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Communicating with Families: Communicating with Families of Infants .G2005

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Families have many issues when it comes to child care and what's best for their child. Learning to communicate effectively with the families of infants in child care benefits the provider, the family and the child.

Families have many adjustments to make as they transition to parenthood. Parenting is a lonely endeavor sometimes. Often families rely more on outside child care, and with that comes the need, particularly for families of infants, to keep the communication lines open between themselves and their child care providers. A variety of techniques can be used to help families and child care providers communicate effectively.

Families of infants naturally are very anxious for their child and often express concerns about what may seem to the provider to be trivial issues, such as schedules and food. The demands actually reflect a deeper concern: that their child be safe, loved and attached to them, the family.

One danger in a child care setting is that a child care provider’s strong attachment to individual infants may interfere with his or her relationship with the child’s family. It is easy for the care provider to feel “I am better for this child than her family” or even “I care more than the family.” These are difficult feelings with which to deal. Still, child care providers must never forget that the relationship between family and child is crucial to the child’s welfare and development. A child care provider has a child for a very brief time compared with the family, who has the child forever. Also, the child has a life beyond child care; that’s a fact that infant child care providers must keep in mind.

Many families bringing their infants into child care settings are under some stress. For example, the mother who would prefer to stay home with her child but cannot or who has mixed feelings about whether to work or stay home will feel more relaxed as she becomes assured her child is in a good, safe place. Therefore, the provider should become not only her child’s friend but also her friend who cares about her as a person. Families who do not feel the caregiver is competing with them will not be afraid that their children will love the child care provider more than them. They will be more effective and better families because of their supportive child care arrangements.

Infants change so dramatically during the first three years. They go from actively observing the world around them as newborns to actively interacting in it as toddlers. This is a dramatic, rapid process. Families, particularly first-time families, need opportunities to understand and support this rapid developmental growth.

Because infants develop so quickly, share it as it happens. Families of infants benefit from seeing and sharing the little changes that indicate growth, not just the easily observable milestones like the child pulling itself up to stand or starting to walk. Informal written and verbal communication can fill this role.

### Formal Conferences

Anecdotal notes can record any observations of children’s behavior and learning. These notes can document, for example, observations of what happened, when it happened, where it happened, and with whom it happened, and are usually written down for later review. These notes can be beneficial when communicating with families. Sharing this developmental information with the family regularly creates a wonderful dialogue between families and child care providers. It engages families and child care providers in thinking about the learning process.

Try using an inexpensive spiral-bound notebook for each infant. Begin by writing down one anecdotal note a week for each child, then send the notebook home and ask the family to write one anecdotal note about what happens at home. This back-and-forth sharing of observations — not opinions and judgments — develops skills. Also by taking and sharing anecdotal notes, providers learn how to really observe an infant’s behavior, while families learn to also become good observers of the child’s developmental growth at home. They are then encouraged to share this information with their child care providers and health care professionals.
Something else beneficial happens. Families get a glimpse of what child care providers do all day besides diaper, feed, and hold infants. Informal written communication reinforces that observation is a crucial part of the child care provider’s role. It communicates that child care providers are important sources of information about the child’s development, and it provides a great opportunity for providers to share resources with families. What is shared with families is as important as what isn’t shared. Make sure to communicate with families about your philosophies related to learning and brain development and how activities are incorporated into the daily schedule to enhance the infant’s social, emotional, physical, and cognitive development. Because families only observe what is happening during drop-off and pick-up, it is important to share information on activities such as reading stories and other moderate stimulation, just as you share the feeding schedule.

Consider scheduling formal oral conferences at the end of the first full week of care, one month later, and at least quarterly thereafter. In addition, these conferences might be helpful anytime something is going to change, like staffing or scheduling. Although this seems like a lot of conferences, they can take place fairly simply by telephone or through e-mail, thus avoiding the scheduling problems of face-to-face conferences.

Frequent formal conferences confirm the need for open communication. Structure the topics that need discussion so similar topics are covered each time. Make a list of questions to ask each time. (For example: What are your observations about your child’s experience at child care? Has anything changed in your family?) Keep notes from each conversation and compare them to see any trends, continued concerns, or even complications that require help.

Informal Conferences

The foundation of communication with families is the daily exchanges that take place between family members and child care providers during arrival and departure from the child care setting. Don’t overlook the importance of these interactions. Families get to view their infant’s experience from these verbal exchanges. The number and accuracy of these conversations can build confidence or concern.

Confidence builds if the child care provider shows a connection with the infant. Concern builds if the provider isn’t a reliable reporter of the child’s experiences or can’t share information with families when asked.

Written communication, such as pattern sheets, help the child care provider easily communicate the activities of the day to the families. Completing the report sheet as the activities take place makes it easy to communicate exactly what has taken place during the day for the child. Report sheets take the burden off the provider’s memory and allows all family members — not just the one picking up the infant — to be involved.

To increase communication from home to the child care provider, ask families to complete a home report form, noting what has happened overnight. This information will help providers give the best care possible and can be used as guides to develop a format that will work best for the provider and families. Give families several home report forms to complete before leaving home so they won’t feel rushed or stressed to complete them as they’re dropping off the infant. Examples of report forms are provided at the end of this publication.

Child care providers and families must invest in building a relationship together. The outcome of the investment is families’ parenting skills grow as their infant matures and develops. The benefit for the child care providers is that their observation and communication skills improve, and they are better able to care for the infant or child in their care.

Resources


Nebraska’s Early Childhood Training Center, Nebraska Department of Education: http://ectc.nde.ne.gov.

This publication has been peer reviewed.

UNL Extension publications are available online at http://extension.unl.edu/publications.
Daily Family Information

Child’s Name_____________________________________ Date____________________ Arrival Time________________

Last evening the child had the following foods:
___________________________________________________________________________________________________
___________________________________________________________________________________________________
___________________________________________________________________________________________________

How long did she/he sleep last night? __________________________

What time did she/he get up this morning? __________________________

Did she/he sleep well? _____________ If not, what seemed to be the problem (i.e., diarrhea, fever, etc.)?
___________________________________________________________________________________________________
___________________________________________________________________________________________________

Did she/he have a bowel movement this morning? ______________________

Did your baby have breakfast this morning? _____________ If so, what time, what, and how much did she/he eat?
___________________________________________________________________________________________________
___________________________________________________________________________________________________

What liquids or solids did you bring today? ______________________

Medications to be given — medication, amount and time __________________________

Is there any other information that will help us take better care of your baby today? ______________________
___________________________________________________________________________________________________
___________________________________________________________________________________________________

Daily Report on Infants for Families

Child’s Name_____________________________________ Date____________________ Provider______________________

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<th>FOOD</th>
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### Diaper Change

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### Medication

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**Stimulation/Activities** (ex: reading, music):

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

**Provider’s Comments:**

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________