

## Infant care plan

**Student name:** \_\_\_\_\_

**Birthdate:** \_\_\_\_\_

**Parents:** \_\_\_\_\_

**Mom Phone:** \_\_\_\_\_

**Dad Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Emergency Contact:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Date of this care plan:** \_\_\_\_\_

### Feeding

Parents will provide an individual feeding plan appropriate for their child's age. Bottles of formula or breast milk will be prepared by families and brought in fresh daily and fed based on the schedule provided below. Bottles are warmed using an automatic warmer. Foods will be introduced as per the family's and/or doctor's recommendations. Infants will be held by a caregiver while being fed bottles and will sit at a table for solid feedings including snacks. Please provide burp cloths for bottle feedings. For solid feedings, please provide the desired bowl(s), spoon(s) and bib. All bottles and caps, containers of food, cups, bowls, spoons, bibs, etc. must be labeled with child's name. Each child has a cubby in the kitchen area where food and feeding items are stored.

Please detail feeding schedule, including snacks, if desired below with approximate times and amount to be fed.


Any allergies or sensitivities:

Typical behavior following feeding (i.e. gassy, sleepy, etc.):

Does your child eat solid foods?

If no, at what age do you expect to introduce solid foods?

### Napping

Infants sleep in individual cribs with low lighting and soothing background music. Parents will provide a fitted crib sheet, blanket, pacifier, and lovey or other item that the child uses to fall asleep. Parents should also provide an extra sheet in the event of an accident. Parents are also welcome to provide a wedge for the crib and/or sleep sack. All sheets, blankets, pacifiers, lovey and other items must be labeled with the child's name.

Please detail approximate nap times and length of nap(s) below.


How does your child fall sleep? (Rocking, pacifier, eating, swaddling, etc.)	
In what position does your child sleep best?	
What does your child sleep with in his/her crib? (Blanket, pacifier, lovey, etc.)	

## Diaper changing

Infants are diapered in the classroom and all events are documented on their daily information sheet. Parents will provide diapers and wipes for their child. Parents may also provide diaper rash cream, if necessary. Staff wears latex free gloves while diapering. The child will be changed whenever he/she is wet or soiled and is checked regularly. Please provide an extra set of clothes, in case of accidents. Packages of diapers, wipes and diaper cream must be labeled with child's name. Each child has his/her own individual basket where diapers, wipes, and diaper cream are stored and a separate basket for spare clothes and non-food items. Caregivers will notify you when supplies need to be replenished.

Any skin issues?

Any specific diapering instructions?

## Activities

Infants have access to many stimulating activities in their environment. We read books, enjoy play mats, push carts, play with soft toys and cause and effect toys. Although it is not popular with the infants, we do have tummy time daily. The room comes with a four seat baby stroller where they can take walks and explore our school to watch other big kids play. Parents should provide a jacket or sweatshirt, hat and sunscreen if desired for outdoor time, and these items must be labeled with the child's name.

Would you like your child to wear a hat and/or sunscreen outside?

Length of tummy time desired per day:

Typical behavior during tummy time:

## Additional Information

Parents will sign child in each day and complete a "daily news" form with information about the morning events before arriving at school. Caregivers will update the daily news form with diapering, napping, and feeding information during the day.

Please update this care plan as there are changes to your child's napping, feeding, diapering and/or other information.

The area below may be used to provide additional parent comments for caregivers:

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE

\_\_\_\_\_  
ADMINISTRATOR SIGNATURE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
DATE