# Child and Youth Programs (CYP) Operating Manual

Supervision and Accountability Standard







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## **Chapter 1:** Introduction

When families enroll their children\* in a Navy Child and Youth Program (CYP), they expect CYP Professionals\*\* to provide high quality care and keep their children safe. Navy CYP's first priority is to keep children safe at all times. CYP Professionals ensure this through the use of developmentally appropriate child supervision practices and rigorous accountability systems.

Supervision and accountability are two related yet distinct elements of CYP program quality. The two terms are defined as follows:

- **Supervision** means that trained CYP Professionals are assigned to be physically present with the children in their care at all times and are providing active, intentional, and developmentally appropriate observation, monitoring, and guidance.
- Accountability means that CYP Professionals are responsible and have a system in place to account for the whereabouts of all children and adults, including visitors, in the program according to specific program safety and monitoring procedures.

Refer to Appendix A for the complete list of terms and definitions associated with *supervision* and *accountability*.

Clearly defined supervision and accountability policies and protocols help CYP Professionals maintain awareness and control over the CYP environment, thus preventing unsafe situations for children in care. The risks of accidents, child maltreatment, and other vulnerabilities are minimized when CYP Professionals implement appropriate supervision and accountability practices.

According to the National Center on Child Care Quality Improvement, inadequate supervision incidents are the most commonly reported licensing issues. Research suggests physical injuries in a child care facility are often associated with a lack of supervision. Lapses in supervision or accountability can jeopardize the CYP's certification and accreditation status and can potentially lead to charges of child neglect against CYP Professionals. Appropriate use of supervision and accountability practices not only contributes to the safety and well-being of children; it also helps to

Chapter 1: Introduction

<sup>&</sup>lt;sup>1</sup> National Center on Child Care Quality Improvement: A Service of the Office of Child Care, "Research Brief #1: Trends in Child Care Licensing Regulations and Policies for 2011." https://childcareta.acf.hhs.gov/sites/default/files/public/065\_1304\_center\_licensing\_trends\_brief\_final.pdf

protect the adults in the CYP by minimizing the CYP Professional's and program's liability and by promoting security for everyone in the program.

While reading this Standard, it will be helpful to also reference the following terms:

- \*The term *child* is used throughout this Standard when referencing all CYP children, youth and teens ages 6 weeks -18 years. Child is also used when referring to children ages 6 weeks 5 years old enrolled in CDCs and children in 24/7 Centers or the CDH program, typically serving ages 6 weeks 12 years old. The term youth refers to all children ages 3–5 years old, youth ages 6–12 years old, and teens ages 13–18 years old who participate in the Youth Program (YP). If a program is designed specifically for young children (e.g., Recreational Preschool, Motor Skill Development), the term child may also be used to reference children ages 3–5 years old. Similarly, the term teen may be used when discussing activities and programs that are specifically geared toward teenage youth ages 13–18 years old.
- \*\*CYP Professional refers to all members of the Navy CYP team, to include staff, volunteers, CDH Providers, and contractors in support of the CYP. If a requirement applies to a specific professional group/type, that designation is used (e.g., CYP employee, CDH Provider).
- Installation CYP Director refers to the designated Director at the installation with oversight of all CYP programs at the installation.
- ▶ *Program Director* refers to the director of a single program, such as CDC, SAC, YP, and CDH, and applies to all directors regardless of program.
- Program Management Team refers to the following positions, as applicable to the program: Director, Assistant Director, Youth Sports and Fitness Coordinator, Teen Coordinator, and CDH Monitors.
- Activity area represents any indoor or outdoor space used to facilitate CYP programming, including Child Development Centers (CDC) classrooms, School Age Care (SAC) and Teen Program activity rooms, 24/7 Center and Child Development Home (CDH) activity areas, playgrounds, fields, courts, etc.

#### 1.1 Purpose

This Standard defines the roles, responsibilities, and requirements to establish and provide guidance for CYPs to support the achievement of effective supervision and accountability. All CYPs must ensure developmentally appropriate child supervision practices are implemented and establish effective accountability systems in accordance with this Standard, including the content of the appendices.

Scenarios and best practices show how the operational requirements may look in daily practice in CYPs. However, CYPs should adapt these practices based on ongoing evaluation and implementation of what works best for them to fulfill specific requirements. CYPs vary in size, installation characteristics, geography, and demographics; as such, the specific processes that work well for one program may need to be adjusted to be implemented effectively for another.

Due to the diverse CYP types, layouts, and programming, the requirement for every CYP to monitor and evaluate the effectiveness of the implemented supervision and accountability practices differs. Therefore, within this document, there are terms used such as *routinely*, *regularly*, *frequently*, *on an ongoing basis*, and *occasionally* that will indicate the requirement for the CYP Management and Training Teams to evaluate their specific programs and establish monitoring frequency in all their CYPs based on observations, individualized program requirements, and teamwork. As a result of this evaluation, each CYP Management and Training Team must effectively train and communicate with each CYP Professional so every person understands the importance of supervision and accountability and knows how to implement all requirements to ensure child safety and policy compliance.

All guidance provided in this Standard, including appendices, is official Navy guidance and must be strictly adhered to unless otherwise indicated.

#### 1.2 Individual Responsibility Plus CYP Teamwork

Supervision strategies and accountability measures rely on two pillars to be effective: (1) each CYP Professional individually taking personal responsibility for supervision and accountability and (2) CYP teamwork. Personal responsibility requires that each CYP Professional, whether working individually or with other CYP Professionals, consistently implement the required supervision practices and accountability measures to ensure the safety of all children in care. For example, it is expected that all CYP Professionals, regardless of position, are responsible for ensuring an immediate and appropriate response in the event that they observe a child who is unattended, identify an unlocked facility door, or see an unaccompanied, unknown person in the facility. In cases such as these, the CYP Professional must immediately intervene and notify a member of the Management Team.

When more than one CYP Professional are responsible for a group of children, it is important for CYP Professionals to communicate with one another continuously using words and agreed-upon cues as they assist, reposition, or provide additional attention to a child as needed in a situation. When CYP Professionals work alone, they must ensure all children are accounted for and safe by implementing appropriate strategies effectively and communicating when assistance is required. CYP teamwork indicates the responsibility of the Management and Training Teams in ensuring the necessary supports are in place to protect each child and equipping each CYP Professional. Although CDH Providers work alone, they still have the same level of personal responsibility for appropriate supervision and accountability of all children in care. Teamwork in CDH is achieved through open communication with the CDH Monitor, Installation Director, Program Director and/or Training & Curriculum Specialist on a regular basis to discuss challenges, strategies, and improvements to supervision and accountability in the home.

The following figure shows the equation that adds up to child safety and well-being:

Figure 1.2A: Equation for Child Safety and Well-Being



#### 1.2.1 CYP Teamwork Supports for CYP Professionals

While CYP teamwork is an important element in ensuring child safety and well-being, the CYP Management and Training Teams are responsible for ensuring the appropriate support and training is provided to the CYP Professionals who work directly with children. The CYP Management and Training Teams offer ongoing support in the following ways:

- Orientation: Supervision and accountability requirements must be presented during orientation. This helps CYP Professionals who are new to CYP understand Navy policies and learn the required procedures.
- ▶ **Training:** Training must be provided to all CYP Professionals on all supervision and accountability policies and implementation. Observations and training of supervision and accountability implementation should be provided on an ongoing basis and as needed.
- Modeling: The CYP Management and Training Teams must model appropriate supervision and accountability procedures, act as mentors, and provide guidance as needed.
- Periodic monitoring/reviews: The CYP Management Team must regularly observe and assess the CYP Professionals who are performing supervision and accountability practices (e.g., an Operations Clerk conducting an attendance audit, direct care staff member conducting a staff transition head count, a CDH Provider transitioning from inside to outside). It is critical that all CYP Professionals receive ongoing feedback on their performance and implementation of supervision and accountability practices. Any deficiencies must be immediately addressed and followed up with appropriate remediation.
- ▶ Reinforcement and redirection: Reinforcement and redirection are additional strategies to support CYP Professionals in their proper implementation of supervision and accountability requirements. Reinforcement provides positive feedback to CYP Professionals on desired behaviors. Redirection provides instructions and alternatives to CYP Professionals on undesired behaviors in order to direct them to acceptable behaviors.

#### 1.3 Roles and Responsibilities

All CYP Professionals have roles and responsibilities in supervision and accountability of children. This section describes how all CYP Professionals must implement, monitor, and support supervision and accountability requirements.

#### 1.3.1 Program Management Team

The Program Management Team is responsible for ensuring the CYP meets all requirements for supervision and accountability. The Management Team monitors to ensure that all CYP Professionals (1) provide developmentally appropriate child supervision and (2) follow required accountability measures consistently.

#### **Program Director**

While all CYP Professionals are responsible for protecting the children in their care, the Program Director is ultimately responsible for ensuring that the CYP meets all supervision and accountability requirements. If an Assistant Director is authorized, he/she supports the Program Director with supervision and accountability oversight, but the Program Director remains ultimately responsible. The Program Director's duties related to supervision and accountability are as follows:

- Ensure supervision policies and procedures, as well as accountability systems, are implemented with effective strategies that maximize the safety and well-being of each child.
- Ensure adequate staffing for facility-based programs to fulfill the required supervision and accountability mandates of staff:child ratios and active supervision requirements in facility-based programs (e.g., providing coverage during all breaks such as lunch or restroom breaks, personal leave, or curriculum planning or training).
- Maintain a visible presence among CYP Professionals throughout the CYP, including CDC, 24/7 Center, CDH, SAC, Teen Programs, Youth Sports and Fitness (YSF) games and practices, Recreational School Age Programs (RSAP), and Recreational Preschool. In addition, the Program Director routinely accompanies CYP Professionals in facility-based programs on field trips.
- Regularly monitor and observe supervision and accountability practices of the CYP Professionals' activities, interactions, and decision-making processes, and provide frequent feedback about strengths, areas for improvement, potential training refreshers, and other resources and technical assistance as needed.
- Regularly assess supervision and accountability procedures and processes to determine if adjustments are needed. Create a program culture of accountability to keep children safe. Ask CYP Professionals to share the challenges they face in executing required supervision and accountability measures, and provide solutions.
- Provide immediate coaching, guidance, or additional support to CYP Professionals as needed to meet program and policy requirements.

Management

- Immediately investigate any identified lapse in supervision or accountability to determine the cause(s) of the incident, develop an appropriate corrective action plan, and—as applicable and as required—report violations. For additional information, refer to the <a href="Child Abuse Prevention">Child Abuse Prevention</a>, <a href="Education and Reporting">Education and Reporting (CAPER) Standard's Lapse in Supervision Matrix.</a>
- Discuss identified issues with the Training Team. Work with the Training Specialist to develop and provide effective coaching plans, training, tools, or system modifications, and provide a clear message to CYP Professionals about the purpose of each initial and remedial solution.
- Require that all CYP Professionals read and receive training on the content of this Standard and offer clarification and answers to questions as needed.
- ▶ Ensure that quality assurance (QA) counts are conducted for CYP Professionals on a daily basis throughout the CYP. In CDCs, SACs, and 24/7 Centers, this includes using the *Accountability Counts Template* (Appendix B) or a similar, locally developed document.
- ▶ Conduct Child and Youth Management System (CYMS) reconciliation checks with CYP Professionals in facility-based programs to ensure that all children are accounted for by matching the Attendance Rosters with the CYMS Attendance Report. Refer to Section 4.2.2 for more information on reconciliation counts.
- ▶ Ensure active supervision requirements are met at all times, including compliance with color-coded apparel, as applicable for the CYP Program. Encourage CYP Professionals to share best practices for supervision and accountability, and offer ideas and suggestions for process enhancements and improvements.
- Ensure families are reminded of the importance of keeping emergency contact information current for themselves and their designees.

#### **CDH Monitor**

The CDH Monitor is responsible for ensuring CDH Providers implement supervision and accountability strategies in their homes. The CDH Monitor conducts monthly home visits and observations and then provides feedback and support to CDH Providers. If a CDH Monitor is not authorized, these duties fall to the CDH Director or designated Program Director. The CDH Monitor's duties related to supervision and accountability are as follows:

- Know the required supervision and accountability measures, and ensure that CDH Providers follow the requirements in this Standard.
- Guide and mentor CDH Providers on the correct implementation of written policies and procedures to ensure age-appropriate supervision and that accountability strategies are used.
- Work with the Management Team to implement and regularly monitor supervision and accountability processes in the CDH.
- During home visits, conduct observations and model appropriate behaviors and practices by asking CDH Providers how many children are in care, counting the children present, and comparing the CDH Provider's responses against the Attendance Roster.
- Routinely document observations of CDH Providers to assess areas for improvement and identify behavior patterns to address with the Training and Management Teams.

- Provide coaching and address immediate training needs (e.g., an impromptu training or consultation) with CDH Providers. For example, the Monitor can demonstrate a name-to-face recognition check prior to going inside from the backyard/playground.
- Regularly assess the effectiveness of supervision and accountability procedures and processes at each CDH and determine when adjustments are needed.
- Review the Visitor Log to ensure it is consistently utilized, take the opportunity to note the length and number of visits, and address any concerns with the Provider to ensure visitors do not compromise the Provider's ability to provide full supervision.
- Work with the Training Team to plan for and conduct coaching sessions on supervision and accountability measures.
- ▶ Support CDH Providers in implementing best practices related to supervision and accountability.

#### **Teen Coordinator**

The Teen Coordinator is responsible for the implementation of all supervision and accountability measures in the Teen Program. The Teen Coordinator is required to spend 60 percent of his/her time in ratio providing direct care. If a Teen Coordinator is not authorized, the YP Director assumes the Teen Coordinator responsibilities. The Teen Coordinator's duties related to supervision and accountability are as follows:

- Know the required supervision and accountability measures, and follow all required protocols as indicated in this Standard, ensuring all teens are accounted for when they are in attendance.
- Guide and mentor CYP Professionals on the correct implementation of written policies and procedures to ensure that age-appropriate supervision and accountability strategies are used.
- Work with the Management Team to implement and regularly monitor supervision and accountability processes in the Teen Program.
- Regularly assess the effectiveness of supervision and accountability procedures and processes, and determine when adjustments are needed.
- Maintain a visible presence among CYP Professionals throughout the program hours.
- ▶ Conduct CYMS reconciliation checks to ensure all teens are accounted for by matching the Teen Attendance Roster with the CYMS Attendance Report. Refer to Section 4.2.2 for more information on reconciliation checks.
- Work with the Training Team to plan for and conduct coaching sessions on supervision and accountability measures.
- ▶ Schedule adequate staff to maintain required ratios during program hours.
- Communicate any challenges with implementation of supervision and accountability practices.
- Ensure line of sight supervision (LOSS) requirements are met, including compliance with color-coded apparel requirements.
- Routinely accompanying CYP Professionals and Teens on field trips.

#### **YSF** Coordinator

The Youth Sports and Fitness (YSF) Coordinator is responsible for the implementation of all supervision and accountability measures in all YSF activities and programs. If a YSF Coordinator is not authorized, the YP Director assumes the below responsibilities. The YSF Coordinator's duties related to supervision and accountability are as follows:

- Know the required supervision and accountability measures, and follow the requirements in this Standard.
- Ensure mandated supervision and accountability policies and procedures are implemented with effective strategies that maximize the safety and well-being of each child.
- Discuss the importance of the program's accountability procedures with families (e.g., when families sign children in/out of YSF activities) to ensure that children are accounted for and safe.
- Work with the Management Team to implement and regularly monitor supervision and accountability processes within YSF.
- Regularly assess the effectiveness of supervision and accountability procedures and processes in YSF activities, and determine when adjustments are needed.
- Print (or request that the Operations Clerk print) and distribute YSF sign-in/out sheets to Youth Sports Coaches. Distribute them prior to seasons and print enough for the entire season. When Youth Sports Coaches return sign-in/out sheets at the end of the season, maintain them in accordance with the guidance detailed in the *Enrollment and Record Keeping (ERK) Standard*.
- Provide Youth Sports Coaches with emergency contacts and non-emergency authorized release designees (via a CYMS-generated report or locally produced document) for all current children participating on their respective sports team prior to each season so that Youth Sports Coaches can maintain sign in/out procedures and ensure that children leave with an authorized adult.
- Provide YSF Coaches with behavior/emergency support plans as appropriate and coordinate with the T&C to provide any additional specific supervision and accountability measures for each child with an identified need.
- ▶ Routinely visit and have a visible presence at YSF activities (e.g., skill assessments, practices, games, camps, clinics, instructional classes). Occasionally visit and have a visible presence at contracted YSF activities (on-base and off-base).
- Ensure adequate staffing to fulfill the required supervision and accountability mandates (e.g., active supervision or providing coverage for Youth Sports Coaches when needed).
- Ensure Youth Sports Coaches implement processes to ensure all children are properly accounted for while in attendance.
- Ensure line of sight supervision (LOSS) requirements are met, including compliance with color-coded apparel requirements.

#### 1.3.2 CYP Training Team

Training Specialists have frequent contact with CYP Professionals; therefore, they are uniquely positioned to assess if CYP Professionals are using supervision and accountability strategies appropriately and

Training Team

consistently. If an Assistant Training Specialist is authorized, he/she supports the Training Specialist in all training and curriculum-related responsibilities, including those described in this Standard. The Training Specialist's responsibilities for supervision and accountability are as follows:

- Know and follow the supervision and accountability requirements in this Standard.
- Develop supervision and accountability training based on guidance in this Standard, and provide all CYP Professionals with initial, annual, and ongoing training as required and needed.
- Support CYP Professionals in implementing best practices related to supervision and accountability.
- ▶ Provide ongoing professional development for all CYP Professionals.
- Routinely visit all CYP offerings (e.g., CDC, SAC, Teen Program, YSF, RSAP, Recreational Preschool, CDH) and occasionally attend field trips on and off the installation.
- Provide coverage when a CYP Professional needs to step away from his/her direct care duties to maintain compliance with staff:child ratio requirements.
- Observe supervision and accountability practices throughout the CYP (e.g., the front desk area, classrooms, outdoor play areas, CDH) to identify strengths and challenges, and to provide guidance as needed to ensure that appropriate strategies are implemented and integrated into daily practices.
- Respond and intervene immediately as needed if any supervision and/or accountability concern is observed, even if it is not directly related to training or curriculum. Follow up promptly with the Management Team to discuss those concerns and assist with developing a corrective action plan.
- Discuss identified issues and policy violations noted during routine observations with the Program Director. Work with the Management Team to develop coaching and/or training plans, additional tools, or systems modifications, and then offer solutions (e.g., refresher training, modified tools) to CYP Professionals. Observe and provide follow-up to ensure issues have been resolved.
- During all classroom and CDH observations, model appropriate behaviors and practices by asking CYP Professionals how many children are in care, counting the children present, and comparing the CYP Professional's responses against the Attendance Roster.
- Routinely document observations of CYP Professionals to assess areas for improvement, identify behavior patterns to address in training, and provide technical assistance with the entire team.
- Provide spontaneous coaching and address immediate training needs (e.g., an impromptu training or consultation) with CYP Professionals. For example, the Training Specialist can demonstrate a name-to-face recognition check prior to going inside from the playground.
- Support line of sight supervision (LOSS) by wearing approved color-coded apparel.

#### 1.3.3 Direct Care CYP Professionals

Within this Operating Standard, the term *Direct Care CYP Professional* refers to any person assigned to supervise children, no matter the length of time. Direct Care CYP Professionals typically include the Program

Direct Care Professionals

Leaders, CYP Assistants, CDH Providers, volunteers, and contractors. However, other CYP Professionals (e.g., Program Directors, Training Specialists, Assistant Directors) may be called upon to provide coverage (i.e. are counted in the staff:child ratio) and therefore must follow all supervision and accountability requirements.

#### **Program Leader**

The Program Leader spends 80 percent of his/her time in ratio providing direct care and supervision in facility-based programs. The Program Leader observes, supports, and models appropriate practices for CYP Professionals to help strengthen supervision and accountability practices. This support and mentorship role distinguishes the Program Leader from other CYP Professionals. The Program Leader has all Direct Care CYP Professional responsibilities (listed in the next subsection) related to supervision and accountability, as well as the following additional responsibilities:

- Demonstrate effective supervision strategies to ensure children feel safe and secure.
- Guide and mentor Direct Care CYP Professionals on the correct implementation of policies and procedures to ensure that age-appropriate supervision and accountability strategies are used.
- Provide support and recommendations to Direct Care CYP Professionals for the appropriate supervision of children.
- Model appropriate practices for supervising and keeping children safe.
- Frequently observe activity areas, especially during transitions, and look for opportunities to improve current supervision and accountability processes.
- Encourage Direct Care CYP Professionals to share best practices for supervision and accountability, and offer ideas for enhancements (i.e. exceeding basic requirements).
- ▶ Collaborate with the Training Specialist to develop quality improvement plans that focus on ageappropriate supervision strategies and accountability measures.
- ▶ Provide feedback to the Training Specialist when planning and conducting coaching sessions.
- Use Attendance Rosters to verify the Direct Care CYP Professional's count of children to ensure that all children are accounted for.
- Notify the Management Team if group sizes are close to exceeding the maximum allowable, if staff:child ratios are out of compliance, or if there is a possibility of them being out of compliance.
- Communicate any challenges with implementation of supervision and accountability practices to the Management and Training Team.
- Conduct informal Direct Care CYP Professional observations and provide constructive feedback to ensure that supervision and accountability standards are correctly implemented.

▶ Support line of sight supervision (LOSS) by adhering to color-coded apparel requirements.

#### Program Assistants, CDH Providers, Contractors, and Volunteers

These CYP Professionals are the primary caregivers who are responsible for a group of children and for ensuring that each child is accounted for, appropriately supervised, and safe. These CYP Professionals must organize the environment for optimum supervision of all children. Additionally, Program Assistants, contractors, and volunteers must be in **constant communication** with other CYP Professionals. These CYP Professionals' duties related to supervision and accountability are as follows:

- Know the required supervision and accountability measures and follow all required protocols as indicated in this Standard.
- Maintain awareness of which children are in the CYP Professional's group/home, and maintain close proximity to children to be able to act quickly if needed.
- Use appropriate zoning practices (refer to Section 3.3).
- Conduct head counts and visual sweeps of the environment to account for all assigned children (refer to Section 4.2).
- Conduct ratio counts throughout the program day.
- ▶ Conduct name-to-face recognition checks when transitioning children from one location to another, including at departure/arrival of offsite activities and at the designated meeting location following emergency evacuations (refer to Section 4.1.2).
- Immediately engage with other CYP Professionals when help is needed.
- Program Assistants must support line of sight supervision (LOSS) by wearing approved color-coded apparel.
- Monitor volunteers and visitors to ensure they properly sign in/out of classrooms and homes. Supervise their interactions with children and maintain active sight supervision.
- Engage children in discussion about the importance of safety practices, and request children to assist in processes, as appropriate.
- Discuss the importance of required accountability procedures with families (e.g., signing in/out) to ensure that children are correctly accounted for at all times.
- Communicate any challenges with the implementation of supervision and accountability procedures to the Program Leader, CDH Monitor, or the Management and Training Team.
- Program Assistants and volunteers must notify the Program Leader and/or Management Team if group sizes are close to exceeding the maximum allowable, if staff:child ratios are out of compliance, or if there is a possibility of them being out of compliance.

#### **Youth Sports Coach**

The Youth Sports Coach is a trained volunteer who mentors and guides children in YSF activities. Although not a paid employee, the Youth Sports Coach has frequent and direct contact with children and is responsible for the supervision and accountability of children during all YSF activities (e.g., skills assessments, practices, games, camps, and clinics). Youth Sports Coaches always

have support during games and practices in the form of one or more Assistant Coaches and/or other CYP Professionals. Some of the supervision and accountability responsibilities can be delegated or shared amongst Youth Sports Coaches. Youth Sports Coaches' supervision and accountability responsibilities are as follows:

- Know and implement required supervision and accountability strategies and practices provided in this Standard.
- Inform parents of sign in/out requirements so that they are aware of and follow procedures.
- Maintain, or delegate to Assistant Coaches, sign in/out procedures on Attendance Rosters during games and practices to track attendance and ensure that each child leaves with an authorized adult (i.e. the child's parent or an emergency or non-emergency authorized contact who is listed on the child's current Registration Form). Return Attendance Rosters to the YSF Coordinator at the end of each season.
- Notify the YSF Coordinator of any challenges or assistance needed with these required supervision and accountability measures.
- Use proven, appropriate accountability procedures to keep track of children during activities (refer to Section 4.1).
- ▶ Support line of sight supervision (LOSS) by adhering to color-coded apparel requirements.

#### 1.3.4 Support Staff

#### **Operations Clerk**

Support Staff

The Operations Clerk is often the first person the families see when entering a CYP facility and the last person when leaving. Operations Clerks are instrumental in implementing the CYP's supervision and accountability measures. The Operations Clerk's duties regarding supervision and accountability measures are as follows:

- Serve as the facility gatekeeper to ensure that everyone who enters and exits the CYP facility is documented and tracked.
- Assist families as they use their CYMS key fobs to enter and exit the facility.
- Notify the Program Director or a member of the Management Team if any expected children are absent.
- Ensure that all visitors and volunteers sign in and out on the visitor/volunteer sign-in/out sheet (Appendix C) at the front desk and that all visitors and volunteers are provided escorts while in the facility as required (refer to Section 5.3).
- ▶ Print Attendance Rosters and distribute them prior to the facility opening. Maintain printed copies of all Attendance Rosters in accordance with the *Enrollment and Record Keeping (ERK) Standard*.
- Maintain the CYMS Hourly Care Reservation Report for hourly care children, and add expected hourly care children to Attendance Rosters. For more information, refer to the CYMS Hourly Car Training Guide.

- Verify identities by examining the photo identification of any visitor, volunteer, or noncustodial parent who enters CYP facilities and confirm their reason for visiting the building. Alert the Program Director or a member of the CYP Management or Training Team before allowing that person to proceed past the front desk.
- ▶ Conduct the CYMS reconciliation count each morning to ensure all children are accounted for in the building (refer to Section 4.2.2). Provide a Visitor Badge or Volunteer Badge to each visitor or volunteer, and collect the badge upon departure.
- ▶ Support line of sight supervision (LOSS) by wearing approved color-coded apparel.
- Ensure families are reminded of the importance of keeping emergency contact information current for themselves and their designees.

#### Other CYP Support Staff (Custodians, Cooks, Food Service Workers)

All CYP support staff, including food service workers, custodians, and other administrative or maintenance staff, have a responsibility to keep children safe at all times, even though these staff members are not responsible for providing direct care and supervision to children. CYP support staff must follow all required supervision and accountability requirements and be actively aware of their environment.

- In the event that they observe an emergency (e.g., an unaccounted child) or potential supervision risk (e.g., a facility door unlocked) or see an unaccompanied, unknown person in the facility, they must immediately intervene and notify a member of the Management Team.
- ▶ Support line of sight supervision (LOSS) by adhering to color-coded apparel requirements.

## Chapter 2:

## Ratios, Group Sizes, and Capacity

Navy Child and Youth Programs (CYP) implement appropriate supervision and accountability measures to ensure the safety of all children, regardless of the program type. In facility-based settings, one such measure in place is ensuring the required number of CYP Professionals are available to provide care for children and that the number of people allowed in designated spaces (i.e. group size) is appropriate. Staff:child ratios and group sizes establish thresholds to help ensure that children receive sufficient attention from an adult who is available to respond to children's needs and monitor their safety. In CDH, a lower group size and ratio requirement helps support the implementation of supervision and accountability measures. To maximize child safety, CYPs must adhere to the following child group management requirements: (1) staff:child ratio, (2) group size, and (3) capacity.

- **Staff:child ratio:** The relationship in quantity between a CYP Professional assigned to care for children and the number of children for whom the assigned CYP Professional is responsible.
- **Group size:** The maximum number of children allowed in a classroom/activity area/home based on the ages of the children in care.
- **Capacity:** The maximum number of individuals that can safely occupy a space.

#### 2.1 Staff: Child Ratios

Research has consistently shown that lower staff:child ratios, smaller group sizes, and separate group spaces are associated with higher program quality.<sup>2</sup> Compliance with the closely related requirements of staff:child ratio and group size helps ensure children's well-being and safety and is a key program quality indicator. CYPs must comply with staff:child ratios **and** group size requirements during all hours of operations in all program settings, including any indoor settings, classrooms, CDH environments, playgrounds, outdoor learning environments, sport fields, field trips, and in transit from one location to another.

<sup>&</sup>lt;sup>2</sup> Fiene, Richard. "13 Indicators of Quality Child Care: Research Update." Presented to the Office of the Assistant Secretary for Planning and Evaluation and Health Resources and Services Administration/Maternal and Child Health Bureau, U.S. Department of Health and Human Services, Washington, DC (2002).

The following charts show the required Staff:Child Ratios and Maximum Group Size for each program type within CYP.

Table 2.1A: Staff:Child Ratio and Maximum Group Size by Age Group in CDC and 24/7

Programs

Age Group	Staff:Child Ratio	Maximum Group Size
Infant (6 weeks-12 months)	1:4	8
Pretoddler (13-24 months)	1:5	10
Toddler (25-36 months)	1:7	14
Preschool (37 months-5 years)	1:12	24
School Age Care Programs (5-18 years)	1:15	n/a See <u>Section 2.2.1</u>

Note: During rest time, the staff:child ratios for children over 24 months of age may increase to twice the non-napping staff:child ratio. A sufficient number of staff members is required to remain in the facility during rest time to meet the non-napping ratios and be available to assist with emergencies.

CDH Providers typically have no more than six children in care at any one time; however, ratios and group size requirements vary depending upon the type of CDH the Provider is operating. A Provider's own children under the age of 8 count towards ratio and maximum group size.

Table 2.1B: Provider: Child Ratio and Maximum Group Size in CDH

Infant Only Home	Multi-Age Group - Small CDH	Multi-Age Group - Large CDH	School Age Only Home
Maximum group size is three children under the age of 2 years.	Maximum	Maximum group size is 12 with two Providers.	
Infant-only, Home-Large CDH.  Maximum group size is six with	group size is 6. No more than 2 children under	One Provider to six children; Each Provider	
two Providers. Each Provider may have three children under the age of 2.	the age of 2.	may have two infants under the age of 2.	Maximum group size is eight. Provider's own children must be age 5 and older.

The following are the minimum staff:child ratio requirements per youth program or activity. Ratios can and should be lowered as needed to maintain optimal safety of youth/teens.

Table 2.1C: Youth Programs Staff:Child Ratio by Program/Activity

Programming/Activity	Age of Youth/Teen	Staff:Child Ratio
	SAC (5–12 years)	1:15
Facility-based	Recreational Preschool (3–5 years)	1:12
	Teen Program (13–18 years)	1:15
Field trips, overnight trips, lock-ins	All applicable ages	1:8
Residential camps	All applicable ages	1:12
Youth sports	Ages 3–18 years	1:15
Vehicle transportation (to/from school)	All applicable ages	1:15
Vehicle transportation (field trips)	All applicable age	1:8
Airplane transportation	All applicable ages	1:4
Independent Travel Situations	All applicable ages	1:1
Hotels	All applicable ages	1:8
<b>High adventure activities</b> (e.g., climbing, water sports)	All applicable ages	1:8
All programming/activities with mixed age groups	All applicable ages	See <u>Section 2.2.1</u>

In *Start Smart*, parents are required to attend and participate in the implementation of the developmentally appropriate Youth Sports and Fitness (YSF) activities with their preschool-age children and to supervise their own children.

Only CYP employees, CDH Providers, contracted direct care staff, and Youth Sports Coaches providing direct care/supervision to children may be counted in staff:child ratios. All CYP Professionals whose child care investigations have not yet been initiated, parents, visitors, and/or other contractors shall not be counted in staff:child ratios. Volunteers under 18 are not counted in ratio.

#### 2.1.1 Single Staff: Child Ratio Staffing in CDCs and 24/7 Centers

While assigning more than one CYP Professional to provide care for a group of children allows the CYP to maximize center-based group sizes, single ratio staffing is also a useful CYP operations tool. Single staffichild ratio staffing, or single ratio staffing, is the assignment of one fully adjudicated CYP Professional to provide care for one ratio group of children. CDH and SAC/YP typically operate with single ratio staffing; however, all CYPs are authorized to implement single ratio staffing within the guidance below.

In CDC and 24/7 single ratio staffing, staff:child ratio must not exceed what is shown in Table 2.1.1A.

Table 2.1.1A: Required Ratios During Implementation of Single Ratio Staffing

Age Group	Single Ratio Staffing
Infant (6 weeks-12 months)	1:3
Pretoddler (13-24 months)	1:4
Toddler (25-36 months)	1:6
Preschool (37 months-5 years)	1:10

When implementing single ratio staffing in a facility-based program, the program must adhere the following guidelines:

- ▶ The Management Team must carefully evaluate the assigned children in the single ratio classroom, ensuring that any child with identified needs, behavioral needs, or any other type of individual needs or challenges can be supported in this type of grouping.
- While this evaluation requirement applies to all staff who work with children, it is imperative to ensure that staff members assigned to a single ratio group can reasonably manage the group without direct support present.
- Since sight and sound supervision requirements vary based on children's ages, position strategies must be adjusted as needed to support single ratios. Trainers shall work with Direct Care staff to identify the best positioning for each age group to ensure appropriate supervision by sight and sound, as applicable.
- Management and Training Teams must observe the application of positioning strategies to ensure that direct care staff understand them and are implementing them consistently and effectively.
- Leadership must provide additional oversight via CCTV and during room check-ins to support CYP professionals while in single ratio.
- ▶ Classroom and/or activity areas must have intercom and/or walkie-talkie for CYP Professionals to contact front desk for immediate support when needed.
- At least two paid CYP Professionals must be present in a CYP facility at all times, including 24/7 programs. At least one professional must be fully adjudicated.

#### 2.2 Group Size

**Group size** refers to the maximum number of children in a group allowed in a program space.

As with the staff:child ratio (identified in Table 2.1A), group size is determined according to the ages of children and the program/activity space in CDCs and 24/7 Centers. Single ratio staffing is the maximum ratio indicated in Table 2.1.1A.

In CDH, the space available to children in the home must be considered when determining group size. Group sizes are referenced in Table 2.1B. If all children are under 2 years of age, the maximum group size is three children. In a multi-age Small CDH, the maximum group size is six children, depending on the space in the home. If all children in a Small CDH are 5 years and older and they have all started kindergarten, including the Provider's own children, the maximum group size is eight

children. In a multi-age, Large CDH, the maximum group size is 12 children with two certified CDH Providers, depending upon the space in the home.

In SAC, Teen Programs, and YSF programs, the group size for children is not limited (i.e. there is no maximum group size for youth and teens) as long as the allowable facility/room capacity is not exceeded.

#### 2.2.1 Determining Maximum Group Size for Mixed-Age Groups

Mixed-age groups include children from more than one age group. Mixed-age groups are appropriate in 24/7 and CDH programs due to the smaller group sizes and in CDCs and SACs, especially during times of lower child attendance (e.g., during arrival and departure periods) to maintain appropriate supervision of children while maximizing staff labor or to maximize space utilization when a higher demand for care for one age group could be met by creating multi-age groups.

Examples of mixed-age groups include the following:

- For CDCs, a mixed-age group may consist of infants, pretoddlers, toddlers, and preschoolers.
- For CDH and 24/7s, a mixed age group may consist of infants, pretoddlers, toddlers, preschoolers, and school-agers.
- For SAC, a mixed-age group may contain children ages 5-12 years.

The following process applies to facility-based programs and shows how to determine the staff:child ratio for mixed-age groups based on the percentages of children in each age group. For applicable staff:child ratios for mixed age groups in CDH, refer to Table 2.1B.

Example: A CDC has five toddlers and nine preschoolers in a mixed-age group in the hour before the facility closes. The CYP Professional uses the formula below to determine what percentage of the mixed-age group is in the youngest age group (i.e. toddlers).

**Step 1**: **Determine the applicable percentage.** The following formula helps to determine what percentage of the children in the mixed-age group are in the youngest age group.

Number of children in youngest age group  $\div$  total number of children in group  $\times$  100 = percentage of children in youngest age group

5 toddlers  $\div$  14 total children = .36  $\times$  100 = 36% of group are toddlers

- **If** the youngest age group makes up 20 percent or more of the entire group, **then** the staff:child ratio for the youngest age group must be applied to the entire group. This applies when there are two age groups present.
- If the youngest age group makes up less than 20 percent of the entire group, then the staff:child ratio for the older age group must be applied to the entire group. This applies when there are two age groups present.

- If three or more age groups are present in the mixed-age group, then the staff:child ratio applied must be for either the middle or youngest age group, depending on which group makes up the higher percentage of the entire group.
- ▶ Step 2: Find ratio. The CYP Professional uses Table 2.1A to determine the appropriate staff:child ratio. In the example above, toddlers make up 36 percent (more than 20 percent) of the group; therefore, the appropriate ratio is 1:7.
- ▶ Step 3: Ensure the correct group size. Once the staff:child ratio is established in Step 2, depending on the total number of children, the CYP Professional may find that the mixed-age group cannot remain together as one group based on the maximum group sizes in Table 2.1A. If this occurs, the CYP Professional must create two groups, then use the formula to determine the appropriate ratio and group size for each group. Creating another group in a CDC means opening an additional classroom to accommodate the separate staff:child group. In 24/7 programs, this means assigning a CYP Professional to take a second group of children to the kitchen, playground, etc. for separate group activities.

For SAC, most CYPs elect to operate free-flowing program groups which feature the mixing of children ages 5-12 years throughout class/activity rooms. With this type of grouping, if 5 year-olds make up 20 percent or more of all children in attendance, a 1:12 ratio is required. Additionally, if a CYP designates a single class/activity room for 5 year olds, a 1:12 staff:child ratio is required in that class/activity room.

#### 2.2.2 Extending a Group Size

In CYP, there may be circumstances when children must be accommodated within an extended group size to temporarily facilitate program operations. These instances may include implementing hourly care, supporting child transition visits to the next classroom (in CDCs), accommodating a child who requires restroom use from the playground (CDCs), etc. The Management Team of facility-based programs are authorized to temporarily extend group size to accommodate children in the aforementioned instances if the following conditions are met:

- The classroom/group consists of pretoddlers, toddlers, and/or preschoolers.
- ▶ The group size extension is 10 percent or less.
- ▶ Staff:child ratios are met. Assign an additional CYP Professional as needed.
- ▶ The total number of individuals in the room/space does not exceed the capacity set by fire department.

Note: Group size may not be extended in an infant classroom/group or single ratio group.

The following table shows the number by which the group size may be extended to accommodate an additional child or children for each age/program type.

Age	Maximum Group Size	Authorized extension to group size to accommodate temporary children (i.e. hourly children)
Infants	8	Extension <b>not</b> authorized
Pretoddlers	10	1 (total of 11 children)
Toddlers	14	1 (total of 15 children)
Preschoolers	24	2 (total of 26 children)
School Age Care	n/a	At the discretion of CYP Management, extensions can be made as staffing

Table 2.2A: Authorized Facility-Based Group Size Extensions

In CDH, the following exceptions may be authorized to extend group size temporarily:

- During an emergency situation such as a fire at another Provider's home, a natural disaster, or some other unforeseen situation
- When care for a child is requested by FAP for an emergent situation

Regardless of the circumstances, CDH Providers are authorized to temporarily extend group size to accommodate children in these types of instances if they adhere to the following guidelines:

- Capacity must be maintained as determined by Fire.
- DH Director or Monitor is notified prior to accepting the child in care so a plan for support can be created to include the length of time the group size may be extended.
- Multi-age homes may only extend group size by one child between the ages of 2 and 5.
- School Age Care Only Homes may extend group size by two children between the ages of 5 and 12 for a total of 10 children.
- Infant Only Homes may not extend group size.

#### 2.3 Ratio and Group Size During Employee Transitions

In facility-based programs, required staff:child ratios and maximum group sizes apply throughout the programming day, including when CYP Professionals in a direct care role transition in and out of ratio. The Management Team must ensure adequate coverage if a direct care staff is not available at the scheduled time or needs to step away from direct supervision for any reason. The Management Team must adhere to the following requirements to ensure staff:child ratios are always maintained:

- Work proactively with CYP Professionals to secure coverage for absent direct care staff (e.g., due to sickness or vacation days) and in advance of anticipated direct care staff transitions during the program day (e.g., breaks, required trainings, curriculum planning).
- ▶ Collaborate with other CYP facilities on the installation (e.g., SAC, 24/7 Center) to create cross-facility utilization of CYP Professionals, creating a larger pool of direct care staff for ratio coverage.
- Establish procedures to maintain ratios and active supervision during unforeseen, emergency situations (e.g., a sick child must be escorted quickly to the restroom or a child unexpectedly

- runs off the playground) so that direct care staff know how to alert the Management Team, Operations Clerk, and/or the Training Team to obtain appropriate support.
- Monitor daily openings and closings of classrooms/activity areas to ensure adequate staffing for the number and age of children present during these transition periods.

#### 2.4 Capacity

Capacity refers to the maximum number of individuals that can safely occupy a room or space. Capacity is determined by the local fire department using current fire code safety regulations and is based on the square footage of the area to include Child Development Homes. Capacity limitations must be considered when determining how to use the space. Programs must not exceed capacity limits. Direct Care professionals should immediately notify management if exceeding the room capacity is imminent and they have not been notified of a pre-determined plan of action.

## **Chapter 3:**

### **Child Supervision Requirements**

**Child supervision**, referred to as supervision in this context, is an active process that involves developmentally appropriate observation, listening, interacting, monitoring, and providing guidance while proactively minimizing risks to children. Supervision is the act of directly watching over the performance and activities of the children in care to ensure safety. When applied effectively, this process helps to ensure that a CYP Professional is available to respond immediately, especially when a child is at risk of harm, requires support, or is distressed. Research clearly supports the importance of supervision and child guidance in early education and care settings. Appropriate supervision is known to lessen the occurrence of certain behavioral challenges in children and has been shown to decrease injury rates among young children in child care settings.

CYP Professionals must be physically present and engaged with children, even with single ratio groups such as CDH, 24/7 Centers, Youth Sports, etc. Programs must ensure that no child is left alone or unsupervised by CYP Professionals. There are strategies that will support effective supervision of children, which include:

- Having an awareness of the developmental abilities of each child
- Observing and listening to children
- Anticipating children's behaviors, positively engaging with children, and redirecting unsafe behaviors
- Establishing strategic body positioning and zones of supervision with adjustments, as needed
- Scanning play activities and circulation around the area, observing for potential safety hazards

<sup>&</sup>lt;sup>3</sup> American Academy of Pediatrics, American Public Health Association, National Resource Center for Health and Safety in Child Care and Early Education. *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs*, 3<sup>rd</sup> edition. Elk Grove Village, IL: American Academy of Pediatrics; Washington, DC: American Public Health Association (2011).

<sup>&</sup>lt;sup>4</sup>Chen, Xiao; Beran, Melissa; Altkorn, Robert; Milkovich, Scott; Gruaz, Kristin; Rider, Gene; Kanti, Amita; Ochsenhirt, Jen. "Frequency of Caregiver Supervision of Young Children during Play." *International Journal of Injury Control and Safety Promotion* (2006): 14:122-24.

The Management Team supports proper child supervision on a daily basis by providing CYP Professionals with clear policy guidance, oversight, and support. They routinely monitor classrooms, CDH environments, playgrounds, and other activity areas (e.g., gyms, hallways, fields) to ensure effective practices.

In facility-based programs, the Management Team promotes a team-based work environment and schedules an adequate number of professionals to maintain required staff:child ratios throughout the day. CYP Professionals must work to coordinate supervision and effectively implement supervision strategies.

The following sections describe developmental considerations regarding the implementation of child supervision and key supervision strategies and requirements.

#### **3.1 Developmental Considerations**

Children require different levels of supervision based on their ages and developmental needs. The way that CYP Professionals supervise an infant who is just learning to roll over is different from how they supervise a group of 11-year-olds playing tag on the playground. Appropriate supervision techniques, such as the physical distance between a supervising adult and child at any given time, must be adapted to meet each child's unique needs.

Below are brief descriptions of the typical development needs for each age group served in CYPs and implications for supervision.

reach the child/respond immediately.

- Dependent on adults to meet their basic needs and keep them safe. Infants explore their world through tactile and oral exploration, constantly touching objects and putting them into their mouths. Infants are able to get into unsafe positions of distress but many not cry out. Therefore, CYP Professionals must closely supervise infants at all times by sight and sound and be able to
- Pretoddlers (13–24 months) increasingly want to explore their environment. Pretoddlers will show greater independence and may begin to demonstrate some defiant behavior. They are generally able to recognize the names of familiar people and objects, form short phrases and sentences, and follow simple directions. They are typically developing more refined fine and gross motor movements, allowing them to move more freely around the room and pick up objects. However, they have yet to develop depth perception or general awareness about safety hazards (e.g., trying to climb on a shelf). CYP Professionals must supervise pretoddlers closely enough by sight and sound that they are able to quickly redirect a child (e.g., a child who has started to crawl toward the door) or immediately remove safety hazards (e.g., a pebble the child is trying to put in his/her mouth) while encouraging the child's development and exploration.

#### **Considering Individual Needs**

CYP Professionals must be attentive to the individual range of needs of children in their care, including in active play situations (e.g., a child loves birds and tends to chase them without paying attention to her surroundings, another child becomes frightened when he hears sirens and tries to hide or flee, a child becomes upset by a comment made and runs away from the group).

- Toddlers (25–36 months) are experiencing cognitive, social, and emotional changes that allow them to explore their world and begin to make sense of it. Toddlers are generally able to follow two- or three-step directions, imitate the actions of adults and playmates, and express a wide range of emotions. They frequently engage in active and imaginative play; however, their large motor skills are still developing, and they often attempt activities for which they may not quite be ready. Toddlers tend to be risk-takers and explore the limits of spatial concepts using their bodies. CYP Professionals need to be close by to help them explore in a safe manner. Toddlers are beginning to engage in parallel and group play with other children but have not yet developed negotiation skills, often resulting in struggles with peers. CYP Professionals must closely supervise toddlers by sight and sound to quickly respond to challenging behaviors and to intervene and redirect when necessary.
- Preschoolers (37 months–5 years) are becoming more independent and are extremely curious about their surroundings. Preschoolers' gross and fine motor skills are strengthening, allowing for increased self-help skills (e.g., they can put on their own coat, wash their own hands), and they demonstrate more physical coordination on play equipment. CYP Professionals should stand near preschoolers to supervise but should allow the children to complete tasks independently unless there are signs of potential problems. Preschoolers' social and interaction skills are also developing during this stage. Preschooler are generally comfortable moving around on their own and can easily open doors and unlock locks. CYP Professionals should set safe limits and expectations. CYP Professionals must maintain close supervision primarily by sight and sound to prevent or respond quickly to challenging behaviors, intervening and redirecting when necessary. CYP Professionals must remain especially vigilant in watching for situations in which children may be bullied, hit, or ignored so they can provide thoughtful, consistent, and individualized intervention where appropriate.
- ▶ School-Age (5–12 years) youth are rapidly developing, becoming more independent and increasingly able to exert self-control. They can express their ideas and feelings, have a sense of humor, and learn to solve problems. School-age youth are very social and like being part of peer groups. They may tend to form cliques. They are beginning to understand others' perspectives. CYP Professionals provide guidance that is balanced with opportunities for youth to be independent, increase their confidence, and make decisions. However, they need adults to support them and provide guidance in various situations. It is important for CYP Professionals to observe and listen as there are frequently cues from school agers that adult engagement is needed.
- Teens (13–18 years) This period of development is full of physical, cognitive, and social-emotional changes. Although teens are starting to make more of their own choices about friends, sports, studying, and school, they may not always be aware of the consequences of their choices or actions. Teens may test rules and limitations as they continue to seek independence, yet they also find security in structure and rules. During this rapid development period, teens need a balance of time spent with their peers and with adults. CYP Professionals should consult with teens in designing program activities and events to ensure the activities are relevant and interesting to them. CYP Professionals should also support teens by providing them opportunities to lead or mentor their peers.

#### 3.2 Active Supervision

CYP Professionals must provide intentional and active supervision. This supervision approach transforms the presence of a CYP Professional from a passive requirement into the application of effective skills that protect children. Active supervision includes applying developmentally appropriate observation, monitoring, and guidance to ensure children's well-being and to promote learning. Training Specialists will provide targeted guidance to the CYP Professionals to ensure that appropriate strategies are implemented and integrated into daily practices.

Realistically, there may be instances when a CYP Professional's attention is required for circumstances

that directly impact their ability to actively supervise the children (e.g., expression of parent concern, arrival of a personal visitor, intercom/front desk phone call, etc.). While these instances should be minimal during operational hours, the following guidance should be applied:

## Active Supervision Involves Active Observation

CYP Professionals must position themselves so that they can actively observe all children in their care at all times. "Active observation" includes the following:

- Observing children
- Listening to children

- Keep conversations with CYP families or other CYP Professionals brief while supervising children. Communicate the requirement for continued supervision to the family member. During brief parent conversations, stand facing into the activity area to continue actively supervising children. When more focused attention with a parent is needed, offer to schedule an appointment with the parent to continue discussion or call for another CYP Professional to provide supervision if communicating with the parent is urgent. For CDH, Providers can schedule a time to talk to the parent or arrange to call the parent after all children have gone for the day.
- When a personal visitor (e.g., spouse, relative, friend, police, etc.) requests to talk with a CYP Professional in-person or by phone, if reasonable, the CYP Professional should be provided a break to address personal matters. Personal visitors should not be allowed in the activity area while the CYP Professional is supervising children as this increases the risk of a lapse in supervision of children. In CDH, Providers should limit prolonged conversations with their family members and address these matters during a time when all children have gone for the day.
- The use of personal cell phones is prohibited for CYP Professionals while assigned to care for children due to the requirement to actively supervise the children at all times. Exceptions are allowed during an excursion, field trip, or emergency only when it is necessary to communicate with the program or make emergency request call(s). For CDH Providers, limit times when conversations or text messages with/from parents are needed in order to ensure supervision of children is ongoing.

The implementation of active supervision helps to ensure that children across the range of ages served are able to explore their environments safely. As described in Section 3.1, children need different levels of supervision at different ages and within different developmental levels. CYP Professionals must use their child and youth development knowledge, together with their awareness of each child's unique needs, to determine their supervision strategies. This includes their proximity to the children, attentiveness, levels of engagement, and overall monitoring and vigilance of the

environment. The CYP Management and Training Team members must provide ongoing monitoring and training support to ensure that active supervision is consistently and effectively implemented. Two sets of primary supervision strategies—sight and sound supervision and positioning and zoning strategies—are discussed next.

#### 3.2.1 Sight and Sound Supervision for Children

A CYP Professional's ability to see and hear the children in care is a central component of active supervision. Visually supervising involves actively observing each child, maintaining an awareness of where the child is and what he/she is doing. Regarding hearing, CYP Professionals should be able to hear the child from where they are positioned. Specific sounds, or the absence of them, may indicate a reason for safety concern, engagement, and response. CYP Professionals who are observing and listening to children can anticipate the outcomes of children's behavior, identify signs of potential danger, and engage as needed to redirect.

NAEYC has established two required sight and sound child supervision assessment items that programs must meet to achieve and maintain NAEYC accreditation (Navy CDCs and 24/7 Centers must be accredited), as listed below:

- Infants, pretoddlers, and toddlers must be supervised by **sight and sound** in care at all times.
- Preschoolers must be supervised by sight most of the time. Supervision by sound alone is permissible for short periods of time., as long as CYP Professionals are able to hear them and check on them frequently (e.g., children can use the toilet independently, during nap, etc.).

Similar to NAEYC, the National Association for Family Child Care (NAFCC) has minimum standards required for sight and sound supervision. These standards align with Navy CYP policies and requirements and are, at a minimum, considered best practice for CDH Providers:

- ▶ Children under the age of 3 must always be in the Provider's line of sight, except when the Provider is attending to personal needs for up to 5 minutes. The Provider assures the safety of all children while attending to his or her personal needs.
- Children age 3 and older may be out of the Provider's line of sight for short periods of time if the Provider is close by and listens carefully to ensure all children are safe.

Sight and sound supervision—the ability to see and hear each child at any point in time—must occur at all times throughout the program day, including when younger children are napping, toileting, or participating in activities indoors or outdoors. The CYP team approach requires the support of the Management Team to observe, coach, and provide feedback/training as needed to ensure practices are effectively and consistently implemented. In CDH, the team approach includes the Monitor and Trainer supporting Providers on a regular basis through home visits, observations, and check-ins. Distinctions for sight and sound supervision of youth are discussed in the next section.

#### 3.2.2 Sight and/or Sound Supervision for Youth

Optimal youth (i.e. 6- to 18-year-olds) supervision is based on positive relationships between youth and adults as well as on the implementation of active supervision (sight and/or sound). Due to the

general developmental level of youth, **sight** <u>or</u> **sound supervision** is the minimum requirement. A CYP Professional's decision to use sight and/or sound supervision must be dependent on the youth's behavior, developmental readiness, and the risk-level of any activities in which youth are participating. Based on these factors, if an event or environment warrants it, sight and sound supervision is required.

#### 3.2.3 Youth Engagement in Supervision

Youth engagement is critical to the success of any supervision strategy and involves two dimensions: (1) establishing trustful relationships and (2) clarifying rules and expectations in order to empower youth to take ownership of their behaviors and participation.

CYP Professionals must take the time to establish and maintain one-on-one, consistent, and positive interactions with youth in order to foster mutual trust. Communication is strongest and supervision strategies are most effective when CYP Professionals and youth trust one another.

Youth are developmentally capable of understanding rules and appropriate behavioral expectations. CYP Professionals must communicate the program's behavioral expectations to youth and their families during orientation and/or a youth's first day of attendance. When youth know what is expected of them, the youth can be accountable for their behavior and CYP Professionals are better able to provide developmentally appropriate supervision.

There are often natural leaders in groups of youth who may take (when allowed) a mentoring and guiding role with their peers to assist with enforcing group supervision and accountability expectations.

Youth must be involved in maintaining their own safety and the safety of others while in the program. CYP Professionals must engage youth in ongoing discussions, allowing them to provide input on the program's expectations and rules, and the natural and logical consequences of not following those expectations and rules. This does not mean that youth are allowed to make the rules or set expectations, but they must have the opportunity to voice their opinions and contribute to discussions on safety, expectations, and consequences. Youth who are encouraged to provide input are often more inclined to accept guidance.

Exhibit 3A displays that the foundation of optimal youth supervision are the positive relationships between youth and CYP Professionals. When youth and CYP Professionals establish positive relationships, youth supervision is more likely to be successful.

**Exhibit 3A: Pyramid of Youth Supervision** 

Youth
Supervision

Active Supervision
(Sight and/or sound,
zoning and positioning)

Positive Relationships
(between youth and CYP Professionals)

#### 3.3 Positioning and Zoning Strategies in CYP

Positioning and zoning are key strategies to support active sight and sound supervision. CYP Professionals must use positioning and zoning in all environments, activities, and transitions, as appropriate, to ensure the safety of all children and to respond to their needs in a timely manner.

#### 3.3.1 Positioning

Positioning refers to the way CYP Professionals continually place themselves in any environment to ensure that all children are within sight and/or sound of at least one CYP Professional, as required, at all times. Positioning does not mean that CYP Professionals are always standing; rather, it means that whether sitting, kneeling, standing, or engaged in an activity such as cooking or changing a diaper (as in a CDH), the CYP Professionals have a clear view of all children under their supervision. When more than one CYP Professional are present, they must work as a team to provide effective positioning with regard to the group of children. Staff must coordinate to rotate between areas and provide assistance as needed. Regardless of the program, CYP Professionals must have a constant awareness of where children are and, if needed, move themselves and adjust their positions to ensure effective supervision.

The Management Team and Training Specialists are expected to provide ongoing support to ensure optimal positioning becomes a consistent practice for CYP Professionals. By continually evaluating positions through observations, Management Team and Training Specialists work with CYP Professionals to assist them in determining the optimal positions for appropriate supervision. More information on Positioning and Zoning Strategies can be found in Appendix E.

#### **3.3.2 Zoning**

**Zoning** is a strategy in which CYP Professionals establish specific zones/areas in a space (e.g., classroom, field, playground) where each CYP Professional has primary supervision responsibility to scan the entire area. For example, CYP Professionals may stand or sit engaged in different activity areas, monitoring the children within that zone. When a specific interaction with a child or other

adult is necessary, the CYP Professional should continue to actively monitor the environment while listening to or assisting the other person. This practice is effective both indoors and outdoors in ensuring that CYP Professionals actively monitor all children and activities while visually scanning the environment to maintain active supervision. As with positioning, when more than one CYP Professional are present, CYP Professionals must work as a team to provide effective zoning, rotating as needed. The Management Team and Training Specialist should observe CYP Professionals' zoning and assist CYP Professionals as appropriate. In CDH, Providers are responsible for scanning and supervising all areas used by children. As Providers are typically the only CYP Professional supervising children, it is critical that the Provider regularly assess the set-up of each area in the environment to ensure that all children can be easily supervised. For more information on setting up the environment for effective supervision, see Section 3.5. More information on Positioning and Zoning Strategies can be found in Appendix E. See Appendix F for additional supervision guidance by activity type that is used during routine care, play, and outdoor activities.

## **3.4 Enhanced Supervision Requirements for Offsite Activities**

During offsite activities, general supervision requirements must always be followed. However, depending on the type of offsite activity, there may be additional measures necessary to ensure safety for all children. These additional safety measures are based on the physical layout of the environment and the activities provided.

CYP Professionals may not have the supports and safety measures typically available to them in the program facility/CDH during offsite activities. Therefore, it is especially important for CYP Professionals to have a heightened sense of awareness of their surroundings. Offsite activities require extra attention to supervision processes of which programs should consider.

When planning for any offsite activity, additional supervision strategies are found in Appendix G.

#### 3.4.1 Supervision During Offsite Field Trips

CYPs should supply identifying apparel to children to enhance the supervision of children by CYP Professionals, enabling them to immediately recognize CYP children. The CYP Management Team or CDH Provider will determine what identifying apparel the children will wear during the field trip. As a reminder, identifiers should not display the children's names. Examples of identifying apparel include identical t-shirts, a request for parents to wear a selected color, tie-dye shirts made in the Program, etc.

#### 3.4.2. Supervision During Transportation

Transporting children from one place to another is a transitional event that requires specific supervision measures. The following sections identify additional measures that should be taken during specific transportation activities. All staff:child ratio and line of sight supervision (LOSS) requirements must be maintained.

#### **Walking Groups**

Walking groups are used to transport children to and from the Program for offsite activities within walking distance (e.g., to/from CDC, CDH, SAC, school, on-base field trips). The following supervision practices should be considered:

- Utilize older children to serve as door holders.
- Discuss how necessary equipment or supplies will be carried or transported to/from the offsite activity.
- When multiple CYP Professionals (or, in CDH, if parents or other CDH Providers) are attending the walking group, distribute CYP Professionals throughout the walking group to ensure maximum supervision of children. One CYP Professional should always be at the back of the group to ensure all children remain with the group when, for example, they cross the streets together, to maintain appropriate supervision.
- ▶ Utilize the safest known walking route to the offsite activity. For younger children, utilize lead ropes, wagons, and strollers. In CDH, younger children may be transported in infant carriers when appropriate.

#### **Vehicle Transportation**

The following are supervision requirements for the vehicle transportation of children:

- ▶ Children requiring additional supervision (e.g., young children or children with concerning behavioral/special needs) should sit in the front or aisle seats of buses. For CDH Providers, these children should be seated in the seats nearest to the driver but not in the front seat.
- When possible, install convex mirrors to increase visual supervision of children.
- In SAC and Teen Programs:
  - When providing transportation to/from school, the driver can be alone with children only if he/she has been favorably adjudicated. If a driver requires LOSS, a favorably adjudicated employee must be present.
  - When providing transportation to/from a field trip, at least two adults (one must be a paid CYP employee) must be in ratio at all times. The bus driver is included in the staff:child ratio if he/she is a paid CYP employee. Additionally, when multiple CYP Professionals are present, they should be spread out amongst the children to increase visual supervision of children.
- A process is implemented to ensure children/youth are not left unattended in vehicles when transported.

#### **Independent Travel Situations**

Independent travel situations require a heightened state of awareness and supervision by CYP Professionals because of the 1:1 staff:child ratio and the CYP Professional assigned to accompany teens to independent travel situations will not have the supports and safety measures typically available to them in the program. Supervision requirements for independent travel situations are as follows:

- A CYP Professional traveling to events/activities that feature a 1:1 staff:child ratio must have a favorably adjudicated background check. A second CYP Professional is not required.
- ▶ CYPs should consider assigning a CYP Professional that has a strong, positive relationship with the teen.
- When possible, CYPs should align the gender of the CYP Professional to the teen traveling to events/activities that feature a 1:1 staffichild ratio. However, this consideration is less critical than assigning a CYP Professional that has a strong, positive relationship with the teen.
- ▶ CYPs must establish communication protocols to include the teen, the sponsor/parent, the CYP Professional, and CYP Management Team. CYPs should consider either (1) issuing a GOV cell phone or (2) authorizing the CYP Professional to use their personal cell phone as a means of communication.
- Separate lodging must be arranged. The CYP Professional and teen must not share lodging; however, rooms should be located near one another but not adjoining.
- During air travel, every effort should be taken to seat the teen and staff together to ensure supervision.

#### 3.5 Environment Requirements for Supervision in CYPs

Appropriate supervision of children is supported through proper room arrangement, facility design, and clear visibility in all CYPs at all times. This requirement not only keeps children safe, but it also minimizes potential liability to the CYP. Navy policies regulate the structure of both indoor and outdoor environments to improve child visibility and facilitate child supervision.

CYPs must arrange environments to allow for maximum supervision of children through visual observation. Navy policy requires CDCs to follow the guidance in <u>Unified Facilities Criteria Child Development Centers</u> and YPs to follow the guidance in <u>Unified Facilities Criteria for Youth Centers</u>. CDH follow OPNAV guidelines and NAFCC standards for establishing environments that support clear visibility of children in care at all times. The following table provides minimum requirements to support appropriate supervision in CYPs for maximum visibility.

	Table 3.5A: Setting	Up the	Environment	t to Su	pport A	∖ppro	priate S	Supervision
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Facility Usage Component	Facility Requirements to Maximize Supervision	Applicable CY Programs
Arranging Furniture	<ul> <li>Lines of sight must be clear</li> <li>Arrange all furniture to ensure that all children and adults can be seen at all times</li> </ul>	CDC, 24/7, CDH, YP
Eliminating Blind Spots	Identify and remove any blind spots to facilitate visual access; open areas must maintain adequate visibility	CDC, 24/7, CDH, YP
	<ul><li>Ensure hallways, entrances, lobbies, and passageways have</li></ul>	

Facility Usage Component	Facility Requirements to Maximize Supervision	Applicable CY Programs
racincy osage component	clear lines of sight when children are present	Applicable of Frograms
Using Convex Mirrors	Install convex mirrors in low visibility areas to facilitate supervision	CDC, 24/7, YP*
Creating Adequate Lighting	No classroom or activity area can be completely darkened	CDC, 24/7, CDH, YP
	<ul> <li>Classrooms and activity areas must have ample lighting</li> </ul>	
	<ul> <li>Ensure lighting supports clear line of sight of all children and adults in classroom</li> </ul>	
Maximizing Window Visibility	Interior and exterior windows must have clear line of sight	CDC, 24/7, YP
	Keep windows free from artwork, draperies, or blinds that prevent line of sight	
Using CCTV	<ul> <li>CCTV cameras must be installed inside and outside of CYP facilities to support thorough monitoring of the premises</li> </ul>	CDC, 24/7, YP
	<ul> <li>CCTV does not replace direct supervision or meet ratio requirements</li> </ul>	

<sup>\*</sup>Although convex mirrors are not required in CDH Provider environments, Monitors may recommend and Providers may elect to install them to enhance supervision if needed.

## **Chapter 4:**

## **Accountability Measures**

Supervision and accountability go hand in hand. Supervision requirements and accountability systems are implemented simultaneously and continually. This means that all CYPs are also accountable for children, and that each CYP Professional must take personal responsibility for knowing how many children are present, which children are in their direct care, and where they are at all times.

CYPs must implement accountability measures and practices that ensure that all children are appropriately accounted for while at the program, on the playground or game fields, participating in offsite activities away from the

## Each CYP Professional, Each Child, Each Moment

Accountability for children is a 100-percent endeavor:

- Each CYP Professional takes personal responsibility for applying accountability measures and ensuring accountability documentation is current.
- Each child is accounted for at all times—CYP Professionals know each child's exact location and who is responsible for supervising the child.
- **Each moment** the program is operating requires diligence to prevent even momentary lapses in accountability measures.

program, and also when children do not attend the program as expected. Additionally, CYPs must implement accountability procedures to ensure all visitors and any other persons entering and exiting the facility/home are closely monitored. CYP Professionals must ensure that parents are aware of their shared responsibility to follow accountability procedures to support CYPs in maintaining accountability of their children. As with supervision, accountability is the responsibility of all CYP Professionals—it requires a collaborative, team-based approach from everyone.

Failure to account for children in care may result in serious consequences for both the CYP and its CYP Professionals, including but not limited to: placing children at risk for harm, placing the Navy at risk for civil action lawsuits, triggering disciplinary action or termination against responsible CYP

Professionals, revoking certification of a CDH Provider, and losing parents' confidence and trust in Navy CYP.

All accountability and quality assurance practices and procedures must be used in tandem with the supervision requirements as described in <a href="Chapter 2">Chapter 2</a> and <a href="Chapter 3">Chapter 3</a>, and they must be implemented as defined in this Standard.

This chapter describes the required accountability practices and implementation by program setting and activity.

All programs must have proactive processes in place to ensure children are kept safe and are accounted for at all times. Each installation must be consistent in

**Parents Are Accountability Partners** 

Parental support of the CYP's accountability measures is critical to child accountability. CYPs can help parents play their role as accountability partners by doing the following:

- Informing parents about the importance of accountability measures for their children's safety.
- Explaining the sign-in/out requirements for each CYP offering.
- Maintaining consistent accountability procedures across an installation so that children and parents know what to expect.

the implementation of accountability measures. Consistent implementation means CYP Professionals understand their roles, even if they work in different facilities and program types across the installation. Consistency across the CYP also enables parents to understand accountability measures regardless of their children's specific programs, thus helping the parents support and fulfill their role in accountability.

## **4.1 Accountability Procedures**

Navy CYP uses several different types of accountability procedures that CYP Professionals must implement to identify, track, and count the children in their direct care. CYP Professionals are expected to use the following accountability procedures throughout each program day, weaving them continuously into their daily routines. This Standard does not prescribe set frequencies or intervals for the use of accountability procedures; instead, Management Team members and Training Specialists are expected to create a program culture in which CYP Professionals understand the importance of accountability procedures in order to build an ongoing awareness of accountability and use accountability procedures with the regularity that achieves child accountability at all times and throughout the program. Although the majority of CDH Providers work alone, this does not negate the need to maintain accountability of children in care at all times. The following subsections explain these measures further.

#### 4.1.1 Head Counts

A head count is the act of quickly, simply, and vocally counting the number of children in care. Frequent head counts at regular intervals ensure that CYP Professionals are aware of the number of children for whom they are responsible. This typically means several head counts each hour in most settings. Training Specialists should help CYP Professionals learn strategies to integrate head counts into their classroom management and daily interactions with children without interrupting CYP

activities. Activities that incorporate head counts can become part of the curriculum to support learning goals. Head counts are especially critical before and after transitions when there are increased risks of lapses in accountability. CYP Professionals should vocalize head counts out loud so that all CYP Professionals are aware of the number of children in their care. Even in CDH programs, headcounts are

#### **Visually Tracking Head Counts**

Many programs track head counts using highly visual methods, such as posting the head count on a centrally located dry erase board.

necessary. The small group size and typically smaller environment is not a replacement for knowing that all children are accounted for. CDH Providers can engage the older children in care to help (and at the same time teach them counting skills) by having them "sound off," count off, or count the younger children. In Large CDHs with two Providers who are each responsible for a group of children, Providers can implement these practices even without the requirement for documentation.

#### 4.1.2 Name-to-Face Recognition Checks

Name-to-face recognition checks are a more detailed head count procedure that requires that CYP Professionals account for each individual child. This accountability measure requires a CYP Professional who knows the children by sight to visually match the face of each child with the corresponding child's name on the Attendance Roster. At a minimum, CYP Professionals must conduct these checks (1) while transitioning children from one location to another (e.g., moving from classroom to playground, moving into a new activity space to combine groups, opening/closing classrooms, going for a group walk, leaving for/returning from a field trip) and (2) any time there is a head count discrepancy. By conducting required name-to-face recognition checks, CYP Professionals can quickly determine if a child is not with the group, allowing for an immediate search for the child to decrease the risks to the child.

CDH Providers use name-to-face recognition checks throughout the day as another way to account for all children. Similar to head counts, Providers can engage the children in conducting these checks in a fun and educational manner which can easily be built into the daily schedule.

#### 4.1.3 Visual Sweeps

Visual sweeps (also known as visual scans) are an accountability procedure that requires CYP Professionals to continuously view the entire care environment (e.g., classroom, home, playground, gymnasium, field, restroom, vehicle) to observe the whereabouts of all children, observe the presence of other adults (if applicable), and ensure that the entire area is safe for children. This practice is especially important in preparation for any transition and in CDH and 24/7 Center environments. CYP Professionals must conduct visual sweeps of an entire area (e.g., in the restroom, under tables, in cribs) immediately before leaving an environment to ensure that no child is left behind and unsupervised after a transition.

#### 4.1.4 Accountability Implementation

CYPs have the discretion to determine the intervals and frequencies of their accountability measures, as long as they result in 100-percent child accountability when implemented for the specific layout of their facilities/homes and based on the specific children in care. However,

consistency across CYPs is important. The following table shows the recommended frequency/interval and tools to document the implementation of these accountability procedures. CYPs must not rely upon documentation alone; rather, Management and Training Teams **must** also observe the application of accountability measures to ensure that staff members understand them and are implementing them consistently and effectively.

**Table 4.1A: CYP Accountability Procedures** 

Practice	Recommended Frequency/Interval	Documentation/Tool
Head Counts	<ul> <li>Integrated throughout the program day:         <ul> <li>As children arrive and leave for the day</li> <li>Before and after another group joins the activity room</li> <li>Evacuating for fire/emergency drills; if count doesn't match attendance, do a name-to-face recognition check while other staff members conduct the sweep</li> <li>Once on/in transportation vehicle</li> <li>Before and after location transitions</li> </ul> </li> </ul>	Locally developed system
Name-to-Face Recognition	<ul> <li>Before and after location transitions</li> <li>Any time there is a head count discrepancy</li> <li>At designated meeting places for fire/emergency drills</li> </ul>	Attendance Roster
Visual Sweep	<ul> <li>Before and after location transitions</li> <li>Continually throughout the day</li> <li>After transportation vehicle is vacated</li> <li>Before egress fire/emergency drills</li> <li>Prior to closing a room</li> </ul>	N/A

## 4.2 Accountability Documentation Requirements in CYP Environments

CYPs have several accountability documentation requirements that, when used appropriately, can help programs maintain accountability. Each of these tools is discussed in the following sections.

#### **4.2.1** Required Forms

#### **Accountability Counts Template**

The Accountability Counts Template (Appendix B), or a similar locally developed document, is required for use in CDCs, SACs, and 24/7 Centers and provides an effective method for documenting the completion of accountability measures throughout a busy day. Programs must **complete and** 

document the following mandatory counts on a daily basis: verification counts, transition counts, and quality assurance (QA) counts (refer to Section 4.2.2). Programs may use the template as written or tailor it to their facilities' and children's needs. At a minimum, the Accountability Counts Template must capture the following information: classroom/program, date, verification counts based on time intervals, staff transition counts, and daily quality assurance counts.

#### Attendance Roster

The Attendance Roster is a CYMS-generated report (refer to CYMS Training Guide #11 – Reports-System for instructions on generating attendance rosters from CYMS) that lists the name of each child enrolled in each CYP program (e.g., CDC classroom, 24/7 Center, SAC program, YSF team). This important accountability tool allows programs to track and monitor each child's attendance. CYPs must include the following three actions in their use of the Attendance Roster:

- 1) Ensure each CYP has a roster at the beginning of each day.
  - a. Each CDC classroom has its roster at the beginning of each day.
  - b. Each SAC program has its roster at the beginning of each day.
  - c. Each 24/7 Center has its roster at the beginning of each day. (24/7 Center Directors have the discretion to determine what is considered the "beginning" of the day. For example, the beginning of the day shift each day may serve as the "beginning" of the day instead of midnight.)
  - d. Each YSF coach is provided with enough rosters for the entire season.
- 2) Ensure parents sign their children in/out of the program using the roster. Note: Some CDCs may require parents to sign their children in/out at the front desk and at their individual classrooms.
- 3) Reconcile the roster with children present at the end of each day.

**CDH Providers** have a requirement to maintain attendance and have parents sign in and out of the home each time the child arrives or departs for the day. Providers will not use the Attendance Roster from CYMS; rather, they use the *Monthly Attendance Record* available on the E-library. CDH Monitors verify that attendance is being maintained during regular home visits in addition to reviewing this document to verify subsidies.

#### **CYMS Current Attendance Report**

The CYMS-generated CYMS Current Attendance Inquiry by Location report lists all children currently in attendance in each program (e.g., CDC, 24/7, SAC, Teen Program). CYMS populates the report using data from CYMS key fob swipes; as families use their CYMS key fobs to sign in/out (or "swipe") their children, CYMS gathers attendance data (see Section 5.2.1 for more information). The best practice in CDCs and SAC programs is for a designated CYP employee (e.g., the Operations Clerk/Manager) to print the report in the morning (after the majority of families have signed in their children for the day, between 9 a.m. and 10 a.m.). The CYP employee then compares the Current Attendance Report to the Attendance Roster(s) as part of the CYMS reconciliation count discussed

in <u>Section 4.2.2</u>. For more information on accountability procedures when children are absent, see <u>Section 4.5 Accountability for Absent Children</u>.

#### 4.2.2 Quality Assurance Measures

Quality assurance (QA) measures are systematic verifications that ensure all accountability procedures are implemented correctly. Various individuals within the CYP are responsible for conducting these checks. See <a href="Appendix H">Appendix H</a> to read the QA requirements.

#### **CYMS Reconciliation Count**

CDCs, 24/7 Centers, and SAC programs must conduct a CYMS reconciliation count each operational morning to ensure that CYMS has accurately recorded the attendance of each child who was dropped off for care. Reconciliation counts can be completed by running the CYMS Current Attendance Inquiry by Location Report. Many programs find that conducting this count soon after the majority of children are signed in for the day is the optimal time to maintain child accountability. SAC programs operating Beforeschool and Afterschool care must run a reconciliation count in the morning (during Beforeschool care) and in the afternoon (during Afterschool care). Best practice in 24/7 Centers is to conduct the CYMS Reconciliation Count at the beginning of each shift change.

#### **Ratio Counts**

CYPs must be in compliance with required staff:child ratios at all times. Maintaining staff:child ratios is a supervisory requirement as well as an accountability measure. CYP Professionals conduct head counts of children in their care and compare that to the number of CYP Professionals present to ensure that they meet the required staff:child ratios, as dictated in Table 2.1A (or, if the CYP Professional is in single ratio, meeting the staff:child ratios shown in Table 2.1.2A). The Management Team and CYP Professionals must work collaboratively to ensure ratio compliance.

#### **Staff Transition Count**

Staff transition counts in facility-based programs are another type of head count that both the departing and the incoming CYP Professional **must** conduct before any staff transition in or out of ratio for any reason (e.g., restroom break, lunch break, end of shift). CYP Professionals conduct staff transition head counts regardless of the group's location or program type. Both the departing and incoming CYP Professional conduct independent head counts, and then both CYP Professionals verify their counts with each other and document the jointly determined number before one CYP Professional departs and the new CYP Professional assumes responsibility for a group of children. If there is a discrepancy in the head counts, a name-to-face recognition check should be conducted. Programs must pre-determine how they will document completed counts during staff transitions; they may use the *Accountability Counts Template* (Appendix B) as written or a locally developed document that is tailored to the needs of their programs.

Before a CYP Professional leaves the activity room for any break (e.g., use the restroom, take a lunch or scheduled break, conduct a parent conference, complete curriculum planning), he/she must wait for the relieving CYP Professional to arrive. Children must not be left alone, and required ratios

must be maintained at all times. To support a seamless transition in supervision responsibilities, the departing CYP Professional must follow the steps listed below before others provide coverage:

- In CDCs, ensure the relieving CYP Professional signs in on the Classroom Attendance Roster. In SAC programs, CYP Professionals sign into a centrally located Attendance Roster when individual Classroom Rosters are not used.
- Describe the activity in which the children are currently engaged, how much time is left for the activity (if applicable), and what is next on the schedule (e.g., free play, naptime, music).
- Inform the relieving CYP Professional of any medical or other potentially challenging circumstances (e.g., signs to observe for a child with a life-threatening medical condition, location of emergency response medications, or a new child who is unfamiliar with the routines).
- ▶ Both the CYP Professional leaving the classroom and the CYP Professional assuming supervision responsibilities must conduct staff transition head counts using the *Accountability Counts Template* (Appendix B) or similar locally developed document before the CYP Professional departs and again when that CYP Professional returns (if applicable).

#### **Verification Count**

A verification count is a quality assurance measure in which a designated CYP Professional (e.g., Program Leader, Assistant Director, Training Specialist) conducts a head count in each classroom and compares that number to the Attendance Roster. The designated CYP Professional must conduct regular verification counts of each classroom, and the frequency and intervals of verification counts must be sufficient enough to ensure the program's accountability for each child. The CYP Professional must document completion of each verification count. Programs may use the *Accountability Counts Template* (Appendix B) as written or a similar locally developed document that is tailored to their program's needs.

#### **Quality Assurance Count**

A quality assurance (QA) count is a measure in which a Management Team member or a Training Specialist conducts a name-to-face recognition using the Attendance Roster and then documents its completion. Programs may use the *Accountability Counts Template* (Appendix B) as written or a similar locally developed document that is tailored to meet their program's needs. QA counts should be unpredictable and should not interfere with any other accountability procedures or quality assurance measures. See Appendix H to refer to the *Summary of Quality Assurance Measures*.

#### 4.2.3 Accountability During Child Transitions

For the purposes of accountability, a transition is defined as any time a group of children and the CYP Professional(s) supervising them move from one location to another. Maintaining accountability for children during transitions can be challenging; whether its leaving a classroom, school bus, or playground, transitions require extra attention and the diligent completion of accountability measures. Children must be accounted for during transitions, including during emergencies. While general best practices are included with this Standard, recommended strategies and measures must be discussed, evaluated, and implemented according to the nature of the type of transition, layout/type of program, etc. to maximize the safety of all children. Management and

Training Team engagement is required to support all CYP Professionals in ensuring children's safety and to establish the program's best practices. The following measures help programs to maintain accountability for children during transitions:

- ▶ Ensure the Attendance Roster is in the possession of one of the CYP Professionals.
- When there is more than one CYP Professional present with a group, gather children before leaving, positioning one CYP Professional at the front of the group and one CYP Professional at the back of the group.
- Conduct a name-to-face recognition using the Attendance Roster before leaving, ensuring that the names in both activities are consistent before transitioning.
- Conduct a visual sweep of the entire area (e.g., in restroom, in cubbies, under tables, in vehicles) immediately before leaving.
- Guide the group of children to the next location using developmentally appropriate strategies such as songs/chants as needed to assist children to stay together and transition smoothly.
- Conduct a name-to-face recognition check upon arrival to the new location to confirm all children are present.

#### 4.2.4 Accountability When Opening and Closing CDC Classrooms

CDCs are authorized to combine children into predetermined opening and closing classrooms. This facilitates efficient use of staff during periods of low child attendance while allowing programs to maintain appropriate ratios and group sizes. While there are benefits to combining children in opening and closing classrooms, this practice also introduces additional transitions for children and staff, increasing the risk of lapses in child accountability. To mitigate these risks, as discussed above, CYP Professionals must conduct the required accountability procedures indicated for location and staff transitions. All children must be accounted for, and programs must know exactly how and immediately where to direct parents to drop off and pick up their children. Programs must carefully consider the following when opening and closing classrooms:

- Determine opening/closing classroom plans in advance. Programs should develop opening/closing classroom plans as intentional, proactive, and thoughtful responses to trends in the program's attendance data. The Management Team should evaluate attendance patterns, schedule staff members appropriately (including single ratio groups), and explain the opening/closing plan to CYP Professionals, taking into consideration the specific children who will be in care at those times. Multiple transitions of children, particularly due to lack of planning, should be avoided.
- Develop opening/closing classroom plans for varied situations. Programs need to be prepared for unexpected circumstances and have predetermined opening/closing plans to address them. For example, in addition to the typical weekday plan, programs may need plans in case of inclement/significant weather events or other local emergencies, in case of an illness that sweeps through a facility, etc. Predetermined, flexible plans help a program to handle difficult or unexpected circumstances without compromising accountability requirements. The Management Team should document opening/closing classroom plans and keep CYP Professionals informed about them.

• Comply with all supervision and accountability requirements. During opening/closing, all group size, staffichild ratio, and supervision requirements must be met and accountability measures are required, just as they are during the rest of the programming day.

#### 4.2.5 Accountability Boards

An accountability board is a tool used to maintain accountability of a large group of children in single-room or multi-room facilities while allowing the children to choose and indicate their current activities. The use of accountability boards is not required; however, if a program chooses to utilize an accountability board, the tool must be accurate and tailored to fit the unique nature of the program. Accountability boards are most commonly implemented in SAC programs, but they can be implemented in other CYP offerings.

An accountability board displays all of the activity choices a child can make at any given time while in the program. These choices can include specific activities, individual classrooms, and outside areas. Accountability boards are designed to allow children to make choices among offered activities and to place their individual nameplates/totems on the board to identify their choices, therefore communicating their whereabouts to CYP Professionals. CYP Professionals should consistently train children on the use of the accountability board, make accommodations for individual needs (e.g., pictures instead of words), and reinforce that all children must use the accountability board.

Programs may be creative in how their accountability boards look, are displayed, and are used. To be an effective accountability measure, boards must at minimum display (1) the activities offered, (2) the location of each activity, and (3) the nameplates/identifiers of each child participating in the program. Programs may use magnets, Velcro<sup>®</sup>, or other removable means to facilitate the use of an accountability board. Programs must also consider the following:

- The board should be large enough to accommodate the nameplates/identifiers of all children and a list of all available activities. Additionally, the board should be located in an area that is accessible to all children and at their eye-level, within their reach, and easy for them to use.
- CYPs should dictate the maximum capacity of an activity based on staff:child ratios and display the maximum capacity number on the board.
- Give children movable nameplates/identifiers to indicate their activity choices and whereabouts on accountability boards.
  - Children should be taught how to use the board, including how to place their nameplates/identifiers appropriately each time they choose a new activity.
  - CYP Professionals should be able to quickly identify the location of each child by finding his/her nameplate/identifier on the accountability board when the parent(s) arrive to pick up the child, when researching the whereabouts of a child, or when reviewing the accountability board for accuracy while conducting QA measures.
- Create nameplates/identifiers for CYP Professionals to indicate their designated classroom on accountability boards. Displaying where CYP Professionals are located will assist in ratio confirmations.
- Create activity passes and ensure that the number of passes matches the maximum number of children allowed in that activity at one time. In operation, each child takes a pass from the board,

places his/her nameplate/identifier in place of the pass under that activity, and gives the pass to the CYP Professional who is supervising the activity. If a child chooses to leave the activity, he/she returns the pass to the accountability board and then moves his/her nameplate to another activity where space is available.



Figure 4.2.5A: Photo of an accountability board

#### 4.2.6 Accountability During School Dropoff & Pickup

Some programs create separate forms (e.g., Attendance Rosters) for listing the children by grade and for listing and the schools they serve, whereas some CYPs use one form for all names and schools.

The following accountability procedures must be followed during school **dropoff** and **pickup** times, no matter which form system the program uses:

- Collect the appropriate forms (which must include emergency contact information), including forms for children with hourly care reservations.
- Predetermine a location for children to be dropped off and picked up.
- Ensure CYP Professionals follow established accountability documentation procedures.
- Establish written protocols for when children are not accounted for at dropoff or pickup.

## 4.3 Accountability Procedures During Offsite Activities

#### 4.3.1 Accountability During Off-Installation Field Trips

An offsite activity is defined as any departure from a facility or CDH Provider's home to a field trip location. Offsite field trips require extra attention to accountability processes. First and foremost, the CYP Professional or Provider must notify the front desk of field trip location, date, and times. When CYP Professionals are accountable for children in care, they must also consider the following:

- ▶ Ensure the safety of the offsite activity by conducting a visit in advance. When possible, a member of the CYP Management Team or the CDH Provider should visit offsite activity locations in advance of trips to observe the layout, ensure the environment is safe, and plan accountability strategies. A determination on the best time to have the field trip should be made based on the following considerations:
  - How crowded the location is at various times of the day
  - Whether large groups of children tend to visit the site at the same time
  - Whether the offsite location requires walking through a parking lot, along or across a busy street, or through another hazardous area
- Implement accountability measures. CYP Professionals must conduct head counts and visual sweeps as well as maintain required ratios and group sizes before, during, and after offsite field trips. Additional accountability measures for offsite activities include (1) designating meeting times and locations and (2) completing visual sweeps of each row and under each seat of the bus when using transportation.
- ▶ Conduct name-to-face recognition checks. CYP Professionals must conduct name-to-face recognition checks prior to departing and arriving at the CYP facility, home, or vehicle used to transport to the offsite location. Best practice includes conducting additional name-to-face recognition checks at intermittent times throughout the offsite activity (e.g., during scheduled breaks, meal times).
- Carry appropriate supplies. Supplies that aid supervision and accountability include the following:
  - Communication devices (e.g., cell phones or walkie-talkies) to maintain communication with one another and to contact the CYP Management Team if an emergency arises
  - The Attendance Roster
  - Each child's emergency contacts
  - A list of assigned children in each CYP Professional's group during the offsite activity to facilitate name-to-face recognition checks

All CYPs must also have a plan in place for emergencies during and evacuations from offsite activities. It may not be feasible to have practice drills at offsite locations, but CYP Professionals must have a plan in place. Specific procedures to follow will depend on the offsite activity environment. Regardless of the exact evacuation procedures from an offsite location, the following accountability measures must be followed by CYP Professionals to ensure all children are accounted for during an emergency or evacuation:

- The CYP Management Team/CDH Provider must contact the offsite venue to inquire about established evacuation protocols and official evacuation gathering location(s). If an official evacuation gathering location is not established by the offsite venue, an appropriate check-in location (e.g., front gate) and a secondary check-in location (e.g., a landmark close to front gate) must be designated for all children and CYP Professionals to meet in case of emergency.
- If there is an emergency or evacuation during an offsite activity, the group will meet at the designated check-in location and the CYP Professionals must perform a name-to-face recognition check of all children using the Attendance Roster.
- Once CYP Professionals have accounted for all children, they must notify the CYP Management Team or CDH Director of the incident and follow the direction of the Emergency Response Professionals.

#### 4.3.2 Accountability in Walking Groups

CYP Professionals must take appropriate precautions to keep children safe during walking trips away from the program facility/CDH. CYP Professionals must consider the following when planning for walking field trips:

- Adhere to all supervision requirements. CYP Professionals must maintain required staff:child ratios and group size limits regardless of where they are.
- Follow accountability measures. Conduct name-to-face recognition checks before leaving, upon arrival, before returning, and upon return. Conduct visual sweeps prior to leaving and repeatedly during the trip in addition to head counts.
- Manage Attendance Rosters. Take rosters on the walking trip to facilitate name-to-face recognition checks.
- Ask for help as needed. Additional staffing may be needed during preparation for walking trips, especially with some age groups. CDH Providers can arrange for parents to help and/or hire a certified CDH substitute Provider to ensure children can remain safe and accounted for during the walking trip.
- ▶ Have a plan. Walking trips away from the program/CDH may require children to cross busy streets or be in a public space where other groups are present, so a plan for a heightened accountability measure should be developed beforehand.

#### 4.3.3 Accountability During Evacuations

Planning for evacuations is a key part of every program's accountability measures. Evacuations, whether actual emergencies or drills, are transitions that require CYP Professionals to thoughtfully

lead children outside of the building, home, vehicle, or space as quickly as possible, and following required accountability procedures will help to ensure all children are evacuated safely. All CYP Professionals must know and be able to quickly implement required accountability procedures during an evacuation.

In addition to the guidance that follows, programs must be aware of and follow their installation's Mobilization and Contingency (MAC) Plan.

#### **Program Evacuations**

Evacuation drills are required in all CYPs. The CYP Management Team should devote small portions of the programming schedule to practice evacuation drills and their associated accountability requirements with children and CYP Professionals. In CDHs, Providers conduct and document monthly evacuation drills. CDH Monitors verify this during the home visit process.

Evacuation drills provide CYP Professionals with opportunities to practice evacuation processes and identify and resolve accountability challenges before actual emergencies occur. CYP Professionals should also use drills as a learning experience for children by (1) teaching them what to do and how to stay calm, and (2) explaining why these drills are important (as developmentally appropriate).

It is especially important in CDHs that Providers have a plan that is posted and tested. As the only adult in the home, the Provider must be well organized and know where all necessary items are located to quickly gather them for an evacuation. Having a bag ready with all needed items, to include attendance and emergency contact information, is recommended for convenience and organization. Monitors support Providers during regular home visits by reviewing the plan and ensuring the Provider can evacuate the home safely and quickly.

The following accountability measures help programs prepare for drills and emergencies:

- ▶ Ensure all CYP Professionals are trained on the emergency procedures. Newer CYP Professionals may need verbal directions to respond appropriately and quickly.
- Ensure the Attendance Roster is in the possession of one of the CYP Professionals.
- When there is more than one CYP Professional present with a group, gather children before leaving, positioning one CYP Professional at the front of the group and one CYP Professional at the back of the group.
- Conduct a head count using the Attendance Roster before leaving, ensuring they are consistent before evacuating.
- Conduct a visual sweep of the entire area (e.g., in restrooms, in cubbies, under tables, vehicle) immediately before leaving.
- Guide the group of children to the designated evacuation location in a calm manner.
- Conduct a name-to-face recognition check upon arrival to the new location to confirm that all children are present.
- When performing vehicle evacuation drills, follow this guidance:
  - Utilize the same vehicles used to transport children when conducting evacuation drills.

- Collaborate with the Fire Department as needed.
- Clarify responsibilities. For example, determine which CYP Professional will perform a visual sweep of the vehicle prior to being the last person to evacuate.
- Train older children to assist younger children in operating an emergency exit door when utilizing school buses.
- Communicate a location where children are to gather away from the vehicle and perform a
  name-to-face recognition check with children using the Attendance Roster once all children
  are together in the designated location.

While the above items are important accountability systems to implement during an emergency evacuation, the following are best practices to enhance these systems and ensure child safety and accountability:

- Clarify specific responsibilities for each CYP Professionals during an evacuation drill.
  - In CDC programs, for example, the Program
     Leader (or designee) is responsible for the
     visual sweep and retrieval of the Attendance
     Roster while the other CYP Professional is
     responsible for retrieving the emergency list and evacuation bag.

## Readily Available Evacuation Procedures

Many programs find that posting a list of evacuation steps in each CYP space (e.g., classrooms, front desk, offices) in a specified area (e.g., next to the exit door) serves as a helpful visual reference.

- In SAC programs, for example, the Operations Clerk is responsible for retrieving and taking the following items: Attendance Roster, CYMS Current Attendance Report, Emergency Binder, Visitor/Volunteer Sign In/Out Sheet, and the evacuation bag that contains items such as medications and a first aid kit.
- Designate a location where the Attendance Roster should be kept in all programs (e.g., kept near the emergency evacuation instructions) for easy access during evacuations.
- In CDCs, establish a designated support team member to assist CYP Professionals with the evacuation of immobile infants and transitional walkers (e.g., kitchen staff are assigned to help infants, Training Specialists are assigned to help pretoddlers, etc.).
- Designate an accessible location to store necessary equipment to transport non-walking children.

## 4.4 Accountability Discrepancies

CYP Professionals must immediately know how to address supervision or accountability discrepancies once they are identified during accountability quality assurance (QA) checks or as soon as they become aware of a policy violation. The Management Team and Training Specialists must ensure that CYP Professionals are trained on the protocols to follow in such cases. Failure to implement required accountability and quality assurance practices in accordance with this Standard places children at risk for harm, is a violation of Navy policy, and can result in disciplinary action.

#### **4.4.1 Addressing Discrepancies in Facility-Based Programs**

If a CYP Professional discovers a discrepancy while conducting accountability or quality assurance measures in facility-based programs, including a child unaccounted for, resolution is required immediately. The following table lists the action steps that must be followed if a discrepancy occurs.

**Table 4.4.1A: Action Steps for Accountability Discrepancies** 

Discrepancy	Required Action Steps
Head Count	If there is a head count discrepancy, CYP Professionals should immediately count again and ask another CYP Professional to verify the count.
	If the CYP Professional verifies the discrepancy, CYP Professionals should immediately conduct a name-to-face recognition check to identify which child is unaccounted for.
Name-to-Face Recognition	If a child is unaccounted for during a name-to-face recognition check, CYP Professionals must conduct a visual sweep of the environment. If this occurs following a transition, they must quickly check any places where the child could have possibly wandered since the last name-to-face recognition check or head count.
Quality Assurance Check	If there are any discrepancies found during a QA check, the Management Team will address them immediately.
	<ul> <li>For discrepancies on tracking procedures (e.g., CYP Professionals do not sign in/out of ratio on attendance rosters, a parent does not sign his/her child in/out), the Management Team will speak with the CYP Professional (or parent) and remind them to follow all requirements and follow up as needed to ensure processes are being followed.</li> </ul>
	If there is a discrepancy with head counts, the Management Team will ask the CYP Professionals to recount the children present and perform a name-to-face recognition check to confirm all children are present and accounted for based on the Attendance Roster.
	If a name-to-face recognition check does not match the Attendance Roster, CYP Professionals will identify which child is missing and check the Attendance Roster to see if a parent failed to sign the child in/out. CYP Professionals will also check with the Operations Clerk to determine if the child was swiped in/out of CYMS.
	If the Operation Clerk indicates the child was not swiped out of CYMS, CYP Professionals will begin searching the environment for the child. CYP Professionals, the Operation Clerk, and Management Team will work together until they confirm the whereabouts of the missing child.

Discrepancy	Required Action Steps	
CYMS Reconciliation Count	The Operations Clerk (or designee), Program Leader, or Training Specialist must immediately inform a Management Team member.	
	CYP Professionals must do the following:	
	Check the area to see if the child was overlooked.	
	Determine if the parent signed the child in/out on the Attendance Roster.	
	Determine if the parent swiped in/out at the front desk. Note: Discrepancies are more likely to occur during transitions, especially during opening and closing hours, when families are checking their children in/out. Some families may have swiped in/out of CYMS but did not sign in/out on the Attendance Roster, or the reverse. If the child is not found, refer to Section 4.5.	

#### 4.4.2 Addressing Discrepancies in Child Development Homes

Despite a CDH generally having a limited number of children and smaller space, discrepancies can still happen. It only takes a momentary lapse in supervision or forgetting to count the children before returning from a playground, the backyard, or a walk to lose sight of the children in care. The same protocols that are put in place in the facility-based programs apply to CDHs with minor adjustments based upon the group size and the environment.

During head counts, if there is a discrepancy, count again and conduct a name-to-face recognition check. If a child is missing, contact the CDH Monitor immediately and follow guidance from the Monitor and from the information provided below.

#### 4.4.3 Missing Child Incidents

If a child is confirmed to be missing, CYP Professionals must try to remain calm and follow these procedures:

- Notify the front desk. Immediately look for the child. If a CYP Professional needs to leave the classroom to look for the child or seek backup assistance, he/she must call the front desk staff immediately to request additional staff to search for the child or provide supervision coverage before leaving the classroom.
- Contact the Program Director. The front desk staff or CDH Provider contacts the Program Director or Monitor. All available employees

Do not hesitate to ask for help, including calling for emergency help (i.e. 911) if necessary Emergency

Ask for Help If a Child Is Missing

(i.e. 911), if necessary. Emergency personnel would much rather respond to a false alarm than lose response time if a child is lost.

conduct a thorough search of the facility or offsite location to locate the child. If the discrepancy occurs following a transition, the CYP Professional must communicate his/her path from the transition location to the current location.

- Maintain supervision. The rest of the children in the group must receive appropriate supervision while staff are searching for the missing child. CDH Providers must contact the CDH office immediately and request assistance from the CDH Monitor or Program Director and wait for their arrival. Providers must never leave a group of children unsupervised. However, if any of the Provider's household members are present and able to assist, such as the spouse or a teenaged child, the family member can begin the search. If the spouse is a certified back-up Provider, the spouse can supervise the children while the Provider looks for the missing child.
- **Search strategically.** Consider logical places the child may be hiding or playing. For example, if a child has gone missing between the playground/outside and the activity area, identify places on the route where the child may have been distracted or may have hidden.

If a child is missing during an offsite activity, enlist others to search for the child. Request assistance from the offsite venue's Security department and keep in mind that the remaining children must continue to be appropriately supervised during the search for the missing child. Conduct a thorough search of the area in which the child was last seen and look in the entire vicinity. Retrace steps if the child went missing while walking from one place to another.

#### 4.4.4 Program Response to Lapses in CYP Accountability Procedures

Lapses in supervision and accountability are serious policy violations. All instances of unsupervised children, even situations in which a child is left alone for a short period of time, must be reported to the Installation and Program Director. Not all instances of children left unsupervised constitute child neglect; however, for each occurrence, the Installation and Program Director must conduct a policy violation review and initiate a Corrective Action Plan to prevent the recurrence of further incidents. Refer to the *Child Abuse Prevention and Reporting (CAPER) Standard* for further instructions and specific guidance on reporting requirements and the development of Corrective Action Plans.

### 4.5 Accountability for Absent Children

CYPs must account for children who do not show up at the program as expected because the CYP shares in the responsibility of ensuring that the child is safe and that the child's whereabouts are known. During orientation, families must be informed that they are required to notify the program/CDH Provider of any change in their children's attendance. Families may drop off their children at any time during the day; however, if on any given day a child is not dropped off and the parents have not informed the CYP that their child will be late or not in attendance, the CYP will work toward accountability verification.

#### Strong Relationships Are Accountability Tools

Strong relationships with families are powerful tools for maintaining child accountability. When programs know their families well and facilitate open communication, they can respond appropriately if unexpected absences occur.

While it is mandatory for programs to contact families when there is an unexpected absence, programs may use their best judgment, based on the relationships they have built with their families, to know how early in the day it is appropriate for them to contact the family. If a program is in doubt, they should make contact early.

Families should be aware that CYP Professionals must follow up to ensure the child or family is not in distress when a child does not arrive as expected. For example, to ensure a child is not inadvertently left in a vehicle.

The following guidelines help facility-based programs to account for children in the case of unexpected absences:

- ▶ The CYMS reconciliation count is most effective for maintaining child accountability when it is conducted soon after the majority of children have been signed in for the day.
- ▶ If the Operations Clerk (or designee) conducting the CYMS reconciliation count finds an unexpected absence, he/she asks the CYP Professional in the child's classroom if the child is scheduled to attend that day.
- If a CYP Professional reports that the child was scheduled to be absent, the Operation Clerk or designee marks the child as absent.
- If a CYP Professional is not aware of a scheduled absence, the Operations Clerk or designee must inform the Management Team. The Management Team member (or designee) must ensure that the family is contacted via home, work, and/or cell phone to confirm the child's absence. If the family confirms that the child is not attending, the Operations Clerk or designee marks the child absent.
- If family members do not answer, a Management Team member (or designee) leaves a message for the family. If the family has not made contact with the CYP within a reasonable timeframe (typically 30 minutes, although programs should judge what is reasonable based on their knowledge of the family's habits), the Management Team member (or designee) contacts the family's emergency contacts. If, after exhausting all emergency contacts, the program has not verified the whereabouts and safety of the child, the Management Team member (or designee) notifies the sponsor's command/workplace that the child is unexpectedly absent.

For Recreational School Age Programs (RSAP), Teen, and Youth and Sports Fitness (YSF) programs, family members are not required to inform the CYP when youth/teens will be attending because these programs are recreational offerings.

CDH Providers have the unique privilege of operating with a small group of children. This small group environment provides the perfect setting for CDH Providers to build relationships with their families and understand each child's arrival and departure routines. Similar to facility-based programs, CDH Providers are required to document on the attendance sheet whether a child will be absent on any given day. If the parent is providing advanced notice in person, the parent can take the responsibility to document this on the child's sign in/out attendance for the day. For unexpected absences, the CDH Provider must contact the parent as soon as possible after the expected arrival time for that child.

If the CDH Provider is unable to reach a parent, he/she must leave a message for the family. If the family has not made contact with the Provider within a reasonable timeframe (typically 30 minutes, although Providers should judge what is reasonable based on their knowledge of the family's habits), the Provider must reach out to the family's emergency contacts in addition to notifying the CDH Monitor. If, after exhausting all emergency contacts, the CDH Provider has not verified the

whereabouts and safety of the child, the Provider will inform the CYP Management Team who will notify the sponsor's command/workplace that the child is unexpectedly absent.

# **Chapter 5:** CYP Access

CYPs must use program access control procedures at all times. Accountability not only involves CYP Professionals knowing the number and whereabouts of children at all times; it also involves tracking all persons who access the program and ensuring that everyone is accounted for in the program. This section details the requirements for securing and tracking program access and the accountability processes for signing in/out children, family, visitors, and volunteers.

Every person who enters a CYP must follow required procedures for signing in and out. Programs must be diligent in implementing procedures that provide the names and total counts of persons in the facility at all times for the following reasons:

- To maximize the safety of children by maintaining access control
- To account for everyone in case of an emergency evacuation (drill or actual emergency)
- To notify individuals who may have been exposed to potential harm at the program (for example, at the direction of the Preventive Medicine department)

Navy policy requires that during program operating hours all children, families, employees, contractors, visitors, and volunteers enter and exit the CYP through the program's front door only (unless there is a safety/emergency situation). Operational exceptions include activities within the course of typical CYP programming (e.g., the SAC program buses drop children off in the rear of the Youth Center, the CDH Provider is taking children to the backyard to play, etc.). However, even in these instances, the program must implement procedures to secure the alternate access door for authorized entry only and apply all of the same supervision and accountability measures that are in place when children enter and exit through the front door. Likewise, alternate doors in facility-based programs may be used for food/supply deliveries or in temporary safety situations when egress is blocked to the front doors (e.g., when there is construction in front of the building). In all situations, when alternate doors are used, their usage and the protocols for supervision and accountability must be evaluated and approved by the Program Director in advance.

## **5.1 CYP Facility Access**

#### **5.1.1 Restrictive Access Systems**

Some CYP facilities have installed restrictive access systems (RASs) that restrict access into the building. Facilities with RASs require CYP Professionals to use Common Access (CAC) cards and/or

pin codes to enter the CYP facility. Family members, visitors, and volunteers must be granted access by a CYP employee (e.g., the Operations Clerk) to enter the CYP facility.

#### 5.1.2 Exit and Gate Monitoring

All exits in facility-based programs that do not lead to a fenced area must be alarmed, and all exits and gates are monitored by CCTV (once CCTV upgrades are in place). The front door alarm is turned off during program hours; however, a chime may sound each time the door is opened. All other facility doors' alarms should be active and will sound if a door is opened to alert CYP Professionals. Exit door alarms are designed to be heard at the front desk for appropriate monitoring and response.

#### 5.1.3 Closed-Circuit Television (CCTV)

CCTV is installed in all CYP facilities. Cameras are located at facility entrances/exits as well as in strategic locations within the building to capture the presence of all persons. CCTV can support CYP Professionals as an accountability tool to determine who is in the facility and where. CCTVs can be used to monitor and ensure all CYP Professionals, family members, and visitors are accounted for and are following appropriate measures and behaviors while children are present.

Families must submit written requests to view recorded CCTV footage. Upon receipt of written requests, Installation Directors must route requests to the local Office of General Counsel.

## 5.2 CYP Signing In and Out

#### **5.2.1 Child Attendance Tracking Using CYMS**

All CYP facility-based programs must use the Child Youth Management System (CYMS) to track enrolled children's daily attendance at the facility. CYMS has an electronic swipe system that allows each family member with a CYP-issued key fob to record his/her child's dropoff and pickup (refer to the <u>CYMS Household Records User Guide</u> for more information on key fobs).

#### **Parents Not Known by Sight**

If the Operations Clerk does not recognize a parent when he/she comes to pick up a child, then the Operations Clerk must check the parent's ID and compare it to the information on the child's registration form.

In instances where CYMS is temporarily down, the front desk should use paper sign-in sheets and do a bulk swipe in/out once the system is back up. This will ensure the official record is up-to-date.

#### 5.2.2 Signing Children In/Out Who Are Not Eligible to Self-Release

A child younger than the minimum age set by the Installation's Self-Care Policy—or who is not allowed to self-release—must be accompanied by his/her parent/guardian/designee and signed in and out of the program. In CDC and SAC, each child must also be accompanied and signed into the classroom/activity area, and the parent/guardian/designee must let CYP Professionals know that

he/she is dropping off/picking up the child so that there is a clear transfer of responsibility for the child. This double sign in/out protocol is an important accountability check. **At no time should a child be dropped off outside the program.** If a child is picked up/brought to the program more than once a day, the required sign-in/out procedures must be followed each time.

If a family member forgets his or her key fob and/or to sign the child in or out, the following procedures must be followed:

- ▶ The CYP Professional may swipe/sign the child in if the child is present in the program. However, the CYP Professional must then speak to the family member during pickup from care to remind the family member of the policy and emphasize that this practice is required to ensure clear transfer of responsibility for each child.
- The CYP Professional may swipe/sign the child out if he or she is certain that the family picked up the child. This may have to be verified by calling the family for verbal confirmation. However, the CYP Professional must then speak with the family member at the next opportunity (i.e. the next program service day) to provide a reminder of the policy and to emphasize that this practice is required to ensure clear transfer of responsibility for the child.
- If the key fob is in the family's car, the family member should be directed to retrieve it from the car and swipe in or out.
- If the family member habitually forgets to sign his/her child in or out, the Program Director must speak to the family member about the importance of this procedure, emphasizing that this practice is required to ensure that the child is safe and that there has been a clear transfer of responsibility for the child.
- ▶ CDH Providers will open a dialogue with the parents about the importance of this requirement. If the parent continues to neglect this responsibility, the Provider can reach out to the CDH Monitor or Installation Director for support.

#### 5.2.3 Signing In and Out for SAC Children Eligible to Self-Release

Using the installation's home alone or self-care policy, the CYPs must establish a CYP self-release policy that authorizes children to sign themselves in/out of the SAC, 24/7 Center, and/or CDH Provider's homes. Parents of eligible children must annually complete and sign <u>Self-Release Forms</u> prior to the children being authorized to self-release from the program. Eligible children sign themselves in/out, both with a CYMS key fob (if in a facility) and on the Attendance Roster. If a child habitually fails to sign in/out, the child's self-release privileges may be suspended, requiring the parent to sign the child in/out of the program.

#### 5.2.4 Signing In and Out for Teen Program

Teens are automatically eligible to sign themselves in and out of the Teen Program. Teens sign themselves in/out, both with a CYMS key fob (if in a facility) and on the Attendance Roster. If a teen habitually fails to sign in/out, the teen's self-release privileges may be suspended, requiring the parent to sign the teen in/out of the program.

CYPs may allow guests to attend Teen Program activities (facility-based and offsite activities) based on local policies. A guest is defined as either a relative or close family friend of a registered teen

currently attending the Teen Program and who meets the age and/or grade eligibility requirements of the program. Guests must be officially sponsored and accompanied by the enrolled teen in the program during the visit. A guest may not access any program activity alone. CYPs are encouraged to collaborate with their command to establish a comprehensive Teen Program guest policy that includes, but is not limited to: the maximum number of guests per day/activity, RSVP processes for guests on offsite activities, who to contact in the event that the guest is injured, behavior management, etc.

Registered teens should provide the program advance notice before bringing a guest. When the guest arrives, the guest must sign in on a Teen Guest Visitor Sign In/Out Sheet to record his or her attendance. Refer to Appendix I for a template of a Teen Guest Visitor Sign In/Out Sheet that programs may use as written or to tailor to their needs.

#### 5.2.5 CYP Staff Sign/Clock In/Out

CYPs have program access procedures for staff. All CYP staff members must sign in/out or clock in/out of their respective CYPs at the beginning of their shifts, for authorized meal breaks, and at the end of their shifts. Shifts include scheduled training, meetings, and special events.

## 5.3 Visitor and Volunteer Sign In/Out

CYPs also have program access procedures for visitors and volunteers.

Visitors to programs are one of two types, as defined below:

- **Known:** The visitor is known by name and/or by sight by CYP Professional (e.g., parent of an enrolled child or a family member, CNIC Headquarters staff, regional staff, contracted custodians, maintenance staff). When a family member is in the facility for a purpose other than to drop off or pick up his/her child, the family member is considered a visitor.
- **Unknown:** CYP Professionals do not know the visitor by name or by sight (e.g., a speech therapist, a child's grandparent who is visiting from out of state).

**Volunteers**, as valued CYP Professionals, play an important role in enhancing program offerings and child experiences. Navy policy encourages CYPs to recruit volunteers to complement CYP program implementation.

All visitors and volunteers must sign in/out of the program, be in compliance with LOSS policy, and wear prominently displayed badges at all times while on CYP grounds and while accompanying the CYP offsite.

Note: Family members and friends may attend YSF events inside or outdoors without signing in, unless there are local requirements for spectators to sign in/out of sporting activities based on the location of the sporting event.

Programs must have visitor and/or volunteer sign-in/out sheets (Appendix C) so that all visitors and volunteers can sign in and out of the program. Programs have the option of either having separate

sheets for visitors and volunteers or having one book for both with a section divider for each type. At a minimum, the visitor and/or volunteer sign-in/out sheet must capture the following information:

- **Visitor sign-in/out sheet** must include the date, name of the individual, individual's organization (if applicable), reason for the visit, and a space for the individual's signature with sign-in/out times.
- **Volunteer sign-in/out sheet** must include the date, name of the individual, room in which the volunteer is to work (in CDC programs), and space for the individual's signature with sign-in/out times.

Programs must keep an adequate supply of visitor and volunteer badges and badge holders at the front desk area. The program is responsible for maintaining and preparing badges for visitors and volunteers. Programs may use the Visitor Badge Template found in Appendix D, but they may also make their own badges that have the same information and are similarly professional and readable. If the program is aware of visitors or volunteers ahead of time, badges can be prepared ahead of the visit. Additionally, all CYP Professionals should be notified of visitors conducting building inspections or tours. Programs must follow these procedures when a visitor or volunteer enters and exits the building:

#### Sign In and Out Requirements for Custodians

Contracted custodians must sign in and out of the CYP facility whenever they are in the building and children are present. If they work only during hours when children are not in care, they are not required to sign in.

- Upon entry, ask the reason for the visit and then have the individual sign the visitor/volunteer sign-in/out sheet.
- Check the individual's valid photo identification to verify his/her identity.
- Have the visitor/volunteer sign the visitor/volunteer sign-in/out sheet. As a courtesy to visiting leadership and command staff, the program may enter these individuals' names and entry/exit times into the visitor/volunteer sign-in/out sheet. This can be done in advance if the program knows that leadership or command members will be visiting.
- Distribute a visitor or volunteer badge and holder for the individual to wear, and remind him or her that the badge must be visible at all times.
- Upon exit, require visitors and volunteers to sign out and return the badges provided. Visitors and volunteers who are in a program for consecutive days or on a recurring basis are still required to return their badges at the end of every visit.

In facility-based programs, a CYP Professional must escort an unknown visitor/volunteer to the appropriate place and assume responsibility for the visitor/volunteer at all times. If the visitor/volunteer is a known individual, the same procedures above must be followed; however, a constant escort is not required. For maintenance or public works staff members visiting a facility, a CYP Professional should escort them to the area(s) where they will be working and instruct them not to enter other areas. They will also be instructed to let the front desk/Operations Clerk know if they need to access any other areas so that CYP Professionals in those areas can be notified.

CDH Providers have similar requirements for ensuring accountability of visitors to their program, whether the visitor is a parent volunteer or a technician who is repairing equipment in the home. The

Provider is required to maintain a visitor's log to document anyone coming into the home during child care hours; however, they are not required to provide or have visitors wear badges. CDH Monitors, Fire or Preventive Medicine, or Inspectors are required to wear their specific name tag/badge as evidence of their position and reason for being in the home. All visitors are required to sign in with their names and the times of their sign-ins.

## **5.4 Facility Closing Procedures**

CYP Professionals responsible for closing the program must secure the facility and verify that all children and adults have exited the building. The following procedures are required to verify that no children or CYP Professionals remain in the building and that it is safe to close the facility:

- An assigned CYP Professional must conduct a thorough visual sweep of the building, making sure that all windows and external doors are locked, gates are secured, panic hardware alarms are operable and turned on, and no one remains in any room of the building.
- The Operations Clerk (or designee) must review the visitor/volunteer sign-in/out sheet (Appendix C) to confirm that everyone who entered the building has exited and signed out. If the Operations Clerk notices any discrepancies on the forms, he/she must alert the Program Director.

## **Chapter 6:**

## Child Release Authorizations

Typically, children are released to their family members. However, in the event of emergency or an instance when the family is unable to pick up the child, the CYP must know who the family authorizes to assume responsibility for its child(ren). CYPs release children **only** to the care of designees who are specifically identified as authorized to assume custody. Designated authorized releases are required for each child and are indicated on the child's <u>Registration Form</u>. Other types of release authorizations are described in this section, as well as procedures to follow when there is concern for the safety of the child during pickup or if a child is not picked up by the program's established close of business time.

## 6.1 Parental Responsibilities for Release of Children

During orientation, CYPs must stress to families the importance of designating authorized contacts to pick up their children when needed. Parents must also notify the CYP and provide current documentation if there are any court orders restricting noncustodial parents' presence on the premises or pickup of the child(ren). Parents are responsible for keeping the CYP informed of any changes in release authorizations.

Regardless of the configuration of a child's family (e.g., two parents, single parent, divorced parents, blended families, other adults serving as guardians), parents have rights to be involved in the lives of

their children. Navy CYP is a neutral party and cannot deny any parent access to his/her child; the only exception is if there is a valid court order that requires the barring of the parent's access to the child or the program. Example of applicable court orders include the following:

- Temporary or permanent restraining orders
- Custody orders that restrict parent visitation
- Termination of parental rights orders

#### **Parental Rights and Child Release**

Parents and legal guardians have rights to be involved in a child's life—including pickup, dropoff, classroom visits, and observations. The only exception is when a court order places a restriction on a parent's access.

The following subsections provide additional guidance on parental responsibilities for ensuring the appropriate release of their children.

#### **6.1.1** Authorized Release Designees

During the enrollment process, families must identify on the Registration Form the individuals who, when needed, are authorized to pick up and depart the premises with their children in non-emergency and emergency circumstances. Navy CYPs recognize two types of authorized release contacts/designees: non-emergency and emergency.

- Non-Emergency Contact: authorized to pick the child up on behalf of the parent or guardian on an intermittent or routine basis, such as when a parent is stuck in traffic, a parent has another obligation, a grandparent is visiting and will pick up on behalf of the parent, or parent is away on TDY.
- ▶ Emergency Contact: authorized to pick up the child within a short period of time on behalf of the parent or guardian in an emergency circumstance, including if a child has not been picked up by the program's closing time. At least two individuals must be designated as emergency contacts, as noted on the Registration Form, and must be local to the installation. These authorized emergency designees are also able to pick up a child for non-emergencies as described above.

The following procedures apply when authorized release designees arrive to pick up a child:

- ▶ Every authorized release designee (i.e. emergency or non-emergency contact) must show a valid photo ID upon entering the program. The CYP Professional verifies that the individual is on the most current Registration Form.
- Once verified, the individual must sign the child out on the Attendance Roster and the child must be signed out of CYMS by the Operations Clerk or designee (as applicable for the program).

#### 6.1.2 Verbal Authorization for Release

Parents are expected to pick up their children themselves or to arrange for individuals authorized as their emergency or authorized release contacts to pick up their children. However, parents may occasionally need someone who is not listed as an emergency or authorized release contact to pick up their child. CYPs must convey to parents that such an arrangement must be the exception, not the rule. The parent should notify the CYP of an alternate pickup in writing in advance; however, parents may call to grant temporary authorization to another individual to pick up their children. In this instance, the program must complete a <a href="Verbal Request for Release of a Child/Youth">Verbal Youth</a> and it must be kept in the child's file. In facility-based programs, the CYP Professional who documented the authorization for release must ensure that both the CYP Professional providing direct care to the child and front desk staff are aware of the temporary authorization. Regular procedures continue to apply for child release.

If a parent habitually calls the program to request verbal releases, the program/CDH Provider should discuss with the family the importance of having a current list of emergency/non-emergency authorized contacts on file. A review of the family's contact list should be conducted and updated as needed.

#### 6.1.3 CYP Professional as Authorized Release Designee

A family may designate a CYP Professional as an emergency or authorized release/pickup contact. However, the family and CYP Professional must understand that CYP Professionals are unavailable to serve as the emergency contact while on duty. Therefore, if a parent designates a CYP Professional as an emergency contact, there must be at least one other non-CYP Professional listed as an emergency contact on the registration form.

The following guidelines apply:

- ▶ CYP Professionals may act as non-emergency authorized release/pickup contacts only during off-duty hours, and it must not interfere with their job responsibilities while on duty.
- CYP Professionals cannot respond to emergency situations while on duty (e.g., pick up a child in the middle of the day due to accident or illness) as this may hinder their work responsibilities.
- ▶ CYP and CNIC are not liable for any behaviors or actions of CYP Professionals outside of work hours when serving as emergency or non-emergency authorized release/pickup contacts.

#### **6.1.4 Child Protective Services (CPS) Release**

If a CPS representative presents an emergency court order or other written legal authorization to assume temporary custody of a child, the program must immediately notify the Program Director (or the CDH Monitor for CDH programs) of the situation. At a minimum, the Director/Provider/Monitor/designee must do the following:

- Carefully review the authorization to ensure compliance with release of the correct child and legal action requirements.
- Dbtain a copy of authorization documentation to maintain in the child's file.
- Verify the CPS representative's identity with photo identification issued by the CPS agency. If there are any concerns, call the CPS office to confirm that the representative is authorized to take responsibility for the child.
- Notify the child's CYP Professional of the situation (if in a facility).

Note: If local jurisdictions require additional release processes, CYPs should establish local policy to guide CYP Professionals on releasing children to CPS.

In facility-based programs, depending on the circumstances and age of the child, the Director should go to the classroom/activity area and bring the child with his/her belongings to the front office. However, there may be instances when it is appropriate to accompany the CPS representative to the classroom/activity area to pick up the child. Remember that this may be a difficult transition and every effort must be made to comfort and reassure the child while also maintaining confidentiality. Sign in and out protocols must be implemented.

## 6.2 Children Not Picked Up at Closing Time

Mission objectives occasionally delay a parent in picking up his/her child. Sometimes parents may miscommunicate about who is picking up the child. In the event a child is not picked up at the program's closing time or at the designated ending time of an activity or event, CYP Professionals must immediately implement the steps shown in Figure 6.2A to minimize program and command liability.

If attempts to contact the parent and emergency and non-emergency authorized contacts are unsuccessful and the child is still in the program at 30 minutes past closing time, the CYP must treat the issue as suspected child neglect. The Program Director must follow the procedure in the chart below and make all contacts as specified in the *Child Abuse Prevention and Reporting (CAPER) Standard*. CDH Providers must contact their CDH Monitor or Director and follow the guidelines below. As needed, the local CPS will work with the FAR and Director to secure temporary placement or care for the child.

Figure 6.2A: Procedure When a Child Has Not Been Picked Up at Closing

#### Child Not Picked Up the program's closing time

A child has not been picked up at the program's closing time. The family has not made contact.

#### **Attempt to Contact Family**

A CYP Professional must attempt to contact the family. If the family cannot be reached, a message must be left for the family.

#### **Attempt to Contact Release Contacts**

A CYP Professional must attempt to call the authorized release contacts from the child's registration form. If the contact cannot be reached a message must be left for each of the contacts.

#### **Contact Authorities**

If the family has not made contact, and no authorized release contacts have responded within 30 minutes of closing, the CYP Professional makes all contacts specified in the <a href="https://www.chen.com/chen.co

## 6.3 Concern for Child Safety at Pickup

The CYP's first priority is always keeping children safe. On rare occasions, a CYP Professional may suspect that a parent (or other emergency notification/non-emergency authorized contact) is impaired from alcohol or drugs or is displaying symptoms of a serious mental or physical illness that would make it unsafe to release a child to the individual. In such cases, the procedure shown in Figure 6.3A must be implemented.

A parent or authorized release contact appears impaired during pickup. The CYP Professional shares his/her concern with the individual and offers to contact another authorized contact to pick up the child. The individual agrees that he/she The individual disagrees and is too impaired to pick up the insists on leaving with the child. child. The CYP Employee/CDH The CYP Employee (with the **Provider contacts Base Security** assistance of the Manager-on-(or local police, if off-base) and Duty in facility-based programs) has the individual sign out, if or the CDH Provider contacts possible. another parent or authorized release contact to pick up the child. The CYP Employee/CDH Provider reports the situation to FAR and the local CPS (in CONUS).

Figure 6.3A: Procedure for Child Safety Concern at Pickup

If the individual refuses assistance and insists on leaving with the child, Base Security or the local police (if the program is located off-base) must be called and CYP Professional must provide the following details: the adult's name; command (if applicable); car's license plate number, color, and make of vehicle. If possible, Base Security/police should be called while the individual is still on site to give authorities time to intervene before the adult leaves the facility with the child. For the safety of all involved, especially the children, CYP Professionals shall not attempt to physically prevent the individual from leaving.

If the individual leaves with the child, reports to the Family Advocacy Representative (FAR) and local Child Protective Services (CPS) must be made. Refer to the *Child Abuse Prevention and Reporting* (CAPER) Standard for guidance on the mandated reporting requirements.

## **Chapter 7:**

# Navy CYP Line of Sight Supervision (LOSS) and Visual Identifier Requirements

CYPs must implement appropriate supervision and accountability measures to ensure child safety and well-being at all times. This includes requirements that, per <u>DoDI 1402.05</u>, any CYP Professional (contractors, volunteers, interns, and all new employees regardless of position type) awaiting adjudication of child care investigations must always be within direct LOSS of a paid employee. The paid employee must both have favorably adjudicated child care investigations and meet the periodic reinvestigation requirement for recurring child care investigation checks. Information on ensuring LOSS compliance for CDH Providers is detailed in <u>Section 7.2</u> below. LOSS requirements for non-CYP Professionals working in the program is explained in <u>Section 7.3</u>.

# 7.1 Ensuring LOSS Compliance Through Visual Identification in Facility-Based Programs

CYP personnel awaiting adjudication of child care investigations must wear color-coded apparel so that a favorably adjudicated, paid CYP Professional can easily identify, monitor, and supervise his/her activities. Color-coded apparel cannot be covered up with a sweater, hoodie, or any other garment. Variations to the required color-coding system are not authorized. Questions regarding child care investigations must be directed to the CNIC Central Suitability Office (CSO).

To support LOSS requirements, programs shall provide CYP Professionals with an adequate number of color-coded shirts, sweatshirts, smocks, etc., all containing the CYP logo. Similarly, Youth Sports and Fitness (YSF) Programs shall provide volunteer coaches with similar apparel; however, hats or visors with the CYP logo may be used in lieu of shirts if necessary. CYPs must adhere to a standardized color-coding attire system for all CYP Professional positions, based on CYP categories (including employees, contractors, and volunteers). Refer to <a href="majority Appendix">Appendix J</a> for more details about the visual identifier colors required for CYP positions.

Paid employees providing LOSS have a shared responsibility to maintain LOSS throughout program hours/activities, and CYP activities should be planned with LOSS requirements in mind. Paid employees responsible for LOSS should provide clear, direct communication and support to the individuals in LOSS. The Management Team is responsible for ensuring the following actions are taken:

- ▶ Specify positioning expectations based on the activity in which the CYP Professional will assist; encourage the CYP Professional to ask questions to clarify positioning expectations when needed and to confirm his/her understanding of the expectations.
- Communicate with the CYP Professional to ensure he/she is engaging in developmentally appropriate interactions and activities that support the LOSS requirement.
- Ensure that CYP Professionals are following the LOSS requirements, including remaining in direct LOSS whenever engaging with children.
- Intervene immediately if any CYP Professional needs assistance or risks violating Navy policy.

The following standardized color coding system shall be utilized while CYP Professionals are awaiting background checks:

#### Eligibility for Red Visual Identifier

Granted to CYP Professionals and contractors, including (1) those performing direct care, food service, and managerial and support duties, <u>and</u> (2) who have <u>pending</u> suitability determination and are approved for provisional hire. While awaiting favorable interim suitability determination, individuals with a pending suitability are not authorized to work with children and shall not be assigned to a group of children, even under line of sight supervision (LOSS). Provisional hires cannot be counted in ratio, be left alone with children at any time, or assist in direct care. Direct care personnel are authorized to observe in classrooms, complete training, support front desk operations, and complete occasional custodial/program support tasks. The intent is to provide direct care provisional hires meaningful learning opportunities. CYP support staff (Operations Clerks, food service staff, etc.) in a provisional hire status are able to perform position duties, except as noted above.

#### Eligibility for Blue Visual Identifier

Granted to CYP Professionals and contractors, including those performing direct care, food service, managerial and support duties, <u>and</u> who have a favorable **interim** suitability determination. While awaiting final adjudication of the submitted investigation, CYP Professionals with blue visual identifier eligibility are authorized to work with children under LOSS as defined in the <u>Assistant Secretary of Defense Policy Clarification for Line of Sight Supervision</u>. Two CYP Direct Care Staff members who are blue smock eligible are authorized to work in ratio together. However, the Management Team is required to ensure that the appropriate level of LOSS is maintained through regular checkins, observations, and oversight.

Due to the processing time required to initiate and complete the Tier 1 background check required for specified volunteers serving as YSF Coaches, programs are authorized to process YSF Coaches as non-specified volunteers. Programs must ensure that all background check requirements are completed and that YSF Coaches processed as non-specified volunteers remain in LOSS at all times of a paid employee with a favorable final suitability determination.

#### Eligibility for Green Visual Identifier

Granted to CYP Professionals and contractors who have a favorable **final** suitability determination background check or have met reverification requirements. Once a favorable **final** suitability determination is made, CYP Professionals, to include Program Leaders, volunteers and contractors, will wear a green visual identifier. All other CYP Professionals will wear the appropriate color identifier by position as indicated in <u>Appendix J</u>. Green visual identifier eligible CYP Professionals are authorized regular contact with children outside of LOSS.

Installation CYP Directors (ICYPD) are authorized to wear professional business attire or black CYP-issued attire; however, if they do not have favorable final suitability, they are also required to wear blue or red CYP attire until a final favorable background check is completed. This guidance includes requirements for ICYPDs who have offices outside of the CYP. ICYPDs are not considered guests to the CYP facilities and are required to wear identifiable clothing while in the programs.

## 7.2 Ensuring LOSS Compliance in CDH

LOSS for CDH programs is unique. CDH Providers work in isolation and very few work with an assistant or Co-Provider. As such, most background check requirements must be favorably completed before a CDH Provider can begin caring for children. CDH applicants with a **pending** suitability determination are not authorized to work with children. The applicant may continue with orientation, establish a MilitaryChildCare.com CDH Provider profile, and complete inspections in preparation for certification and while waiting for background checks to be processed.

CDH Providers with favorable **interim** suitability determination may conditionally operate while awaiting final background check suitability as long as all household members are, at a minimum, in an interim status. CDH Providers may begin interviews, enroll families, and receive subsidies. CDH programs are required to conduct weekly health/safety home visits in addition to the regular monthly home visits until final certification is granted. Programs shall use the <u>Monitoring and Quality Improvement Weekly Home Visit Record</u> to conduct weekly home visits. All regular certification requirements are required to be met prior to issuing a conditional certificate to operate. CDH Providers in an interim status must be documented as such in the Child Youth Management System (CYMS) using code *D1-INTRM*.

CDH Providers are granted favorable **final** suitability when background checks and/or reverification requirements are favorably completed for the CDH Provider and the applicable household members. Weekly home visits will discontinue, and the CDH Provider will only receive monthly home visits. The CDH Provider must remember to maintain supervision of all children in care as outlined in <u>Chapter 3</u>, especially when other adults are in the home, even household members, unless the household member is certified as a Substitute Provider. The Provider is responsible for the children and their safety.

## 7.3 Supervision requirements for Non-CYP Professionals working with Children in CYP

#### 7.3.1 MFLCs working with individual children in CYPs

While Military Family Life Consultant (MFLC) will primarily work with children within their typical setting (e.g., classroom, activity area, on the playground, etc.), there may be instances when a child is provided individualized support in CYP. The need for support outside the group environment should be agreed upon among the MFLC, CYP Director/CDH Provider, and parent to determine such factors as context, frequency, location, length of time, etc. It is appropriate for the MFLC to work with a child individually when (1) the parent and program have determined and agreed on the MFLC support services, (2) the parent has signed the MFLC Parent Authorization Form, and (3) the program has provided appropriate supervision within line of sight of a CYP Professional unless the parent is present.

#### 7.3.2 Other Service Providers working with individual children in CYPs

Any non-CYP Professional, including but not limited to speech therapist, ABA therapist, etc., who provides services to children in CYP is required to be in LOSS of another cleared CYP Professional. The services provided are agreed upon by the service provider, CYP Director/CDH Provider, and the child's parents, and including the frequency of sessions, length of time per session, etc. Depending on the child's needs and the services provided, the services may be (1) in the child's typical activity area (e.g., CDH, classroom, playground alongside or in proximity to the CYP Professional(s) and other children) or (2) in a designated space that facilitates greater concentration for the child (e.g., at the kitchen table in CDH or 24/7 Center). LOSS must be provided by a designated CYP Professional for all non-CYP service providers who work with children for the duration of his/her presence in a CYP facility or home.

## **Appendix A:**

# Key Terms and Concepts for CYP Supervision and Accountability

Term	Definition
Accountability	Each CYP Professional's responsibility for knowing how many and which children are in care and where they are at all times.
Accountability Counts Template	A template (Appendix B) that programs may use as written or tailor to create their own document to record required daily accountability counts. CDH is not required to use this form.
Activity Area	The term <i>activity area</i> represents any indoor or outdoor space used to facilitate CYP programming, including Child Development Center (CDC) classrooms, School Age Care (SAC) and Teen Program activity rooms, 24/7 Center and Child Development Home (CDH) activity areas, playgrounds, fields, courts, etc.
Active Supervision	Focused attention and intentional, developmentally appropriate observation, monitoring, and guidance to ensure children's well-being and to promote learning.
Adjudicated and Favorably Adjudicated	Terms used to indicate the status of CYP Professionals' child care investigations. Completed investigations are adjudicated. Investigations with favorable results are favorably adjudicated.
Attendance Roster	A CYMS-generated roster for each classroom/program that lists the name of each child registered in that classroom/program. Families must sign their child in and out of the classroom/program on this roster. Staff use the roster to conduct required accountability practices throughout programming hours to confirm the presence of children in attendance. CDH Providers may use the Attendance Roster on the Elibrary. CDH Providers do not use a CYMS-generated listing.
Child	The term <i>child</i> includes all children, youth, and teens participating in CYP.
Child and Youth Management System (CYMS)	Child Youth Management System (CYMS) tracks enrolled children's daily attendance at the facility (refer to the <u>CYMS Household Records User Guide</u> for more information).
Current Attendance Report	A CYMS-generated report of all children currently in attendance at a CYP program. Not required for CDH Providers.
CYMS Reconciliation Check	A required practice conducted shortly after the majority of children have arrived for the day. The Operations Clerk uses the CYMS Current Attendance Report to verify

	that each child indicated as present on the report has been signed into the Attendance Roster in his/her classroom/program. N/A for CDH.
CYP Professional	The term <i>CYP Professional</i> includes all employees, volunteers, CDH Providers, and contractors in support of the CYP. If a requirement applies to a specific professional group/type, that designation is used; example, CYP employee, or CDH Provider.
Group Size	The maximum number of children in a group allowed in a classroom or activity area. Group size is determined by the ages of the children in care.
Head Count	The process of visually counting the number of children in a group.
In Ratio	A CYP Professional's status when he/she is counted in the staff:child ratio and is directly responsible for a group of children.
Installation CYP Director	The term <i>Installation CYP Director</i> refers to the designated Director at the installation with oversight of all CYP programs at the installation.
Line of Sight Supervision (LOSS)	The requirement for any CYP Professional (except CDH Providers) awaiting favorable adjudication, any volunteer, or any visitor to a CY program to remain within the direct line of sight and supervision of a favorably adjudicated CYP employee when the CYP Professional, volunteer, or visitor is in the vicinity of or working directly with children.
Management Team	The term <i>Management Team</i> refers to the following positions, as applicable to the program: Director, Assistant Director, Youth Sports and Fitness Coordinator, Teen Coordinator, 24/7 Program Supervisor, and CDH Monitors. This team is responsible for overall CYP operations.
Name-to-Face Recognition Check	A type of head count in which the CYP Professional visually verifies the presence of each child in a group by viewing each child's face and ensuring he/she is signed in on the Attendance Roster.
Program Director	The term <i>Program Director</i> refers to the director of each CYP program—CDC, SAC, YP, 24/7, and CDH—when something applies to all directors regardless of program.
Quality Assurance Count (QA Count)	A daily accountability measure completed by a Management Team member. The Management Team member conducts a name-to-face recognition check and compares it to the Attendance Roster. Programs document QA counts on the Accountability Template or on a similar, locally produced document. N/A for CDH.
Sight Supervision	The requirement that CYP Professionals providing direct care are able to visually observe each child for whom they are responsible.
Sound Supervision	The requirement that CYP Professionals providing direct care are able to clearly hear children for whom they are directly responsible.
Sight and Sound Supervision	The requirement that CYP Professionals providing direct care are able to visually observe and clearly hear children for whom they are directly responsible.
Staff:Child Ratio	The relationship in quantity between the number of CYP Professional assigned and number of children for whom the assigned Professional is responsible.

Staff Transition Head Counts	A type of head count conducted before every staff transition, when one CYP Professional departs and a replacing CYP Professional assumes responsibility for the supervision of the group of children. To conduct a staff transition head count, both CYP Professionals conduct a head count independently and then compare their counts. The staff transition head count must be documented on the Accountability Template or on a similar, locally produced document.
Teen	The term <i>teen</i> is used when discussing activities and programs specifically geared toward children ages 13–18.
Training Team	The term <i>Training Team</i> refers to the following positions, as applicable to the program: Training & Curriculum Specialist, Training Specialist, and Assistant Training & Curriculum Specialist. This team is responsible for implementation of the CYP Training Program.
Transition	The term that describes the movement of children from one environment to another (e.g., location to location, vehicle to location).
Verification Count	A type of head count in which the designated CYP Professional (Program Leader, Assistant Director, T&C) of each classroom/program conducts a name-to-face recognition check and compare it to the Attendance Roster. The designated CYP Professional must document each verification count. Programs may use the Accountability Template or a similar, locally produced document. N/A in CDH.
Visual Sweep	An accountability measure in which the CYP Professional visually scans the entire care environment, checking that the environment remains safe, and noting the whereabouts of all children. CYP Professionals must incorporate frequent and ongoing visual sweeps into their daily routines and interactions with children. Visual sweeps are also used before, during, and after all transitions.
Youth	The term <i>youth</i> is used when discussing activities and programs specifically geared toward children ages 5-12.

### **Appendix B:**

### **Accountability Counts Template**

CDCs, 24/7, SAC, and Teen Programs may use this template to create the accountability document required to conduct the daily quality assurance (QA) measures, as follows: (1) hourly verification count, (2) staff transition count, and (3) daily QA checks. Once programs create their own document from this template that reflects the details of their own facilities, they must use the document as locally determined.

Classroom/Program:	Date:
--------------------	-------

**Hourly Verification Count:** Each hour, the Program Leader (or designee) conducts a name-to-face recognition check and reconciles it with the attendance roster. He/she enters the number of children and number of staff and initials that the verification is complete for that hour.

Time	5 AM	6 AM	7 AM	8 AM	9 AM	10 AM	11 AM	12 PM	1 PM	2 PM	3 PM	4 PM	5 PM	6 PM	7 PM
# Children															
# Staff															
Staff Initials															

**Staff Transition Count:** For all staff transitions for any reason, both the departing and incoming CYP Professionals conduct head counts of the children in the departing CYP Professional's group before transferring responsibility. If the departing CYP Professional returns, use the return columns on the right.

Initials of Staff Transferring Supervision Responsibility	Time In	# Children	Time Out	Time In (if departing staff returns)	# Children	Time Out (if incoming staff exits)
Incoming Staff:						
Departing Staff:						
Incoming Staff:						
Departing Staff:						
Incoming Staff:						
Departing Staff:						

**Daily QA Check:** The Management Team or Training Team must conduct QA checks. The QA check involves asking the CYP Professionals for the number of children currently in the classroom/program, noting it in the table below, conducting a name-to-face recognition of each child, and matching the name-to-face recognition check results with the Attendance Roster.

Name of Management Team Member or Lead Training Specialist Conducting QA Check	Time	Head Count Given by CYP Professional	Name-to-Face Recognition of children (√ after conducted)	Does the Name-to- Face Recognition Check Reconcile With the Roster? (Y or N)*

<sup>\*</sup>If the name-to-face recognition check does not match the roster, or if the CYP Professionals' head counts do not match, the Management Team must follow up with staff as appropriate

## **Appendix C:**

# Visitor and Volunteer Sign-In/Out Sheet

#### Visitor Sign-In/Out Sheet

Date	Visitor Name	Organization Affiliation	Reason for Visit	Time In	Time Out
Date	VISILOI IVAIIIE	Aimation	Reason for visit	- 111	Out

#### **Volunteer Sign-In/Out Sheet**

Date	Volunteer Name	Room/Location	Time In	Time Out
Date	volunteer Name	Roomy Location	1(1	Out

### **Appendix D:** Visitor Badge Template

(Installation Name)
CHILD DEVELOPMENT CENTER

**VISITOR** 



(Installation Name)
CHILD DEVELOPMENT CENTER

**VISITOR** 



(Installation Name)
CHILD DEVELOPMENT CENTER

**VISITOR** 



(Installation Name)
CHILD DEVELOPMENT CENTER

**VISITOR** 



(Installation Name)
CHILD DEVELOPMENT CENTER

**VISITOR** 



(Installation Name)
CHILD DEVELOPMENT CENTER

**VISITOR** 



## **Appendix E:**

# Positioning & Zoning Strategies in Daily CYP Activities

Activity	Strategy
Diapering an infant	► The diaper changing table/area must be strategically placed where the CYP Professional can easily view and hear the other children while changing a diaper.
Holding or feeding an infant	While feeding an infant, the CYP Professional must sit in the room where he/she can still observe the other children. For example, when feeding an infant in a high chair, the CYP Professional must place the high chair so that he/she can see and hear the other children (i.e., CYP Professionals should not be facing the wall or away from the children).
Talking to a family member at pickup time	When speaking with family members during pickup time, the CYP Professional must maintain visual and sound supervision of the children in the classroom. For example, the CYP Professional should be positioned facing the children so that the CYP Professional can easily observe the children. If a lengthy discussion is required with a parent, the CYP Professional should offer the family member an alternate option for an extended conversation.
Interacting with a specific child or small group of children	<ul> <li>Interactions are required and expected in CYP environments, and while interacting, the CYP Professional must strategically place his/her body to ensure sight and sound supervision of the other children.</li> <li>CYP Professionals should not only interact with a particular child or group of children when there is a larger group; the CYP Professionals must also move around the room/area to provide active sight and sound supervision.</li> </ul>
Supporting a child in the restroom	For children under 3 years old, one CYP Professional must be able to see the child(ren) at all times. For older children, the CYP Professional does not have to see the child using the restroom but must be able to hear the child. The CYP Professional should check on a preschool-aged child after a short period of time to ensure safety.
On the playground/ outdoor environment	<ul> <li>CYP Professionals must continuously move around and visually scan the outdoor environment to provide supervision to all children.</li> <li>CYP Professionals must use consistent positioning techniques at play stations, areas, and/or playground equipment.</li> </ul>

Activity	Strategy
	When there is more than one CYP Professional, they should communicate with one another to implement position and zone strategies so they are able to scan the entire area and supervise every child.
	When playgrounds are too large to support adequate visual and sound supervision, or if the playground has blind zones, CYP Professionals should work together with the Management and Training Team to address supervision limits.

### **Appendix F:**

## Supervision Requirements for Children

#### General supervision requirements for young children

CYP Professionals are required to supervise young children according to the following guidelines:

- ▶ CYP Professionals must supervise younger infants during activities by either holding the infants supportively or positioning themselves no more than an arm's length away with all infants in full view (e.g., during tummy time, floor time, or high chair).
  - Tummy time is conducted when a CYP Professional is sitting on the floor next to the infant(s), interacting with the infant(s), and ensuring that the infant(s) is/are not in distress. Under no condition will an infant be left unattended (out of arm's reach) on their stomach during tummy time. If the infant is in distress in this position, the CYP Professional must quickly reposition the infant or end the tummy time session.
- ▶ CYP Professionals must be constantly ready to take action and move or reposition infants so that they are able to experience and explore their surroundings safely.
  - As infants are learning to scoot, roll over, and crawl, CYP Professionals must ensure nothing harmful is in the infants' paths. CYP Professionals may need to move or reposition an infant out of harm's way or move an object that could pose a danger.
  - Example: An infant lying on her back spits up. The CYP Professional must immediately reposition the infant to lie on her side to reduce the danger of aspiration.
- CYP Professionals must continually observe and evaluate the environment to ensure open spaces are clear of hazards so that children can crawl, walk, and run without getting hurt. For example: CYP Professionals must remove any materials that children can trip over; have sturdy objects that older infants/pretoddlers/toddlers can hold onto and use to pull themselves up; remove objects that can be pulled down onto children; and ensure space for unobstructed movement that also discourages running indoors.
- Depending of the child's development, CYP Professionals supervise mobile infants, pretoddlers, and toddlers by positioning themselves within a few steps of them at all times to balance promoting development and emerging independence while maintaining their safety. Children who are just learning to crawl, pull up, and walk may move more quickly than anticipated. However, they also struggle with stability during these stages. CYP Professionals must constantly move and position themselves so they can see all children assigned to them in a single, visual sweep with minimal head or body adjustments and be close enough to intervene if a child needs help. For example, when pretoddlers are practicing motor skills, CYP Professionals should maintain enough distance to allow the child to experience the activity, communicate supportively with the child, and be near enough to help the child as needed.

- While it is developmentally appropriate for toddlers to test their boundaries and emerging physical skills, they may attempt activities that are unsafe. For example, toddlers might try climbing on bookshelves or put items like crayons or small manipulatives in their mouths. The role of the CYP Professional is to notice and immediately respond to the child by offering safe, appropriate alternatives and frequent redirection, as needed.
- CYP Professionals must carefully supervise young children with toys, even if the toy is designated as safe for the specific age range. It is developmentally appropriate for children to explore toys and objects by using their mouths and hands. CYP Professionals must observe the children's engagement with these toys and objects to prevent choking or other safety risks to the child and others. All toys should be checked at least daily for loose parts and/or breaks that may pose a choking or other safety risk. All toys must be evaluated based on the manufacturer's safety labeling designations (e.g., WARNING: CHOKING HAZARD Toy contains a small ball.; Not for children under 3 yrs.) to ensure compliance and meet the safety guidelines for the prevention of choking regarding type, size, and width (refer to Caring for Our Children Basics: Health and Safety Foundations for Early Care and Education for specific guidance on safety guidelines for toys).
  - Even when materials are age-appropriate, children should first be shown and provided guidance on how to safely use them. Children are curious and may try to use a toy or other item for a purpose it was not intended, increasing risk of harm. CYP Professionals' effective responses and reinforcement of learning will assist with keeping the children safe without eliminating imaginative play opportunities.
- CYP Professionals should ensure children engage safely and appropriately with materials and their peers. CYP Professionals must watch for young children's potential conflicts during play, especially around shared materials. Although young children learn to interact with other children, this is a progressively developmental social skill needed for smooth interactions. CYP Professionals should have reasonable expectations, according to the child's developmental strengths and engage children with supports such as with multiple popular toys, sufficient space to work, guidance to wait for the child in front to slide down, etc.
  - While most preschoolers should be provided an increased level of independence, developmentally, they are just beginning to master group play and can be impulsive with reactions and emotions. Social interactions with others can sometimes result in challenging behaviors or altercations as their ability to manage their own emotions may not be fully developed. For example, children may hit another child instead of communicating with words when they want an item, or they may use scissors to cut their own hair or another child's hair during pretend play. CYP Professionals must observe (and engage when needed) in independent and small group activities, give clear rules for use of materials, and monitor the use of scissors, blocks, books, and all other materials for safe and appropriate use.
  - CYP Professionals must ensure children do not have places to play behind or out of view of CYP Professionals. Especially beginning with the preschool ages, children may be curious about their own and their peers' bodies and may want to explore. CYP Professionals need to regularly monitor children activities and be prepared to redirect and intervene as needed.
- When two CYP Professionals are assigned to supervise a group of children, Training Specialists must work with CYP Professionals to help them develop effective communication strategies with each other to minimize risks. A CYP Professional attending to an individual child's needs may be unable to respond to the immediate needs of other children in the classroom. Maintaining effective

communication with the other CYP Professional is critical, and the other CYP Professional must use positioning strategies to ensure all children are appropriately supervised, as applicable.

- Communication is also important with single ratio staff, ensuring the CYP Professional is trained in advance to understand how to successfully supervise the children during the various routines (e.g., diapering/toileting, meals, nap, etc.).
- Training Specialists are responsible for ensuring all CYP Professionals are well prepared to
  fulfill their responsibilities, regardless of the CYP type, by observing supervision practices to
  provide guidance as needed to ensure that appropriate strategies are implemented and
  integrated into daily practices.

#### General Supervision Requirements During Meals and Snacks for Young Children

To minimize risks of choking, CYP Professional must be vigilant when supervising children during meals by following these requirements.

- ▶ CYP Professionals must closely supervise children during meals and snacks and must look for signs of choking or distress in order to respond immediately as needed.
- CYP Professionals must monitor children for potential allergic reactions to new foods.
- When feeding a group of younger children, CYP Professionals must position themselves so that they can maintain appropriate supervision of the other children in the room.
- When more than one CYP Professional is in a room, they must communicate and reposition themselves to ensure all children are properly supervised.
- CYP Professionals must sit with and closely supervise children as they learn to serve themselves to minimize spills or other potentially unsafe practices and engage them to make mealtime a pleasant experience.
- ▶ To minimize risk of choking, children consuming food or drink should be seated at table.
- CYP Professionals must model the safe use of utensils since children are at all developmental levels and may require assistance in learning how to use utensils as their fine motor skills are still developing.
- A CYP Professional must remain at the table with the children who are still eating while the other CYP Professional supervises children who are finished eating, need to use the restroom, or become engaged in another activity. CYP Professionals must work with Training Specialists to develop a transition plan to use as children finish their meals or need to leave the table.
- While CYP Professionals should sit at the table with children if they are all at the table, meal supervision must include repositioning if some children are still eating but some are finished. Repositioning may include standing up from the table, as needed, to keep all children in sight and under sound supervision.
- In CDH or if an employee in the CDC is in a single staff:child ratio group, he/she must work with the Training Specialist to develop a plan for meals, including the transition at the end of the meal when some children are still eating and some are finished. The transition plan may include requesting additional assistance to ensure all children are in sight and sound supervision during meal transitions.

#### Infant Supervision Requirements During Meals and Snacks

- Infants eat on their own schedules and gradually develop a more consistent feeding schedule as they get older. Because infants eat on their own schedules, Management Teams must consider the need for flexible responses to changes in infant feeding schedules when scheduling employees in infant rooms.
- CYP Professionals must hold infants who are bottle-fed. When it is developmentally appropriate, the CYP Professional must support infants' development by assisting them in learning to hold the bottle. Through practice, infants will learn to hold the bottle on their own. Bottles must never be propped with a pillow or other item.
- ▶ No more than two infants in high chairs may be fed at the same time in CDCs and 24/7s.
- ▶ CDH Infant-only homes may have up to three infants and may need to feed all three at one sitting. Infant-only CDH Providers should be practicing family-style dining, as applicable, for the ages of children in the care.
- CYP Professionals must sit within arm's reach of infants who are feeding themselves and monitor them during the entire meal so they can respond quickly if an infant begins choking or require assistance.
- ▶ CYP Professionals must continuously communicate with one another as they attend to feeding infants and meeting the needs of other infants (e.g., changing a diaper, placing a tired child in a crib). Depending on the activities in the classroom, an additional CYP Professional may be needed, and a CYP Professional may need to ask for assistance.

#### Pretoddlers and Toddlers Supervision Requirements During Meals and Snacks

- As pretoddlers and toddlers are learning self-feeding skills, they are particularly vulnerable to risks of choking and must be observed closely during feeding.
- All pretoddlers and toddlers must be seen at all times. If a child wanders from the table, at least one CYP Professional must be able to see the child.
- If a toddler needs to use the restroom during a meal, the transition plan should position one CYP Professional in the restroom doorway so he/she can maintain LOSS of the child in the restroom as well as the children still at the table.

#### **Preschoolers Supervision Requirements During Meals and Snacks**

- Preschoolers look to adults as role models for behaviors and social interactions during meals and snacks and to assist with family-style dining, and talk with the children about the meal. As needed, the other CYP Professional may facilitate the meal service and be available to assist children as they finish their meals and transition to the next activity.
- If a preschooler needs to use the restroom during mealtime, CYP Professionals may allow the child to go unattended if they maintain awareness of the child in the restroom, if the child does not need assistance, and if the child is still within sound supervision. CYP Professionals must know where the child is, monitor the time the child is away from the group, and check on the child as needed.

#### School Agers Supervisions Requirements During Meals and Snacks

During mealtimes, CYP Professionals must sit and engage with youth. Note that cafeteria/buffetstyle meals (including snacks) that allow youth to choose and serve themselves decrease the need for additional staff coverage and enable staff to maintain zoning.

#### **Supervision Requirements During Naptime**

<u>NAEYC Early Learning Program Standards</u> require that all children be actively supervised at all times, including naptimes. CYP Professionals can enhance the visual supervision of sleeping children through assistive devices such as convex mirrors; however, this does **not** replace visual supervision. **All children must be supervised while sleeping**. Refer to <u>Section 2.1</u> for staff:child ratios during naptimes.

#### Naptime Supervision Requirements for All Age Groups

CYP Professionals providing direct care during naptime must adhere to the following child supervision requirements that apply to **all age groups:** 

- When infants, pretoddlers, toddlers, and preschoolers are sleeping, the CYP Professional must be aware of, and be positioned, so they can see and hear any and all children at all times.
- Rooms may not be darkened. Overhead lights may be turned off, but natural light should be sufficient to see all children.
- ▶ The CYP Professional must conduct visual and physical checks conditions through direct observation (e.g., listening for and observing steady breaths, normal skin color, any other observable concern) of all sleeping infants, pretoddlers, and toddlers at least every 15 minutes as any change may indicate distress, experiencing discomfort, or need of adult assistance.
- Visual checks must not be conducted through the use of a mirror, baby monitor, window, CCTV, or other means in lieu of direct sight and touch checks.
- Observing a sleeping child should not disrupt the child's sleep unless there is a concern. If there are any signs of distress, a CYP Professional must respond. If another CYP Professional is in the room, alert the other Professionals in the room, especially if the other Professionals are also actively engaged with children who are awake.
- Additional consideration must be given for placement and frequency of checks on children with identified needs (temporary or long-term) who may require additional observational support (e.g., seizure disorders, sleep apnea, severe asthma, mobility issues, reflux, etc.).
- All children's heads and faces should be completely visible and not covered with any object (e.g., toy, blanket).
- ▶ To the greatest extent possible, cribs, pack-and-plays, and cots must be placed in an open area, unobstructed by shelves, cubbies, or other visual barriers. If there is a visual barrier, the Training Specialist must evaluate the area to provide specific guidance to the CYP Professionals for supervision and observe the effectiveness of the guidance to ensure that supervision requirements are fully met.
- ▶ CDH Providers may not place children in a separate room that is out of the Provider's line of sight. Provider's may use a separate area in the home that is not closed off with a door for napping all

children. However, the Provider must be able to check on children easily and see the area from other parts of the house.

- The CDH Provider's own children may sleep in their own beds, however, the Provider must be able to support the child(ren) without an extended amount of time away from the rest of the group.
- Preschool children also require active supervision while napping to ensure their safety. CYP Professionals should ensure active supervision throughout the nap period by strategically positioning themselves to ensure that at all children (asleep and awake) can be seen and heard.
- ▶ Children are not required to sleep during naptime. The CYP Professional will offer developmentally appropriate activities for children who are not sleeping.
- ▶ CYP Professionals must work together and with the Training Specialist to establish a process to accommodate the needs of children who may nap less often, struggle with the adjustment to a routine nap schedule, or fall asleep outside of the scheduled nap period (e.g., entering care for the first time, after vacation, transitioning from the infant room).
- ▶ CYP Professionals must provide appropriate supervision to children who are not sleeping while engaging with and supervising the entire group.
- Children who do not consistently nap or wake earlier than others should also be placed closer to CYP Professionals so the CYP Professional can easily see and interact with them or immediately respond to them without disturbing the other children.
- Programs should establish a system in the classroom/home to effectively supervise all children while accommodating variable sleeping schedules.
- If young children need help settling down for a nap, a CYP Professional may rub his/her back, hum a song, or simply sit close by to help the child relax.
- ▶ CYP Professionals should prepare developmentally appropriate quiet activities in advance for those children who do not nap or nap for only a short period while the other children are resting.

#### Naptime Supervision Requirements for Infants

In addition to the general naptime supervision requirements applicable to all children, Navy CYP requires Professionals to supervise sleeping infants according to the following guidelines:

- For infants who require an **alternate sleep position** and do not sleep on their backs, CYP Professionals are required to conduct visual and physical checks on them at least **every 10 minutes**.
- Infants must be placed on their backs to sleep for safety. Exceptions can be made only if the infant has documentation of a medical need for an alternate sleeping position from a physician on file at the CDC/CDH.
- Infants may not have any pillows, blankets, other soft items, or toys in the crib while they are sleeping. They may be put to sleep in a sleep sack.
- Infants may not use pacifiers with attachments that cover their face.
- Infants must sleep on approved sleeping surfaces in cribs or pack-and-plays in CDH.
- If an infant falls asleep elsewhere, such as the floor or in a car seat while being transported into the CDC/CDH, the infant must be moved to an approved sleeping surface.

#### Supervision of Diapering and Toileting

Diapering and toileting require vigilant supervision to keep children safe and minimize risks. Restroom floors are slippery when wet, and changing tables pose falling risks for active children. **All children must be well supervised during diapering and toileting.** 

#### **Supervision Requirements for Diapering**

Programs must adhere to the following supervision and accountability requirements when diapering children in the CYP, regardless of the child's age:

- ▶ Children must **never** be unattended on a changing table, even for a moment.
- ▶ CDH Providers should position the changing table to be able to see all children when diapering. Placing the diaper station in the bathroom that is typically closed off from the rest of the area does not allow the Provider to maintain supervision of the other children, so changing tables must be placed in an area that allows for visibility of all children in care.
- ▶ CDH Providers who do not use a changing table may use a changing mat on the floor in an area that allows for visibility of all children in care.
- Management Teams must ensure that diaper changing stations are placed in classrooms to allow CYP Professionals to change diapers while maintaining visual access to the rest of the classroom.
- ▶ CDH Providers must work with the Training Specialists to help them develop effective strategies to minimize risks during diapering. A Provider attending to a child's diapering needs is unable to respond to the immediate needs of other children in the home; therefore, the Provider must ensure that the other children in care are engaged in activities that are safe and do not require immediate assistance. It is critical that the Provider use positioning strategies to ensure all children are in sight and sound supervision.
- Diaper changing supplies must be gathered and accessible prior to placing the child on the changing table.
- When a child is on a diapering table, the diapering CYP Professional must position his/her body toward the child and keep one hand on the child to monitor the child's movement and keep the child safe.
- CYP Professionals assigned to any group that needs to attend to a child's diapering needs, must ensure the rest of the children in the group are properly supervised during the diapering, including in a single ratio group.
- For children who are capable of walking, diaper changing stations should include steps or a sturdy step stool in the locked position so that walking children can reach the changing table. During the process of ascending/descending, the CYP Professional must remain in close proximity to the child and provide supervised support by physically holding the child's hand, supporting the child's body, communicating what the child should do next, and/or providing verbal encouragement depending on the age and development of each child.

#### **Supervision Requirements for Toileting**

Programs must adhere to the following supervision and accountability requirements when supervising young children's toileting.

- If the CYP's layout impedes clear line of sight for supervising a child in the restroom while monitoring the remainder of the children, Training Specialists must work with CYP Professionals to establish procedures for supervising and supporting toileting. These procedures should determine the best positioning for the CYP Professional to maximize supervision and safety of all children.
  - CDH Providers' homes are not always constructed for easy visibility of the restroom;
     therefore, it is extremely important that the Provider work with the Training Specialist to develop the best plan to support supervision requirements during toileting.
  - Even if pretoddlers and toddlers have developed toileting skills, CYP Professionals must be
    positioned where they can see the child(ren) and monitor their actions directly. They may
    never be alone and unsupervised in the restroom.
  - CYP Professionals must provide appropriate supervision of children in restrooms according
    to the individual child's developmental needs because children learn to use the toilet at
    their own pace. Toileting supervision includes assisting children with unfastening or
    fastening articles of clothing, helping children wipe themselves properly, and teaching and
    helping them to wash their hands thoroughly with soap and water when finished.
  - Preschoolers may use the restroom by themselves (if they are developmentally ready), but CYP Professionals must be able to hear them (i.e., within sound supervision) and be ready to immediately assist as needed. CYP Professionals must maintain awareness that a preschooler is in the restroom and should check on him/her as needed. CYP Professionals should listen for the toilet flush and always check that children wash their hands after using the restroom.
  - Unless there is a specific support plan, youth and teens use the restrooms independently;
     however, the CYP Professional should have an awareness of where youth and teens are and check in on them if they have been in the restroom for an extended period of time.
- CYP Professionals must ensure that the other children in care are engaged in a safe activity or, for infants in CDH, are placed in a pack-and-play or infant seat for safety prior to assisting the child in the restroom.
- ▶ CYP Professionals should be able to easily open restroom doors from the outside to maintain visibility and provide adult assistance as required. Also, children should be able to easily open the restroom doors from the inside.
  - CDH Providers should ensure that bathroom doors are not closed and locked by the child so the Provider can assist as needed and still maintain visibility of the child in the bathroom and other children in the home.
  - If a CDC classroom has restroom doors, half-doors are required.
- Restrooms for youth and teens are required to be separate from adults. If no separate adult restroom is available, there is a system in place to ensure youth and teens do not use the restroom at the same time as adults (e.g., sign on the door which indicates the current use type: adult or youth/teen).

#### Managing Children's Indoor Restroom Use When Groups Are Outdoors

All CYPs must work together with their Training Specialist to identify and establish processes for maintaining supervision and accountability protocols while managing children's restroom needs when the group is engaged in activities outdoors. CYP Professionals must prepare for these inevitable situations and be flexible in accommodating children's needs. The following are best practices to help CYP Professionals to manage children's restroom requirements during outdoor activities.

- ▶ The CYP Professional encourages all toilet-trained children to use the restroom before going outside.
- ▶ In CDC, 24/7 Center, or CDH, if a child (especially multiple children) need to use the restroom while outside, the CYP Professional can take the entire group into the CYP to wait for the child to use the restroom. This is especially important for children who may need assistance during toileting.
  - While indoors, it may be helpful to encourage the children to use the restroom again.
- Under no circumstances should children be left outside by themselves while a CYP Professional attends to a child in the restroom.
- In facility-based programs for younger children, CYP Professionals may allow the child who needs to use the restroom to go inside with another group of children to their classroom/activity area.
  - The CYP Professional, with the support of the Training Specialist, must develop an effective reminder strategy to ensure they maintain awareness that a child has gone inside to the restroom and how long the child is inside, in case an inquiry needs to be made. Examples of effective reminders include setting a timer or using a pass system such as a clothespin or a badge attached to the Attendance Roster.
  - This may put that classroom over group size (refer to Section 2.2) for the brief time that the child is using the restroom.
  - A communication protocol must be established so the CYP Professional inside is aware that
    the child has come inside to use the restroom, and the CYP Professional communicates to
    the CYP Professional outside when the child returns to the outdoor group.
- Youth and teens are allowed to enter the facility and use the restroom without being escorted by CYP Professionals. However, to ensure safety and maintain accountability awareness, SAC and Teen Programs must develop effective reminder strategies (e.g., pass system) and communication protocols.

# **Appendix G:**

# Accountability During Offsite Events and Activities

Event or Activity	Accountability Requirements for CYP Professionals
Apply to all offsite events and activities  Field Trips	<ul> <li>Be accountable for children at all times while participating in any program.</li> <li>Follow all accountability measures.</li> <li>Maintain a list (e.g., on a clipboard) of all children participating in the offsite activity (e.g., field trip, lock-in, game/practice), along with their emergency contact information and a communication device.</li> <li>Share CYP POC cell phone information with families.</li> <li>Conduct head counts frequently during field trips and verify the counts with other CYP Professionals.</li> </ul>
	<ul> <li>Conduct a name-to-face recognition check with the Attendance Roster of all children before leaving for the field trip and before returning from the field trip.</li> <li>Follow all required procedures for walking groups (e.g., walking in designated crosswalks only).</li> <li>Give children a meet-up location and instructions at every destination in case they become separated from the group.</li> </ul>
YSF Games and Practices	<ul> <li>Perform visual sweeps of any game and practice areas ahead of time to identify any potentially unsafe areas (e.g., blind spots), design a plan to monitor these areas, and perform visual sweeps after the completion of all games and practices to ensure no children are left behind.</li> <li>Ensure all children are signed in during all games and practices.</li> <li>Verify that all children are signed out by the end of the game or practice and allow them to self-release or leave with an authorized individual.</li> </ul>
Overnight: Lock-Ins	<ul> <li>Ensure CCTV is set up to record additional operating hours.</li> <li>Keep all unused rooms closed.</li> <li>Monitor the main entry door and ensure all other doors leading into the facility remain locked and alarmed.</li> </ul>

Event or Activity	Accountability Requirements for CYP Professionals
	Have designated sleeping areas separated by gender and routinely supervised by CYP Professional.
	▶ Implement accountability practices throughout the entire event.
	Conduct a name-to-face recognition check with all children at the beginning of the lock-in and as needed (e.g., every other hour) throughout the lock-in. Name-to-face recognition counts must be taken of children who are awake and participating in activities, as well as children who are resting/sleeping in designated areas.
	As children choose to rest/sleep, CYPs may limit the amount of open activity rooms for improved accountability.
	Perform visual sweeps of facility/areas at the end of the lock-in to ensure no children remain.
	Conduct staff transition counts during CYP Professional transitions.
Overnight: Hotel	▶ Become familiar with the hotel and its layout to identify any unsafe/inappropriate areas and to set limits/restrictions for teen access as needed.
	▶ Establish locations for teens and CYP Professionals to meet in case of emergencies.
	Work with installations to obtain hotel accommodations that can provide maximum appropriate supervision.
	Reserve rooms that allow for a group of rooms for females and a group of rooms for males on separate floors (if possible). CYP Professionals will have rooms on the same floors of teens of the same gender.
	▶ Request rooms without adjoining doors (if possible).
	Instruct teens to follow rules, including that the teens must stay in their assigned rooms and not switch rooms.
	Establish check-ins in the lobby or other appropriate open area with CYP Professional(s).
	Perform name-to-face recognition checks at curfews and during check-ins. Request teen leaders to assist CYP Professionals as they perform checks.
	Establish a nighttime curfew for all teens to check in with teen leaders and CYP Professional as the last check-in for the evening before going to their rooms.
	Stay present at the evening check-in point. CYP Professionals do not retire to their rooms until all teens are accounted for during curfew.
	▶ Set up times and places for teens and CYP Professional to meet each morning.
Overnight: Camping	Know the tent/cabin number and names of youth assigned to each tent/cabin. Separate tents/cabins by gender.
	▶ Request youth leaders to perform checks with CYP Professionals.

# **Appendix H:**

## Summary of Quality Assurance Measures

Quality Assurance Measure	Responsible CYP Employee	Frequency/Interval	Documentation/Tool
CYMS Reconciliation Count (comparison of documents)	Designated employee (e.g., Operations Clerk)	In the morning after the majority of children have been signed in for the day  During School Year, upon arrival of buses in the afternoon	<ul> <li>CYMS Current         Attendance Report     </li> <li>Attendance Roster</li> </ul>
Ratio Count	CYP Professional	Integrated throughout the program day	► Accountability  Template or a locally  developed document
Staff Transition Count (CDC , 24/7)	CYP Professional	Before all staff transitions, conducted by both departing employee and incoming employee	Accountability     Template or a locally     developed document
Verification Count (Head count compared to Attendance Roster)	Designated employee (e.g., Lead CYP Professional)	Sufficient to ensure the practice of maintained child accountability	<ul> <li>Attendance Roster</li> <li>Accountability Template or a similar tool</li> </ul>
Quality Assurance Count (Name-to- Face Count compared to Attendance Roster)	Management Team member or Training Specialist	Sufficient to ensure the practice of maintained child accountability	<ul> <li>Attendance Roster</li> <li>Accountability         Template or a similar tool     </li> </ul>

# **Appendix I:**

# Teen Visitor Sign In/Out Sheet

Date	Teen Visitor	Sponsoring Teen	Time In	Time Out

## **Appendix J:**

# Visual Identifier Chart by Position Description

View and print the PDF version of this document on the <u>E-Library</u>.

	Navy Child and Youth Programs  Visual Identifier Chart by Position Description								
		ORGANIZATIONAL POSITION TITLES	PAY PLAN	SERIES	GRADE	POSITION #	VISUAL IDENTIFIER		
		Assistant Youth Sports and Fitness Coordinator	GS NF	0188 0188	07 03	N/A CYP 15-01	Black		
0188	FITNESS	Youth Sports and Fitness Coordinator	GS NF	0188 0188	09 04	N/A CYP 15-03	Black		
	=	Youth Sports, Fitness and Teen Coordinator	GS NF	0188 0188	09 04	<u>N/A</u> CYP 15-04	Black		
4		Regional Child and Youth Program Manager	GS NF	0301 0301	13 05	NV52030 CYP 13-13	N/A*		
300: REGIONAL	NAL	Regional Resource and Referral Director	GS NF	0301 0301	09 04	NV52041 CYP 13-14	N/A*		
O: RE(	REGIONAL	Regional Program Analyst	GS NF	0343 0343	11 04	NV52028 CYP 13-15	N/A*		
30		Regional Program Analyst (Information Systems Manager)	NF GS	0343 0343	04 11	CYP 13-43 N/A	N/A*		
٦	REGIONAL	Regional Child and Youth Program Director	GS NF	1701 1701	12 04	NV52035 CYP 13-16	N/A*		
1701: REGIONAL		Regional Child Development Home Director	GS NF	1701 1701	11 04	NV52034 CYP 13-17	N/A*		
, <u> </u>		Regional Child and Youth Program School Liaison Officer	GS NF	1701 1701	12	NV52013 CYP 13-09	NA*		
N N	CYP	Installation Child and Youth Program Director	GS NF	1701 1701	11 04	NV52044 CYP 13-18	Black*		
ADMINISTRATIVE		Child Development Center Director w/CYP Oversight –  Large CDC	GS NF	1701 1701	12	NV52024 CYP 13-19	Black*		
LINIS		Child Development Center Director w/CYP Oversight – Medium CDC	GS NF	1701 1701	11 04	NV52023 CYP 13-20	Black*		
ADIV	cpc	Child Development Center Director w/CYP Oversight – Small CDC	GS NF	1701 1701	09	NV52025 CYP 13-21	Black*		
701: CYP		Child Development Center Director — Large CDC	GS NF	1701 1701	11 04	NV52026 CYP 13-22	Black*		
170		Child Development Center Director – Small or Medium CDC	GS NF	1701 1701	09	NV52027 CYP 13-23	Black*		

Navy Child and Youth Programs  Visual Identifier Chart by Position Description								
		ORGANIZATIONAL POSITION TITLES	PAY PLAN	SERIES	GRADE	POSITION #	VISUAL IDENTIFIER	
		Child Development Home Director w/CYP Oversight – Large CDH	GS	1701	11	NV52017	Black*	
			NF	1701	04	CYP 13-06		
		Child Development Home Director w/CYP Oversight – Small or Medium CDH	GS NF	1701 1701	09 04	NV52018 CYP 13-24	Black*	
	GDH		GS	1701	11	NV52011		
	ľ	Child Development Home Director – Large CDH	NF	1701	04	CYP 13-04	Black*	
7			GS	1701	09	NV52019		
Ę		Child Development Home Director – Small or Medium CDH	NF	1701	04	CYP 13-25	Black*	
701: CYP ADMINISTRATIVE		and the second s	GS	1701	12	NV52038		
<u>s</u>		Youth Director w/CYP Oversight — Large SAC/Youth	NF	1701	04	CYP 13-26	Black*	
Ę		Youth Director w/CYP Oversight – Medium SAC/Youth	GS	1701	11	NV52037	Black*	
5	E		NF	1701	04	CYP 13-27		
2	CYES SAC & YOUTH	Youth Director w/CYP Oversight – Small SAC/Youth	GS	1701	09	NV52036	- Black*	
			NF	1701	04	CYP 13-28		
÷		Youth Director – Large SAC/Youth	GS	1701	11	NV52039	Black*  Black*  N/A*	
2			NF	1701	04	CYP 13-29		
_		Youth Director – Small or Medium SAC/Youth	GS	1701	09	NV52040		
			NF	1701	04	CYP 13-30		
		Child and Youth Program School Liaison Officer –	GS	1701	11	NV52014		
		Medium or Large	NF	1701	04	CYP 13-08		
		Child and Youth Program School Liaison Officer – Small	GS	1701	09	NV52015		
		-	NF	1701	04	CYP 13-07		
b		Child and Youth Program Supervisor (Annex Facility)	GS NF	1702 1702	07 03	N/A CYP 13-31	Black	
Ö			GS	1702	03	NV52031		
SUPPORT	CYP	Child and Youth Program Assistant Director	NF	1702	03	CYP 13-32	Black	
			GS	1702	07	N/A		
1702:		Child and Youth Program Teen Coordinator	NF	1702	03	CYP 15-02	Black	
2	I	CLULD	GS	1702	07	NV52032	DI I	
۲	GE	Child Development Home Monitor	NF	1702	03	CYP 13-34	Black	
1701		Child and Vouth Brogram Training Specialist	NF	1701	04	CYP 13-42	Black	
	<u>o</u>	Child and Youth Program Training Specialist	GS	1701	09	N/A		
	É	Child and Youth Program Training and Curriculum Specialist	GS	1701	09	NV52016	Black	
	TRAINING		NF	1701	04	CYP 13-10		
	F	Child and Youth Program Assistant Training Specialist	GS	1702	07	N/A	Black	
		Sinia ana Todan Pogram Assistant Training Specialist	NF	1702	03	CYP 13-36	Diuck	

	Navy Child and Youth Programs  Visual Identifier Chart by Position Description								
	ORGANIZATIONAL POSITION TITLES			PAY PLAN	SERIES	GRADE	POSITION #	VISUAL IDENTIFIER	
			Child and Youth Program Leader	GS	1702	05	NV52033	Green	
		ш		CY	1702	II	CYP 13-35		
2			Child and Youth Program Assistant	GS	1702	04	NV52008	Green	
CARE				CY	1702	II	<u>CYP 13-03</u>		
l E			Child and Youth Program Assistant – Intermediate	GS	1702	03	NV52009	Green	
DIRECT	4	Ш		CY	1702	ı	CYP 13-02		
🖺	0		Child and Youth Program Assistant – Entry	GS	1702	02	NV52010	Green	
				CY	1702	1	<u>CYP 13-01</u>	0.00	
1702:			Volunteers working directly with children, including YSF Coaches					Green	
			Contractors working directly with children, including Camp A Counselors, Instructors, etc.					Green	
			Child and Youth Program Operations Clerk	GS	0303	04	NV52029	Yellow	
				NF	0303	02	CYP 13-37	rellow	
l b			USDA Clerk	GS	0303	05	N/A	Yellow	
5				NF	0303	03	CYP 13-44	reliow	
₾	Γ.		Child and Youth Program Food Management Assistant	GS	1101	04	N/A	Yellow	
S	₹ 5			NF	1101	02	CYP 13-38	reliow	
MIXED: SUPPORT	ľ		Child and Youth Program Custodian	NA	3566	02	CYP 13-39	Yellow	
			Child and Vanda Danamar Coals	WG	7404	04	N/A	Yellow	
			Child and Youth Program Cook	NA	7404	08	CYP 13-40		
			Children d Veryth Browner Frend Comition Wordson	WG	7404	01	N/A	V-II	
			Child and Youth Program Food Service Worker	NA	7404	04	CYP 13-41	Yellow	

N/A\* - Individuals in Regional positions visiting programs are required to sign-in to the facility and follow visitor protocols.

Black\* - All CYP Directors and School Liaison Officers whose offices are located in a CYP facility with a favorably completed background check are authorized to wear professional business attire in order to fulfill their management duties. If they do choose to wear CYP issued attire, it must be black. In both cases, a name tag, identifying the person and their positon as a Director, must be

worn.

Green\* - Instructors teaching a class that requires specific attire, i.e. dance, karate, swim, with a favorably completed background check are authorized to wear appropriate attire. If they have not received a favorably completed background check, they must work in LOSS of a CYP employee who meets the requirements of this policy letter.