

CHEERS Guide for Home Visitors

CHEERS is an objective tool for 1) observing Parent-Child Interaction (PCI), attachment, and bonding, and 2) promoting parental strengths and addressing parental challenges in these areas. This guide will help you to better understand CHEERS and how to document your CHEERS observations. If you have additional questions, please ask your supervisor for assistance.

CHEERS Domains Defined:

Cues are a child's efforts to communicate their needs to a caregiver. Cues include behaviors like cooing, smiling, crying, reaching, arching the back, and turning away. When a parent recognizes and responds to their child's cues, they let the child know that their needs will be met, build the child's trust in the parent, and help the child learn how to manage their emotions over time.

Holding refers to both physically cradling or cuddling a child and to "spatial closeness" – how close or far a parent is from their child in physical space. Holding a child helps them to feel comforted and nurtured. When a parent sits close to an older child as they begin to explore their world independently, they help to build the child's confidence and keep them safe.

Expression relates to all the ways that a parent and child communicate with each other using vocal sounds, singing, and verbal self-expression, even if a child doesn't speak words yet. When a child coos and the parent coos back, or a parent describes an object or activity to their child, the parent is stimulating the child's language development and brain development.

Empathy refers to a parent's ability to understand what their child is feeling or experiencing. For instance, when a child cries a certain way and the parent understands that they are hungry, or angry, or tired. The parent's ability to understand their child's experience comforts the child and encourages bonding.

Rhythm & Reciprocity refers to "give and take" in parent-child interactions. For example, sometimes a parent might initiate an activity with their child, and at others the child might start an activity with the parent. When this "give and take" is going well, it's as if the parent and child are dancing together in sync. Over time, this kind of interaction helps a child learn how to "connect" and have healthy relationships with others.

Smiles refers to the joy, happiness and laughter a parent and child experience as they relate to each other. When a parent takes the time to play with and laugh with their child, the parent becomes a source of pleasure for the child, creating a positive bond between the two of them.

CHEERS Documentation Facts:

- For every postnatal home visit, document each domain of CHEERS with a unique example.
- If the target child is not present for the entire visit (for instance, the child is asleep), or it's not possible to complete the CHEERS observation for some reason (a crisis, for instance), you are not required to document it. Simply note under "Cues" the reason why the CHEERS observation could not be completed and type "N/A" in the comment boxes for the rest of the domains.
- For prenatal visits (as stated on the HV Narrative form), begin documenting the observation of any one CHEERS domain at 24 weeks and any two CHEERS domains at 31 weeks. You do **not** need to document frequency ("most of the visit," etc.) when documenting prenatal CHEERS.
- For prenatal visits, you can document your direct observations of the parents and/or the parent's own reporting of events outside of the home visit. Below, an example for Expression:

Mom smiled and said baby was kicking during the night. Mom stated that she talked to him, saying, "Hello baby. Are you a night owl like mommy?"

- CHEERS observations document the interaction between one parent and one child. For families on Level 1P, 1 or 2, when both parents are present, you can 1) document CHEERS for each parent, or 2) alternate visits, one visit observing Mom, the next the other parent. For parents on Level 3 or 4, document CHEERS for each parent, including separate examples for mom and the other parent within each domain of CHEERS.

- Like the ASQ or other assessments, the CHEERS assessment is meant to be **objective** (based on what you see and hear, not your feelings or interpretations) and **neutral** (capturing the parents' strengths *and* challenges regarding each CHEERS domain, not just their strengths). Here's an **objective** example for Cues:

"TC arched her back and turned her head away from Mom when Mom held her close. Mom continued to hold TC close. This represents most of the visit."

Next, using the same scenario, an example of **non-objective** documentation for Cues (what you want to avoid):

"TC wanted to be put down. Mom ignored her cues. This represents most of the visit."

- Only your observations are documented in the CHEERS section, not your responses and/or interventions. Document these under the related topic area elsewhere in the HV Narrative.

CHEERS Documentation Basics

- Ask the assigned assessment question above for each domain:
 - Cues:** Did the parent *respond* to the child's cues?
 - Holding:** What was the nature of the *holding/spatial closeness* between parent and child?
 - Expression:** Was there a "conversation" between parent and child?
 - Empathy:** Did the parent understand what the child was *feeling* and *experiencing*?
 - Rhythm & Reciprocity:** Who *initiated* most activities/interactions? Was there a *give and take* between parent and child?
 - Smiles:** Was there *joy* in their interaction?
- Choose one example of an interaction between parent and child that captures your assessment and represents the overall visit. If the child initiates the interaction, show the parent's response, and (ideally) the child's response to the parent's intervention to show the full interaction. Likewise, if the parent initiates the interaction, show the child's response, and (ideally) the parent's response to the child.
- Note the frequency of the behavior. For instance, "This represents most of the visit" or "This represents all of the visit" or "This represents half of the visit" (in the latter case, give an example for each "half"). Avoid using "Some of the visit" as "some" is difficult to quantify.

Postnatal documentation example (with samples from various different CHEERS observations):

Cues: Ella pointed to a toy truck and said "Truck." Mom continued to look at her cell phone and did not respond. This represents most of the visit.

Holding: Dad sat close to Kendra on the floor while Kendra did tummy time on a mat. This represents all of the visit.

Expression: Monique looked out the window and pointed at a bird. Mom said, "That's a bird." Monique said, "Burr." This conversation represents most of the visit.

Empathy: Dad asked André, "Do you want to put on Mr. Potato Head's glasses?" André threw Mr. Potato Head's glasses. Dad said, "What's wrong with you?" This represents most of the visit.

Rhythmicity/Reciprocity: Mom and Juan both initiated activities throughout the visit. Mom initiated patty cake, and Juan joined in. Juan pointed at a ball. Mom responded with, "Do you want to play with your ball?" This represents all of the visit.

Smiles: Dad smiled and said, "Good job!" when Henrietta stacked the blocks. Henrietta responded by adding another block. Henrietta did not smile during the visit. This represents most of the visit.

Prenatal CHEERS examples (1 CHEERS domain is required at 24 weeks and 2 domains at 31 weeks):

Cues: Mom said, “the baby usually starts kicking when I lie down to go to bed.”

Holding: Mom gently rubbed her belly during the visit.

Expression: Dad said, “The baby is constantly kicking Mom these days. I tell her to stop but she doesn’t listen.”

Empathy: Mom said, “I notice she kicks a lot when we have music on; she seems to get excited.”

Rhythm/Reciprocity: Dad said, “I shined the flashlight into Mom’s belly and the baby moved to wherever I put the light!”

Smiles: Mom said, “I never really wanted to be pregnant, so I’m ready for it to be over.”

Overall Strengths: note the parents’ overall strengths, skills and abilities *related to any of the CHEERS domains*. Since families generally demonstrate some strength or skill during every home visit, this section should be filled out for each visit.

Example: Mom kept a conversation going with Monique throughout the visit, encouraging her language development (Expression).

Areas to Focus Support: note areas of challenge where the parents need support *related to any of the CHEERS domains*. Optionally, you can note how you plan to offer support to help the family address these specific challenges. *For serious challenges, speak to your supervisor about including these in the Service Plan for the family.* Even when parents don’t exhibit challenges, you can always find an area where parents can build on a strength. For this reason, this section should be filled out for most visits.

Example: Dad seemed to lose patience with André when André didn’t follow Dad’s guidance about how to assemble Mr. Potato Head. Will bring curriculum about André’s developmental stage and expectations related to behavior for next visit.

CHEERS and Reflective Strategies: After you observe a parent and child’s PCI, bonding and attachment through CHEERS, you **promote** strengths observed using ATPs and **address** concerns observed using other Reflective Strategies and additional resources. *Please note: the Reflective Strategies section is only for documenting the use of these strategies related to CHEERS. You can document other uses of Reflective Strategies in the corresponding section. For example, if you ATP Dad for completing a goal, document that in the FGP section of the Home Visit Narrative.*

1) Promote strengths. Whenever you conduct a CHEERS observation, you are expected to use *at least one ATP to promote strengths observed related to CHEERS*. The following examples show how to document your use of ATP’s related to CHEERS:

Used ATP when Mom understood by his cues that TC wanted to breastfeed.

Used ATP when Dad and TC exchanged smiles and laughter.

2) Address concerns. You **address** challenges or concerns identified through the CHEERS observation by using any of the other Reflective Strategies (beyond ATPs) You can also use curricula or handouts, videotaping the parent (so they can learn by observing themselves), and/or resources and referrals to help the family address challenges related to CHEERS. There is no specific expectation regarding how often you use reflective strategies to **address** CHEERS-related concerns. The following examples demonstrate how to document your use of additional reflective strategies related to CHEERS:

Used S-ATP when Dad let TC initiate activities during play.

Used Explore and Wonder when TC turned away and Mom repeatedly tried to engage him.

Next, two examples of how to document your efforts to address parental challenges related to CHEERS using tools other than Reflective Strategies:

Reviewed curricula on language development to encourage Dad to talk to TC.

Provided an activity with turn taking to encourage Mom to engage in “give and take” with TC.