

Parent/Provider Health & Safety Agreement

SSPS#	Today's Date	Would parent(s) like to be present for technical assistance visit? ☐ Yes ☐ No
Provider Name		Provider Signature:
Parent Name(s)		Parent Signature(s):

This agreement is intended to be a guide for discussion between parent(s) and provider. Spend time discussing the items in this document. The intent is to support the care provided to the children. Read through and identify possible hazards or safety precautions in the home. Please sign above that you have reviewed all items on this checklist.

Topic	Discussed
Supervision	
Healthy Interactions to Support Development	
Recognizing and Reporting Child Abuse and Neglect	
Safe Sleep	
Shaken Baby Syndrome-Abusive Head Trauma	
Prevention and Control of Infectious Diseases, Allergies, and Medications	
Indoor Safety	
Chemicals, Medications, and Poisons	
Outdoor Safety	
Transportation	
Emergency Preparedness	

Supervision - means the provider must be able to see or hear the children at all times.	
Expectation	Why is this important?
Supervision is the most important factor in keeping a child safe from injury.	 On average 120,000 children suffer permanent damage due to accidental injuries every year. A safety scan is a visual process of scanning the surroundings. A safety scan is used to identify items that can cause harm.
Children are always within line of sight or hearing inside or outside the home.	 Accidental injuries can consist of head injuries, long-term breathing damage, disfiguring burns, poisoning, downing, and other injuries.
Parent: Does your child have a favorite hiding place? If so, whe	ere is it?

Parent: Does your child have a favorite hiding place? If so, where is it? **Provider:** Share what your expectations are on supervising children.

Healthy Interactions to Support Development	
Expectation	Why is this important?
Providers must be aware and responsive to child's developmental, linguistic, cultural, and academic needs.	 Children learn through play and exploration, interacting with the world around them. They observe, listen, touch, taste and smell.
Communicating or interacting with child/children should be done using a climate of healthy, culturally responsive, and respectful language.	 Environments that are safe, organized, inviting and engaging allow children to take initiative and learn about themselves and the world around them.
Using positive interaction techniques with children encourages healthy social development.	 Nurturing relationships help children become secure, confident, curious, and able to learn new things and communicate about them. Children learn through relationships with family, providers, teachers, and community members.
Parent: How is your child currently redirected? What types of activities do you do with your child to encourage their development?	
Provider: Share information from the training regarding appropriate discipline.	

Recognizing and Reporting Child Abuse and Neglect	
Expectation	Why is this important?
Providers are mandated reporters; if child abuse is suspected it has to be reported.	A mandated reporter is a person who is legally required by Washington State Law to report any suspected cases of child abuse and neglect.
Making a report means a request for help when there is suspicion and does not necessarily mean a proven fact.	 Mandated reporters play a critical role in preventing any future harm to children. Reporting begins a process that can help parents learn to care for and protect their own children.
Parent: What type of discipline do you use? Are there any cultural considerations that you would like to share with the provider?	
Provider: Share information from the training regarding what it means to be a mandated reporter.	

Safe Sleep Is there an infant (0-12 months) that will be cared for? If no, move to the next section. If yes, please complete before moving to the next section.	
There should not be any blankets, toys, stuffed animals or pillows in the crib or bassinette when an infant is sleeping.	 Each year in the USA, thousands of babies die unexpectedly or suddenly. By removing extra items from the crib it reduces the risk of Sudden Infant Death Syndrome (SIDS).
Infants should be placed on their back when sleeping.	 Research also shows that babies who sleep on their backs are less likely to get fevers, stuffy noses, and ear infections. The back sleep position makes it easier for babies to look around the room and to move their arms and legs.
Always follow safe sleep practices with infants to reduce the risk of infants being injured or possibly dying.	American Academy Pediatrics standards specify when an infant is in a crib:
Link: Safe Sleep & Other Safety Tips Parent: Share the method you currently use to help your child for	all asleep.
Shaken Baby Syndrome-Abusive Head Trauma	
Expectation	Why is this important?
There is never a time that is appropriate to shake a baby or child.	 Even though the shaking may last only a few seconds, it can result in severe injury or death. This is caused by a larger person violently shaking a baby or by blunt impact to a baby's head. Even though the shaking may last only a few seconds, it can result in severe injury or death. This is caused by a larger person violently shaking a baby or by blunt impact to a baby's head.
Have a plan if a child is inconsolable and you feel frustration or are overwhelmed as the provider. Call parents if needed.	Shaking a child may cause internal injuries to the brain that leave no visible signs.
Parent: What are some triggers that cause your child to feel over	rwhelmed? How do you calm your child?

Provider: What are triggers that cause you to feel overwhelmed? What is your plan when you are stressed?

Expectation	Why is this important?
Hand washing procedures include the use of warm water, soap, rubbing hands for 20 seconds and dry.	 Many diseases and conditions are spread by <u>not</u> washing hands with soap and running warm water for an appropriate amount of time. Hand sanitizer does not replace regular handwashing.
Hand washing is done: • When coming in from the outdoors • Before meals and after meals • After handling animals; • After touching bodily fluids • After using the toilet; • When caring for a sick child • When treating open wounds	Regular handwashing, particularly before and after certain activities is one of the best ways to remove germs, avoid getting sick, and prevent germs from spreading.
The provider should receive training from the parent when special medical procedures are required for a child.	 Accurate measuring of medications should be done by using measuring tools such as a syringe or measuring spoons. Using everyday silverware does not guarantee accurate measurement of medication.
The parent must give written permission to administer medication. Prescription medications should have the child's name on the packaging.	 Documenting minimizes errors that can result in harm to a child. Such as, giving the wrong dose, forgetting to administer the medication or an accidental second dose. Helpful hint: document the times, dose(s), dates and possible side effects of the medication given.
All medications must be stored where they are not accessible to child/children.	 Young children explore the world by putting things in their mouths, poisoning is a serious risk. Accidents can happen very quickly. Always store in a safe place away from the reach of the children.
Proof of immunizations are required if the provider's own child is present.	Being immunized protects children, community, and families from diseases.
Every effort should be made to store, cook, and prepare food at proper temperatures without cross contamination to avoid food poisoning.	 Food poisoning is commonly caused by foods that are outdated. Always read labels. Call the toll-free Poison Center (1-800-222-1222) if a child shows symptoms of food poisoning. To reduce the risk of cross contamination, use different cutting boards for meat and other foods.
Document any known food allergies. Be aware of signs of allergic reaction to food.	Allergies to foods can trigger serious problems that require medical attention. Call 911 immediately if you think a child is having an allergic reaction.

Indoor Safety Scan – Building and Physical Premises Safety	
Why is this important?	
 A child's skin is thin and will suffer second to third degree burns in as little as 10 seconds at 130° F water, or 4 seconds at 135° F, or 1 second at 140° F. 	
Children can be seriously injured by appliances pulled down on themselves, a head injury may occur, or they can be electrocuted by putting the appliance in water.	
A power outage may happen. In an emergency a working phone could be the quickest way to get help.	
 40% of residential fire related deaths among children are caused by children playing with fire. Change smoke detector batteries when resetting clocks in the Spring and Fall. About two-thirds of home fire deaths occur in homes with no smoke alarms or non-working smoke alarms. 	

Chemicals, Medications, and Poisons	
Expectations	Why is this important?
Hazardous materials and bio contaminants should be inaccessible to children at all times. (Examples, household cleaners, makeup products, vehicle maintenance supplies, sharp objects, outdoor yard equipment).	 Poisoning in childhood is frequently due to household cleaning products, medicines, vitamin supplements, or cosmetics. Toddlers and preschoolers may be attracted to medicines and vitamins because they resemble candy. Cleaning products may look like sweet beverages; and cosmetics may smell like fruit or candy.
Other household items that should be out of reach for children are: tobacco and cannabis products, firearms, and alcohol.	 50% of all unintentional child shooting deaths occur in the child's home. Nearly 40% occur in the home of a relative or friend. If a weapon is in the home, it should be unloaded, locked up and out of the reach of children. Tobacco and cannabis products should be kept out of reach of the children.
Parent: Share if there are any firearms in the home. If so, where are they stored? Where are chemicals stored?	

Outdoor Safety Scan	
Expectations	Why is this important?
Children should only be allowed to play on equipment that is in good condition and have adequate ground cover.	 According to the Center of Disease Control (CDC) annually in the United States, emergency departments treat more than 200,000 children ages 14 and younger for playground-related injuries.
Children should not be allowed to come into contact with poisonous plants.	 Toxic plants can be a hazard to children and pets. It is advisable to keep toxic plants out of the reach of those who might crush, eat, or taste them; it is not always possible to prevent accidental encounters.
Children should be supervised when high risk hazards are present. High risk hazards include swimming pools, spas, hot tubs, ponds, trampolines, uncovered wells, septic tanks, and farm manure.	 Drowning can happen in moments. Young children have been known to drown in less than two inches of water. Fencing is recommended as a barrier to keep children from these hazards.
Keep children indoors when temperatures are below 20 degrees or over 100 degrees.	 Cold temperatures can cause hypothermia and in some situations frost bite. Hot temperatures can cause dehydration and heat stroke.
Active supervision is especially important when the children are near streets and parking lots.	 Do not assume children understand the dangers near streets and parking lots. Yearly, thousands of children are seriously injured or die because a driver simply didn't see them while backing up.
Parent: Are there any high risk hazards near the home? If so where are they located?	

Transportation	
Expectations	Why is this important?
Washington State Law (RCW 46.61.687) requires a child less than eight years of age or less than four feet nine inches tall be restrained in appropriate booster or car seat when in a motor vehicle.	Children are much safer when proper restraint is used when transported in a motor vehicle.
Never leave children unattended in a vehicle.	 Leaving a child unattended is very dangerous. Statistics show cool temperatures in the 60s can rise to 110 degrees inside a vehicle. Strangulation or getting limbs or fingers caught in the power windows are common injuries related to unattended children in vehicles.
Anyone transporting child/children must have a valid driver's license, current auto insurance policy, and not used alcohol or drugs prior to driving. Medical conditions should also be considered.	Even small amounts of alcohol, medications, or drugs can have a measureable effect on a person's ability to drive.
Washington State Law prohibits the use of handheld cell phones while driving. These distractions can result in fatalities.	 Washington Traffic Safety Commission reported drivers being distracted was a leading cause of accidents. One in four crashes involves individuals using a cell phone.

Provider: Discuss how children will be supervised when high risk hazards are present.

Parent: Share your expectations regarding transporting of your child/children. If transporting children is allowed, are there special instructions on installing the car seat or booster seat?

Emergency Preparedness

Expectations	Why is this important?
Make a list of contacts: doctors, dentist, poison control, fire station, police, local hospital, power and water company, parent work numbers, and other emergency contact person.	 You may need to access this information quickly. This list is an essential part of your emergency preparedness plan. If you need to leave the home, this list would have all the essential phone numbers you need.
 Things to include in an emergency preparedness plan: Map of escape route How to account for the children A meeting place Name and location of local shelter Place for lockdown in the home How to contact the parents 	 Having an evacuation plan will take the guesswork out of the situation. Walk through the home and choose two exits from each room and plan an outside meeting place that everyone knows about.
Practice emergency/ disaster preparedness plan.	Plan, prepare, and practice makes everyone safer and teaches you and the children how to react correctly and automatically in an emergency.
A first-aid kit should be available and include these items: Non-latex gloves Bandages of various sizes Small scissors Tweezers, and elastic wrap bandage Sterile gauze Ice pack Thermometer with disposable sleeves Triangle bandage Adhesive tape First- aid manual Hand sanitizer for adult use Working flashlight	 Looking for these items individually can take more time then intended. Being prepared allows you to offer comfort and support to child/children while taking care of their needs quickly.

Link: The Emergency Preparedness for Child Care Professionals is available for use to document contact information listed above.

Parent: Where is the first aid kit stored?

Parent and Provider: Develop the emergency preparedness plan together.