

Babysitting Orientation Exercise Guide

Child and Babysitting Safety

Overview

This exercise guide provides you with the training materials needed to conduct the CABS class exercise on doing a babysitting orientation with someone interested in babysitting services.

Goal

The goal of a babysitting orientation is to gather information about the family looking for babysitting services, prior to a babysitting job. The orientation is meant to provide details that will better prepare a babysitter to provide safe, enjoyable, and successful babysitting services. It can also help a babysitter identify any concerns about potential customers and the babysitting environment.

How to Conduct the Exercise

Here are the guidelines for conducting the exercise:

- Have students locate the blank Babysitting Orientation Form in the Student Book, or provide each student with a separate blank copy of the form (available in Otis).
- Using this Babysitting Orientation Exercise Guide, review the goal of the exercise and how it will be conducted.
 - Review the goal provided for the exercise.
 - Tell the students you will be playing the role of a parent participating in a babysitting orientation.
 - Read the Scenario Story (below) aloud to set up the situation.
 - Guided by the student-facing Babysitting Orientation Guide (found in the Student Book or in Otis) and the prompts on the form, have students take turns asking you questions about you, your family, and information about your kids related to babysitting them.
 - Answer their questions using the filled-in Babysitting Orientation Form provided in this exercise guide or answers you have developed on your own.
 - Have all students fill in their form based on your answers.
 - Ensure each student gets to ask a similar number of questions.
 - Students should complete their Babysitting Orientation Form as fully as possible based on the information given.
- After each student has asked at least one question, take a moment for students to discuss what information they have and what they still need before they babysit for this family.
- Allow adequate time for students to participate in the exercise.
- When completed, ask for and answer any questions regarding the exercise.

Scenario Story

Mrs. Smith contacted you about a babysitting job to watch her two kids while she and her husband go out for dinner and a movie. She was referred to you by another couple who you babysit for. The Smiths are also good friends with your parents.

Since they are new customers for your babysitting services, you have scheduled a time to meet with them at their house to do a babysitting orientation, prior to the date of the job. You have arrived and are ready to do the orientation using the Babysitting Orientation Form.

Babysitting Orientation Form

Child and Babysitting Safety

Family's Last Name Smith

Family

Parent/Guardian Casey Smith Relation Dad Cell 555-1001

Parent/Guardian Taylor Smith Relation Mom Cell 555-2001

Child Avery Smith Age 2-1/2 yr. Details Likes to color with crayons

Child Jordan Smith Age 5 yr. Details Likes dinosaurs and building forts with furniture and blankets.

Child _____ Age _____ Details _____

Other Family Details No one is expected to come over, no ex-spouses or step-family, etc.

Communication

Contact Preference Call Text Phone Preference Home Babysitter's Cell

Location of Home Phone Landline phone, cordless, usually rests in the base on the kitchen counter.

Answer Calls on Home Phone? Yes No Where to Put Messages? Let calls go to voicemail

Safety

Is it okay to NOT answer the door? Yes No

Potentially Dangerous Things in House? There are no firearms in the home. Prescription medications are stored in medicine cabinet out of reach of kids. Chemicals in high cupboard in laundry room.

Outside Play? Yes No Details Backyard play okay, fully enclosed.

Off-Limit Areas Front yard, water feature is unsecured.

Animals? Yes No Details Goldfish in tank, no care required

Safe Area for Brief Times of Non-Supervision Living room is okay if baby gate on stairs is secured, or a short TV show is okay to distract them

Food

Meal/Snack Details Lunch at 11:30 am, snack at 3:00 pm, dinner at 5:30 pm. Jordan drinks soy milk. I usually leave something heat and serve, like spaghetti. Pretzels or something similar okay between meals.

Dishes/Utensils Location Sippy cups and kids dishes are in cupboard below coffee maker.

Stove/Microwave Operation Don't use stove. Hit "express" on microwave to add 30 seconds to cook time.

Where to Sit/Equipment Avery has a booster seat at the table; always buckle her lap belt.

How to Serve Foods Cut up any meats into bite-size pieces, make sure foods aren't too hot after warming in the microwave.

Food Allergies? Yes No Details _____

Off-Limit Foods? Yes No Details Do not give Jordan cheese, he gets an upset stomach.

Bottle Preference (Infants) Breast Milk Formula

Bottle Feeding Details _____

After-Meal Clean-up Details Help kids wash hands and faces; Avery needs help scrubbing hands with soap.

Diapering/Using the Bathroom

Diaper Preference Disposable Cloth Details Avery - Potty training, wears training pants; extras are in bathroom cupboard under the sink upstairs.

Diaper Change Every 2 Hours When Wet Diaper Cream? Yes No

Diaper Disposal Put used training pants into garbage can.

Bathroom Details Remind Avery to try to use the bathroom every hour; if she goes, she gets a sticker on her chart and a piece of candy from jar in bathroom. Remind Jordan to flush and wash after he goes.

Soiled Clothes Instructions Put into basket in laundry room.

Playtime

Favorite Games/Activities Jordan - building forts, Avery - coloring, process art with paint or glue.

Off-Limit Games/Activities Online cartoons or computer games.

Screen Time Details They can have one PBS show for 25 minutes before naptime, rated TV-Y only.

After-Playtime Clean-up Details Help them put away toys into the toy chest, books back on shelves.

Clean-Up

Location of Cleaning Supplies Broom and dustpan in pantry, dish towels are in bottom drawer by sink.

Location of Garbage Can Under kitchen sink

Behavior

Cooperation Tips Offer Jordan extra book time when he's behaving well. Give Avery positive words or sticker.

Comforting Tips Might need a hug or offer to read a book, get Avery's stuffed bunny.

Approach to Difficult Behavior Time out okay for hitting, pushing, etc. Jordan 5 mins., Avery 2 mins.

When to Call Parents? Avery sometimes has a tantrum if Jordan won't play with her. Call me if she starts really crying and won't stop for 10-15 minutes. Offer her two activity choices, that sometimes helps.

Sleep

Naptime/Bedtime Details Avery has nap in her daybed 12:30-2:00pm most days. Jordan doesn't have to nap, he can read or do a puzzle quietly. Make sure she gets a clean pair of training pants first.

Safe Sleep Instructions (Infants) _____

Baby Monitor Yes No Details Avery has a monitor in her room, receiver is in the kitchen.

Sleep Time Tips Pajamas, brush teeth, each gets to choose a book, then nightlight on and lamp off. Close the door to their rooms.

Medical Information

Medical Issues Jordan - seasonal allergies, might get runny nose and itchy eyes.

Medications He has allergy medicine but we will administer it.

If Something Goes Wrong

Protected Location inside House Basement; emergency kit is in rubber storage container.

Outside Meeting Location Across the street at the bank of mailboxes.

Trusted Neighbor(s) Emily Goodfellow Phone 555-2113

Babysitter

Okay to Read/Do Homework While Kids are Sleeping? Yes No

Okay to Contact My Parents? Yes No Can You Provide Me Transportation? Yes No

Walk-Through Notes Baby gate on the stairs, lower and upper landings. Child locks on kitchen cabinets. Unsecured bookshelf in living room.

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Family's Last Name _____

Family

Parent/Guardian _____ Relation _____ Cell _____

Parent/Guardian _____ Relation _____ Cell _____

Child _____ Age _____ Details _____

Child _____ Age _____ Details _____

Child _____ Age _____ Details _____

Other Family Details _____

Communication

Contact Preference Call Text Phone Preference Home Babysitter's Cell

Location of Home Phone _____

Answer Calls on Home Phone? Yes No Where to Put Messages? _____

Safety

Is it okay to NOT answer the door? Yes No

Potentially Dangerous Things in House? _____

Outside Play? Yes No Details _____

Off-Limit Areas _____

Animals? Yes No Details _____

Safe Area for Brief Times of Non-Supervision _____

Food

Meal/Snack Details _____

Dishes/Utensils Location _____

Stove/Microwave Operation _____

Where to Sit/Equipment _____

How to Serve Foods _____

Food Allergies? Yes No Details _____

Off-Limit Foods? Yes No Details _____

Bottle Preference (Infants) Breast Milk Formula

Bottle Feeding Details _____

After-Meal Clean-up Details _____

Family's Last Name _____

Diapering/Using the Bathroom

Diaper Preference Disposable Cloth Details _____

Diaper Change Every 2 Hours When Wet Diaper Cream? Yes No

Diaper Disposal _____

Bathroom Details _____

Soiled Clothes Instructions _____

Playtime

Favorite Games/Activities _____

Off-Limit Games/Activities _____

Screen Time Details _____

After-Playtime Clean-up Details _____

Clean-Up

Location of Cleaning Supplies _____

Location of Garbage Can _____

Behavior

Cooperation Tips _____

Comforting Tips _____

Approach to Difficult Behavior _____

When to Call Parents? _____

Sleep

Naptime/Bedtime Details _____

Safe Sleep Instructions (Infants) _____

Baby Monitor Yes No Details _____

Sleep Time Tips _____

Medical Information

Medical Issues _____

Medications _____

If Something Goes Wrong

Protected Location inside House _____

Outside Meeting Location _____

Trusted Neighbor(s) _____ Phone _____

Babysitter

Okay to Read/Do Homework While Kids are Sleeping? Yes No

Okay to Contact My Parents? Yes No Can You Provide Me Transportation? Yes No

Walk-Through Notes _____