

**PROMISE OF CONFIDENTIALITY**

I, \_\_\_\_\_ solemnly and sincerely promise that I will fulfill my assigned responsibilities.

Further, as an **employee/ caregiver/ parent/ board member** of the Family Home Child Care Society of Pictou County, I will not disclose any information made known to me by virtue of my position with the Society. I am aware that should I breach this confidentiality, I may be removed from my position with the Family Home Child Care Society of Pictou County.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
(Employee/ Caregiver/ Parent/ Board Member/ Committee Member)

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

- Caregiver Completes
- Staff Completes on Employment
- Parent Completes on in-take
- Board members complete on recruitment

**Liability Release Form/Parent**

On admission of my child(ren) \_\_\_\_\_ to the Family Home Child Care Society of Pictou County, I agree to fully co-operate with the requirements of the program as outlined in the policies. I understand that my child(ren) will be in a licensed day care facility.

I hereby release the Family Home Child Care Society of Pictou County, its agents, servants and employees from any and all liability for any person or consequential injury or illness occurring to my child(ren) while he/she/they are in the care of the Society, its agents, servants, and employees or while my child(ren) is in the Family Home Child Care Program.

Signature: \_\_\_\_\_  
Parent

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

# **Family Home Child Care Society**

## **BEHAVIOR MANAGEMENT POLICY FOR STAFF AND CARE PROVIDERS**

The Following Forms of Discipline Shall Not Be Used:

- 1) Corporal Punishment, including but not limited to the following:
  - Striking a child directly or with any physical object.
  - Shaking, shoving, spanking or other forms of aggressive physical contact; and
  - requiring or forcing a child to repeat physical movements.
- 2) Harsh, humiliating, belittling or degrading responses of any form, including verbal, emotional or physical
- 3) Confine or isolate a child; OR
- 4) Deprive a child of basic needs, including food, shelter, clothing, or bedding.
- 5) Caregivers/Staff will not offer food to reinforce positive behaviors OR
- 6) Withhold food as a consequence for inappropriate behavior &
- 7) Food is not to be used as a reward for completing a task or finishing a meal (e.g. dessert will not be withheld if child does not finish main course);
- 8) There will be zero tolerance toward sexual abuse.

### **THE FOLLOWING TECHNIQUES SHALL BE USED FOR GUIDING CHILDREN IN LEARNING APPROPRIATE BEHAVIOR:**

- 1) Staff and Care providers will adopt a positive attitude towards children which includes enjoyment of and respect for the children as individuals.
- 2) Limits set shall be enforced consistently and fairly.
- 3) Under certain circumstances, staff and care providers may want to use physical contact to guide behavior, for example, holding a child to prevent disruptive behavior. An adult touch during a frustration situation may have a calming effect on the child, thereby avoiding or stopping destructive behavior.
- 4) Discipline statements shall be expressed positively wherever possible. Staff and care providers should use positive reinforcement; tell a child what he/she can do, rather than what he/she cannot do. Sometimes redirecting a child's behavior is all that is required.
- 5) When appropriate, staff/caregivers shall continue interaction with the child and listen to him or her during periods of upset behavior.
- 6) A brief period of time-away from others may sometimes be required. A child may be removed from an activity for a period of quiet time.

**Family Home Child Care Society, Pictou County**

**PLAY EQUIPMENT/ FIELDTRIP/EMERGENCY AUTHORIZATION FORM**

I hereby grant permission for my child to use all play equipment and participate in all the program activities of the Day Care.

I hereby grant permission for my child to leave the day care under the supervision of the staff for neighborhood walks or field trips in authorized vehicles.

**\*I hereby grant permission for my child to be included in pictures connected with the Family Home Child Care Program. Example: website \_\_\_\_\_**

I hereby agree that I have received a copy of the Parent Handbook from the Agency.

I hereby grant permission for the staff to take whatever steps may be necessary to obtain emergency medical care if warranted. These steps may include, but are not limited to the following:

- a) Attempt to contact parent or guardian.
- b) Attempt to contact the child's physician.
- c) Attempt to contact you through any person listed as emergency contact(s) that you have given us.
- d) If care provider cannot contact you or your child's physician, she will do any or all of the following:
  - i. Call another physician
  - ii. Call an ambulance
  - iii. Have the child taken to emergency in the company of the caregiver
- e) Any expenses incurred under (d), will be the parent's/guardians responsibility.

Child(ren's) Name(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed: \_\_\_\_\_  
Parent/Guardian

Witness: \_\_\_\_\_

Date: \_\_\_\_\_