

## **APPENDIX 509**

### **JOB CORPS CHILD DEVELOPMENT PROGRAMS**

#### **SELECTION AND FUNDING OF JOB CORPS CHILD DEVELOPMENT PROGRAMS**

##### **Selection**

1. Job Corps centers must submit proposals for on-site child development programs and/or residential parent/child programs to the National Office for approval, through the Regional Office.
2. Proposals must include:
  - a. Statement of need, including documentation demonstrating that existing local resources are not adequate to meet the needs of the center's student population.
  - b. All information specified in Exhibit 5-7, Proposal Outline for On-Site Child Development Centers and Residential Parent/Child Programs.
3. The National Director, Job Corps, shall request a design and/or facility review as appropriate, and shall approve the establishment of all on-center child development and/or residential parent/child programs.

##### **Funding Sources**

1. Job Corps appropriated funds shall be used only for costs specified in Exhibit 5-8, Use of Job Corps Funds for Child Development Centers and Parent/Child Programs.
2. Non-Job Corps funds shall be used to support the ongoing operating costs of child development programs and the additional operating costs associated with housing children in residential parent/child programs. Non-Job Corps funding resources are specified in Exhibit 5-8.
3. In exceptional circumstances, where a shortfall in non-Job Corps revenue obtained from outside sources for support of ongoing costs of child development centers (CDCs) and/or residential parent/child programs (RPCs) occurs, the Job Corps center may submit a request through the Regional Office to the National Office for funding. The request must clearly explain why any shortfall exists and what steps the center has taken to address the problem.
4. Centers must identify resources and develop linkages for financial and nonfinancial support for on-center programs.

## **ADMINISTRATION OF ON-CENTER CHILD DEVELOPMENT PROGRAMS**

### **Method of Operation**

Center operators must operate approved on-site child development programs:

1. Directly with center-employed staff.
2. Through subcontracts with licensed child care providers.
3. Through agreements with other programs such as Head Start.

### **Licensing**

Center operators must design and operate a development program for children that meets state licensing guidelines. Every effort shall be made by the center to obtain licensing by the state.

### **Design of Program**

Center operators must operate the program in accordance with written standard operating procedures (SOPs) that include the following:

1. Designation of ages of children to be served. In no case, however, may children younger than 6 weeks nor children of mandatory public school age be enrolled in on-center CDC programs.
2. Registration and enrollment procedures for children, including provision of any required documents by parents such as children's birth certificates and immunization records, or documentation to meet other minimum health standards established by the state licensing agency and/or by the CDC operator.
3. Designated hours of operation.
4. Daily schedule of activities.
5. Procedures for release of children. Unless a prior written agreement is on file with the CDC, only custodial parents or designated individual(s) may remove a child or children from the CDC. A signed consent form, giving the name of the parent's designee(s), must be kept on file to verify identification of the designees.
6. Emergency procedures. Authorization for emergency treatment from the parent must be on file for each child in the event the condition of a child is such that waiting for parental authority may jeopardize the life or risk permanent disability of the child.
7. Record-keeping procedures, including a process for maintaining records on each child on a current basis, to include the emergency treatment authorization, notation of any

- allergies or health problems, immunization records, developmental progress, and emergency contact information.
8. System to provide copies of emergency and alternate contact information obtained from parents, and designation of individuals who can remove children from the premises, to staff in CDC and, as appropriate, in residential parent/child dormitories.
  9. Procedures to ensure proper storage and administration of medication to children must be handled in accordance with state guidelines for child care centers.
  10. A written child guidance/behavior modification policy, which prohibits corporal punishment or any humiliating or frightening punishment such as spanking, hitting, slapping, pinching, shaking, or any other form of physical or verbal abuse.
  11. Procedures for transportation of children in accordance with state laws. Children in RPCs shall be entitled to government-paid transportation to and from home to the same extent it is allowed for their parent(s).
  12. Procedures to ensure the CDC is maintained at full capacity. If all slots are not filled by children of students, dependent children of center staff may use the center for payment of a fee established by the center operator and approved by the Regional Office. Where on-center programs are operated by Head Start, eligible children from the neighboring community may fill remaining slots.
  13. Procedures to ensure routine maintenance and cleanliness of CDC facilities.
  14. Procedures to ensure proper handling and storage of food in accordance with state and local health department requirements.

### **Safety and Health Requirements**

Child development centers must ensure that:

1. CDC buildings and furnishings conform to National Fire Protection Association (NFPA) 101 and state licensing requirements. In cases where these differ, the more stringent shall apply.
2. Prior to occupancy, the facility must be inspected by the state licensing agency, local fire department or other authorized agency, the Job Corps center's safety supervisor, and the DOL safety and health officer.
3. Portable fire extinguishers, which meet state guidelines, are available in the CDC.
4. An annual fire prevention inspection by the fire department or cognizant agency and the CDC director or designated representative must be conducted, and any discrepancies must be promptly corrected.

5. All CDC staff must be trained in proper evacuation procedures. Evacuation procedures must be conspicuously posted. Emergency evacuation drills shall be conducted in accordance with state and local regulations.
6. Crib rooms in CDCs must have at least one exterior exit with an inclined ramp for emergency evacuation of wheeled cribs.
7. A daily attendance record must be maintained by the CDC staff and kept readily available for conducting "head counts" of evacuees outside the building in the event of a fire or other emergency.
8. Smoking is not permitted in CDC or in children's outdoor play areas.
9. The CDC is maintained in sanitary condition in order to reduce the spread of disease.
10. Door and cabinet hardware in child activity spaces and children's bathrooms must be operable from either side.
11. Exit-door hardware in toddler activity spaces must be located above the reach of children.
12. Only non-toxic, lead-free paint may be used in CDCs.
13. Storage space containing cleaning and other chemicals must be securely locked. Such materials must not be located in or directly off rooms occupied by the children. Flammable, poisonous, and highly caustic materials, such as drain cleaner, must not be stored on the premises.
14. Pest control operations must be approved and inspected by the Job Corps center safety officer.
15. A daily inspection of the CDC and outdoor play areas must be conducted by center management personnel to identify and eliminate safety hazards.
16. First aid kits must be conveniently located, but out of reach of children, in all CDCs and include materials for emergency cleansing and protection of wounds, bandages, dressings, rubber gloves, thermometer, and tweezers.
17. Emergency instructions and telephone numbers of medical, ambulance, fire, and police services must be conspicuously placed near all facility telephones.

### **Insurance**

Center operators must obtain liability insurance covering personal liability and accident coverage for the facility, staff and volunteers, and children and parents while on the premises, unless state requirements are different.

**Quality Assurance**

Center operators must conduct an annual review of each child development center and residential parent/child program.

## **CHILD DEVELOPMENT CENTER PROGRAM STAFFING**

### **Staff Coverage**

Child development center operators must:

1. Staff the CDC at a level that maintains staff-to-child ratios and group sizes as appropriate for the ages of the children enrolled, and in accordance with minimum requirements of the cognizant state licensing agency.
2. Ensure that the ratio of staff to children is sufficient at all times to maintain constant supervision and to ensure quick evacuation in the event of fire or other emergency.
3. Count only staff involved in providing direct care for children in ratios.
4. Ensure that at least two adults are in the CDC at all times.
5. Ensure the presence of one staff member who is in physical or visual supervision of occupied crib rooms at all times.
6. Assign at least one full-time caregiver to each age/developmental group.

### **Staff Qualifications**

Child development center operators must:

1. Hire only qualified staff in accordance with Exhibit 5-9 (Child Development Center Minimum Staff Qualifications) as shown at the end of this section.
2. Ensure that all CDC staff are at least 18 years of age.
3. Conduct an extensive background check prior to employment to ensure staff do not have a history of, conviction of, admission to, or evidence of acts of child abuse, molestation, or neglect. In states that have set up systems for background checks on persons applying for positions working with children, the background check must include fingerprinting. All references must be checked prior to employment.
4. Ensure staff are in good physical and mental health and have received all required physical examinations and immunizations in accordance with state licensing standards.

### **Use of Volunteers**

Child development center operators must ensure that health requirements and background checks for, and policies regarding use of, volunteers meet state guidelines.

## **Staff Training**

Child development center operators must ensure that staff receive training as follows:

1. All new staff must participate in a new-staff orientation prior to actually caring for children, which must include:
  - a. CDC regulations and standard operating procedures.
  - b. Health practices, including personal hygiene and sanitation principles and infectious disease control.
  - c. Child nutrition/feeding
  - d. Safety
  - e. Fire protection
  - f. Emergency procedures
  - g. Identification of and responsibility for reporting of child abuse
  
2. Each caregiver must participate in specialized training related to child development and receive periodic updates, covering at a minimum, the requirements of the state licensing agency and the following topics:
  - a. First aid
  - b. Infant and child CPR
  - c. Child growth and development
  - d. Age-appropriate programming and activities
  - e. Design and use of space for children
  - f. Working with parents
  - g. Child guidance and behavior modification techniques
  - h. Child abuse and/or neglect detection, prevention, and reporting

## **PROGRAM AND DEVELOPMENTAL CARE**

### **Activities**

Child development center operators must provide:

1. A balance of active and quiet activities.
2. Developmentally appropriate activities for each age group that promote the intellectual, social, emotional, cultural, and physical development of the children.
3. Copies or posting of activity schedules in an area where parents can review them.
4. Opportunities for outdoor play.
5. A routine for napping, and appropriate bedding and cots.

### **Facilities and Environment**

Child development center operators must provide:

1. Facilities and equipment as specified in Exhibit 5-10 (Facility Requirements for Child Development Centers and Residential Parent/Child Programs).
2. An environment that is conducive to learning, with child-sized furnishings, materials, and supplies.
3. Equipment and toys to meet age and developmental levels of children.
4. Individual storage areas for personal belongings of children.

### **Meals**

Child development center operators must provide:

1. Nutritional meals and snacks, which at a minimum meet state requirements.
2. Meal scheduling so that there must be no more than 3 hours nor less than 2 hours between regular meals and snacks.
3. Copies or posting of menus in an area where parents can review them.
4. Information on children's food allergies, maintained on a current basis; formula and juices prepared by the parent at home labeled with the child's name and refrigerated until use; food brought by parents labeled as to content, date of opening, and the name of the child for whom it is intended.



**Child Guidance/Behavior Modification**

Child development center operators shall provide a behavior modification system that:

1. Focuses on learning appropriate behaviors.
2. Prohibits corporal punishment or any humiliating or frightening punishment such as spanking, hitting, slapping, pinching, shaking, or any other form of physical or verbal abuse.

## **PARENT INVOLVEMENT**

Child development center operators must develop a system to ensure sharing of information with parents on an ongoing basis that includes the following:

### **Parent Handbook**

A brochure or parent handbook with hours of operation, philosophy of the program, description of the developmental program, emergency procedures, and daily schedule of activities.

### **Interaction With Caregivers**

Opportunities for each parent to talk to the child's caregiver, to be informed of child's activities, to observe the program, and to review the schedule of planned activities.

### **Parent Meetings**

A parent meeting or conference at least quarterly for CDC staff to update parents on child's progress.

### **Parent Notifications**

Procedures for immediate notification of a child's parent(s) in the event of illness, accident, or injury of their child and to ensure that at no time will a child who is ill or injured be left unattended. Job Corps center health staff must not be contacted regarding illness or injury of children except in emergency situations.

### **Children's Meals**

Copies of menus or posting of menus in an area where parents can review them. Parents must be requested to provide the CDC any information on food that the child has allergic reactions to; this information must be maintained on a current basis in child's file.

## **ADMINISTRATION OF RESIDENTIAL PARENT/CHILD PROGRAMS**

### **Standard Operating Procedures**

Job Corps centers must operate residential parent/child programs in accordance with written standard operating procedures (SOPs) that describe the following:

1. Emergency procedures, including treatment authorization and contact information that is accessible to RPC staff.
2. Provision of meals for children and for storage of food and feeding children in residences.
3. Supervision to ensure children are not left alone in residences, including policies regarding babysitting or other care for children during evening hours.
4. Procedures to accommodate children who are ill. This may require that parents be allowed to remain in the dormitory during class hours to care for children too ill to be left in the child development center.

### **Medical Care for Children**

Job Corps centers must:

1. Arrange for children's medical care to be provided off center. Medical care for children must be covered by the parent's health insurance plan, Medicaid, or other well-baby care or entitlement program. Centers must make local arrangements for emergency care for children.
2. Use Job Corps center health services only in case of emergency illness or injury. Make alternative arrangements for care as quickly as possible.

### **Safety and Health Requirements**

Job Corps centers with residential parent/child programs must ensure that:

1. All doors in residences are operable from both sides so that children will not get locked in.
2. All cleaning supplies are kept in locked areas that are inaccessible to children.
3. Laundry supplies are kept in a locked cabinet or stored out of the reach of children.
4. Only non-toxic, lead-free paint may be used in the dormitory housing parents and children.

5. Portable fire extinguishers that meet state guidelines must be available for use in parent/child living areas.
6. Food items and cleaning supplies must never be stored in the same areas.
7. Fire-retardant bedspreads and draperies must be used in parent/child living areas.
8. Pest-control operations must be approved and inspected by the center safety officer.

## **RESIDENTIAL PARENT/CHILD PROGRAM STAFFING**

### **Staff Coverage**

1. Develop a staffing plan for the residential parent/child program that takes into account the configuration of the housing facilities and the unique needs and problems of parents/children in a residential setting.
2. Ensure that staff coverage is sufficient to maintain the safety and security of the students and their children.

### **Staff Qualifications**

1. Hire only counselors and residential advisors/residential counselors who meet at least the minimum qualification requirements established in Chapter 5, Exhibit 5-3 (Minimum Staff Qualifications).
2. Ensure that staff assigned to the residential parent/child dormitory do not accept responsibility for care or supervision of students' children.
3. Conduct a background check prior to employment to ensure staff assigned to the RPC do not have a history of, conviction of, admission to, or evidence of acts of child abuse, molestation, or neglect. In states that have set up systems for background checks on persons applying for positions working with children, the background check must include fingerprinting. All references must be checked prior to employment.

### **Staff Training**

1. Provide staff training in accordance with Chapter 5, Exhibit 5-4 (Required Staff Training).
2. Ensure all staff assigned to the RPC program have successfully completed a beginning first aid course and CPR, including infant/child CPR.
3. Ensure all RPC dormitory staff receive training on identification of child abuse and responsibility and procedures for reporting instances of child abuse.