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ABSTRACT

Material related to routine as well as sensitive aspects of parent/day care center relationships is presented in this training module, one of a series providing staff development information for programs operated for dependents of military personnel. The module offers a brief discussion of ways caregivers can help parents feel at ease about leaving their children in child care and presents a set of multiple-choice skill-building exercises for effectively working with parents. Exercises focus on various topics, including how parents can be approached when their child may have a health problem, when child abuse or neglect is suspected, and when parental cooperation is needed to stop a child's undesirable or disruptive behavior. Exercises are also devoted to the questions of whether or not caregivers should act as advisors to parents or tell parents about their child's behavior at the center. Concluding exercises indicate how caregivers can handle parent requests for privileges or disciplinary methods which are against center policy, what to do when a parent consistently does things that are against center policy, and how to handle an angry parent's complaints. All exercises present problematic situations caregivers may encounter, list alternate responses caregivers may make, and provide feedback on caregiver choices. (RH)

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The "Caring" Role In A Child Care Center

Staff Development Series

Military Child Care Project

Part II Relating To Parents

April 1982

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RESERVE AFFAIRS
AND LOGISTICS

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FOREWORD

This series of manuals for Child Care Givers on DoD Installations is issued under the authority of DoD Instruction 6060.1, "Training Manuals for Child Care Givers on DoD Installations," January 19, 1981. Its purpose is to provide child care givers with training materials that include the latest techniques and procedures for the safe care and guiding development of children entrusted to their care.

This series of manuals, DoD 6060.1-M-1 through DoD 6060.1-M-17, was developed under the auspices of the Department of Health and Human Services by the Department of Army, in cooperation with the Navy, Air Force, and Marine Corps.

The provisions of this series of manuals apply to the Office of the Secretary of Defense, the Military Departments, and the Defense Agencies (hereafter referred to as DoD Components) whose heads shall ensure that the manuals are distributed or otherwise made available to all child care givers on DoD installations and that these materials are used in regional and inter-Service workshops, seminars, and training sessions.

This series of manuals is effective immediately.

Send recommended changes to the manuals through channels to:

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DoD Components may obtain copies of this series of manuals through their own publications channels. Other federal agencies and the public may obtain copies from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402.

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**Staff Development
Series**

**Military
Child Care
Project**

Ft. Lewis, Washington

Part II
Relating To Parents

PART II
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INTRODUCTION

WELCOME to the first in a series of staff development modules written for the "caregiver" or "teacher" in a military child care center. We think the hints and ideas provided in these modules will help you on your job. This module, The Caring Role in a Child Care Center, will tell you what role you will play in providing the best possible care for children and in cooperating with their parents. You now are reading Part II of the module, Relating To Parents.

Let us introduce you to a new kind of experience, learning through self-paced instruction. This means you will be able to work on your own, by yourself, and at your own pace. In each section a small amount of discussion about important ideas will be provided, followed by some real situations that take place in child care centers. These situations have really happened and come from the experiences of our own caregivers who tell us that new caregivers are very likely to find these situations hard to handle. In other words, the experiences you will find in this module and the other modules are very much like the ones you will run into on your job.

Although the situations you are about to read do not in any way cover ALL problems that you may have in a child care center, the more common or frustrating problems you may face are presented.

This module is designed to help you learn to make decisions relating to real problems. The situations have been selected from actual experiences of caregivers in our child care center.

We want to stress that the solutions we present are not the only possible answers to the situations. There are possibly as many "right" answers as there are caregivers. Hopefully, the situations and solutions we present will not only increase your knowledge of your caring role in a child care center but also will stimulate your thinking about yourself, decisions which you will make in your job, and the possible outcomes of your actions.

HOW CAN YOU
MAKE PARENTS FEEL AT EASE
ABOUT LEAVING THEIR CHILDREN
IN CHILD CARE?

BE SENSITIVE TO
PARENTS' FEELINGS

Recognize The
Strains On
Families

Being a parent has never been easy. In many ways, it is harder today than it ever has been. There are so many things that must be done; daily living is so expensive that it is almost necessary for both a husband and wife to work outside of the home; and in many single-parent households, a parent may work full time and be responsible for keeping house and providing full physical and emotional support for the children.

Although parents try to be independent, and handle everything that needs to be done, they never can be totally independent. They need others—perhaps someone to talk to, or someone to watch the baby while they run to the store, or someone to care for the child while they work. In countless ways, every day, parents have always needed the help of other people.

What are some ways that the military family can get extra support that is always needed by parents?

The child care center on a military installation can provide a necessary and important service to military families.

Let Parents Know
You're In
Their Corner

Many parents have heaved a sigh of relief when they learn there is a child care center on the installation which can help provide relief from the 24-hour-a-day care that children require. It should be remembered, however, that every parent is different. Although parents may be delighted to have care for their child available, they may also have other feelings:
uncertainty about leaving their child

will they take good care of her?

jealous or afraid

*will she learn to love you, the caregiver,
more than she does us?*

guilty

should we really put her in the center?

uncomfortable or threatened

*does this staff know more about our child
than we do?*

cautious

*are we "on display" and being "judged" by how
our child acts in the center?*

angry

why did you let her do that?

Understand that parents may have these mixed feelings. Just as there are no firm rules on how to be a "good caregiver," there are likewise none for how to be a "good parent." Remember that parents generally want to do what they think is best for their child.

Sometimes, they simply need someone else to talk to who also is interested in their child - you. It is not unusual for you to feel unsure of yourself in this situation, because your time usually is spent talking with children. But, listen to them. You can do much to put them at ease by hearing them out and talking about what an important job they have as parents.

Understand The
Special Importance
Of Child Care
To Families Of
Children With
Special Needs

As parents are finding ways to cope with problems of disabled or handicapped children in their homes rather than in institutions, child care centers are finding ways to integrate these children into their regular programs.

A conservative estimate is that one in every ten families has a child with a significant disability. Any child can try a parent's patience, causing the parents to seek time away from the child. Special children, through their physical, emotional or mental limitations and needs, place an unusual demand on their parents. They are, however, deserving of their share of the love, discipline and attention.

Due to physical or mental limitations, there are some places where disabled children may not be able to accompany a parent. This makes it necessary to find a caregiver - perhaps even more often than a parent would for the average child.

Parents need child care not only for duties and business, but for their relaxation and mental health. It is essential to have some time to rejuvenate if parents are to fill such a large responsibility. When the parent feels confident about the child care center's ability to care for the child, the center staff rightly can feel they have rendered a real human service for both the special child and the parent.

Parents never expect to have a handicapped child, and when they do, their reactions vary according

to their individual makeup. However, certain reactions are common. There are periods of shock, bewilderment and disbelief. Parents also usually have periods of anger; grief, worry, guilt and denial. Some families go through these feelings, then fairly quickly come to grips with the situation and take steps to deal with it and learn ways of handling it. In fact, some people are better equipped somehow, from the beginning, to handle and provide care for their handicapped child. Others have a longer, harder struggle. This, of course, is not providing an optimum atmosphere for the progress of their child.

Parents may simply spend too much time directly with the child - locking themselves away, overprotecting the child and believing they are the only ones capable of providing adequate care. Sometimes the time spent away, while the child is at the child care center, can be as therapeutic for the child as for the parent, and the entire situation can help these families lead more comfortable and more normal lives.

Encourage Parents
To
Get Involved

Parents are important. They are the most important people in a child's life. For this reason, it is important that you and others on the staff draw parents into the life of the center and make them feel welcome.

Remember that even the busiest parents are interested in, and want good care for, their children. They are our best resources and have valuable information and suggestions to offer. "Listen" to what they say. If you want to find out about a child, ask his parents. Remember, they've been caring for him much longer than you have.

Parents often are willing to help the center or your room in some way if they know what to do and feel needed. Although not all parents wish to become involved in the same way, most are willing to help if they can.

Have respect for their ideas and share information about their child. This is necessary for the child's development.

Become friends with the parents. Even quick, informal contacts parents have with you when they bring or pick up their children are important meetings. The parents' impression of

the whole center may be based on those few precious moments. And, they need to "feel good" - in just those few moments - about leaving their child in the center. If you have established a friendship with the parents and if they "feel good" about you and the center, any problems that might come up can be handled more easily.

BUILDING YOUR SKILLS
IN
WORKING WITH PARENTS

. . . Some Often Asked
Questions
And
Situations To Explore

HOW DO YOU
APPROACH PARENTS
WHEN A HEALTH PROBLEM
IS SUSPECTED?

In a child care center, children should be screened as carefully as possible for fevers, colds and other health problems. If a child's eyes look dull, he is flushed or you notice excessive coughing, center policy will dictate whether or not the child can be accepted in the center. Vision and hearing problems often do not become apparent until the child has been in the center for awhile. Your suspicions about a health problem should be brought to the attention of the director so that she also has an opportunity to observe the child. Vision, hearing or other potentially serious problems should be brought to the parents' attention by the director, because they may not have noticed the problem in the home.

WHAT WOULD YOU
DO IF . . .

Suzy, who is usually a bright, alert four-year-old, comes in with her mother and you notice mucous in her nose and her cheeks seem flushed. You are concerned that Suzy has a cold and fever. What would you say to the mother?

- A. "Suzy doesn't look as if she feels well. Has she been sick?"
- B. "I'm afraid you will not be able to leave Suzy here, because I can see she has a fever and cold."
- C. "I'm concerned that Suzy is not feeling well. Please take her to the office, and they will take her temperature. I would hate for you to leave her and then have to be called right back."

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Johnny seems inattentive at story time and has difficulty following directions. You find yourself repeating directions to him quite often. Johnny has to be looking directly at you in order to hear what you say, and you suspect a hearing problem. How would you approach his parents with this problem?

- A. When parents pick Johnny up, you describe Johnny's behavior and tell the parents to have Johnny's ears checked.
- B. You discuss the problem with the center director, and he also observes Johnny's behavior. Talk to the parents and ask if they have noticed similar behavior at home. Tell parents you are concerned that Johnny may not be hearing you and suggest that the parents check with a doctor.
- C. Tell Johnny to tell his parents he has trouble hearing. When his parents come in to get him, remind Johnny of what he is to tell his parents.

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Choice A may put you on the spot if the mother answers that Suzy is fine. You will then either have to allow the mother to leave a sick child or you will have to tell the mother you disagree with her. Neither is a good choice.

Choice B has you playing the role of doctor and making a decision which may very well antagonize the parent. In most child care centers, the caregiver is not the one who makes those kinds of decisions.

Choice C is the best one because you have stated your concern, made a reasonable request of the mother and given a good reason for that request. You have shown concern for Suzy and the mother.

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Choice A is not the best answer since you have not informed the director of the problem. It is always best to have two opinions before talking to parents about a potential problem.

Choice B is the best answer because you have involved the director in the decision and have asked the parents whether they have noticed similar behavior at home. By involving the parents and the director as well as yourself in the problem, you are more likely to get help for Johnny.

Choice C puts the responsibility on the child, who does not understand the situation, and is the least likely way to get help for the child.

HOW DO YOU
APPROACH A PARENT
WHEN YOU SUSPECT A CHILD
IS BEING ABUSED OR NEGLECTED?

One of the hardest things for caregivers to deal with is the fact that a child in their care is being abused or neglected. Sometimes the abuse or neglect is deliberate and sometimes it happens because of a lack of parenting skills. In either case, the caregiver must ask the director for help in approaching the parent and must try to build a good relationship with the parent and the child. Before deciding that a child is abused, be sure you have all the facts about how the injuries have occurred so that you don't jump to false conclusions. When you suspect the child is neglected, write down the reasons for your suspicions (child wears old clothes, child is dirty, child has constant running nose, etc.). When you have compiled the list, take it to the director and discuss it with her. When you suspect abuse, be sure the director is aware of all the facts and let the director make the final decision.

WHAT WOULD YOU
DO IF . . .

An infant, six months old, comes to the center on a daily basis, and when the caregiver changes his diapers she notices he has a very bad diaper rash. This continues for several days and the child is very fussy and seems to be in pain. As the caregiver, what should you do?

- A. Tell the parent you have noticed the diaper rash and suggest she put ointment on it to clear it up.
- B. Bring some ointment from home and put it on the baby. Suggest the parent use the same ointment so the rash will clear up.
- C. Ask the parent if the child has had frequent diaper rashes and suggest she mention the problem to the doctor at the next visit (if the child is to be seen by a doctor in the near future). If the child is not scheduled for a checkup in the near future, suggest the parent take the child to the doctor. Ask the parent what she has found helpful and explain that you have been changing the baby frequently at the center so the urine does not cause further damage.

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David, who is a four-year-old, comes in as usual on Monday but seems sad and withdrawn. You discover welts on his back which look like he has been spanked with a belt. He tells you he was a bad boy on Sunday and daddy whipped him. As a caregiver, what would you do?

- A. Ask the director to look at David's back and if he feels that the child has been beaten, the director will talk with the parent before David leaves the center.
- B. When the parent comes to the center, tell her what David has said and suggest that using a belt to spank him is not a good idea.
- C. Tell the parent you noticed the welts on David's back and ask her how it happened. If the parent does not have a good answer, tell her the director wants to speak with her.

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Choice A - Diagnosing the cause of the rash could cause problems as the baby could be allergic to a food which is causing the rash. The child could also be having a physical problem of which you and the parent are unaware. The ointment could make the rash worse, not better.

Choice B - It is never a good idea to use any medication on a child without a doctor's approval. In addition, most center policies would not allow you to do this.

Choice C is best. Making the parent aware you are concerned about the rash and what you are doing at the center perhaps will help her take more care in changing at home. If the child is being changed frequently at home also, the parent should be told that a doctor may need to see the child and prescribe treatment. In this choice, you are not passing judgment on the parent - just suggesting ways to help solve the problem.

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Choice A is the best answer because as a caregiver, you are not expected to take any action other than reporting suspected child abuse to the director. The director is the person who should talk with the parent and any others he feels should be notified.

Choice B is not a wise choice because a parent who beats a child either is unaware that using a belt is child abuse or perhaps is unable to control his or her emotions. As the caregiver, you should not discuss suspected abuse with the parent.

Choice C really puts the parent on the defensive and makes your job and the director's more difficult.

HOW DO YOU APPROACH PARENTS
WHEN COOPERATION IS NEEDED
TO STOP UNDESIRABLE OR
DISRUPTIVE BEHAVIOR?

Involving the parents in helping a child develop good behavior patterns at the center can be most valuable. If the child is showing undesirable and/or disruptive behavior at the center, you will need to come up with a plan for changing that behavior. The child care staff who comes in contact with the child during the day must all be using the same tactics in getting rid of the poor behavior. Parents can and should be involved in working out the plan and helping implement it in the home. When all people coming in contact with the child, parents and caregivers, agree on a plan of action in dealing with the disruptive behavior, the behavior often disappears quite rapidly.

Approach the parents with your concerns about the child's behavior and ask them if they have noticed the same things at home. If the answer is yes, then the next step is to agree on a plan to stop the undesirable behavior. Parents and caregivers need to keep in touch so that if the first plan doesn't work, an alternative can be developed. Be sure the parents understand that you are concerned about the child (not angry with the child) and that you do not blame the parents for the undesirable behavior.

WHAT WOULD YOU
DO IF . . .

Ellen hits or kicks the other children to get her own way. She is three years old and an only child. She seems unable to wait for a turn to do anything and will hit or kick the other children to be first. The children are beginning to stay away from Ellen, and they refuse to play with her. As a caregiver, how can you help Ellen develop social group skills?

- A. When the parents come to get Ellen, ask if you may speak to them. Explain you are concerned about Ellen's relationship with the other children. Ask the parents if Ellen has children her own age to play with. If the parents say "Yes," inquire about Ellen's relationship with these children. If the answer is "No," this will tell you part of the problem. Try to work out with the parents one or two goals for Ellen to work on.
- B. Tell the parents when they come to get Ellen that she has been a real problem and that you would appreciate the parents working on the situation at home while you work on it at the center. Explain what the problem is.
- C. Keep detailed notes for one full day on Ellen's behavior. When the parents come to get Ellen, show them the notes. After the parents read the notes, ask if they have noticed the behavior at home and try to work out a plan with the parents so you are both dealing with it in a similar way.

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Kurt, at four, seems to withdraw from playing with the other children and wants to cling to you all of the time. He has been coming to the center for a month, and you are becoming concerned about his insecurity. He needs constant reassurance that he is doing all right. What would you do?

- A. Ask the parent if something has happened at home because you are concerned that Kurt is a very insecure child.
- B. Describe Kurt's behavior to the parent and ask if she has noticed this at home and if she can think of some way to help Kurt feel more comfortable and sure of himself.
- C. When the parent comes in to get Kurt, tell her that Kurt seems to be unhappy in the room and ask if he has mentioned anything at home that disturbs him about the center. Emphasize that you want to help Kurt to be happier and feel more comfortable at the center.

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Choice A is best because it approaches the parents in a very non-threatening way and involves the parents in working with you, the caregiver, in helping Ellen. With this approach, communication between parents and center can be kept open and Ellen will benefit the most.

Choice B labels the child as a problem and immediately puts the parents on the defensive. You have not tried to get the parents to work with you but have indicated only that the parents work on it at home. You have left the explanation of the problem to the very end.

Choice C is not the best answer because parents will become very defensive on reading notes about their child's behavior. This alternative will make it much more difficult to work out a common plan of action and to keep lines of communication open. Keeping notes on Ellen's behavior should be done after you have established some goals with the parents and are working on them.

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Choice A seems to place blame on the parent or home and labels the child. This choice could make a parent very defensive.

Choice B is more acceptable but also places the burden of the solution on the parent, rather than indicating you want to work with the parent.

Choice C is best because it gives the parent a chance to tell you anything that has been said at home and also opens up the discussion to finding ways to help Kurt. By not labeling Kurt and by not placing the source of the problem on the home, you will be more able to work with the parent in helping Kurt both at home and at the center.

SHOULD YOU GIVE ADVICE
TO PARENTS
WHEN THEY ASK FOR IT?

Often caregivers are asked by parents for advice on how to handle a problem they are having with the child. It is very easy to slip into the role of advisor when perhaps you shouldn't. Parents do not always give you all the facts to begin with, and you need to have more information in order to advise them. Knowing when to advise the parents, when to seek more information, and when to refer the parents to the director, a doctor, a social worker, etc. takes a great deal of skill and knowledge. Most times it is best to say, "I can see that you are concerned about this. May I get back to you after I have thought about it for awhile?" Then check with your director or supervisor who may have more knowledge about the family and will be better able to advise the parents or refer the parents to a professional for help. When in doubt, do not advise!

WHAT WOULD YOU
DO IF . . .

Five-year-old Brad's father tells you that he and Brad's mother are separating and asks you for the best way to tell Brad and help him adjust.

- A. Tell Brad's father that you also are interested in helping Brad adjust but that you would like to have some time to think about ways of telling Brad and helping him adjust. Ask him to check with you the next morning. Inform your director of what has happened, and ask her advice on the matter.
- B. Tell Brad's father that you feel he and his wife should both talk with Brad and then be sure to give him lots of love and attention.
- C. Tell Brad's father to talk with the director because she can help him find the answers to his questions.

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John's mother tells you that she and his father are concerned because John is not talking, and he is three years old. You have only seen John three times at the center. What should you tell the parent?

- A. Tell John's mother that you will observe John and that probably he is just a little slow in talking. Reassure her that many children are slow to talk, particularly boys.
- B. Tell the mother that often a doctor can examine the child and tell if the child needs help and that the doctor can then refer John to someone, if necessary.
- C. Tell the mother that you agree that John should be talking now and that she had better get help for him soon. Say that you will work with him at the center on talking.

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Choice A, the best, shows sympathy to the father's situation and lets him know you are willing to try and help. The director then is made aware of the situation and can inform you of her recommendations and the agencies on the installation which may help Brad's father find some answers when he comes the next day.

Choice B has you, the caregiver, giving advice which you are not qualified to do and perhaps keeps Brad's father from seeking professional help which could answer other questions that come up concerning the situation.

Choice C does refer the problem to someone more qualified, but perhaps Brad's father does not know the director and is uncomfortable speaking to her about the problem. This could keep the father from seeking any help at all.

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Choice A reassures the mother and may keep her from getting needed help for John. You should not diagnose problems.

Choice B steers the mother in the direction to get help for John and also reassures her that help, if needed, is available.

Choice C may cause the mother even more concern while she is waiting for a doctor's appointment. Also, until you know what the problem is, you cannot help John with his speech.

SHOULD YOU TELL PARENTS
ABOUT THEIR CHILD'S BEHAVIOR
AT THE CENTER?

Most of the time when parents ask you how their child's day has gone at the center, you can easily explain what activities have gone on, what their child has had for lunch and how the child has behaved during the day. However, sometimes there have been problems during the day and a caregiver is not sure whether to tell the parents or not. A good thing to remember is that if the behavior is making the child's day go unhappily, or if it is an ongoing, every-day behavior that is of concern to you, then you probably should discuss it with the parents. Remember, parents are defensive about their children and often look on criticism of their child as a criticism of them as parents. Be positive and understanding. If the behavior that concerns you only happens once or twice, then often it can be solved by the caregiver and does not need to be discussed with the parents. Also, if you are concerned that the parents may react harshly to the child, then discuss the problem with your director first. Remember always that you are the child's friend and must act and react with that in mind.

WHAT WOULD YOU
DO IF . . .

Nancy, who is five years old, comes to the center on a daily basis, and her mother wants her to nap every day. Nancy, however, is very restless and disturbs the children around her. She rarely sleeps and seems to cope the rest of the afternoon just fine. This leads you, the caregiver, to believe that Nancy really doesn't need a nap. When Nancy's mother comes in she asks, "Did Nancy take a nap today?"

- A. Ask: "Does Nancy take a nap at home and, if so, how long a nap does she take?"
(Most times you will find that Nancy either takes no nap at home or only a short rest of a half hour or so). Explain to the mother that Nancy seems restless and unhappy at nap time, and you feel that perhaps it would be better for Nancy to play with a quiet game or look at books in a quiet corner of the room rather than lying on a cot. Ask if you may try this for a few days and see how things go for the rest of the day and at home. Ask Nancy's mother to let you know if it seems to affect Nancy at home if she takes no nap at the center.
- B. Tell the mother that Nancy did not take a nap and that you do not feel she needs a nap as her day goes better at the center when she doesn't nap. Explain that when Nancy is forced to take a nap she is restless, disturbs the other children and you have to speak to her frequently which upsets her.
- C. Tell the parent that Nancy did not take a nap but that you will try and make her take a nap the next day. Explain that since Nancy is five years old, she may not need a nap.

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Rudy is an active three-year-old who has trouble sharing toys and often is aggressive. You have been working with him and see some improvement. But you still feel that it will take much time and effort on your part to help Rudy learn to share and vent his angry feelings in an acceptable way. You know that at home Rudy is spanked often, and his parents have very high, rigid standards of behavior. When the mother comes to get Rudy, you are asked, "Well, did he behave himself today?" What do you as the caregiver reply?

- A. "Rudy hit and kicked several children today, but I'm sure he will have a better day tomorrow."
- B. "I am working with Rudy on not hitting and he was a little better today. I'm sure in time he will learn to use words--not fists to express his angry feelings."
- C. "Rudy is trying hard to share toys, and I see him improving every day. You must be proud of him. I am also trying to have Rudy tell people when he is angry and to not hit. Often hitting just causes the child to hit Rudy back, and I think he is beginning to learn this."

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Choice A helps you understand Nancy's naptime at home. You are also explaining Nancy's behavior at naptime in a positive way and giving an acceptable alternative to naptime. In addition, you are giving the parent a chance to report back any side effects that not taking a nap at the center may cause at home.

Choice B does not give any alternative to napping and reports in a negative way Nancy's behavior during naptime. The parent may go away feeling frustrated with no solution in mind.

Choice C gives the parent no solution to the problem. Also, keep in mind that it is impossible to force a child to sleep.

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Choice A will probably cause the mother to lecture Rudy all the way home and perhaps even spank him.

Choice B is more positive but to a mother with rigid, high standards, being "a little better" is not good enough, and Rudy will probably have a tough time ahead of him at home.

Choice C is best because it emphasizes positive behavior on Rudy's part and will probably leave the mother feeling "OK" about Rudy's behavior. It may even open the door to further communication between you and the mother.

HOW DO YOU
HANDLE PARENT REQUESTS FOR
PRIVILEGES OR
DISCIPLINE METHODS
WHICH ARE AGAINST CENTER POLICY?

Many times parents don't read the center's parent handbooks or information papers and therefore request that you, as a caregiver, do things that are against center policy. In this case, you can explain that their request is against center policy and refer them to the parent handbook. However, there are times when parents know their request is against center policy, but they ask you to make an exception in their case. This is much more difficult to handle tactfully. However, remember that when and if you do make an exception, you will have to justify it to other parents, your director and perhaps other staff members. It is best to have the decision on exceptions made by the center director. In most cases, re-stating the center policy and explaining the reasons behind the policy to the parent will take care of the situation. If not, refer the parent to your supervisor or director. Be sure you are familiar with center policies.

WHAT WOULD YOU
DO IF . . .

Parents bring their two-and-a-half-year-old son and four-year-old daughter to the center and ask that both children be allowed to stay in the four-year-old room. They tell you the two-and-a-half-year-old is very dependent on his four-year-old sister and will cry if separated from her. How do you, as the caregiver, handle this?

- A. You decide that since it is both children's first day at the center, you will allow them to stay together as long as things "go well." You tell the parents this.
- B. You tell the parents the children must be with their own age group unless they have special permission from the director.
- C. Explain the center's policy on this to the parents and assure them that usually children adjust quite quickly and are happier with their own age group doing activities planned for that age. Specifically, suggest if the parents are concerned, they call back in an hour or so to check on the children.

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Jimmy is 18 months old, and his mother requests that he be moved to the two-year-old room. She feels that Jimmy is very advanced and is bored with the "babies" in his present room. You feel that Jimmy is a typical 18-month-old child and center policies are quite definite as to the age level for each room. What do you say to the mother?

- A. Tell the mother you feel Jimmy is a bright, loveable child who is very well adjusted. Explain the center's policy on the age levels assigned to each room. Tell the mother that Jimmy seems to enjoy the activities in his present room, and invite her to observe the room for a few minutes through the window in the door (or in a way that Jimmy is not aware that she's observing).
- B. Explain that Jimmy must stay in his present room until he is two, and tell her you feel he is an average 18-month-old child.
- C. Tell the mother any changes in room assignment must be made by the director.

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Choice A puts you on the spot because the parents will expect the exception to be made every time the children come to the center. Also, it is highly likely that other parents will find out and request the same exception.

Choice B really "passes the buck" to the director, who does not have time to talk with every parent who wants an exception made for their child. You, as the caregiver, have a responsibility to explain center policy to the parents.

Choice C is best because you explain center policy to the parents and give the reasons for that policy. You also encourage the parents to reassure themselves by calling in an hour or so to check on the children.

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Choice A is the best answer because you are reacting positively to Jimmy while explaining the center policy. You are also giving the mother the opportunity to see how he does in the room - unobserved by Jimmy. This all tends to reassure the mother.

Choice B questions the mother's judgment of Jimmy's ability and does not explain center policy or assure the mother of your good feelings about Jimmy.

Choice C passes the decision to the director who is busy, and this choice gives the mother no explanation of center policy. It also does not assure the mother of your good feelings toward Jimmy and his welfare.

WHAT WOULD YOU DO
WHEN A PARENT CONSISTENTLY
DOES THINGS THAT ARE
AGAINST CENTER POLICY?

Most parents are very likely to abide by center policies when they know what they are. However, there are times when parents will totally ignore center policy even when it is obvious they know what the policy is. In these cases, after you have reminded the parents two—or at most three—times of the policy, then refer them to the center director who has the authority to take further action.

WHAT WOULD YOU
DO IF . . .

Mike's parents know that the center closes at 1:00 a.m. on Saturday nights, but they are always 15 to 30 minutes late picking him up. You have made allowances for flat tires, car breakdowns, etc., but you are beginning to doubt that they are really trying to pick Mike up on time. When they come in 30 minutes late, for the fourth time in a row, what do you, the caregiver, say to them?

- A. "This is the fourth time this month you have been late picking up Mike, and I am going to speak to the director about this."
- B. "I realize you are sorry you are late, but it is very hard on me to have to stay over my hours. Before you bring Mike back to the center, you will have to speak to the director."
- C. "Good evening Mr. and Mrs. Johnson, Mike is sleeping. Come with me and I'll show you where he is."

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A mother brings eight-month-old Sam to the center and tells the caregiver the baby has loose bowels and has been spitting up. The mother says she must go to the commissary but will be back in two hours, although she knows the center cannot accept sick children. What do you as a caregiver do?

- A. Explain to the mother it is against center policy to accept sick children.
- B. Tell the mother if it is only going to be for two hours it is all right.
- C. Tell the mother that Sam must be checked by the director before you can accept him.

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Choice A has you, the caregiver, being hostile to parents and threatening them. This is not your job.

Choice B has you, the caregiver, complaining to the parents. Telling them to see the director before they bring Mike back is overstepping your bounds of authority.

Choice C is best because you are being polite to the parents and not overstepping the bounds of your authority. By all means, do tell the director the next day what has happened and allow him to decide on the course of action.

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Choice A is the best answer since most parents know that most centers cannot accept sick children. If the mother wants to speak to the director about this, you, the caregiver, have explained center policy and should be backed up by the director.

Choice B is of course incorrect since not many child care centers can accept sick children for care. (Check your center's policy).

Choice C is not the best answer because the director depends on you to state center policy to the mother and hopefully this will solve the problem.

HOW DO YOU HANDLE
AN ANGRY PARENT'S COMPLAINTS?

When people are angry, they are not thinking clearly, and you must remain calm and listen to what they are saying. Remember, most parents become angry when they feel the center is not caring for their child properly or is treating them, the parents, unfairly. Explain your side of the problem as calmly as possible, and if the parents will not discuss the situation calmly with you, then refer them to the director. Do not argue with parents because this will accomplish nothing positive and will probably raise the parents' level of anger and frustration.

WHAT WOULD YOU
DO IF . . .

Jackie is 17 months old and has come to the center several times. One week she is bitten on the hand twice in two days, and the father is very angry. He demands to know the name and address of the parents of the child who is the biter. What do you, the caregiver, say to the father?

- A. "I won't give you the name of the other child's parent. You'll have to get it from the director."
- B. "I realize how upset you are about Jackie's being bitten. However, it is against center policy to give out names and addresses of parents. I can assure you that we will speak to the child's parent and try and keep a close eye on the child."
- C. "I know you are upset about Jackie's being bitten, but we have a lot of children to watch, and I cannot watch the other child all of the time he is here. I will tell her parents she is biting and how angry you are about this."

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Amy's mother comes to pick her up and is unable to find Amy's coat. Mother says, "That was a new coat, and if you don't find it, I demand that the center pay us the full price of the coat. Why don't you watch the children's things more carefully?" What do you say to this parent?

- A. "Let me help you look for Amy's coat. I remember it was a very nice one. Did you have Amy's name on it? If we can't find it now, I will continue to look for it and perhaps if another child has by mistake worn it home, the parent will return it. Many times children have the same coat, which is why we ask that all clothes be labeled with the child's name."
- B. "The center policy is that all clothes be labeled. I will try and find Amy's coat, but the center is not responsible for lost clothes."
- C. "Where did you put your coat, Amy? Did you hang it where I told you to? The center is not responsible for lost clothes, but I will try and find it."

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Choice A is a poor choice because you know the center's policy is not to give out names and addresses, and you have really put the director on the spot.

Choice B is the best answer because you are being understanding of the father's anger and also are stating the center's policy against giving out names and addresses. You are reassuring the father that you will try to take care of the situation. It is, of course, a good idea to inform your director of all parents' complaints.

Choice C is a poor choice because you are not stating the center's policy and you are making excuses for the child's biting behavior going unchecked. You know, as the caregiver, that - no matter what the size of the group - when you have a child who bites, it is very hard to control. Talking with the biter's parents is a good idea if the director approves.

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Choice A states the center's policy about labeling coats and assures the mother you will try and find it. You are being helpful but not accepting responsibility for the lost coat.

Choice B is not the best answer because you are not helping to find the coat and are not being very understanding of the mother's anger.

Choice C is a poor choice because the burden of the lost coat is put on Amy, which is unfair and will upset the mother.