kit is available at all youth events. First aid supplies include: scissors, bandages, cold packs, sterile gauze, tape, anti-bacterial soap, disposable gloves, tweezers, thermometer, and other items determined by the installation medical advisor.
- Y147 A written maintenance and cleaning schedule for all facilities is maintained. The program facilities and all restrooms are cleaned & maintained daily.
- Y148 The **current** Child Abuse/Neglect and Safety Violations in DoD Child/Youth Programs signs are posted in highly visible areas in each facility where parents, children, youth, and staff have easy access to the telephone numbers. The numbers are included in all parent handbooks and other brochures.
- Y149 *The Director/Designee reports all suspected cases of inappropriate guidance, of child abuse and neglect telephonically and in writing, using the AF Child & Youth Programs (CYP) Reportable Incidents Report, to the Flight Chief, Family Advocacy Office (FAO) (or other locally determined action officer), Squadron Commander/Director, MAJCOM Specialist, HQ AFSVA/SVPY and HQ USAF/AISA within 24 hours of occurrence.*
- Y150 All violations of the guidance policy are reported verbally and in writing to the supervisor and the Flight Chief.
- Y151A *When a staff member is under investigation in a case of suspected child abuse or neglect, he/she is placed on administrative leave or assigned to a position that does not involve contact with youth until the situation is resolved. Staff who violate the guidance policy are not permitted access to youth until they are retrained or they are assigned to a position outside of youth care, or they are terminated.*
- Y152 When a staff member is under investigation in a case of suspected child abuse or neglect, he/she is placed on administrative leave or assigned to a position that does not involve contact with youth until the situation is resolved.
- Y153 If staff do not have a completed National Agency Check (NAC) or National Agency Check with Inquiries (NACI), then at least two staff members are present with each group of youth, or are in nearby areas, or are within line of sight, or the area is monitored by a Closed Circuit Television System (CCTV). The staff member that is responsible for monitoring the CCTV has a completed NAC/NACI.
- Y154 An adult is present at the main entrance of the facility during all hours of service. Only those persons on official business are permitted in the facility.
- Y155 All visitors are required to enter and depart at the main entrance except for approved kitchen deliveries, sign in and out, wear identification, and are monitored by staff while in the facility.
- Y156 The lights are left on in all rooms, including closets with windows, toilets, offices, and storage areas, when the building is in use. It is possible to view into closets, storerooms, etc. or they are kept locked during the hours of operation.
- Y157A An Installation Records Check (IRC) has been completed on all staff, CW, and V. The IRC consists of a records check of all installations on which the individual has lived or worked for 2 years before the date of the application. The IRC includes a file check of Security Forces Management Information System (SFMIS), Family Advocacy's AF Central Registry (which includes all drug and alcohol program files, medical treatment facility files, mental health, and life skills files) and Family Housing. A check of

SFMIS and Family Advocacy's AF Central Registry will satisfy the requirement for IRCs from current and former installations. Results are maintained in the employee work folder.

- Y157B The Dru Sjodin National Sex Offender Registry Check has been completed prior to employment. Note: Applicable for those hired after October 2008.
- Y158 A State Criminal History Repository Check (SCHRC) has been completed from all the states the individual staff or CW has lived in during the last five years. NOTE: Only required if a completed NAC/NACI is not on file. Results are maintained in the employee work folder.
- Y159 A NAC or NACI has been requested for each individual staff member. Note: As of 21 May 08, all newly hired employees must have a NACI. A FBI fingerprint check has been requested for each CW. An individual with a Secret Clearance meets the requirement of a NAC or NACI but does not meet the SCHRC requirement. If the results of the NAC, NACI, or FBI fingerprint check were not completed and adjudicated, follow-up action has been conducted and documented every 6 months, until the checks are completed and adjudicated. Results are maintained in the employee work folder.
- Y160 Record re-verification of the IRC and a Defense Central Index of Investigations (DCII) has been completed for all staff, Vs, and CWs every 5 years.
- Y161 All staff, CWs, and Vs wear a nametag or other identifying apparel. There is a visually recognizable system that identifies staff with completed NAC/NACIs.
- Y162 All staff have read and signed that they understand the guidance, confidentiality, ethical standards and emergency procedures.
- Y163 All staff, Vs, and CWs have signed a statement indicating whether or not they have been arrested or convicted of any crime involving youth, drugs, or alcohol.
- Y164 At least two positive, professional references are obtained on staff, CWs, or Vs before they are allowed to work with youth. (Exclude contracted custodial workers) Documentation is kept in the employees work folder.
- Y165 A copy of a current drivers license and results of a positive driving record for all employees who transport youth are on file in the employee's work folder and updated annually.
- Y166 Staff have a physical examination and the tests recommended by the program medical advisor. All staff and volunteers have the immunizations required by AF Joint Instruction 48-110, Immunizations and Chemoprophylaxis and AFI 48-105, Surveillance, Prevention, and Control of Diseases and Conditions of Public Health or Military Significance. Results are maintained in the employee work folder.
- Y167 Staff are observed periodically by experienced staff while interacting with youth during the first 6 months of employment. Maintain documentation on file.
- Y168 Staff receive continuous supervision and feedback. The program keeps written, updated notes on staff performance and feedback. The supervisor or designee observes and evaluates staff at least annually.
- Y169 Contractors and volunteers are evaluated and given feedback within the first 6 months (or each season) and documentation is kept on file.
- Y170 All coaches, assistant coaches, and other specified volunteers are required to sign a code of ethics annually which is kept on file.
- Y171 Two adults (staff, contractors, or volunteers) are present in the facility and/or program areas at all times when youth are present. If junior staff (student trainees) are included in the program, they are not included in the adult:youth ratio.

- Y172 There is a GS-05 **or** NAF equivalent in pay and job responsibilities or higher in the building at all times youth are present.
- Y173 Adequate supervision by paid staff and adult volunteers of youth is maintained based on the type of program or activity offered. Staff and adult: youth ratios are IAW DODI 6060.4, Page 19 Chart.
- Y174 There is a plan to provide adequate staff coverage in case of emergencies or when one of the staff is absent.
- Y175 YP staff including the Director and Program Director, work an uncommon tour of duty to include evenings, weekends, and school holidays.
- Y176 All training is documented on the AF Form 1098, Special Task Certification and Recurring Training. Every employee starts an annual AF Form 1098 in January.
- Y177A All regular and flex staff have current certification training in Cardiopulmonary Resuscitation (CPR) and First Aid (*inclusive of blood-borne pathogens*) within the first 6 months of employment. At least one staff member/ V and/or CW is certified in CPR and first aid and is present at all activities sponsored through the YPs.
- Y179 All regular and flex schedule staff receive 24 hours of training. Annual training requirements include: program planning, positive guidance and conflict resolution, child abuse prevention, identification, and reporting, youth development, youth fitness and nutrition, safety and fire prevention.
- Y180 New staff/CWs receive at least 8 hours of orientation training prior to working with youth.
- Y181 Each installation has at least one staff who is a Certified Youth Sports Administrator (CYSA) and remains certified through annual trainings (one Continuing Education Unit from NAYS every 2 years).
- Y182 Youth management staff participate in a minimum of 12 hours of annual training, including training on such topics as the latest studies on youth development; youth activity programming; child abuse prevention, identification, and reporting procedures; YP administration; and eliciting parent involvement. The Youth Director attends formal conferences and has attended a National or Regional 4-H/BGCA conference within the last 2 years.
- Y183 Vs (to include coaches) and CWs are provided an orientation training prior to working with youth. Orientation and annual training should include: program philosophy, objectives and goals, safety requirements, fire prevention, acceptable and unacceptable discipline techniques, child abuse prevention, identification and reporting (annually), universal precautions for handling bodily fluids, youth development, and at risk behavior. Completion of training is documented and kept in the V/CW files.
- Y184 Coaches and Assistants complete a coaching certification and receive training prior to working with youth in the following areas: first aid, CPR, psychology of coaching, injury prevention, practice organization, training and conditioning, youth development, diversity and sexual harassment and techniques of coaching a specific sport. Completion of training is documented and kept in the V/CW files.
- Y185 Returning certified coaches are provided supplementary training to enhance their coaching ability and to maintain annual certification. (i.e., sports specific, skills enhancement, Youth Development, fitness, nutrition).
- Y186 During the first 6 months of employment, Child and Youth Program Assistants (CYPAs) complete three of the YP Modules, first aid, CPR, food handler's training, and monthly observations. Satisfactory progress toward and completion of the YP training modules is a condition of employment. After fulfilling the initial 6 month requirement of completing three modules, CYPAs must complete a minimum of 3 modules every 3 months, completing all modules within the first 18 months of employment.