



Newborn Encounters: A Strengths-Based Approach to Identifying Newborns and New Parents in Need of Early Intervention Services

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INTRODUCTION

<p>What is Baby TALK?</p> <ul style="list-style-type: none"> In 1986, Baby TALK, Inc. developed an innovative community-based early intervention model used for at-risk children and families. The Baby TALK model includes early childhood curriculum used in Early Head Start and home-visiting programs. The Baby TALK model also uses intervention tools throughout the community to identify families in need of services. 	<p>What is the Baby TALK Newborn Encounter Documentation (NED) tool?</p> <ul style="list-style-type: none"> The Baby TALK NED tool is one early intervention strategy unique to the Baby TALK model. New mothers complete the NED screener in hospital recovery rooms; a critical time for identifying needs for the new family. The NED tool is a series of strength-based questions and guided observations that support early identification of need. 	<p>How is the NED tool used in hospital settings?</p> <ul style="list-style-type: none"> Once new moms are adequately recovered, trained early childhood professionals complete the NED tools using open-ended, respectful, and engaging questions with new parents. Parents are asked questions about their baby, observations are made of the interactions in the room, and initial assessments of risk are conducted. This approach to assessment builds a positive foundation that supports future engagement.
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PURPOSE OF THE STUDY

- To examine the findings from a large sample of new mothers ($n=582$) who completed the Baby TALK NED tool in hospital post-labor recovery rooms.
- To examine demographic trends in the sample and rates of identifying early intervention needs and referrals when the NED tool was used.

UTILITY OF THE NED TOOL

- Can the NED tool be used as an observation tool?
- Does the approach and questions in the Baby TALK NED tool promote relationship-building with new parents?
- In what ways does the Baby TALK NED tool support early intervention methods within hospital settings?

METHODOLOGY

- NED surveys were completed with 582 new mothers in two hospitals located in Decatur, Illinois; Decatur Memorial Hospital and St. Mary's Hospital.
- Surveys were analyzed for demographic trends and findings related to the research questions.
- Qualitative comments were also interpreted. These comments spoke to the quality of engagement and family observations.

FINDINGS

- The Baby TALK NED tool promotes positive engagement with new parents, particularly when their newborn is present during the assessment.**
 - 59.8% of moms were 'very responsive' to the NED questions when the baby was in the room compared to the 54.8% who were 'very responsive' despite the baby *not* being in the room.
 - The rates of responsiveness were even higher when dad was in the room holding the infant during the assessment (86.4% were reported as 'very responsive')
 - The nature of the family-centered assessment engages the entire family, thus we saw results noting parents were 'responsive' to the tool.
- The Baby TALK NED tool serves as a quality observation tool.**
 - The tool includes questions regarding the baby's states (e.g. deep sleep, light sleep, active alert, etc.), active behaviors (e.g. tracking, rooting, grasping, etc.) and interactions between caregiver and infant (e.g. holding, talking to baby, eye contact, etc.)
 - Implementation of systemic observations as these helps to identify possible risks and needs for the infant. These observations could also inform parent needs that can be addressed in home-visiting programs.
- The language in the Baby TALK NED tool promotes a strength-based approach to engaging parents allowing parents to lead the discussion about their infant's needs.**
 - Parents are engaged with open-ended, respectful probes that allow the parent to take the lead in the assessment. For examples, professionals begin engagement using phrases such as "tell me about your baby," "what was your birth story?" and "tell me about your delivery."

Conclusion:

The Baby TALK NED tool can promote early identification of at-risk families with infants when used in hospital obstetric units through its strength-based approach to engaging parents. The result of the positive engagement may support future parent engagement in other family support programs.

CONCLUSION

- Use of the NED tool in health care settings is a promising method of identifying new families in need of intensive services.
- The NED tool supports a strengths-based approach to engaging at-risk families through observation and questions that positively engage new parents.
- The NED tool and the nature of its implementation can be adapted to other community-based settings.

POLICY MESSAGES

- EI strategies should target at-risk infants and mothers in hospital postpartum rooms when new parents are most open to receiving services and infants are at greatest risk.
- Early Intervention tools should promote parent engagement and use a strength-based approach to building quality relationships with parents. The NED tool is a good example of this.

CONTACT INFORMATION

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