Baby TALK’s Mission
Baby TALK’s Mission is to positively impact child development and nurture healthy parent-child relationships during the critical early years.

Systems Building
“Casting a net over the Community” - creating a community plan for the joining of services into a seamless system of care.

Building Relationships
Baby TALK’s “Trustworthy System of Relationships” - every level of BT’s work is based on relationships.

Going Where Families Are
BT’s approach is to identify where families are already receiving services and build collaborations to be able to take services to those locations.

Facing Difficult Issues
Real leadership entails being willing to have hard conversations with parents, colleagues, and collaborators.

Parallel Process
At every level of relationship, the same processes occur and the same strategies work.

“Tell me about your baby”
Establishes parent as expert and our openness/willingness to go where they need the conversation to go.

Becoming Ever Better
Continuing growth as professionals.

Coming Alongside
We want to join parents in the task of raising children - partnership, not advice-giving.

Collaboration
Working together with parents, colleagues, and other community agencies - toward common goals.
the Baby TALK model

Build a system.
Identify others interested in serving young families in your community. Learn about their goals and services, and discover opportunities to assist each other in meeting goals for families. Establish a system of communication for ongoing support of families.

Screen every family.
Cast a net over your targeted population in order to identify who is raising children. Use Baby TALK’s Encounter Protocol to learn about families’ risk factors. This may include outreach to hospitals, WIC, clinics or other community locations where families may be found.

Identify the need.
Use this screening to identify which families are most at-risk, which ones are already being case managed by other agencies, and which ones have needs which can be addressed either through your resources or other community resources. Make referrals or connections immediately to establish trust with parents.

Deliver appropriate services.
Families most at-risk may enter a system of case management with purposeful, frequent personal encounters. These may be delivered through home visit as well as other points within the system of care.

Families with fewer risk factors may be served by group encounters through the community’s resources, with ongoing efforts to re-examine the development of risk factors over time.
Protocol Template

Every encounter will include:

– Preparation
– Assessment of situation
– Affiliation
– Observation
– Developmental Behaviors
– Exploration of System of Support
– BT information and system of care
– Reflection
Preparation

“It is crucial to have the courage to meet every family without preconceptions or prepared programs, to come open-minded and ready to listen not knowing in advance what form our intervention may take.”

Donna Karl, NBAS Manual, 1995

Prepare with an open mind.
Recognize what I bring to the interaction.

Gather materials: Baby TALK Developmental Perspectives curriculum for fifteen months, balls, pretend toys (cup, spoon, dish, doll, bottle, blanket), push toy, board books, simple puzzles, music and collaborator information.
Have additional information ready to meet the specific needs of an individual family.

Assessment

Note the environment and activity level within the community-based encounter setting.
If encounter is at home, assess the environment and availability of other people in the child’s life.
Assess availability of family.

Affiliation

“The most important non-verbal listening strategy is to pause for at least 3 seconds before speaking after asking a question; it will seem like a very long time, but many studies show that, even for people who have something to say, they may need at least 2 ½ seconds to find it or phrase it.”


Use OPERA listening:
Open-ended questions
Pause
make Eye-contact
Repeat
Avoid judgment, Ask opinion, Advise last

Use affiliation strategies such as the following involving both Mom and Dad as much as possible:

“Tell me about your toddler.”
What is your greatest success this month?
What is your greatest challenge this month?
What has changed in your toddler’s typical day?

Play
How has your toddler’s new motor skills changed the way she likes to play?
What part of the house does your baby like to explore repeatedly? How have you made it safe?
How does your toddler use his hands in play? With toys? Mealtime? Bathtime?

Dependence/Independence
How does your toddler show dependence on you? Clingy? Separation Fear/Anxiety?
In what ways does your toddler want to be independent? Mealtime? Dressing? Walking?
What are you thinking about toilet training? Feeling Pressure? Getting advice?

Limit Setting
How is your toddler responding to limits you have set?
How do you respond when she tells you “no” or shakes her head “no”?
How do you handle temper tantrums?
Observation
Simply look at the toddler with the parents for 10-30 seconds.
“Let’s just watch your toddler and see how she is playing with her toys.”
Do the parents seem receptive to your conversation? If not, why do you think not?
If other adults are present what role do they play? Support vs. “Gatekeeping?”

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<thead>
<tr>
<th>Observe parent-child relationship:</th>
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<tbody>
<tr>
<td>How much language is the parent using with the toddler? Turn taking? Repeat words? Naming objects?</td>
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<tr>
<td>What non-verbal expressions of warmth do you see the parent demonstrate?</td>
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<tr>
<td>How much eye contact does parent/child make with each other?</td>
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<table>
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<tr>
<th>Observe the toddler:</th>
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<tr>
<td>What non-verbal expressions of warmth do you see the toddler demonstrate toward parent?</td>
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<tr>
<td>What is the toddler’s quality of mood in the midst of learning new skills?</td>
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<tr>
<th>Observe parent-child relationship with siblings:</th>
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<tr>
<td>How does the parent show warmth and affection toward siblings?</td>
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<tr>
<td>How does the parent support interactions between siblings?</td>
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Developmental Behaviors
Elicit or notice expected behaviors using Baby TALK Developmental Perspectives curriculum for fifteen months.
Elicit or note expected behaviors and the meaning parents are making of the behaviors: independence, temper tantrums, walking, preference to foods/toys, understanding words or testing limits?
What is today’s critical issue?
When a child demonstrates atypical behavior what are ways I can support the parents?

System of Support
Note who parent “brings into the room” with her during conversations.
Listen for evidence of the support system.
Observe who comes to the encounter with the family or who else is in the home.
If the toddler is in a childcare situation on a regular basis, note parent’s interactions and feelings about the caregiver.
What community resources has she used, or might she use?

Baby TALK and System of Care
How can Baby TALK support you? How can I support you?
Introduce Baby TALK services appropriate for this family.
Offer appropriate Baby TALK materials.
Make referrals as needed.
Provide advocacy as needed.

Reflection-On-Action
How do I feel about this encounter?
How did I connect with the family?
What did I learn about the parent/child relationship?
Did I facilitate the parent/child relationship, or did I just interact with the toddler while the parent watched?
Did I hear or understand a concern from the family that I can follow-up on?
What do I need to document about this family today in order to prepare for the next encounter?
How might I change my approach for the next encounter to “become ever better?”

Documentation
Complete Baby TALK Personal Encounter documentation form.
What sort of record do I need to make to capture this encounter?
What do I need to do to provide follow-up for this family?
How/where will this family encounter Baby TALK in the future?