Tinker AFB

Parent Handbook
Welcome to the Tinker AFB Child Development Programs.

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The Military Child Development Programs have attained a reputation for an abiding commitment to quality in the delivery of child care. …

President Bill Clinton
Welcome

Welcome to Tinker Air Force Base (TAFB) Child Development Programs. We are honored that you have chosen us to care for your child, and to help nurture your child’s developmental needs. Our centers are certified by the Department of Defense (DoD) and accredited by the National Association of Education for Young Children (NAEYC). We have an open door policy and welcome you to become a active participant with your child’s care. We invite you to share ideas, ask questions and express any concerns you may have regarding our programs or your child’s development. Please take a minute to review our programs’ policies and procedures in order to make your child’s transition to our family an easy and engaging experience. Thank you for making us a part of your family.

Philosophy

The practices of Air Force Child Development Programs are based on current knowledge of child development and early childhood education. We are responsible for supporting the development of the whole child - all areas of development are considered inter-related and equally important. Our program acknowledges that children learn through active, hands-on involvement with their environment, peers and caring adults. We respect each child’s unique interests, experiences, abilities and needs, thus allowing us to be responsive to and appropriate for each child. Children are valued as individuals, as well as part of a group. Likewise, our program respects and supports ideals, cultures and values of families in their task of nurturing children.

Mission

The purpose of our program is to assist commanders and families in balancing the competing demands of the DoD mission and family life by managing and delivering a system of quality, available and affordable programs for eligible children and youth from 6 weeks to 18 years of age.

Curriculum Goals & Objectives

The programs’ goals and objectives will help your child:

- Foster positive identity and a sense of emotional well-being
- Enhance social skills
- Encourage children to think, reason, question and experiment
- Promote language and literacy development
- Build physical development and skills
- Support sound health, safety and nutritional practices
- Advance creative expression, representation and appreciation for the arts
- Appreciate and respect cultural diversity
- Develop initiative and decision-making skills

Confidentiality

Please note, child and parent information are always handled with extreme confidentiality. Confidentiality is used when information is shared with the Director or staff members. Staff will also share information with the Director for the safety and well-being of the child. All financial data is secured in the programs’ locked safe.
Eligibility

Eligible patrons include active duty military personnel, DoD civilian personnel (including AAFES), reservists/guard members on active duty or inactive duty training, DoD contractors, Wounder Warriors and dependents of Fallen Warrors. Patrons are required to fill out a DD Form 2606 and send a copy of their child’s birth certificate to the Resource and Referral (R&R) Office to be placed on the CDC’s waiting list. Prioritization of placement on the child and youth programs’ waiting lists are in accordance with DoD Instruction 6060.2. For further information about eligibility and waiting list placement, please contact the R&R Office at 405-734-7980 or DSN 884-7980.

Registration

The Child Development Programs are committed to providing families with quality care at affordable prices to help ease one of the burdens of military life. During the registration process, families are informed of policies and basic routines at the centers. Information required for the registration process is as follows:

- To enroll, a verification of Total Family Income (TFI), birth certificate, completion of AF Form 1181 (including proof of immunizations), family data and emergency information must be provided. For single and dual military parents, an AF Form 357, Navy-OPNAV-1740 or Army-DA FORM-5305-R (Dependent Care Plan) must be completed before a child can enroll in the program.

- Sponsors who change their marital/living status have five working days to report the change and provide formal documentation. For households with unmarried couples or pairs living as a family, the total household income will be used to determine the TFI.

- Written proof of a health evaluation within three months of enrollment and a copy of current health insurance coverage is required.

- The Military Child Care Act of 1989 (Public Law 1809, Section 1504) requires the DoD to establish uniform fees for child care based on TFI. Sponsors enrolling their child in full day child care are required to bring a copy of their Leave and Earnings Statement (LES) and a copy of their spouse’s pay stub to verify TFI as defined in DoD Instruction 6060.2.

- Those who do not present a copy of their LES and/or spouse’s pay stub to verify TFI will be placed in the highest fee category until financial data can be provided.

Special Needs

The focus of the programs is to support the individual needs of all children. Children with conditions that require special services are considered special needs children. Determination of a special need is ascertained by the base medical authorities or the child’s primary care giver. This category includes children with dietary restrictions, allergies/asthma, speech/developmental delays and/or orthopedically impaired. Prior to the child’s enrollment, families of a special needs child need to discuss the situation with the center trainer and obtain written concurrence (Medical Profile for Specialized Service Form) from the base medical advisor.
Special Needs continued

If a child is on an Individualized Family Services Plan (IFSP), Individual Education Plan (IEP) or another plan, a copy must be provided prior to the child’s enrollment. The staff will work together with families and involved agencies to assist in the implementation of these individualized plans.

Security and Safety Procedures

Keeping children, staff and parents safe and secure is the highest priority. Tinker CDC’s are located on a military installation with limited access. The following procedures are provided to help maintain the security and safety of the children, staff and parents.

- Front desk staff supervise the entrance to the facility.
- Families are provided a security code/PIN number to enter their child(ren) into a data system on a daily basis to ensure attendance, account balances and parent information is properly maintained. Families should not give their PIN to anyone.
- Parents or authorized individuals must sign children in and out on Air Force (AF) Form 1930 located in the classroom. This form serves as the classroom’s daily roster/attendance sheet. An emergency contact number must be provided daily on the AF Form 1930 to render quick communication access to the family. It is imperative to sign your child in and out on the 1930 on a daily basis to account for all children during emergency and evacuation procedures.
- Only authorized individuals listed on the AF Form 1181 will be allowed to pick up children. This person must be at least 14 years of age and produce proper photo identification at the front desk.
- All visitors are required to sign in to the facility, receive a visitor badge and are to be escorted when in the building.
- Food or items brought from home could potentially create a safety/health hazard (coins, small toys and food could harm children with allergies etc.) and should not be brought into the center.
- In accordance with Tinker AFB policies, please do not leave vehicles running unattended or children under the age of nine left unattended in a parked vehicle.
- All aspects of safety are adhered to while transporting children as pedestrians or as vehicle passengers. Specific procedures for children with special needs are also followed.

Leave Procedures

All categories are set up without leave calculated. Accounts will not be prorated for leave time taken. Parents need to inform administrative staff when their child will not be attending by filling out a leave notice form at the front desk.
Fees and Charges

Child Development Programs offer affordable, quality and accessible child care to families in a competitive market. Procedures to ensure contractual standards are met are as follows:

- All fees are due in advance. Weekly fees are due no later than 1800 the second business day of the week for each week of care. Payments may be made in person via cash, check or credit/debit card. A receipt of payment will be issued by the following working day.

- Families who utilize the Child Development Programs must provide a credit card number on the application and agree to have their card charged if payment is not received by 1800 by second business day of the week.

- Families who receive Department of Human Services (DHS) subsidy are advised that DHS does not pay for days missed and families must meet the monthly requirements set forth by DHS. The sponsor will be responsible to reimburse the programs for charges not received by DHS. Therefore, families are required to provide an LES/paystub during registration to verify TFI for annual AF audit review.

- Late fees, service fees, hours for covered care, recalls and exercises are covered in the Parent Agreement during registration.

Inclement Weather Policy

Oklahoma weather has its ups and downs, changing at a moments notice. When weather conditions affect TAFB it may also affect the normal operations of the CDCs. Tornado drills are conducted seasonally and fire drills are conducted on a monthly basis. This helps maintain a safe environment for children and ensures they are prepared to handle emergency situations quickly and calmly.

The Child Development Programs staff are considered non-mission essential personnel. If the Hazardous Weather Committee issues a late reporting due to severe weather conditions, child and youth programs will open 30 minutes prior to the report time. A late reporting also allows staff a designated amount of time to report to work safely which may cause delays in accepting children due to low staffing. If the committee deems an early closure parents will have 1 hour to pick up their children.

The Hazardous Weather Committee may also deem it critical to close the base. If the base is closed, all child and youth programs will also be closed.

Delays/closures due to weather may be announced on local radio, television stations or the Tinker homepage.

Hazard and Environmental Risks

The safety and well-being of children and adults is paramount to the Child Development Programs. Upon a hazard being identified, the proper agency is contacted. Here are the basic guidelines that are followed:
Hazard and Environmental Risks continued

- If playground equipment poses a hazard, the area is closed until repairs are made.

- As a precaution, outdoor and physical activity is limited when smog or other air pollution alerts have been issued. Weather information can be obtained by calling 734-1900.

- If the facility is in danger due to a chemical spill, fire hazard or prolonged hot or cold conditions, the following actions will be taken:
  - Children could be re-located to a different room depending on the type of danger.
  - If management deems that the children need to be evacuated from the facility and re-located, base transportation will be provided. Parents will be contacted with the location of their child as soon as possible.

Guidance Policy

Our Child Development Programs provide a caring and supportive environment that helps children develop self-control, self esteem and respect for the rights of others. A child’s attempt to learn, participate and respond to people and activities in the programs are respected as an important part of his/her overall development. Adults are role models for children. Staff practice appropriate guidance techniques that are fair, consistent and respectful of children and their social and emotional needs.

Positive guidance efforts are expected to result in a child’s positive response to the staff’s instructions and directions. In case of continuous negative behavior when a child does not respond to redirection or other disciplinary measures, parents may be requested to remove the child from the AFS Flight activity program on a short-term basis. In extreme cases of negative behavior when a child may potentially harm himself/herself or others, parents may be required to seek alternative care.

Transitions for Children

Transitioning from one age group to another can be challenging for children and parents. The procedures listed below help ensure a child’s transition is gradual and comfortable.

- Parents will be given a Transition Notice Letter from management informing them their child is scheduled to move to the next age group. Before the transition is made, the Director meets with teaching staff and trainers to discuss the next level for the child.

- The child visits the new room on a daily basis for one week, starting with short periods of time with a gradual increase each day. If additional time is needed for the child to adjust, the teaching staff and parents will work together until a permanent transition is completed.
Parent Involvement

Child Development Programs realize the important roles parents play in the education and development of their children. Our programs have an open door policy and families are welcome to share their questions, comments or concerns. Parents are encouraged to visit their child’s room at their convenience and communicate their ideas and suggestions to the teaching staff.

The Parent Participation Group gives parents an opportunity to become actively involved, allowing staff and parents to talk about the program and the care of their children. Meetings are held monthly to plan community and enrichment activities, arrange special events and work with staff on community improvement activities.

The Parent Advisory Board (PAB) consists of members from the Parent Participation Groups along with flight management. The PAB meets quarterly to go over planned events and to address parents suggestions, ideas and concerns.

Parent teacher conferences, both formal and informal, provide an opportunity for information exchange and shared problem solving. Formal conferences with written reports are held semi-annually at a minimum; additional conferences can be arranged by request. Informal conferences and verbal exchanges take place on a daily or weekly basis. The programs also use a variety of assessment tools. Parents input on the ASQ questionnaires are a vital piece to curriculum planning. ASQ’s are given to parents during registration and then continue on a regular basis afterwards. All records are kept confidential.

Open house events, parent workshops and parent involvement activities provide additional opportunities for families to visit the center, to meet other families and to become involved with the program.

Field Trips

Every time a child attends a scheduled field trip, management notifies parents in advance and a signed permission slip is required. Field trips are developmentally appropriate and provide hands-on meaningful experiences. Field trips are provided at no additional cost to parents.

Government vehicles are the only authorized transportation for military Child Care Programs. Once a field trip has been established, procedures are in place to ensure children and staff are safely transported.

In order to identify the group as a whole, all children will receive an identification item with an emergency contact number printed on it. Staff are equipped with all pertinent emergency contact information along with first-aid supplies. Staff members continually confirm all children have been accounted for during field trips.

Parents are highly encouraged to volunteer and/or assist staff during field trips.

Procedures for Missing or Lost Children

The AF Form 1930 will accompany the teaching staff during playground activities, field trips or any type of program that take the children out of the room. Our staff perform consistent checks to ensure all children are accounted for throughout the day.
Procedures for Missing or Lost Children continued

If a child is lost or missing, the following procedures occur:

- Teaching staff informs other staff members that the child cannot be accounted for and an immediate search begins.
- If the child cannot be located immediately, a staff member contacts the immediate supervisor who becomes actively involved in the search.
- If necessary, parents, Base Security Forces or local forces will be contacted to issue an Amber Alert.

Nutrition

Nutritious meals and snacks are served daily in accordance with the United States Department of Agriculture (USDA) and Child/Adult Care Food Program (CACFP) regulations.

Birthdays will be celebrated the last business day of the month. In order to meet the USDA nutritional guidelines, personal birthday parties are not authorized in the programs.

All food and beverages are provided by the center. Special diets are only permitted for cases of verified medical conditions. A Medical Profile for Specialized Service form must be completed by the child’s primary care physician.

Due to the allergy concerns of other children and nutritional guidelines, families are asked that their children not eat/bring outside food items into the facilities.

Field trips can be exciting for everyone!

“WHILE WE TRY TO TEACH OUR CHILDREN ALL ABOUT LIFE, OUR CHILDREN TEACH US WHAT LIFE IS ALL ABOUT.”

ANGELA SCHWINDT

Field trips also offer a great time for discovery and learning.
Health & Prevention Practices

Ensuring children are healthy while in attendance is key to reducing the spread of illnesses and communicable diseases. AF programs follow guidance on the inclusion and exclusion of children in the programs from Caring for Our Children and our flight Operating Instruction.

Healthy Environment for Young Children

The facilities are free from harmful animals, insect pests and poisonous plants. Pesticides and herbicides are applied according to the manufacturers instructions when children are not in the facility and in a manner that prevents shin contact, inhalation and other exposure to children. The program uses techniques known as Integrated Pest Management (IPM) so the least hazardous means are used to control pests and unwanted vegetation. All indoor plants are correctly labeled.

To reduce the spread of bacteria and viruses in our programs and among the children/staff, all children and adults are required to wash their hands when they arrive at the center each day. Parents are to assist their children with washing their hands as soon as they enter the classroom each morning.

Over-the-Counter Medications

The medication policy is in accordance with AFI 34-248, Child Development Programs. Over-the-counter medications, including aspirin, aspirin-like-products, antihistamines, decongestants and cough syrup can not be administered without a prescription from a medical provider. "As needed" medications are given or applied only with the daily approval of the parent. Parents must complete AF Form 1055 for all medication provided for administration. Parents must initial and date the AF Form 1055 each day medications are given. "As needed" medications are accepted for use only when there is a start and an end date with instructions on when and how to use.

In the event a child has a potentially life threatening condition that requires prompt administration of a medication, exceptions to the "as needed" medication rule will be made when clear instructions from the child's medical provider have been provided. An example of the exception would be the use of an epinephrine self-injection pen for a child with a history of anaphylactic reaction.

Diaper ointments are not applied unless they are being used for treatment purposes. Ointments/salves will not be used as a preventative measure.

Exceptions to the rule includes sunscreen, insect repellent, lip balm and hand lotion which can be administered by a staff member. Child care facilities will provide sunscreen SPF 20 or above and insect repellent that has been approved by the base medical advisor for all children. Parents will sign a one-time permission agreement for as needed application of sunscreen, lip balm and hand lotion. If you suspect your child is allergic to a specific brand or chemical in a sunscreen, notify the Director. Lip balm and hand lotion will not be provided. Parents must provide these products. The products will be stored in a sealed plastic bag with the child's name on it in the medication area in their room.
Prescription Medications

Only staff trained in medication administration will administer medications prescribed by a medical provider. All prescriptions must be labeled with the child’s name, name of medication, date of prescription, dosage strength, starting dates and ending dates. Prescriptions are valid for 30 days unless otherwise noted on the prescription.

Only medications requiring more than two doses per day will be administered by our programs. Staff will administer medications at 1130 and 1430. Medications prescribed for three or four doses per day, the parent will administer the first, third, and fourth doses, our staff will only administer the second dose.

Due to possible adverse drug reactions, parents must wait at least 20 minutes after administering the first dose of any new medication before signing the child into the center.

Parents must complete AF Form 1055, Youth Flight Medication Permission document, and initial and date this form each day the medication is given.

Use of emergency medications at the center must be requested in writing by the parents along with instructions from the child’s medical provider and updated annually. All over-the-counter and prescription medications are kept in a secure location away from the children.

Child Exclusion Criteria

Every effort will be made to assure the best judgment for your child’s health is made. The facility will not deny admission or send home a child because of an illness, unless one or more of the following conditions exists:

• The illness prevents the child from participating in regular activities or going outside.

• The illness results in a greater need of care than the teaching staff can provide without compromising the health and safety of the other children.

• A temperature of 101°F or higher. Once a fever is identified, staff will retake temperature within 15 minutes and if higher or the same the parent will be contacted to pick up the child within 30 minutes.

• Vomiting due to illness two or more times within one to two hours, which ever is greater. Only a medical provider can determine if the vomiting is not contagious, and if the child is not in danger of dehydration.

“CLEANING YOUR HOUSE WHILE YOUR KIDS ARE GROWING UP IS LIKE SHOVELING THE WALK BEFORE IT STOPS SNOWING”

PHYLLIS DILLER

Eating right is a great way to start the day.
Child Exclusion Criteria continued

- Diarrhea, defined by more watery stools, decreased form of stool that is not associated with changes of diet and increased frequency of passing stool that is not contained by the child’s diaper or ability to use the toilet, two or more times within one to two hours, which ever is greater.

- Signs of a potential infectious illness, to include, but not limited to mouth sores with drooling, rash with fever, head lice, scabies and impetigo.

- Symptoms and signs of a possible severe illness, such as lethargy, uncontrolled coughing, difficult breathing, wheezing, persistent crying, etc.

If a specific illness is occurring in the facility, the medical group pediatrician will apply more explicit criteria for the CDC to follow. Once contacted, the parent or emergency contact must pick up the child within 30 minutes. The stated conditions must be symptom free for 24 hours before the parent can bring their child back to the facility. If a medical provider provides a note stating the child is non-contagious, only the Director or Flight Chief can make the decision to readmit the child before the 24 hours has elapsed. If antibiotics are prescribed for a contagious illness, allow the prescription 8 to 24 hours to take effect before returning the child back to the center. If children have been exposed to a disease, the center will post a “possible exposure” sign on the classroom door with handouts describing what signs and symptoms to watch for.

Medical Emergencies

TAFB Medical Clinic does not handle emergencies. The Medical Group has contracted with Midwest Regional Hospital to handle emergency situations.

In the event that emergency medical attention is needed for children and/or adults, 9-1-1 will be called. Management will then contact a parent and/or family member immediately.

If determined by emergency responders, children and/or adults will be transported to the primary site of Midwest Regional Hospital located off East Reno. The hospital’s address is 2825 Parklawn Drive Midwest City, OK 73110. The hospital can be reached at 405-610-4411.

A staff member will accompany children and/or adults in their privately owned vehicle if not transported by an ambulance.

Sleeping Arrangements

The program provides opportunities for sleep/rest for all children. The facility shall make available a regular rest period for children, if the child desires. For children who are unable to sleep, the program will provide time and space for quiet play.
Sudden Infant Death Syndrome (SIDS)

For infants:
Providing infants with a safe place to grow and learn is very important. For this reason, the Air Force created a policy on safe sleep practices for infants up to 1-year-old. We follow the recommendations of the American Academy of Pediatrics (AAP) and the Consumer Product Safety Commission to provide a safe sleep environment and reduce the risk of Sudden Infant Death Syndrome (SIDS). SIDS is "the sudden death of an infant under 1 year of age, which remains unexplained after a thorough investigation." The staff, substitute staff, volunteers and family child care providers in all Air Force CDCs and family child care homes follow the AAP safe sleep policy.

Sleep Position:
- Infants will be placed flat on their backs to sleep every time unless there is a physician signed sleep position medical waiver up-to-date on file. In the case of a waiver, a waiver notice will be posted at the infant's crib without identifying medical information. The full waiver will be kept in the infant's file.
- Infants will not be placed on their side for sleep.
- Devices such as wedges or infant positioners will not be used, unless specified by a physician, since such devices are not proven to reduce the risk of SIDS.
- Infants who use pacifiers will be offered their pacifier when they are placed to sleep and it will not be put back in should the pacifier fall out once they fall asleep.
- Pacifiers will be cleaned between each use, checked for tears and will not be coated in any sweet or other solution. Parents are asked to provide replacement pacifiers on a regular basis.
- While infants will always be placed on their backs to sleep, when an infant can turn over from back to front and front to back, they can remain in whatever position they prefer to sleep.

Sleep Environment:
- Air Force programs will use Consumer Product Safety Commission guidelines for safety-approved cribs. Young infants (under 6 months) will not be placed on mats for sleeping. At no time will infants (2 weeks-11 months) will be placed on cots.
  - Crib slats will be less than 23/8" apart
  - Infants will not be left in bed with drop side down
- Infants will not be placed to sleep on any standard bed, waterbeds, couches, air mattresses or on other soft surfaces.
- Only one infant will be placed to sleep in each crib. Siblings, including twins and triplets, will be placed in separate cribs.
- The crib will have a firm, tight-fitting mattress covered by a fitted sheet and will be free from loose bedding, toys and other soft objects (i.e., pillows, quilts, comforters, stuffed toys, etc.)

A child's laughter is priceless

“LIVE SO THAT WHEN YOUR CHILDREN THINK OF INTEGRITY, THEY THINK OF YOU.”

H. Jackson Brown Jr.
Sudden Infant Death Syndrome (SIDS) continued

- To avoid overheating, the temperature of the rooms where infants sleep will be checked and will be kept at a level that is comfortable for a lightly clothed adult.

- If a blanket is used, the child's feet will be placed to the foot of the crib and a thin, single layer blanket will be tightly tucked in along the sides and foot of the mattress. The blanket will not come up higher than the infant's chest. Sleep clothing, such as sleepers, sleep sacks and wearable blankets (without hoods) may be used as alternatives to blankets.

- Bibs and pacifiers will not be tied around an infant's neck or clipped to an infant's clothing during sleep.

- Smoking will not be allowed in or near Air Force CDCs or family child care homes when children are in the home.

Supervision:

- When infants are in their cribs, they will be within sight and hearing of staff, substitute staff or family child care providers at all times.

- A staff member, substitute staff or family child care provider will visibly check on the sleeping infants frequently by standing and looking into the child's crib at least 3 times each hour.

- Checking on a sleeping child should not disrupt that child's sleep or interrupt the staff member, substitute staff or family child care provider interactions with children who are awake.

- When an infant is awake they will have supervised "tummy time." This will help babies strengthen their muscles and develop normally.

- Infants will spend limited time in swings and bouncer/infant seats when they are awake.

Training:

- All staff, substitute staff, family child care providers and volunteers in AF child care programs will be trained on safe sleep policies and practices.

- The designated source of training is "The Reducing the Risk of SIDS in Child Care Speaker's Kit" located at http://www.healthychildcare.org/sectionSIDS.cfm.

- Safe sleep practices will be reviewed with all staff, substitute staff, family child care providers and volunteers annually. In addition, training specific to these policies will be given before any individual is allowed to care for infants.

- Documentation that staff, substitute staff, family child care providers and volunteers have read and understand these policies will be kept in each individual's file.
Sudden Infant Death Syndrome (SIDS) continued

When The Policy Applies:
- This policy applies to all staff, substitute staff, family child care providers, volunteers and parents when they place an infant to sleep in an AF CDC or AF Family Child Care Home.

Communication Plan for Staff and Parents:
- Parents will review this policy when they enroll their child and a copy will be provided in the parent handbook. Parents are asked to follow this same policy when the infant is at home.
- These policies will be posted in prominent places. Information regarding safe sleep practices, safe sleep environments, reducing the risk of SIDS in child care as well as other program health and safety practices will be shared if any changes are made. A copy will also be provided in the staff handbook.

Any individual who has questions may ask:
Program Contact: CDC Director or Family Child Care Coordinator

This information should not be used as a substitute for the medical care and advice of your physician. There may be variations in treatment that your physician may recommend based on individual facts and circumstances.

Outdoor Play
Outdoor play not only provides an opportunity for children to learn in a different environment, but it also provides children with many health benefits. All children in the program, including infants, shall play outdoors daily when weather and air quality conditions do not pose a significant health risk.

- Weather that poses a significant health risk shall include wind chill at or below 15°F and heat index at or above 90°F as identified by the National Weather Service.
- Air quality conditions that pose a significant health risk shall be identified by announcements from the Tinker Command Post. Children with respiratory health problems such as asthma shall not play outdoors when local health authorities announce that the air quality is approaching unhealthy levels.
- Children shall be protected for the sun by using shade, sun-protective clothing and sunscreen with UVB-ray and UVA-ray protection of SPF-15 or higher with an approved AF Form 1055. Before and during outdoor activity in warm weather, children shall be well hydrated and encouraged to drink water.
- If you have any questions regarding the above procedures, you may ask to speak to the front desk staff or the section chief.

“KIDS GO WHERE THERE IS EXCITEMENT. THEY STAY WHERE THERE IS LOVE.”
Zig Ziglar

New environments enhance all of the senses furthering a young child's development.
General Information

Tinker AFB Child Development Programs strive to provide a positive experience for families and their children. Staying actively involved and continually communicating with your center builds stronger relationships for an enhanced high-quality care program.

Here are a few reminders:

- The center is not responsible for children's personal items. Please ensure that all items brought into the center are labeled with the child’s name. Toys and money can be brought on special days specified by the child’s provider.

- Outside food items must be consumed before entering the building.

- Ensure immunizations, personal data, credit card information and Family Care Plans are updated as they occur at the front desk.

- Extra change of clothes (shoes, socks, underwear, pants and shirt), wipes and diapers must be consistently maintained in the child's classroom.

- Leaving vehicles running unattended is prohibited.

- Positive, healthy relationships between parents and teaching staff is critical in the development of children.

- Communicating with staff will always be in an appropriate manner.

- Outbursts, cursing and derogatory remarks will not be tolerated by either parent or staff member—contact Director or Flight Chief with concerns.

Hours of Operation

Tinker AFB has two Child Development Centers—East and West. Hours of operation are from 0600 - 1800 Monday through Friday. The CDCs are closed on weekends and federal holidays. For more information about the centers, visit www.tinkerliving.com, or contact them directly using the information below:

Child Development Center East
3590 East Dr.
Bldg. 3904
Tinker AFB, OK 73145
DSN: 884-4212
Commercial: 405-734-4212/4213

Child Development Center West
6090 Twining
Bldg. 5510
Tinker AFB, OK 73145
DSN: 884-3116
Commercial: 405-734-3116/3646

4 October 2011