**Table of Policies and Procedures March 2024**

|  |  |
| --- | --- |
| **1** | **Safeguarding Children** |
| **2** | **Medicines** |
| **3** | **Illness and Infectious Diseases** |
| **4** | **Food and Drink** |
| **5** | **Accident and Emergency** |
| **6** | **Behaviour Management** |
| **7** | **Complaints** |
| **8** | **Working with Parents** |
| **9** | **Inclusion** |
| **10** | **Lost/Missing Child** |
| **11** | **Uncollected Child** |
| **12** | **Parental Permission Forms** |

**Please tick policies shared and agreed, sign below.**

|  |  |
| --- | --- |
| **Child’s name**  |  |
| **Childminder’s name** |  |
| **Childminder’s signature** |  |
| **Parent(s)’ name** |  |
| **Parent(s)’ signature** |  |
| **Date**  |  |

**Model Child Protection and Safeguarding Policy for Childminders**

Issued by the London Borough of Lambeth - March 2024

The model policy relates to Ofsted Registered Childminders working within the Statutory Framework for the Early Years Foundation Stage.

|  |
| --- |
| **Please note:** This model policy is to support you to devise your own policy. Please make sure that you only state in your own policy what you do in your own setting. This can be used as a template so you can add or delete as appropriate |

Name:

As a registered childminder, I am the lead safeguarding practitioner for my setting.

In the case of childminders working together, each childminder is responsible for meeting the requirements of their own registration. Childminders must know that they have a shared responsibility when working together for the wellbeing of all the children present. Therefore, where childminders work together, each childminder also has a responsibility to refer any concerns where another childminder does not continually meet the requirements of their registration.

My Unique Registered Number from OFSTED is:

My first responsibility is towards the children in my care. I understand that I have a duty to share information to safeguard children. At times this information may be highly sensitive.

If I have any cause for concern, I will report it to the relevant bodies and liaise with local statutory children’s services for the child’s home area, as appropriate, following the local procedures.

The team to contact in Lambeth is called the Integrated Referral Hub, Phone: 0207 926 3100. After office hours I would call 0207 926 5555

If I am unsure, or feel I need to discuss the situation, I will contact Deborah Carter, Senior Safeguarding Manager for Lambeth on 07935602437 or at DCarter@lambeth.gov.uk

I can also contact Kathryn Shaw, Early Years & Out of School Quality Improvement Lead on 07908119631 or at KShaw2@lambeth.gov.uk

I follow the Lambeth Safeguarding Children Partners procedures which can be found at: [https://www.lambethsaferchildren.org.uk/](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/419604/What_to_do_if_you_re_worried_a_child_is_being_abused.pdf)

I understand that child abuse can be physical, sexual, emotional, neglect, domestic, or a mixture of these, and I am aware of the signs and symptoms of these. See appendix for different types of abuse.

Allegations

I must notify Ofsted and the LADO of any allegations of abuse that are alleged to have taken place while the child is in my care, including any allegations against me, or any members of my family, or other adults or children in my home who have had contact with minded children.

I must inform Lambeth’s Local Authority Designated Officer (LADO) on 0207 926 4679. I will follow the advice given to me. I will also contact my public liability insurance provider for legal advice if necessary.

(I will refer to the Lambeth Safeguarding Referrals Poster for guidance)

Other Notifications

I am aware that I must notify Ofsted of any serious accident, illness, or injury to, or death of, any child while in my care, and of the action taken. Notification must be made as soon as is reasonably practicable, but in any event within 14 days of the incident occurring. Failure to comply with this requirement, commits an offence. I must notify local child protection agencies of any serious accident or injury to, or the death of, any child while in their care, and must act on any advice from those agencies. 3.52.

I must notify Ofsted of any food poisoning affecting two or more children cared for on the premises. Notification must be made as soon as is reasonably practicable, but in any event within 14 days of the incident. Failure to comply with this requirement, commits an offence. 3.50

Link to notify Ofsted: Report a serious childcare incident - GOV.UK (www.gov.uk)

I must tell Ofsted if someone new moves into my home such as a partner, lodger, friend, or family member.

I must also tell Ofsted if someone new is working in my home such as a new assistant.

Link to more information: [Early years and childcare services: EY3 changes to individuals - GOV.UK (www.gov.uk)](http://www.ofsted.gov.uk/Ofsted-home/Forms-and-guidance/Browse-all-by/Care-and-local-services/Childcare/Complaints-and-enforcement)

Prevent duty

I am aware that I must have due regard of the Prevent duty. From July 2015 all registered childcare providers are subject to a duty under section 26 of the Counterterrorism and Security Act 2015, to have “due regard to the need to prevent people from being drawn into terrorism”. This duty is known as the Prevent duty. It applies to a wide range of public-facing bodies. Bodies to which the duty applies must have regard to the statutory guidance.

I understand the signs and indicators of extremism or radicalisation. If I have any concerns, I will contact the Prevent Officer in Lambeth on 0207 926 7025 or 0207 926 3668, or email prevent@lambeth.gov.uk and my Safeguarding Partners as above. If there is immediate danger I will phone 999.

I am aware of the Department for Education telephone helpline (020 7340 7264) to raise concerns relating to extremism directly. Concerns can also be raised by email to [counter.extremism@education.gsi.gov.uk](https://www.gov.uk/guidance/report-a-serious-childcare-incident)

I must also ensure that no individual who is unsuitable to work with children has unsupervised access to a child in my care. I have read and understand the safeguarding and welfare requirements of EYFS. I have also read the national statutory guidance document [https://www.gov.uk/government/publications/working-together-to-safeguard-children](https://beta.lambeth.gov.uk/noise-nuisance-anti-social-behaviour-and-safety/domestic-violence/violence-against-women-and-girls) and [What to do if you are Worried a Child is being Abused - Advice for Practitioners 2015](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/439598/prevent-duty-departmental-advice-v6.pdf).

Procedure (how I put the statement into practice)

I keep up to date with child protection issues, local cultural and religious concerns, and relevant legislation by taking regular training courses. The date of my last training was [insert your last child protection training date here]

I also check the Lambeth Safeguarding Children Partnership (LSCP) website regularly: [https://www.lambethsaferchildren.org.uk/](https://beta.lambeth.gov.uk/noise-nuisance-anti-social-behaviour-and-safety/domestic-violence/violence-against-women-and-girls)

Unless I believe that it would put the child at risk of further harm, I will discuss concerns with a child’s parent if I notice:

* significant changes in children’s behaviour
* deterioration in children’s general wellbeing
* unexplained bruising, marks or signs of possible abuse or neglect
* children’s or parents’ comments which give cause for concern, including expressing extremist views
* any reasons to suspect neglect or abuse outside the setting, for example in the child’s home; and/or inappropriate behaviour displayed by other members of staff/assistants, or any person working with children.

I aim to share all information with parents but in some instances (where I am worried about a child’s wellbeing) I may have to refer serious concerns without discussing this with you first.

I work together with parents to make sure the care of your child is consistent.

Behaviour Management and Physical Intervention

I must not give or threaten corporal punishment to a child and must not use or threaten any punishment which could adversely affect a child's well-being. I must take all reasonable steps to ensure that corporal punishment is not given by any person who cares for or is in regular contact with a child, or by any person living or working in the premises where care is provided. Failure to meet these requirements commits an offence. I will not be taken to have used corporal punishment (and therefore will not have committed an offence), where physical intervention was taken for the purposes of averting immediate danger of personal injury to any person (including the child) or to manage a child’s behaviour if absolutely necessary. I must keep a record of any occasion where physical intervention is used, and parents and/or carers must be informed on the same day, or as soon as reasonably practicable. 3.54

Attending and collecting

Children will only be released from my care to the parent/carer or to someone suitable named and authorised by them. A password agreed between us might be used to confirm identity if the person collecting the child is not previously known to me. Children will not be released into the care of anyone that I have reason to believe is under the influence of drugs or alcohol.

Where a child fails to attend unexpectedly, I will take all necessary action to attempt to contact their parents. If contact cannot be made, I will phone the other emergency contact numbers. Any unexplained absence where there is a serious concern will be reported to the Police. I will contact other safeguarding agencies according to individual circumstances. For example, if there is a concern that a parent may have had an accident and a child can’t summon help, or if there is a suspected case of FGM, or concerns relating to the Prevent duty. Where a family has a social worker and the child stops attending, I may be required to inform their social worker.

Parents must notify me of any concerns they have about their child, and any accidents, incidents or injuries affecting the child, which I will record and ask parents to sign.

I will secure written consent from parents to administer medication and confirm when the last dose was given at home. I will record each dose of medication and ask parents to sign this record upon collection of their child. I will store medication safely, out of reach of children.

I ensure that I complete Paediatric First Aid training every 3 years to keep my knowledge up to date and to provide effective first aid when required.

I also ensure that I have Public Liability Insurance in place at all times to meet legal requirements.

I will ensure I have at least three relevant contacts for the child, so that I have alternative contact details in the case of emergency or unexpected absences.

I recognise the additional barriers that exist when identifying the signs of abuse and neglect of children who have special educational needs and/or disabilities.

If a child tells me that they or another child is being abused, I will:

* Show that I have heard what they are saying, and that I take their allegations seriously.
* Encourage the child to talk, but I will not prompt them or ask them leading questions. I will not interrupt when a child is recalling significant events and will not make a child repeat their account.
* Explain what actions I must take, in a way that is appropriate to the age and understanding of the child.
* Record what I have been told, using exact words where possible.
* Make a note of the date, time, place and people who were present at the discussion.

I will call the relevant Social Care Department for the child’s home address. In Lambeth that is the Integrated Referral Hub on 0207 926 3100 for advice and an assessment of the situation. I will follow this phone call up with a [referral form](file:///C%3A/Users/LBoyle/Desktop/Multi-agency%20Referral%20Form%20%28MARF%29) within 48 hours. I will record the concern and all contact with relevant agencies thereafter.

In all instances I will record:

* the child’s full name and address and the date and time of the record
* factual details of the concern, for example bruising, what the child said, who was present
* marks could be recorded on a body outline drawing
* details of any previous concerns
* details of any explanations from the parents
* any action taken, such as speaking to parents.

It is not my responsibility to attempt to investigate the situation myself.

The use of mobile phones and cameras

I understand that mobile phones are an everyday part of life for parents and childminders, here is my procedure for their use:

* I will ensure my mobile phone is always charged and with me in case of emergencies.
* I will ensure that all electronic devices with “imaging and sharing capabilities” are used and stored safely. (This includes mobile phones, cameras, tablets, iPads, smart watches, kindles and gaming devices)
* I have the facility to take photographs on my mobile phone, camera and other technological devices. I will seek parental permission for myself and my assistants to take any photographs of your child to record activities and share their progress with you.
* Any photographs taken will be stored, used and deleted in accordance with data protection and privacy guidelines.
* I will not publish photographs of your child on any social networking sites or share with any other person without your written permission.
* I understand that it is not appropriate to photograph injuries or bruises on a child’s body and I would use a ‘concerns recording form’ to indicate injuries instead.

I request that you do not use your mobile phone or any other technological devices with imaging and sharing capabilities whilst dropping off and collecting your child/children.

Any visitors will also be asked not to use their mobile phone or any other smart device.

If your child has a mobile phone, games console or any other device with imaging and sharing facilities that they wish to bring into the setting, please let me know. This is so that we can work together for the safety of all children and ensure appropriate access to material when using the internet.

More information is available here: [Safeguarding children and protecting professionals in early years settings: online safety considerations - GOV.UK (www.gov.uk)](https://www.gov.uk/government/publications/working-together-to-safeguard-children)

To comply with the Data Protection Act 2018 and GDPR I have registered with the Information Commissioner’s Office (ICO) as a data controller to allow me to store digital images on an SD card, Smart device, or computer.

I will ensure that all IT devices used by the children have parental locks, and that the children are being supervised. I will set limits on screen time. I will ensure that I keep up to date with e-safety guidance to support children to use technology safely add wording sent.

Female Genital Mutilation (FGM)

I am aware of my responsibility to report concerns that a child may have undergone or be at risk of undergoing FGM [Female Genital Mutilation – multi-agency guidance](https://www.lambethsaferchildren.org.uk/)

The Female Genital Mutilation Act 2003 legislation can be found [here](https://www.legislation.gov.uk/ukpga/2003/31/contents)

The legislation clarifies the offence of female genital mutilation:

(1) A person is guilty of an offence if he/she excises, infibulates or otherwise mutilates the whole or any part of a girl’s labia majora, labia minora or clitoris.

(2) But no offence is committed by an approved person who performs—

(a) a surgical operation on a girl which is necessary for her physical or mental health, or

(b) a surgical operation on a girl who is in any stage of labour, or has just given birth, for purposes connected with the labour or birth.

Contact Lambeth’s Integrated Referral Hub on 0207 926 3100 or the police on 999 if a child is at immediate risk

Missing Child

I must inform parents about the procedure that I will follow in the event of a child going missing within my premises, from my premises, or off site during outdoor events.

I will search for the child ensuring that any other children are safe. If the search is unsuccessful, the police will be informed.

Parents will be notified and advised as soon as possible.

Any missing or lost child incident will be considered as a significant incident and the LADO and Ofsted will be informed.

Risk assessments

I risk assess my home to identify aspects of the environment that need to be checked on a regular basis. This will include foods offered to the children, routines, key times of day such as arrival and departure times, activities offered to the children, outings and any known hazards in the environment such as button batteries.

I will ensure that there is no smoking, vaping or use of e-cigarettes in my home while children are present. If there has been any use outside of Childminding hours, I will ensure that my home is fully ventilated for a suitable period before children arrive.

I will ensure that there is no access to alcohol or medication in my home.

Serious Illness

For general reportable illness I will contact:

South London Health Protection Team (HPT),

Public Health England Zone C,

3rd Floor, Skipton House, 80 London Road, London SE1 6LH

Email [slhpt.oncall@phe.gov.uk](https://www.gov.uk/government/publications/safeguarding-children-and-protecting-professionals-in-early-years-settings-online-safety-considerations)  or telephone 0344 326 2052

The Public Health team at Lambeth: 0207 926 2900

[Publichealth@lambeth.gov.uk](https://www.gov.uk/government/publications/early-years-and-childcare-providers-ey3-changes-to-individuals)

Ofsted - Please notify Ofsted using the online form which can be accessed at this link: [https://www.gov.uk/guidance/report-a-serious-childcare-incident](https://www.gov.uk/government/publications/what-to-do-if-youre-worried-a-child-is-being-abused--2)

Please also notify your Lambeth Locality Lead:

South-East Locality: Carmel Spanswick [CSpanswick1@lambeth.gov.uk](http://www.ofsted.gov.uk) or telephone 0784 1800 787

North Locality: Jenny Griffiths Griffiths2@lambeth.gov.uk or telephone 07908 119 644

South-West Locality: Lorraine Boyle [LBoyle@lambeth.gov.uk](https://www.gov.uk/guidance/notifiable-diseases-and-causative-organisms-how-to-report) telephone 07534 221 742

**Appendix**

Different types of abuse and their indicators - taken from [What to do if you are worried a child is being abused](https://www.gov.uk/guidance/report-a-serious-childcare-incident)

There are four main categories of abuse and neglect: physical abuse, emotional abuse, sexual abuse and neglect.

Physical Abuse

Physical abuse is deliberately physically hurting a child. It may take a variety of different forms, including hitting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.

Physical abuse can happen in any family, but children may be more at risk if their parents have problems with drugs, alcohol and mental health or if they live in a home where domestic abuse happens. Babies and disabled children also have a higher risk of suffering physical abuse.

Physical harm may also be caused when a parent or carer fabricates the symptoms of, or deliberately induces, illness in a child. Physical abuse can also occur outside of the family environment.

Some of the following signs may be indicators of physical abuse:

* Children with frequent injuries
* Children with unexplained or unusual fractures or broken bones
* Children with unexplained:
	+ Bruises or cuts.
	+ Burns or scalds; or
	+ Bite marks

Emotional Abuse

Emotional abuse is the persistent emotional maltreatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on a child’s emotional development.

Although the effects of emotional abuse might take a long time to be recognisable, practitioners will be in a position to observe it, for example, in the way that a parent interacts with their child. Emotional abuse may involve deliberately telling a child that they are worthless, or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them or making fun of what they say or how they communicate.

Emotional abuse may involve serious bullying, including online bullying through social networks, online games or mobile phones by a child’s peers.

Some of the following signs may be indicators of emotional abuse:

* Children who are excessively withdrawn, fearful or anxious about doing something wrong
* Parents or carers who withdraw their attention from their child, giving the child the ‘cold shoulder’
* Parents or carers blaming their problems on their child
* Parents or carers who humiliate their child, for example, by name calling or making negative comparisons

Sexual abuse and exploitation

Sexual abuse is any sexual activity with a child. You should be aware that many children and young people who are victims of sexual abuse do not recognise themselves as such. A child may not understand what is happening and may not even understand that it is wrong. Sexual abuse can have a long-term impact on mental health.

Sexual abuse may involve physical contact, including assault by penetration (for example, rape or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via the internet). Sexual abuse is not solely perpetrated by adult males. Women can commit acts of sexual abuse, as can other children.

Some of the following signs may be indicators of sexual abuse:

* Children who display knowledge or interest in sexual acts inappropriate to their age
* Children who use sexual language that you wouldn’t expect them to have
* Children who ask others to behave sexually or play sexual games
* Children with physical sexual health problems, including soreness in the genital and anal areas, sexually transmitted infections or underage pregnancy.

Child sexual exploitation

Child sexual exploitation is a form of sexual abuse where children are sexually exploited for money, power or status. It can involve violent, humiliating and degrading sexual assaults. In some cases, young people are persuaded or forced into exchanging sexual activity for money, drugs, gifts, affection or status. Consent cannot be given, even where a child may believe they are voluntarily engaging in sexual activity with the person who is exploiting them. Child sexual exploitation doesn’t always involve physical contact and can happen online. A significant number of children who are victims of sexual exploitation go missing from home, care and education at some point.

Some of the following signs may be indicators of sexual exploitation:

* Children who appear with unexplained gifts or new possessions
* Children who associate with other young people involved in exploitation
* Children who have older boyfriends or girlfriends
* Children who suffer from sexually transmitted infections or become pregnant
* Children who suffer from changes in emotional wellbeing
* Children who misuse drugs and alcohol
* Children who go missing for periods of time or regularly come home late
* Children who regularly miss school or education or don’t take part in education

Neglect

Neglect is a pattern of failing to provide for a child’s basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter. It is likely to result in the serious impairment of a child’s health or development.

Children who are neglected often also suffer from other types of abuse. It is important that practitioners remain alert and do not miss opportunities to take timely action. However, while you may be concerned about a child, neglect is not always straightforward to identify.

Neglect may occur if a parent becomes physically or mentally unable to care for a child. A parent may also have an addiction to alcohol or drugs, which could impair their ability to keep a child safe or result in them prioritising buying drugs, or alcohol, over food, clothing or warmth for the child. Neglect may occur during pregnancy as a result of maternal drug or alcohol abuse.

Some of the following signs may be indicators of neglect:

* Children who are living in a home that is indisputably dirty or unsafe
* Children who are left hungry or dirty
* Children who are left without adequate clothing, e.g., without a winter coat
* Children who are living in dangerous conditions, i.e., around drugs, alcohol or violence
* Children who are often angry, aggressive or self-harm
* Children who fail to receive basic healthcare
* Parents who fail to seek medical treatment when their children are ill or are injured

Domestic Abuse – if I suspect a child is being exposed to domestic abuse, or that a pregnant woman is experiencing domestic abuse I will contact Lambeth’s Integrated Referral Hub on 0207 926 3100 or after office hours 0207 926 5555.

Information about support available can be found here or by visiting [https://beta.lambeth.gov.uk/noise-nuisance-anti-social-behaviour-and-safety/domestic-violence/violence-against-women-and-girls](https://www.lambethsaferchildren.org.uk/)

Safeguarding children is everyone’s responsibility.

Signed

Date

Date for review

**Sample Medicine Policy**

**Policy statement: Medicines**

As a childcare provider I will ensure that I implement an effective procedure to meet the individual needs of a child when administering medicines. In order to achieve this I will do the following:

**Procedures (how I will put the statement into practice)**

I will keep a written record of a child’s need for medication and ask parents to update regularly.

I will keep written records of all medicines administered to children in my care.

I will inform parents when a medicine has been administered including the time and dosage.

I will store all medicines safely out of reach of children and strictly in accordance with the product instructions (which may require refrigeration in a sealed container away from food) and in the original container in which it was dispensed.

I will obtain prior written permission from parents for each and every medicine to be administered before any medication is given.

I will work in partnership with parents to ensure the correct medication, dosage etc is given.

If the administration of prescription medicine requires technical/medical knowledge, then I will attend training from a qualified health professional. The training will be specific to the child in question.

If any of my staff are involved in the administration of a prescription medicine that requires technical/medical knowledge then I will ensure that they have attended individual training from a health care professional, specific to the child in question.

I will only administer prescription medication to the child if it is prescribed for by a doctor, dentist, nurse or pharmacist and has that child’s name on the prescription label.

I will only administer non-prescription medication such as pain and fever relief with parents’ previous written consent and only when there is a health reason to do so.

I will never administer medicines containing aspirin to a child under the age of 16 unless they have been prescribed by a doctor.

In an emergency, if I do not administer the medicine whilst the child is in my care, I will inform parents of who will be responsible for the administration of medicines to their child. (Emergency back-up cover). If a dose is missed this will be recorded and the parents informed. Children cannot be forced to take medication so in the event of a refusal this will be recorded, and parents will be contacted.

If I have a child in my care with long-term medical needs, then I will ensure that I and any co-workers have sufficient information about the child’s medical condition and will work in partnership with parents and any health professionals to assist the administration of any prescribed medication and the management of other health needs such as a gastrostomy tube.

If a child has medication that they administer themselves at my setting (such as an asthma inhaler) then I will ask them to tell me so that it can be recorded. Full details of the medication and the child’s requirements for it will be recorded and the parent will sign to give consent for the child to self-medicate.

**Additional guidance for the Childcare Register**

Providers on the Childcare Register, apart from home childcarers, are required to maintain a written record of any medicine administered to a child for whom the childcare is provided, including:

* The details of the product and the date of its administration
* The name of the person who administered the medicine and the circumstances.
* A record of parental consent or the consent of a carer, if the parent has identified another person.

There is no guidance relating to whether the medication is prescribed or otherwise so long as the provider keeps a written record.

All consent forms and completed records will be stored in accordance with my confidentiality policy.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards: **England**

Meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements.

**Sample Illness and Infectious Diseases Policy**

**Policy statement: Illness and infectious diseases**

It is my policy to keep children safe when they are in my care, promote good health and take necessary steps to prevent the spread of infection within my childcare setting and while I am off site.

**Procedures (how I will put the statement into practice)**

**Sick children**

If there is a child in my setting who becomes ill whilst in my care, or whom I believe has an infectious illness or disease (for example a severe cold or stomach upset) I will:

* Contact the parents as agreed to arrange for the immediate collection of the child
* Ensure the child is excluded from my setting until they have been well for 48 hours, or in accordance with Health Authority guidelines.

If I believe a child in my setting is suffering from a disease or illness which requires notification, I will inform the parents/guardians of my concerns and act on advice given by Notifiable diseases and causative organisms: how to report - GOV.UK (www.gov.uk) as to when they will be able to return to my setting.  I will also inform Ofsted and my local authority advisor of any action taken.

I make parents aware of my sickness exclusion policy and keep a record of the arrangements for the exclusion of a child should they become ill whilst in my setting.

In accordance with the contract agreed with parents I expect to be paid for the child’s place even if they are excluded from my setting due to an illness or infectious disease.

If I, or one of the members of my family, has a confirmed infectious disease, I will inform parents as soon as I am able. As I will not be able to offer my Childminding service, I do not charge parents for the time the service is unavailable, as agreed in the contract.

I will inform the parents of the other children in my setting if a child I care for has a diagnosed infectious disease.

**Hygiene**

I ensure all adults and children in my setting are aware of good hand-washing procedures, before eating or handling food and after using the toilet.

I ask parents to provide a face flannel and towel for their child, which I wash regularly.

I ensure there is a supply of tissues available for children.

I immediately clean up any spillage of body fluids using a disposable cloth and gloves.

I wear disposable gloves for changing nappies. I will discard these gloves after each change.

I ensure that any animals on the premises are safe to be around children and do not pose a health risk.

I ensure that litter trays and pet food dishes are kept away from children.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards: **England**Meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements Health, Medicines

**Sample Food and Drink Policy**

**Policy statement: Food and drink**

It is my policy to provide children with healthy, balanced, and nutritious meals, snacks and drinks.

Those responsible for the preparation and handling of food will be competent to do so.

**Procedure (how I will put the statement into practice)**

Before a child is admitted I will obtain information about any special dietary requirements, preferences and food allergies, and any special health requirements.

I will collect, record, and act on information from parents about a child’s dietary needs.

Where parents provide meals for their children to eat in my setting, I will provide chilled storage for packed lunches and appropriate storage areas for other foodstuffs.

I will also provide children with clean and age-appropriate crockery and eating utensils.

I will respect the diversity of practice around mealtimes e.g. use of chopsticks or fingers for eating.

I will provide children with healthy meals, snacks, and drinks as appropriate and recommended by the Food Standards Agency literature.

I will ensure fresh drinking water is available at all times, both in and outside my setting.

As a provider of meals and snacks I am aware of my responsibilities under food hygiene legislation. This includes, if necessary, registration with the relevant Local Authority Environmental Health Department. If this is the case, then I am happy to have my premises inspected by a food safety officer.

I will detail any allergens that are present in the food that I prepare for children in accordance with EU Information for Consumers Regulation 2014 and share this with parents/carers.

I will list any allergens in ingredients that are present in any food that I produce, as well as being aware when I take children out to eat at other settings. **All registered food businesses** will have to comply with the legislation so I will make sure I am aware of any allergens contained and make this part of my risk assessment.

I will ensure suitable sterilisation equipment for babies’ food.

I will keep pets out of the food preparation area at all times. If a family pet does gain access to this area, then I will ensure that all work surfaces and cooking utensils have been thoroughly cleaned before any food preparation or food handling takes place.

Baby changing facilities will not be near food preparation areas.

I will ensure that I, and everyone caring for children, as well as the children themselves, are aware of good hand washing procedures and how these are carried out.

I will not undertake laundry during times of food preparation, and I will ensure that any detergents or soiled clothing will not come into contact with food preparation areas.

If there is an outbreak of food poisoning affecting two or more children looked after on my premises, I will notify Ofsted as soon as possible but definitely within 14 days of the incident occurring in order to comply with regulations.

I will keep all food receipts, including those under £10, so that if there is an outbreak of food poisoning on my premises, I will be able to trace the outlet where the food was purchased.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards**: England**

Meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements
**Health, Food and Drink**

**Sample Accident, Incident and Emergency Policy**

**Policy statement: Accident, Incident and emergency**

It is my policy to keep children safe when they are in my care.

 I risk assess my premises to ensure it meets the safeguarding and welfare requirements of the Early Years Foundation Stage. I also regularly review, update and practise fire evacuation procedures. I record dates and times of fire drills.

**Accidents to minded children, childminder’s own children, or the childminder**

As a registered childminder, I am legally required to have a valid paediatric first-aid certificate before registration and to ensure that my first aid training is renewed every 3 years.

I can administer basic first-aid treatment, and my first-aid box is clearly labelled and easily accessible. Parents’ emergency contact numbers are kept securely with the first-aid box.

I hold written permission from parents to seek emergency treatment for their child if it is needed.

I also have an arrangement with another registered childminder/responsible adult to provide emergency back-up cover, if necessary, details below.

**Procedure (how I will put the statement into practice)**

If there is an accident to a minded child or childminder’s own children:

* First, I reassure the injured child while making sure that the other children in my care are safe. This may mean strapping a baby in a buggy or sitting an older child somewhere safe where I can see them.
* Then, if the accident is a minor one and requires only basic first aid, I deal with it myself. If not, I will ring 999 (or 112 from a mobile) for help.
* If I have to accompany or take a child to hospital, I either take the other children with me, or call my emergency back-up cover. This will be another registered childminder or known responsible adult. These people will be made known to parents at the settling-in visit and are named below.

If there is an accident, my emergency back-up cover may contact you and you will be expected to collect your child straight away.

If I manage to deal with the accident myself, then I will tell the affected child’s parents immediately and advice of any first aid treatment given.

If I accompany or take a child to hospital, I will contact the child’s parent and ask them to meet me at the hospital.

If I or any of my own children have an accident, I will get the nearest responsible adult to help, while my emergency back-up people are being contacted.

I will do my best at all times to make sure the children in my care are safe, reassured and kept calm.

**Accidents off site:**

I will carry parents’ contact details with me when I am away from my home, in order to follow procedures above should an accident occur off site.

I will take a small first aid kit with me when away from home.

**Incidents**

An incident is a non-medical emergency which causes the need for an immediate response/change of routine in the setting.

I will use existing planned procedures as far as possible in the event of an incident which affects my setting as follows:

Missing child – I will follow my Missing Child policy and procedure.

Gas leak/fire – I will follow my Emergency Evacuation procedure – see below.

Challenging/aggressive behaviour of a child – I will follow my Behaviour Management policy and procedure.

Flooding – I will monitor the situation and follow my Emergency Evacuation procedure if necessary.

Threatening behaviour of an adult – I will seek to remove the children from the situation to a safe place and if necessary and when safe to do so I will call the Police on 999.

I will contact parents as soon as possible so that if necessary, they can collect their child.

**Emergency evacuation procedure**

Should an emergency occur that requires me to leave the setting the following procedure will apply:

* Ensure that all the children in the setting are present.
* Evacuate to a safe area (using a buggy/reins if there is time to do so)
* I will contact the emergency services on 999 (or 112)
* I will reassure the children and make sure that they are not unduly upset.
* I will contact the parents and let them know the situation.
* If I have to take the children to another setting (for example to the home of my emergency back-up cover) then I will contact the parents and ask them to collect their child as soon as possible.

**Other emergencies:**

Should any other emergency occur (such as a terrorist attack, or a member of my family becoming ill in my home) I will contact parents as soon as possible. I expect that parents will also contact me in the event of any accident or emergency which may befall them.

Should it not be possible for parents to contact me, then I will keep the children safe until such time as parents can make contact with me.

**Recording:**

I will record all details in my accident, incident book, and make these available for parents to sign and provide a copy for parents. I will ensure that all completed forms are stored in accordance with my confidentiality policy.

If the accident is significant e.g. if a child is taken to hospital for a broken bone I will inform Ofsted, the local child protection agency, the Health and Safety Executive and my insurance company as soon as is reasonably practicable but in any event within 14 days of the accident occurring.

 **Emergency back-up cover**

|  |  |
| --- | --- |
| Back-up registered childminder | Name:Telephone: |
| Known responsible adult | Name:Telephone: |

I have read and understand the Accident, incident and emergency policy.

I give my permission for the named emergency back-up people to have my contact details for use in an emergency.

I give permission for my child \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ *[name]* to be taken to hospital and be given emergency treatment providing every effort has been made to contact me.

Parent signature and date:

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards**: England**

Meeting the Early Years Foundation Stage Safeguarding and Welfare and Ofsted requirements
**Health, accident or injury**

**Sample Behaviour Policy**

**Policy statement: Behaviour**

As a registered childminder I recognise the need to set out reasonable and appropriate limits to manage the behaviour of children in my care.

 By providing a happy, safe environment, the children in my care will be encouraged to develop social skills to help them be accepted and welcome in society as they grow up.

**Procedure (how I, and any one I employ, put the statement into practice)**

I keep up to date with behaviour management issues and relevant legislation by taking regular training and by reading relevant publications.

All parents receive or have access to a copy of my Behaviour Policy.

I will not threaten or administer physical punishment, cause pain, discomfort, humiliate or hurt any child in my care.

I endorse positive discipline as an effective way of setting boundaries for children.

I agree methods to manage children’s behaviour with parents before the placement starts. These are discussed with parents during initial visits before the contract is signed.

Wherever possible I try to meet parents’ requests for the care of their children according to their values and practices. Records of these requirements are agreed and kept attached to the child record forms. These records are revisited and updated during regular reviews with parents.

I expect parents to inform me of any changes in the child’s home circumstances, care arrangements or any other change which may affect the child’s behaviour such as a new baby, parents’ separation, divorce, new partner or any bereavement. All information shared will be kept confidential unless there appears to be a child protection issue.

I work together with parents to make sure there is consistency in the way the children are cared for. A consistent approach benefits the child’s welfare and helps ensure that the child is not confused. I offer regular review meetings with parents to discuss their child’s care and any issues or concerns, preferably when the child is not present.

I will only physically intervene, and possibly restrain, a child to prevent an accident, such as a child running into the road, or to prevent an injury or damage. Should this be necessary I will record any instances of physical intervention in writing in my incident book and inform parents on the same day, or as soon as reasonably practicable.

I record all significant behaviour incidents in an incident book. I will discuss these with the parents of the child concerned so that together we can work to resolve any behavioural issues and share strategies.

I acknowledge the strength and range of children’s feelings and try to help children to find constructive solutions for managing these.

I encourage responsibility by talking to children about choices and their possible consequences.

I aim to be firm and consistent so that children know and feel secure within the boundaries I set.

I will respond positively to children who constantly seek attention or are disruptive.

I will help children maintain their self-esteem by showing I disapprove of challenging behaviour, not the child themselves.

If I have concerns about a child’s behaviour which I cannot resolve in partnership with parents, I will ask for permission from the parents to talk it through with another childcare professional. I may contact PACEY, the NSPCC, health visitor or the local early years team for confidential advice.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards**: England**Meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements

**Managing Behaviour**

**Sample Complaints Policy**

**Policy statement: Complaints**

As a registered childminder I aim to work in close partnership with all parents to meet the needs of their children. Maintaining good communication between both parties will aid this. I expect that parents will immediately bring to my attention any aspect of my service they are not happy with so that every effort can be made to resolve the matter. Parents can make a complaint to me verbally, or in writing.

It is a condition of my registration to investigate all written complaints relating to the safeguarding and welfare requirements of the Early Years Foundation Stage and/ or the Childcare Register. I will notify the complainant of the outcome within 28 days of the receipt of the complaint.

I display Ofsted’s poster for parents which introduces Ofsted's childcare responsibilities and gives Ofsted contact details. You can complain or compliment my service to Ofsted by calling:

0300 123 1231

Or you can email: [enquiries@ofsted.gov.uk](https://www.gov.uk/government/publications/multi-agency-statutory-guidance-on-female-genital-mutilation)

**Procedure (how I will put the statement into practice)**

I will investigate all complaints and notify the complainant of the outcomes of the investigation within 28 days.

I will keep a written record of all complaints and their outcome for at least three years. Confidentiality will be maintained but, as required, I will provide Ofsted, on request, with a written record of all complaints within a specified period and the action taken as a result of each complaint.

I will record the following information:

* The name of the person making the complaint.
* The Early Years Foundation Stage requirement(s) or Childcare Register requirements to which the complaint relates.
* The nature of the complaint.
* The date and time of the complaint.
* Any action taken in response to the complaint.
* The outcome of the complaint investigation (for example, ways the service has improved).
* Details of the information and findings that were given to the person making the complaint, including any action taken.

If the complaint cannot be resolved or if the complaint is of a serious nature and you feel you cannot discuss it with me please contact Ofsted on 03001 231231.

Ofsted produces guidance on concerns and complaints about childminders and childcare providers. This is available on the Ofsted website and provides guidance on the complainant’s right to contact Ofsted.

|  |  |
| --- | --- |
| Childminder’s name |  |
| Childminder’s signature  |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |

This policy supports the following requirements and standards**: England**

Meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements and the requirements of the Childcare Register
**Information and Records, Complaints**

**Sample Working with Parents Policy**

**Policy statement: Working with parents.**

I aim to work in partnership with parents and carers to meet the needs of the children I care for.

I respect that parents are children’s first and most enduring educators. When parents and practitioners work together in early year’s settings, the results have a positive impact on children’s development and learning.

I treat all children and adults equally and create a welcoming, inclusive environment in my home.

**Procedure (how I put the statement into practice)**

I keep up to date about working in partnership with parents and carers and with relevant legislation by taking regular training and by reading relevant publications.

All parents receive or have access to a copy of my policies and procedures, information about the types of activities provided, the daily routines and how parents can share learning at home.

**Contracts and records**

I draw up and sign a written contract with parents before the placement starts. The contract is signed by the parent/s and myself and dated. I give copies to the parent/s and any other party involved in the contractual arrangements.

I review the contract with parents once a year or when circumstances change.

I issue a receipt for all payments received from parents.

I meet parents’ requests for the care of their children according to their values and practices, preferences and attitudes.

I keep records of these requests with the child record forms which also contain emergency contact numbers, dietary requirements/preferences, food allergies, health requirements, and information about who has legal contact with the child and who has parental responsibility for the child. These records are revisited and updated during regular reviews with parents.

**Communication with parents**

I work together with parents to make sure that the care of their child is consistent.

I make time for discussion about a child’s needs by sharing information with parents about daily routines and activities in my setting and in the child’s home.

Ways of sharing this information can include inviting parents to add to children’s profile books, email, telephone, face-to-face meetings, and informal day to day feedback.

 I will discuss any changes in my or the child’s home circumstances which may impact on the child’s development or my ability to care for a child.

I offer regular review meetings with parents to discuss their child’s learning and development share observations and discuss next steps.

I welcome parents’ feedback on my service. Please refer to my Complaints Policy on my procedures for managing negative feedback.

I display my Ofsted registration certificate and the Ofsted poster for parents which introduces Ofsted's childcare responsibilities and gives Ofsted contact details.

**Ofsted inspections**

I will notify all parents in advance when I am to be inspected by Ofsted so that parents can contribute their views to the inspector.

I will supply parents with a copy of the Ofsted report within five working days of receiving the report.

All significant incidents are recorded in an incident book and will be shared and discussed with parents so that we can work together to resolve any issues.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

**Sample Inclusion Policy**

**Policy statement: Inclusion**

I make sure that I actively include all children and their families.

**Procedure (how I put the statement into practice)**

I provide a range of challenging and enjoyable opportunities for each child to learn and develop to their full potential, taking into account age and stage of development, gender, ethnicity, religion, home language, and ability.

I provide, and make sure that all children have access to, a range of books, toys and other resources which reflect positive images and examples of the diversity of life in our society.

I will work closely with parents to support the early identification of needs and liaise with other agencies where appropriate to ensure individual children’s needs are met.

I will ensure that my business policies and documents are accessible to all.

I will promote self-esteem and appreciation of others by celebrating the differences which make us all unique. I will regularly review my risk assessments to ensure accessibility and reasonable adjustments are made.

I challenge racist and other discriminatory remarks, attitudes and behaviour from all children and adults with whom I have contact.

I am aware of all legislation and existing codes of practice produced by the Equality and Human Rights Commission, the Equality Act 2010 and the Children and Families Act 2014. If I am delivering 2-, 3- and 4-year-old Free Early Education and Care I will give the Special Educational Needs and Disability Code of Practice 0-25 years due regard.

I will promote the British values of democracy, rule of law, individual liberty and mutual respect and tolerance of different faiths and beliefs through my delivery of the EYFS.

I will be proactive in providing care to all children regardless of their individual needs and consider reasonable adjustments to equipment and routines where necessary.

I am happy to give medication but where this requires medical or technical knowledge, I must have training by a healthcare professional before administering this.

I will regularly review, monitor, and evaluate my practice and keep up to date by attending relevant training.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards: **England**Meeting the Early Years Foundation Stage Safeguarding and Welfare Requirements
Special Educational Needs **Learning and development requirements**

**Sample Lost Child Policy**

**Procedure if a child is lost or goes missing:**

I will safely supervise children in my home and when we go on outings or trips and undertake a risk assessment.

I will teach the children about safety at home when we are out and about and tell them what to do if they do become lost according to their age and stage of development, e.g. stay where they are, meet up at a certain place, use their mobile phone to summon help.

If a child goes missing, I will tell the police, provide a description, and search the area.

If a child goes missing in a public place e.g. a library, park, shop, or shopping centre I will also alert the staff and security staff.

Then, I will contact the parents and Ofsted.

Other children in my care will be kept with me and reassured.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

**Sample Uncollected Child policy**

It is my policy to provide care for your child during contracted hours. The procedure below is to be followed if you fail to collect your child at the appointed time.

**Procedure if a child is not collected:**

**If you are running late to collect your child, please contact me**

If a child is not collected within 15 minutes of the agreed collection time and I have not been contacted with an explanation, I will try calling the parents’ contact numbers.

Then I will try the emergency contact numbers provided on your contract.

During this time, I will continue to safely look after the child.

I will continue to try the parents’ contact numbers and emergency numbers. If I have heard nothing after 1 hour from the original agreed collection time, I have a duty to inform the local authority duty social worker.

I will charge an additional fee for late collection – see contract.

|  |  |
| --- | --- |
| Date policy was written |  |
| This policy is due for review on the following date |  |

This policy supports the following requirements and standards: **England** Meeting the Early Years Foundation Stage Safeguarding and Safeguarding and Welfare Requirements **Information and records**, **information for parents and carers**

**Sample Parents’ Permission Forms**

**Parental permissions**

The following set of permission forms isn’t comprehensive but will help you to think about the types of permission you need to obtain from parents. For the purposes of this document, the term “parents” is deemed to include parents, guardians and anyone with legal responsibility for the child. Forms include:

* permission form for childminders to seek emergency medical assistance or treatment.
* routine outings
* transporting children in a vehicle
* sun protection cream application
* observations
* garden play equipment
* pre-arranged alternative care
* photo permission.

Each slip has space for two parents to sign. Where the care of the child is shared it is best practice to get permission from both parents.

**Notes on permission for emergency medical assistance or treatment**

A parental

**Notes on the photo permission form**

There are many occasions when you may want to take photographs of the children you care for, whether you are planning to use the photos for capturing children’s progress, send them to The Childcare Professional, PACEY’s membership magazine, or simply put them in your own album.

It is best practice to get parents’ permission before taking photographs of their children. It is also best practice that anyone using photos of children should not put children’s full names and other identifying information alongside their photographs when they appear in publications and training course assignments.

When taking digital photographs, even if they are printed and then the files are destroyed, you will be required to notify with the Information Commissioner’s Office as a data controller. You can do this online at <http://www.ico.gov.uk/what_we_cover/data_protection/notification.aspx>

It is also advisable to check whether any publication, college or course provider you are submitting photographs to have their own guidelines governing the use of photographs of children.

If you sometimes take video footage of the children you care for, it is advisable to create and use a separate permission form for this.

Whilst every effort has been taken to ensure that the information provided is accurate and up to date, PACEY will not be held responsible for any loss, damage or inconvenience caused as a result of any inaccuracy, error or omission. To access the most up to date information on home-based childcare please visit the Ofsted website at www.ofsted.gov.uk.

**Parental** **permission form for childminders to seek emergency medical assistance or treatment.**

In the event of an emergency, I will try to contact the child’s parents first and then any other emergency contacts. If I cannot reach anyone and the child requires assistance or treatment, I will seek help.

Always let me know if your number changes.

I/we agree permission form for (insert name here ------) to seek emergency medical assistance or treatment.

|  |  |
| --- | --- |
| Child’s name  |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |

**Routine outings with the childminder permission**

I/we agree for the child named below to go on routine outings with the childminder named below.

|  |  |
| --- | --- |
| Child’s name  |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |

Non-routine visits will be discussed and agreed separately.

**Pre-arranged alternative care permission**

I/we agree for the child named below to be cared for by another registered childminder in a one-off situation for a maximum of one day, on the following date [insert date].

I/we understand this is not for an emergency situation but for occasions when the contracted childminder has an appointment (for example, at the hospital or dentist), or a family commitment.

I/we agree that we will pay for childminding under the terms of the contracted childminder’s existing contract with me/us and that I/we will pay for the additional sub-contracted childminding cost at the price of £ [insert fee] per hour.

|  |  |
| --- | --- |
| Child’s name |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |

**Sun protection cream application permission**

I/we agree for sun protection cream to be applied to the below-named child by the childminder named below.

|  |  |
| --- | --- |
| Child’s name |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |

**Observation permission**

I/we understand that ongoing observations will be undertaken of the child named below, to follow and assess their development. These may be in the form of written statements, photographs/videos, or tape recordings.

|  |  |
| --- | --- |
| Child’s name |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |

**Outdoor play equipment permission**

I/we agree for the child named below to use play equipment in gardens, parks, or playgrounds while in the care of the childminder named below.

|  |  |
| --- | --- |
| Child’s name |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |

**Transporting in a vehicle permission**

I/we agree for the child named below to be transported in a vehicle with the childminder named below.

|  |  |
| --- | --- |
| Child’s name |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |

**Photo permission**

I/we give permission for the childminder named below, or a person nominated by the childminder, to take photos (including those taken on a mobile phone or similar device) of the above-named child for the reasons I/we have indicated below:

□ to record the child(ren)’s daily routine

□ to record the child(ren)’s development

□ to share with the child(ren)’s parents

□ the childminder’s own album, coursework, promotional literature, website

□ other reasons specified by the childminder in the box below.

\*Any photos stored electronically will be stored securely and deleted when the child is no longer in the childminder’s care.

Please see my safeguarding policy regarding the use of mobile phones and other devices with imaging or sharing capabilities.

You may wish to use this form for any other purposes that arise.

**Parental Permission Form**

|  |  |
| --- | --- |
| Child’s name |  |
| Childminder’s name |  |
| Childminder’s signature |  |
| Date |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |
| Parent(s)’ name |  |
| Parent(s)’ signature |  |
| Date  |  |