



## Primary Care

Use this resource to help communicate the importance of primary care. It will help promote essential program practices to ensure quality in family child care and center-based programs that serve infants and toddlers.

### Rationale

High-quality relationship-based care is central to optimal early brain development, emotional regulation, and learning (Center on the Developing Child, 2012). One of the Program for Infant/Toddler Care (PITC) six essential program practices to promote this type of care is **primary care** (PITC, n.d.). Consistent, responsive, and meaningful interactions with a primary caregiver build a child's attachment with a familiar adult (Raikes & Edwards, 2009). Primary caregiving also strengthens relationships with the families of the children in the primary care group, which, in turn, supports the development of trust and security between the infant or toddler and the primary care provider (Lally, Torres, & Phelps, 2010).

In a primary care system, the care of each infant or toddler is assigned to one specific infant and toddler teacher who is principally responsible for that child in the care setting. The primary caregiver's responsibilities include:

- ◆ fostering a relationship with the child and his or her family;
- ◆ observing, documenting, and
- ◆ planning for each child's development and learning on an ongoing basis;
- ◆ supporting the child through transitions;
- ◆ carrying out the majority of the child's care routines; and
- ◆ providing emotional support.

Primary care does not mean exclusive care. It means, however, that all infant and toddler care program staff know who has primary responsibility for each child during transitions, during care routines, and when providing emotional and relational support (PITC, n.d.). Primary care systems often happen naturally in family child care and home care settings.

### Why Is Primary Care Important for Infants and Toddlers?

- ◆ Primary care relationships provide a strong foundation for responsive interactions and communication between an infant or toddler and his or her caregiver (Ruprecht, Elicker, & Choi, 2016).
- ◆ Partnerships between a caregiver and specialists (for example, mental health, medical, occupational therapists) are facilitated by primary care providers working with individual children and their families (McMullen, Yun, Mihai, & Kim, 2016).

- ◆ Primary care provides opportunities for caregivers to deepen their knowledge of a child's development, abilities, and interests, which allows for more accurate developmental assessments and individualized curriculum implementation (Theilheimer, 2006).

## How Does Primary Care Promote Positive Child Outcomes?

- ◆ Infants and toddlers develop trust when primary caregivers respond to their unique temperament, needs, and interests (Copple & Bredekamp, 2009).
- ◆ A primary caregiving system supports infants' and toddlers' identity and cultural connection to their families (Lally, 1995; Virmani & Mangione, 2013).
- ◆ Responsive primary caregivers buffer stress and help the infant or toddler regulate to environmental stimuli (National Scientific Council on the Developing Child, 2007).
- ◆ Young children who do not have a primary caregiver and instead experience multiple caregivers (or multiple childcare settings in a day) are more likely to engage in challenging behavior (Clasien de Schipper, Van Ijzendoorn, & Tavecchio, 2004; Morrissey, 2009).

## Planning to Implement Primary Care in Diverse Child Care Settings

**Goal:** High-quality infant and toddler programs implement a primary care system.

- ◆ Implement written guidance to support a system of primary care throughout the program. This includes creating staff and family handbooks that share the importance of, as well as practices for, supporting primary care strategies for infants and toddlers and their families.
- ◆ Create job descriptions for infant and toddler teachers that include expectations for primary caregiving practices. This includes forming relationships with families, learning about families' home cultures and caregiving routines, and weaving the home care experiences into daily practice.
- ◆ Attend, create, or advocate for professional development that promotes systems of primary caregiving.
  - Strengthen professional development of teachers and administrators on the concepts and implementation of primary care. This should start at orientation when hiring new staff and then continue throughout the years of employment.
- ◆ Use an intentional review process to continually strengthen the system of primary care across the center or family child care program.



## References

- Center on the Developing Child. (2012). *Executive function: Skills for life and learning* (InBrief). Retrieved from <http://developingchild.harvard.edu/resources/inbrief-executive-function/>
- Clasien de Schipper, J., Van Ijzendoorn, M. H., & Tavecchio, L. W. C. (2004). Stability in center day care: Relations with children's well-being and problem behavior in day care. *Social Development, 13*(4), 531–550.
- Copple, C., & Bredekamp, S. (2009). *Developmentally appropriate practices in early childhood programs* (3rd ed.). Washington, DC: National Association for the Education of Young Children.
- Lally, J. R. (1995). The impact of child care policies and practices on infant/toddler identity formation. *Young Children, 5*(1), 58–67.
- Lally, J. R., Torres, Y. L., & Phelps, P. C. (2010, February 8). *How to care for infants and toddlers in groups*. Zero to Three Parenting Resource. Retrieved from <https://www.zerotothree.org/resources/77-how-to-care-for-infants-and-toddlers-in-groups>
- McMullen, M. B., Yun, N., Mihai, A., & Kim, H. (2016). Experiences of parents and professionals in well-established continuity of care programs. *Early Education & Development, 27*, 190–220.
- Morrissey, T. W. (2009). Multiple child-care arrangements and young children's behavioral outcomes. *Child Development, 80*(1), 59–76.
- National Scientific Council on the Developing Child. (2007). *The science of early childhood development: Closing the gap between what we know and what we do*. Retrieved from [www.developingchild.harvard.edu](http://www.developingchild.harvard.edu)
- Program for Infant/Toddler Care (PITC). (n.d.). Mission statement and PITC philosophy. Retrieved from [https://www.pitc.org/pub/pitc\\_docs/about.html](https://www.pitc.org/pub/pitc_docs/about.html)
- Raikes, H., & Edwards, C. (2009). *Extending the dance in infant and toddler caregiving*. Baltimore, MD: Paul H. Brookes Publishing Company, Inc.
- Ruprecht, K., Elicker, J., & Choi, J. (2016). Continuity of care, caregiver–child interactions, toddler social competence and problem behaviors. *Early Education and Development, 27*, 221–239.
- Theilheimer, R. (2006). Molding to the children: Primary caregiving and continuity of care. *Zero to Three, 26*(3), 50–54.
- Virmani, E. A., & Mangione, P. L. (Eds.). (2013). *Infant/toddler caregiving: A guide to culturally sensitive care* (2nd ed.). Sacramento, CA: California Department of Education.

*The State Capacity Building Center (SCBC) works with state and territory leaders and their partners to create innovative early childhood systems and programs that improve results for children and families. The SCBC is funded by the U.S. Department of Health and Human Services, Administration for Children and Families, Office of Child Care.*

### State Capacity Building Center, A Service of the Office of Child Care

9300 Lee Highway  
Fairfax, VA 22031

Phone: 877-296-2401

Email: [CapacityBuildingCenter@ecetta.info](mailto:CapacityBuildingCenter@ecetta.info)

#### Subscribe to Updates

[http://www.occ-cmc.org/occannouncements\\_sign-up/](http://www.occ-cmc.org/occannouncements_sign-up/)



ADMINISTRATION FOR  
**CHILDREN & FAMILIES**