

PROGRAM PARTICIPATION

The Family Resource Unit provides services to parents, expectant parents and primary caregivers who would like additional support to raise happy, healthy children. The program offers free home visits and group sessions.

Our goals include:

- building your understanding of your child's development;
- strengthening your positive parenting techniques; and
- encouraging you to give your baby the most valuable gift of all a confident, informed and supported caregiver

| Client information | | | |
|--------------------|------------|------------|--------------------------|
| Parent #1 | | | |
| Last name | | First name | |
| Mailing address | | | |
| Phone # | | Email | |
| Parent #2 | | | |
| Last name | | First name | |
| Mailing address | | | |
| Phone # | | Email | |
| Child | | | |
| Last name | First name | | Date of birth YYYY/MM/DD |

Providing feedback

The Family Resource Unit is always trying to improve our services to parents and children. Periodically, we may ask your opinion of how we are doing and what would be helpful to you.

If you have a concern or complaint about the services you are receiving, please contact the program manager at 867-667-3745. They will make every effort to address your concerns.

Information for families receiving home visiting

- Every effort will be made to encourage both parents of the child to participate in Family Resource Unit programs.
- If your family dynamics change while you're receiving services, we will offer services to both parents.
- The Family Resource Unit will aim to provide the same worker to both parents whenever possible.
- In cases where parents or caregivers do not live in the same home, to maintain confidentiality, the information you share with your Family Resource Unit worker, will be kept separate.
- Information will only be shared if there is consent from both parents.

Family Resource Unit records are confidential.

Service providers and all community members are required by law to report danger to children. If we have reason to believe any child is in danger, in any way, we will report our concern to Child Protection Services.

To ensure the safety of Family Resource Unit workers, full names and addresses of families who participate in evening and weekend home visits are routinely submitted to the on-call service located at Family and Children's Services.

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| Consent for services | | | |
|--|--------------|--|--|
| My/our signature/s below indicate that I/we have given consent to receive Family Resource Unit services. I/we understand that this is a voluntary program and that I/we can withdraw and have the right to refuse services at any time. I/we have the right to referral, as appropriate to other service providers, the right to participate in the planning of services to be provided and the right to individualized Family Goal plans. | | | |
| Signature | Signature | | |
| Relationship | Relationship | | |
| Date | Date | | |
| Signature of witness | Date | | |