



jaccjersey@gmail.com

J.A.C.C.

Jersey Association of Child Carers



www.jacc.org.je

Parent and Registered Childminder Agreement

One copy should be kept by the parent and one copy by the registered childminder. This agreement only remains valid whilst the registered childminder complies with the Requirements of Registration. For more information please visit www.gov.je, click on *Caring and Support* and then follow the links to *Child Care*

When signed this agreement is binding by both parties.

This agreement is to be completed together **before** entering into any childcare arrangements.

THIS SECTION SETS OUT THE INFORMATION YOU WILL NEED ABOUT ME, YOUR REGISTERED CHILDMINDER

My name:
My address:.....
My telephone number:.....My mobile number:.....
My email address:.....
I am registered with Childcare & Early Years Service (CEYS). I am registered to care for: **6** children between the ages of **BIRTH – 12 YEARS** Registration number:..... Which is valid from:..... to:.....
As per the Requirements of Registration, I have public liability insurance with:.....
Which is valid from:..... And expires on:.....
Everyone over the age of 16 years living at the registered premises has had a DBS check (Disclosure and Barring Service)

THIS SECTION SETS OUT INFORMATION THAT I NEED ABOUT YOU AND YOUR CHILD

Parent/Guardian 1 name:.....
Address:.....
..... Postcode:.....
Telephone number(s):Home:.....Work:.....Mobile:.....
Email address:.....
Relationship to child:.....
Do you have parental responsibility for this child? Yes/no* delete as applicable If no, please give details:.....
.....

Parent/Guardian 2 name:.....
Address(if different from above):.....
..... Postcode:.....
Telephone number(s):Home:.....Work:.....Mobile:.....
Email address:.....
Relationship to child:.....
Do you have parental responsibility for this child? Yes/no* delete as applicable If no, please give details:.....
.....

Child's FULL name:.....

Child's date of birth:.....

The address where your child lives if different from your address:.....

.....

.....Postcode:.....

Name, address and contact number of anyone who may collect your child other than you:.....

.....

.....

.....

.....

Emergency contacts: if I am unable to contact you in an emergency situation

1st contact: Name:.....Relationship to child:.....

Telephone number(s):.....

2nd contact: Name:.....Relationship to child:.....

Telephone number(s):.....

3rd contact: Name:.....Relationship to child:.....

Telephone number(s):.....

The name of your child's GP:.....

GP's telephone number:.....GP's address:.....

.....

.....Postcode:.....

Name of your child's health visitor:.....

Immunisations/vaccinations – has your child had the following? Please tick:

(This information can be found in your child's red health book)

It is a Requirement of Registration for every registered childminder to have this information

2 months of age:

Diphtheria, tetanus, pertussis(whooping cough), polio, Hib disease

Pneumococcol infection

Rotavirus

Meningitus B

3 months of age:

Diphtheria, tetanus, pertussis(whooping cough), polio, Hib disease

Rotavirus

4 months of age:

Diphtheria, tetanus, pertussis(whooping cough), polio, Hib disease

Pneumococcol infection

Meningitus B

12 months of age (but not before first birthday):

Measles/ mumps/ rubella (1st dose)

Meningitis B

13 months of age:

Pneumococcol infection

Hib disease and Meningitis C

2, 3 & 4 year olds: annually in October/November

Flu (for your convenience, the nasal vaccine is offered via your child's nursery)

3 years, 4 months (or soon after):

Diphtheria, tetanus, pertussis(whooping cough), polio (booster)

Measles/ mumps/ rubella (2nd dose)

Does your child have any: allergies Yes/ no*
 delete as applicable special dietary requirements Yes/ no
 medical requirements Yes/ no*
 developmental issues Yes/ no*

If you have answered yes to any of the above, please provide details below:

.....

Does your child have any ongoing medical condition that would require me to be trained to administer medication/ treatment? Yes/ No* Delete as applicable

If yes, please provide details below:

.....

THIS SECTION SHOWS THE DAYS AND TIMES YOU WISH ME TO LOOK AFTER YOUR CHILD

	<u>YEAR ROUND</u>		<u>TERM TIME</u>		<u>WRAP AROUND</u>		<u>SCHOOL HOLIDAYS</u>	
	From	To	From	To	From	To	From	To
MONDAY								
TUESDAY								
WEDNESDAY								
THURSDAY								
FRIDAY								

Total weekly hours:.....

If the daily times vary from week to week, you agree to provide me with a weekly schedule of the times for each day that you wish me to look after your child. This schedule must be provided at least.....days in advance and be for a minimum of.....and a maximum of.....hours per week.

Parents to provide: *delete as applicable

Breakfast	yes/no*	Lunch	yes/no*	Dinner	yes/no*	Snacks	yes/no*
		Nappies	yes/no*	Bottles	yes/no*		
		Wipes	yes/no*	Sun hat	yes/no*		
		Nappy sacks	yes/no*	Sun cream	yes/no*		
		Change of clothes	yes/no*	Comforter	yes/no*		
		Other	yes/no*				

You must tell me as soon as possible of any changes in information you have given me about your child

THIS SECTION SETS OUT WHEN THE AGREEMENT IS TO START, CHARGES THAT WILL BE MADE FOR LOOKING AFTER YOUR CHILD AND WHEN PAYMENTS WILL BE DUE

This agreement is to commence from:.....(Date of signing)

Agreed date that I start to care for your child.....

Any settling in visits prior to the start date will/will not* incur any additional charge.

Fees:

Deposit

A deposit equivalent to one week's fees is payable when agreement is reached to care for your child. This fee is regarded as **the first week's payment**. The deposit is **non-returnable** if the agreement is cancelled by you prior to the agreed start date. In the event that I cancel the agreement, this deposit is to be returned to you **immediately**.

Retaining fee

Should there be a delay between agreement to care for your child and the starting date or where the registered childminder is asked to keep an existing place open eg. Mother's maternity leave, a retaining fee of £.....per week is payable. This retainer should only be charged if the registered childminder has a current vacancy. (Half fee is suggested)

If you have paid a retainer fee to keep a place for your child, this is a **non-refundable payment** regardless of whether you take up the place.

Standard charges

Hourly rate:.....

Weekly rate:.....

Monthly rate:.....

Meals (please tick all that apply)

- | | | | | |
|--------------------------|-------------------------------------|-----------------|---------------------------------|--------|
| <input type="checkbox"/> | Breakfast | @ £.....per day | Daily total charge for meals: | £..... |
| <input type="checkbox"/> | Morning snack | @ £.....per day | | |
| <input type="checkbox"/> | Lunch | @ £.....per day | Weekly total charge for meals: | £..... |
| <input type="checkbox"/> | Afternoon snack | @ £.....per day | | |
| <input type="checkbox"/> | Evening tea | @ £.....per day | Monthly total charge for meals: | £..... |
| <input type="checkbox"/> | Daily charge inclusive of all meals | @ £.....per day | | |

Payment of Fees

The first payment, as detailed below, to be made on:.....

Amount £.....

Less deposit £.....

Plus meals £.....

Total payable £.....

Subsequent payments, as detailed below, to be made on or before.....
and thereafter daily/ weekly/ monthly* in advance/ in arrears*

Daily/ weekly/ monthly* £..... *delete as applicable

Plus meals £.....

Total payable £.....

Please note if I am unable to open for business, any fees will be adjusted accordingly.

Name of person responsible for payment.....

I accept cheque* made payable to....., cash* or standing order* paid into the following

account.....number.....sort code.....

*delete as applicable

I will provide you with a certificate of payment for child care tax relief purposes on an annual basis. For more information about this please go to www.gov.ie, click on Individual's tax information and then Childcare tax relief. The fees will be reviewed at least annually and one month's notice will be given **in writing** of any increase.

Holidays

The Association recommends, for the benefit of both parties, that I have a minimum of **20 days paid holiday a year**, pro rata. However, additional holidays, paid or unpaid, may be negotiated between us. **If a parent takes holidays when the registered childminder is open for business, the registered childminder still gets paid.** In the event that the agreement to care for your child ends before the end of the year, then any holidays will be pro-rataed and any days owing to the registered childminder will be paid by the parent and any days owing to the parent will be refunded by the registered childminder.

Agreed paid holidays.....days per year

Agreed unpaid holidays.....days per year

If I have given you a minimum of six months notice of my intended holidays, I will not be liable for any additional childcare costs incurred. However if less than 6 months notice of holidays has been given and you need to pay for alternative childcare then the registered childminder cannot expect to be paid

Additional Charges

Late Collection:

If you are late collecting your child, I reserve the right to make an additional charge of £.....for each extra 15 minutes (or part thereof) that I have to look after your child

Late Payment:

I would be grateful if you could ensure that you are prompt in paying your fees. If I have not received payment within seven days of the due date, I will issue you with a polite reminder. If I have still not received payment by the 10th day following the original due date I reserve the right to make an additional charge 'Late Payment Fee' to cover any bank charges I may have incurred. If at this point I still have not received payment I reserve the right to cease minding your child with immediate effect and seek legal advice for recovery of any monies due to me. If you have had a change in personal circumstances and are struggling to make payments, please let me know so we can make suitable arrangements.

Extra Hours:

If you ask that your child be looked after in addition to the times set out in this agreement, the amount payable will be £.....for each additional hour

Unsociable hours:

Before 8am or after 6pm the amount payable will be £.....per hour. (Time and a half is suggested)

Overnight stays:

I may/may not*, on occasion, agree to care for your child overnight depending on the circumstances. Charges for this are to be agreed in advance.

*delete as applicable

Statutory public holidays:

The association recommends that I receive full pay on public holidays, **on condition that these are normal agreed hours/days**. However, if I agree to work on statutory public holidays, the additional charge will be £.....per hour. It is suggested that the fee be a minimum of time and a half. These are the bank holidays in Jersey (taken from www.gov.je) - New Year's Day, Good Friday, Easter Monday, May Day bank holiday, Liberation Day, Spring bank holiday, Summer bank holiday, Christmas Day, Boxing Day. If a bank holiday is on a weekend, a 'substitute' weekday becomes a bank holiday, normally the following Monday.

(Tick box as appropriate)

- I will work on these days, my charge will be £.....per hour/ day
- I may make myself available to work on these days, my charge will be £.....per hour/ day
- I will not be available to work on these days

THIS SECTION DETAILS THE TERMS AND CONDITIONS OF THIS AGREEMENT

Notice/ Termination of Agreement

At least one month's notice is required to be given **in writing** by either party, or money in lieu (unless there are exceptional circumstances). Exceptional circumstances can include, but are not exclusive to, non-compliance of Requirements of Registration and irretrievable breakdown of parent/minder relationship. In these circumstances the agreement may be terminated with immediate effect. Longer notice and good communication re future plans is always appreciated.

The above terms of notice will not apply in the first 4 weeks once the care arrangement has begun, as these are considered a trial period for both myself, you and your child alike. **Where the caring arrangement is ended in these circumstances, any money paid in advance for days when the child will no longer be cared for, should be refunded.** If this agreement relates to term time only or school holiday care then any notice period should take place during the usual agreed working times. For example, if the agreed minding times are term time only then the notice period must take place during the term time and not the school holidays when the registered childminder would not normally be engaged. If this is not possible then payment in lieu of notice should be made.

Sickness

You **must** inform me **before leaving home** if your child has been unwell so that the care arrangement can be discussed. I may have other children in my care which will affect whether I am able to care for your child or not.

Your child **must** be well enough to get through a normal day with me.

If your child has an infectious illness (eg. chicken pox, impetigo, etc) you must ensure that it has cleared up **before the child returns**. Please refer to my individual policies on exclusion through illness and infection.

In the case of vomiting and/or diarrhoea your child must have been clear of all symptoms for **48 hours** before returning to my care. This is in accordance with Health Guidelines and Policies.

If your child becomes ill whilst in my care, I expect you to collect them within an hour of contacting you.

If your child is not well enough to be in my care but I am open for business, I will expect to be paid. However, if I or one of my family are ill and I am unable to care for your child, I will not expect to be paid.

Medication

If your child has been given **any** medication prior to arriving in my care, whether prescribed by the doctor or not, you **must inform** me in case your child develops any side effects.

You must tell me if your child requires medicine prescribed by a doctor. If you require me to administer **prescribed medication** to your child whilst in my care, I will need your written permission for each dose required.

I will keep a written record of all medication given to your child that will include the date and time that the medication/ treatment was administered and the quantity given. You will be required to check and sign this record. This is in line with my Requirements of Registration.

I am not allowed to give a child in my care anything other than prescribed medication. This includes paracetamol, ibuprofen, cough mixtures, etc. I do not have to agree to give any medicine or similar treatment to your child.

Accidents

I will contact you as soon as possible or, if you are not available, I will contact one of the pre-agreed persons detailed in the Emergency Contacts list.

I will keep a written record of any accident including full details of how it happened. You will be asked to sign this record. I am required to inform Childcare & Early Years Service (CEYS) if your child needs to attend the A and E Department as a result of an accident while in my care. This is in line with my Requirements of Registration. You must tell me of any accidents or injuries your child suffers when he/she is not being looked after by me. I may need to record this and you will be asked to sign this record.

Please detail below any other information relating to the care of your child.....
.....
.....
.....
.....

Conditions:

I have read the conditions set out in this agreement, understand them and agree to abide by them.

Parent’s/Guardian’s signature:.....Date:.....

Registered childminder’s signature:.....Date:.....

This agreement is subject to review every 6 to 12 months. Date of next review.....

Useful Information:

Help and Support

If parents or registered childminder have any concerns with this agreement or anything that may arise from it, confidential advice and support can be obtained by contacting the Jersey Association of Child Carers (JACC) on: **07700808707** or by email: jaccjersey@gmail.com

Data Protection:

You agree that information I hold on your child may be disclosed to other parties, such as health professionals, Child care & Early Years Service, educational professionals and local authorities, if required. As a data controller, I will comply with the Data Protection (Jersey) Law 20018. You agree for me to discuss your child’s development with other childcare professionals and key persons involved with your child, when necessary.

Parent’s/Guardian’s signature:..... Date:.....

Freedom of Information:

Registered childminders are required by law to retain information on your children for a period up to 25 years. For more information the Retention Schedule can be accessed on the JACC website – www.jacc.org.je on the News and Info page

Registration certificate:

I have seen my registered childminder’s current registration certificate

Parent’s/Guardian’s signature:..... Date:.....

Policies & Risk Assessment:

I am in receipt of my registered childminder’s written policies and am aware that my registered childminder has a risk assessment

Parent’s/Guardian’s signature:..... Date:.....

Permission to seek urgent medical treatment:

I give permission for my child.....to receive urgent medical treatment if my registered childminder is unable to contact me.

Parent’s/Guardian’s signature:.....Date:.....

Permission to take your child on outings:

I give permission for my registered childminder to take my child on outings. Such outings may be on foot, in a car or on public transport. Facilities outside of the registered childminder’s home may also be used.

Parent’s/Guardian’s signature:..... Date:.....

Permission to transport your child:

I give permission for my registered childminder to transport my child in/on any suitable vehicle ie. the registered childminder’s car, public transport. Age and height appropriate restraints will be used for safety, wherever available. The registered childminder’s car insurance must include cover for *business use as a registered childminder*.

Parent’s/Guardian’s signature:..... Date:.....

Permission to apply sun cream:

I give permission for my registered childminder to apply sun cream to my child.

Parent’s/Guardian’s signature:..... Date:.....

Recording Observations:

I agree that my registered childminder may record observations of my child by any paper records and/or electronic means eg. Tapestry

Parent’s/Guardian’s signature:..... Date:.....

I agree to the Tapestry administrator viewing my child’s profile for the purpose of analyzing data

Parent’s/Guardian’s signature:..... Date:.....

Photographs/Video:

The registered childminder may sometimes wish to take photographs/videos of your child for the following reasons:

- to record activities, events or daily routine
- to record your child’s development
- for my registered childminder’s own album

I give permission for my registered childminder to take photographs/videos of my child whilst in their care.

Parent's/Guardian's signature:..... Date:.....

Any photographs/video taken will not be shared with anyone other than the parent(s) named in this agreement unless otherwise agreed. Some photos shared between the registered childminder and the parents may include photos of other children in the registered childminder's care. I give permission for my registered childminder to share photographs of my child with other parents of children in her care, for their own personal viewing.

Parent's/Guardian's signature:..... Date:.....

I agree that any photos shared with me that include the other children in my registered childminder's care are for my personal viewing only and are not to be shared or forwarded without the express permission of the parents of those children.

Parent's/Guardian's signature:..... Date:.....

Facebook page/s:

I do/do not* have an open/closed* Facebook page.

If my Facebook page is a closed group, only parents of other children in my care will be able to view the photos/videos.

If my Facebook page is an open group, photos/videos posted can be viewed publicly.

I give permission for my registered childminder to post photographs/videos of my child on their Facebook page.

Parent's/Guardian's signature:..... Date:.....

Permission for back-up childcare:

I give permission for my registered childminder to make alternative childcare back-up arrangements in the case of an emergency eg. Illness, accident, etc.

Parent's/Guardian's signature:..... Date:.....