

## Feeding Scale Item Description Clarification Sheet\*

Some Feeding items may need further clarification. Please highlight the following sentences or clauses or add comments to the item descriptions.

### **Sensitivity to Cues**

**#4.** Highlight the note. If all that needs to happen is turning of the head to make eye contact occur, this is a *yes*. Turning bodies (like side-by-side positioning) would score a *no*. This is different than item 29.

**#6.** Highlight the sentence about *may or may not* release the nipple when breastfeeding.

**#12.** This is an **OR** statement ...Allows pauses **OR** in the pause phase of suck-pause sequence.

**#13.** Think of this item as the caregiver following the lead of the baby.

Score *yes*:

- if the caregiver *slows the pace of the feeding* (this is easiest to observe in solid feedings),
- comments on cues or on pauses, **OR**
- momentarily pauses in response to any subtle disengagement cue.

**Note:** Consider this question, “does the caregiver allow the baby to express cues?” If the answer is *yes*, this item is usually scored *yes*. Remember the caregiver is allowed to not pause or allow cues one time and still score *yes* on this item.

**#14.** This is another **OR** statement, the parent terminates the feeding when the child shows satiation cues **OR** other after other methods have proven unsuccessful.

**#15.** If a mother scores *no* on this item, she *may* also score *no* on 12 and 13 as well because she is not following the lead of the baby.

### **Response to Distress**

*Helpful reminders:*

1) scoring is cumulative—that means you are scoring the parent’s best observed behavior, even if they only respond one way to an incident, they get credit for that one behavior. We want to recognize all the skills the parent has in their repertoire to alleviate the child’s distress.

2) the caregiver must attempt to alleviate the child's distress (respond) within 5-10 seconds of the potent disengagement cue(s),

3) the potent disengagement cue(s) that occur during the first minute of the feeding and those that terminate the feeding are not scored in this subscale, and

4) The caregiver’s responses to their child's distress are not scored elsewhere. (e.g. #21 doesn't also count on #11.)

**#22.** Highlight third sentence. *Attempts to distract child must be unrelated to the feeding and novel as opposed to soothing.*

### **Social Emotional Growth Fostering and Child Vocalization Clarifications**

**#29.** Highlight the NOTE. For highchair feedings, if the parent is in front of the tray and not way off to one side, give them credit for en face positioning.

**#30.** Highlight the last sentence.

**#32.** Highlight second sentence . . .includes verbal exchanges between caregiver and child, facial exchanges, or physical interaction (games with food, hands, etc. that both caregiver and child partake in). Attending to the caregivers attempts, e.g. looking at, smiling, etc. would count as the child partaking in the interaction. Remember to look for these things during burps also.

#36. Highlight—Child does not have to see the caregiver smile or hear the caregiver laugh.

#38, 48, 60, & 70 all have to do with child **vocalizations**.

- #60 includes *all* sounds except crying and feeding sounds (rationale here is because the subscale is Clarity of Cues and we want to give credit for attempts to communicate with the caregiver).
- #38, 48, 70 includes all sounds *except* crying, whining, fussing, feeding sounds, and grunting.

### Cognitive Growth Fostering

#42. Caregiver must totally HAND OVER the item to the child. Highlight the words “hands over” in parentheses and the last three sentences.

#43. Highlight the second sentence about 4 months and younger.

#47. The caregiver uses more explanatory forms of statements (e.g. describe, ask questions, explain consequences) MORE than commands in talking to the child. Words that are not commands are considered explanatory. Think of explanatory language as “talking” to child vs. telling them what to do. Caregivers who speak very little and do not use commands would score a *yes* on this item. #47 is not about quantity of caregiver verbalizations.

### Clarity of Cues

#51. Remember that cues signaling a readiness to eat are fewer and less intense in older infants and children. It can just be a little lean forward or head raising.

#53. The decrease in tension **must stabilize** during the feeding. This means the child must settle in to the feeding once they have **secured food**. There may be blips of activity but in general, the child must settle in and eat without a lot of ups, downs, restlessness, disengagement cues, etc.

#56. If no activity or not enough activity /inactivity to rate score as *no*, e.g. only one instance of each.

#60. It is imperative to learn what vocalizations sound like to score the Feeding scale. Review utterances, sighs, whimpers, sounds, and vocalizations that precede fussing or whining. Also carefully re-read the definition of fussing and whining. It is not a single or short little sound.

#61. Caregiver does not need to see or hear this laugh or smile.

#63. Remember there are *two parts* to this item. The caregiver must *offer* the food and the child must vigorously resist in one of the ways listed in the manual to score *yes*.

### Responsiveness to Caregiver

#67. Postural direction to or attending to caregiver/social activity enough to score a *yes*.

#71. Caregiver must *see* the child's smile.

#73. Pulling the baby closer to the mom (tucking in) is considered repositioning or handling.

#76. This item is really about looking away from the feeding (caregiver is the source of food). If the child gazes at the caregiver and then looks at breast or closes their eyes, they are not averting gaze or turning away from their caregiver.