Principles

P.1.1—Above all, we shall not harm children. We shall not participate in practices that are emotionally damaging, physically harmful, disrespectful, degrading, dangerous, exploitative, or intimidating to children. This principle has precedence over all others in this Code.

P.1.2—We shall care for and educate children in positive emotional and social environments that are cognitively stimulating and that support each child’s culture, language, ethnicity, and family structure.

P.1.3—We shall not participate in practices that discriminate against children by denying benefits, giving special advantages, or excluding them from programs or activities on the basis of their sex, race, national origin, immigration status, preferred home language, religious beliefs, medical condition, disability, or the marital status/family structure, sexual orientation, or religious beliefs or other affiliations of their families. (Aspects of this principle do not apply in programs that have a lawful mandate to provide services to a particular population of children.)

P.1.4—We shall use two-way communications to involve all those with relevant knowledge (including families and staff) in decisions concerning a child, as appropriate, ensuring confidentiality of sensitive information. (See also P.2.4.)

P.1.5—We shall use appropriate assessment systems, which include multiple sources of information, to provide information on children’s learning and development.

P.1.6—We shall strive to ensure that decisions such as those related to enrollment, retention, or assignment to special education services, will be based on multiple sources of information and will never be based on a single assessment, such as a test score or a single observation.

P.1.7—We shall strive to build individual relationships with each child; make individualized adaptations in teaching strategies, learning environments, and curricula; and consult with the family so that each child benefits from the program. If after such efforts have been exhausted, the current placement does not meet a child’s needs, or the child is seriously jeopardizing the ability of other children to benefit from the program, we shall collaborate with the child’s family and appropriate specialists to determine the additional services needed and/or the placement option(s) most likely to ensure the child’s success. (Aspects of this principle may not apply in programs that have a lawful mandate to provide services to a particular population of children.)

P.1.8—We shall be familiar with the risk factors for and symptoms of child abuse and neglect, including physical, sexual, verbal, and emotional abuse and physical, emotional, educational, and medical neglect. We shall know and follow state laws and community procedures that protect children against abuse and neglect.

P.1.9—When we have reasonable cause to suspect child abuse or neglect, we shall report it to the appropriate community agency and follow up to ensure that appropriate action has been taken. When appropriate, parents or guardians will be informed that the referral will be or has been made.

P.1.10—When another person tells us of his or her suspicion that a child is being abused or neglected, we shall assist that person in taking appropriate action in order to protect the child.

P.1.11—When we become aware of a practice or situation that endangers the health, safety, or well-being of children, we have an ethical responsibility to protect children or inform parents and/or others who can.

Section II

Ethical Responsibilities to Families

Families* are of primary importance in children’s development. Because the family and the early childhood practitioner have a common interest in the child’s well-being, we acknowledge a primary responsibility to bring about communication, cooperation, and collaboration between the home and early childhood program in ways that enhance the child’s development.

Ideals

I.2.1—To be familiar with the knowledge base related to working effectively with families and to stay informed through continuing education and training.

I.2.2—To develop relationships of mutual trust and create partnerships with the families we serve.

I.2.3—To welcome all family members and encourage them to participate in the program, including involvement in shared decision making.

* The term family may include those adults, Besides parents, with the responsibility of being involved in educating, nurturing, and advocating for the child.