

Ep #43: Hiring Overnight Newborn Care: What You Need To Know



Full Episode Transcript

With Your Host

Devon Clement

[Parenthood Prep](#) with Devon Clement

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Have you thought about hiring overnight care for your newborn, but you don't even know where to start? Stay tuned because we're going to talk all about it.

Welcome to *Parenthood Prep*, the only show that helps sleep-deprived parents and overwhelmed parents-to-be successfully navigate those all-important early years with their baby, toddler, and child. If you are ready to provide the best care for your newborn, manage those toddler tantrums and grow with your child, you're in the right place. Now here's your host, baby and parenting expert, Devon Clement.

Hello and welcome back to The Parenthood Prep Podcast. If you hear some beautiful fiddle music in the background, it's my partner practicing his fiddle. He takes lessons and he's pretty good.

I imagine they're going to edit it out, but just know that I am listening to lovely fiddle music, which is nice because it is really freaking cold right now and I find myself longing for the temperature to be like 30 or 40 degrees because it is down in the teens and it is just awful. You know, it's making me feel like a bear. I just want to hibernate. I'm so tired even though I'm getting sleep. If you are living somewhere that it's super cold, I feel you and I'm so sorry and seriously give yourself grace if you just want to stay inside and snuggle in bed with your kids all the time.

The topic I wanted to talk about is a little bit niche and that's about hiring newborn care. Specifically, overnight help when you have a newborn or multiple newborns. And the reason I decided to do this topic, I've kind of had it on the books for a while to plan to do it, but one of my favorite Instagram accounts that I follow is a woman named Shannon Willerton, and she is expecting twins via surrogate next month. And she was posting on her page about hiring night care. I said, you know what? I'm going to do a podcast episode about it. Shannon, if you're listening, hi.

I'm going to try not to make it sound like a commercial for my company because of course, that's not what you came for. You came for information. I do think the way we do things is pretty good. I've been doing this a long time. I've had the company for over 13 years. In that time, we've figured out a lot of what works

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and what doesn't work and some solutions for that. So I'm not necessarily just going to tell you that you should find somebody who does exactly what we do or hire us. But do know that that's where I'm coming from when I talk about why we do the things the way we do because a lot of lessons that we've learned through experience and sometimes learn the hard way.

So should you even consider hiring overnight care? This is something that was really limited up until I would say the last 10 years or so. In the beginning of my career, I was working with a lot of families where either there was some sort of medical issue with the birthing parent or it was twins. People with twins and triplets and more knew that they needed night help and people with one baby didn't really consider that. Now, of course, wealthy people have been hiring night nannies and night nurses and postpartum doulas and all that for a long time.

A lot of my mentors in the industry work in the Bay Area or in LA and they're working with celebrities and major tech wealthy people. It's really come to be accessible to a lot more people. And I think that's fantastic. And in the last 10 years, I've just seen so much growth of new parents with only one baby or people who just prioritize getting their sleep and having this care and support in the beginning. So I think that's great.

Also, a lot of companies now, if you work for a big company, especially a big tech company, they are providing benefits to pay for this care. So there's a service called Carrot Fertility. There are a couple of other different ones, Maven and Progeny. Carrot is the big one. They are providing supplemental benefits to employees or through employers to their employees to pay for all the additional costs associated with fertility treatments.

We spoke to Justine last week about that and that can get pricey and stuff that's not covered by insurance. It covers birth support, labor doulas, and it also has started covering postpartum doulas and newborn care support, which is phenomenal. We're so, so pleased. And then we've had a lot of clients working with these benefits programs. But what I am seeing pretty frequently is people call us, we got an email today from someone whose baby's 4 weeks old. They didn't even know they had the benefits and they want to use them before the time limit is up. So check with your company, check with your partner's company

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if you're expecting, and you might want to take advantage of that benefit. And I think that more and more companies are going to start providing it in order to stay competitive.

So how do you find a caregiver? Obviously, leaving your brand new baby alone with a stranger for the night is a little bit intimidating. And you know, it's funny, first time parents are always like, "How can we trust the caregivers? How do we know that they're trustworthy? And do they have background checks? And can we talk to their references? Can I see their third grade report card?" People who are having their second baby or third baby or fourth baby are like, "Literally send anyone. I just need to sleep. Is your cat available? Can they make a bottle? That's fine. It doesn't matter."

So, absolutely you want someone trustworthy, but you really get to know the caregiver very quickly. If they're good at what they do and they're good at helping you feel comfortable, then you're going to feel that way right from the beginning. But there's a lot of ways you can make sure to find someone that you trust. And one of those ways is to find someone through word of mouth. Use somebody that a friend or a colleague or a family member or a neighbor used, use that same caregiver.

Solo care providers like people who work just by themselves and don't work with a team or with an agency, they usually are found through word of mouth and that's a great way to do that. A lot of people find our company through word of mouth, but they also find us through Google and through some of our referral sources like pediatricians and lactation consultants and OBGYNs and stuff like that. Parent groups online are great. So if you're in like a local parent group for your neighborhood or for your city or your town or whatever, you can ask on there. They'll usually make some good recommendations.

We get a lot of people saying that that's how they found us. And certainly just Googling, although with Googling you're more likely to get a team or an agency, which is totally fine. There's two different types of agency. I'm just gonna go over that really quickly. One is where they refer the caregivers to you, and then you work directly with the caregiver and you pay the agency a fee for basically a finder's fee for finding this person.

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So you're gonna pay the caregiver directly, they're gonna bill you, all your work will be directly with the caregiver, and then you just pay this finder's fee to the agency. And then the other type of agency, which is what we have, I call it more of like a team agency, that we have a team of caregivers that we work with all the time. And these people take their own clients and stuff like that. But for the most part, this is our steady team and we do all the work. We do the billing for you and the contracts and all that, and we set you up with your caregivers and then we will be the ones billing you and you'll be paying us.

The way that we do that is that the whole fee is rolled in, so you're not paying additional agency fees on top of what you're paying the caregiver. That's something that's worth taking into consideration when you're thinking about who to hire, whether you want to work with someone who's just working by themselves, someone who's been referred to you by an agency but is essentially just working by themselves, or do you want to work with a team where you might be working with a couple of different caregivers but you know that you can rely on that business infrastructure to really support you in a lot of different ways.

Again, that's how we do things and we find that that's what works best. A big question is how much does night care cost? Obviously, that varies incredibly widely across the country depending when it's happening, all that kind of stuff, who you're working with. I'll get into some specifics about costs, but honestly, it changes all the time and depending where you live.

The one thing I will say is you get what you pay for a million percent. Let me say it again. You get what you pay for. So yes, this is expensive, but I would so much rather see you take that budget and hire someone that's excellent that might be a little bit more expensive and use them a little bit less. Have them 3 nights a week instead of 7 nights a week, if that's the price difference.

And honestly, you will get the support and the care that you need, even if it's fewer nights a week, than hiring someone who's very cheap and is gonna be overworked, is gonna be tired, is maybe inexperienced, maybe just doesn't care. Like have you ever had a job where you didn't feel like they were really paying you enough and you just kind of didn't give a shit. Imagine if that person was

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taking care of your baby. Imagine if you in that moment was responsible for like the most important thing in someone else's world.

It drives me nuts. The people here in New York who hire these caregivers that are so, so, so under priced, like below minimum wage and they crow about it and they're so proud of it. Like, "oh, we got our baby nurse for \$250 a day for 24 hour care." Like you're paying that person \$10 an hour to do care that honestly requires such a high level of expertise.

So I would certainly not go under minimum wage. I would try to go quite a bit over it because again, this is not a teenage babysitter that's putting your 6 and 8-year-old to bed after watching a movie and then sitting on the couch while they sleep. This is your brand new newborn. This is you as a brand new parent who's recovering, possibly recovering from giving birth, learning all these new things. Like you want someone who knows their shit. You want someone who knows what they're doing.

You don't want someone who's so tired, they're undercharging so much that they are working 7 nights a week plus days. Clients ask me all the time, "are your caregivers, do they also have day jobs?" And I'm like, no, you know, yeah, we might do a day shift with a client here and there, or some of them might have a part-time job or something like that. But nobody is going from a full-time daytime job to a full-time overnight job, the way that they do when they are undercharging.

And a big part of the reason we charge a lot on the high end is so that our caregivers can be really well rested and provide that care to your family. So that's something that I would absolutely consider when you're looking at the pricing.

And then whether you're working with a solo caregiver or an agency, ask if there's any additional charges. Are you expected to pay for their transportation? Are you expected to provide meals, like certainly on a full-time live-in? Meals are expected to be provided, but sometimes people want specific things provided to them, even if they're just there for overnights.

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Are taxes built in? Are you expected to tip? I know a lot of agencies when they match people with a caregiver, the expectation is that you're going to tip pretty significantly. And that gets rolled into the cost. I'm not saying that there's anything wrong with that, but look at what the final total is that you're paying.

Is there an agency fee that you're paying on top of what you're paying the caregiver or is that already rolled in? So taking all of those things into account. You know, what are some questions you should ask? So when you're talking to a solo person, there's a lot of questions that I would ask them. I mean, a lot of stuff is pretty obvious, right?

Like how long have you been doing this? How were you trained? Give us some reference letters from some past clients. What's your philosophy? What's your training in body feeding, nursing, if that's something that you're interested in? What's your training in sleep shaping or sleep conditioning? Will you get my baby sleeping through the night by 12 weeks if that's something you want? What's your feelings on schedules?

Maybe you're somebody who doesn't want a super strict schedule or super strict sleep training. And so you want a caregiver who's going to really align with your values. And you want someone who's gonna be supportive no matter what. So if you want to breastfeed and the caregiver says, "okay, that's great, but I recommend formula feeding overnight," shut that person down immediately because that person is trying to do what's gonna benefit them and not what's going to help you with your goals.

If you're like, "you know, I want to breastfeed, but I'm kind of on the fence about it and it's just going to go how it's going to go. And if it doesn't work out, that's fine. Or like, I really want to, but I'm also open to it if it doesn't." And they're super militant, like, "no, breastfeeding is so important. It's the best way to feed your baby and formula is garbage and blah, blah, blah." Like don't hire that person either.

You don't want someone who's incredibly strict in their beliefs or their dogma about pretty much anything other than safety. Because you just don't know how things are going to go. And having someone who's going to really support you

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no matter how things go or what changes or whatever, there's people in my industry who won't work with a family, who won't be a birth doula for a family that's planning to circumcise if it's a boy.

I just don't really see how that is helpful or purposeful. Like, okay, yeah, maybe in postpartum, you don't want to care for a baby post circumcision. Fine, that's your beliefs. I understand that. But what does it help to not help a family through their delivery when you are going to have nothing to do with this baby's penis after the fact? In fact, what they do with their baby's penis is none of your business.

For the record, because I have never really talked about it, I think circumcision is a personal choice. It's not a choice I don't think I would personally make, but I used to be very, very anti. "How can you do that?" And now I'm like, you know what, at the end of the day, it's not really that big of a deal. So whatever. And if my clients are circumcising, fine, great, do it. It's your choice.

So along those lines, ask them how they'll make you feel comfortable. How will you make me feel you are a stranger in my home? How will you make me feel like I can trust you? If they say something like, "well, I take the baby at night and I shut the door and you're not allowed to come in." Like, I don't know that anybody really says that, but certainly that's a red flag.

You know, we allow the parents anytime they want to check in, check in. We're not going to give you a hard time. You want to see how the baby's doing, text me. I'll reply. You want to come in the room and look in and see the baby. That's totally fine. If the baby's sleeping and I'm sleeping, I mean, I might be snoring. I might have my mouth hanging open, sorry about that. But you can come in at any time, I don't have any problem with that.

The most important thing after like trustworthiness and their expertise is their reliability. If you're working with a solo caregiver or even if you're working with a team agency, ask them, how much flexibility do I have in the schedule? Am I locking into how many nights a week for how many weeks? What happens if my baby comes early?

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What if the caregiver that I'm supposed to be working with has another client that's supposed to run right up to my due date and then the baby comes 2 weeks early? What will you do in that situation? We get a lot of families that call us saying, "our baby came early and the caregiver we had lined up couldn't do it."

What's your backup situation? Are you going to send me someone I've never met or talked to before? If there's potentially going to be another person I'm working with or a backup person, I'd like to know that information. Frankly, you should know that regardless of when your baby comes because when you're working with a solo provider, like things happen, they get sick, they get injured, their kids get sick, they have family emergencies, like you want to know that you are gonna be covered.

So if you're working with a solo care provider, I would really make sure that they have a plan for what they're going to do if they're not available. How can they support you? Maybe that means they give you the names and numbers of some people that you contact as well as a backup, but you don't want to be doing that when you're coming home from the hospital with your brand new baby, and you expected to have a person there.

So what is your option if they are not available for whatever reason, whether that's because the baby came early or whatever? What are my options as far as flexibility in changing the schedule? Can I extend? Can I add on care? Can I add on additional nights? Can I extend the care longer?

This is one of the beautiful things of working with a team and something that has been so important to us. Listen, I'm going to tell you straight. If you are expecting and you're thinking about hiring nightcare and you have a budget in your mind of how much money you want to spend. And that is a hard line. You're like, we have this much money that we have set aside for this care and it is how much we have. Maybe your parents gave it to you, maybe you've been saving up, whatever. But that is an idea in your mind.

And when the reality hits of you have this baby here and you have the nightcare, I'm just going to say it, it's like drugs. I feel like I'm selling drugs sometimes.

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People love the care that we provide so much. They love to sleep. And you don't realize how much you love sleep until you are not getting any of it.

So the vast majority of our clients end up adding on or extending their care beyond what they initially think they might do. And listen, if you're booking 7 nights a week for 4 months, fine, you're golden. That's great. Not saying you have to do that, but that's pretty much the only situation where I'd be like, okay, you're probably not going to extend.

If you want something like 3 nights a week or 2 nights a week or you're thinking of care for the first 2 weeks or the first month or whatever, take into account that you might want to extend that. Whether that's because in week 3, the baby goes through a growth spurt and they're suddenly waking up more at night and you decide you want care for 4 weeks instead of 3 weeks. Or, you know, you have 2 nights a week for 3 months and you're like, that's just not enough. I want more.

Or my recommendation, you front load the beginning when you're, you know, recovering from birth or your partner's recovering from birth or whatever, and you're getting used to having a new baby. So you do every night the first week, maybe every night the second week or 5 nights the second week. And then you go down from there, you can keep doing 5 nights, you can do 3 nights, whatever. But frontload it in the beginning and then space it out.

The model of care that I hate is to have care every single night for 2 weeks, a month, and then go cold turkey and have zero care. That is such a shell shock when you have been used to someone else caring for your baby every single night or even like 5 nights a week and then they're just gone. I would so much rather see you wean off, taper down, have help a little less, a little less as you get used to caring for your own baby.

That's another call we get all the time. "We had care, she just left, she was done, she couldn't extend, she had to go to another family, and now we're screwed because we cannot handle this on our own and she didn't teach us what to do." So we just have no clue what to do right now with our baby. Or maybe you do have a clue what to do, but you're just used to having the help every night and then suddenly you don't have it anymore. So don't do that.

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Ask them about timing. Are you available for the hours that we want? And if you're not sure what hours you want, ask them how much flexibility there is there. Some really popular shifts are 7 to 7, 9 to 7, 8 to 8, kind of depending on how many hours you want, 8 to 6, 10 to 8, whatever. I'm not just going to keep naming times. You know how a clock works.

Think about it, do we have older kids? Do we want someone who's there to take the baby so we can do their bedtime? Or do we want the caregiver to come after the older kids are asleep? Do we want someone who's there in the morning, like just kind of hand the baby over, bring the bassinet back into our bedroom and tiptoe out? Or do I want to get up and have a shower and have a coffee and maybe your caregiver will even make you breakfast and then you take the baby and then you start the day?

Do you have bigger kids? Do you want someone who's going to come and butt up to the time that you do the daycare drop off or the nanny comes or your mom comes to help out? Especially in those early days when you're like newly postpartum, maybe like your partner's dropping your two-year-old off at daycare on their way to work and you don't want to take over with the baby immediately when that happens, you want a little bit more support, just think about that timing and make sure that your caregiver is available for that.

I heard of someone that another potential client of ours had spoken to who has a hard and fast rule that she works 9 p.m. to 5 a.m. And that is so crazy to me. So crazy because 8 hours is a short shift. I understand that some people want it or it's all they can afford. Fine, you want to do 8 hours, do 8 hours. That's no problem. I'd rather see you do 8 hours than no care at all, but it is a very short shift.

But what I will say is 4 to 6AM, like, I know they say, we can't say everything's the same and every baby's different. I have yet to meet a baby who is calm and normal from 4 to 6 a.m. before they are sleep trained. There is just no baby in the world who is not making some kind of sound, grunting, squirming, fussing, kicking off in some way from 4 to 6 a.m. So if your caregiver's leaving at 5, like you're waking up at that time.

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I have said since I was a young nanny, also when you're thinking about these schedules, take into account things like what's your routine? What's your schedule? Are you a night owl? Are you an early bird? Do you want to be tucked into bed by 9:00? Have the caregiver come at 8? Are you usually up till midnight? Have the caregiver come at 9 or 10 and stay until 8 or 9 in the morning.

I have said since I was a young nanny, I'm a night owl. If I ever have children, I want someone here from like 5 in the morning to 10 a.m. Like every day, just to like deal with them in that hour so that I can wake up and I can start my day like a normal person and not be starting the day already exhausted because I've been woken up every 5 minutes since 5 a.m. And I only went to sleep at midnight.

So a caregiver that leaves at 5 a.m., I'm sure in certain situations it's fine. I personally do not think that that is useful to anyone. She was also significantly more expensive than we were and we're on the high end. I'm like, if you could map out how much, like, obviously we charge the same rate per hour, but if I could like gauge in the course of a night how much work I was doing at any given time, like sort of measured in dollars. I am doing the bulk of that work from 4 to 7, a little bit in the beginning, a little bit here and there. Of course, there's feeds you're waking up for and this and that. But the most intense hours of work I'm doing are in that very early morning. So you're paying all this money for her to do the easy part of the night, which is a little crazy to me.

Ask them philosophy questions like, what do they think of Socrates? No. A little dad joke there. What's their philosophy? How will they help you figure out your philosophy? Will they help you find your way? Like I said earlier, you don't want someone who's going to be super dogmatic. But what's important to you?

Do you want someone who's going to get the baby on a schedule? Do you want someone who's gonna get the baby sleeping well, who's gonna create some routines? Is it your second or third baby and you want someone who's gonna help the baby just fit in with the rhythm of the family? Do you want someone who is willing to help out with the older kids while you're with the baby? Maybe you're

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feeding the baby and somebody else reads the older kids a book and puts them to bed or gives them a bath or whatever.

What is important to you? Make sure that they're on the same page with you about that. If they tell you that they typically like to sleep train the baby or get them sleeping through the night, ask them how long that usually takes. Ask them some questions about how they do it just so you can make sure they are aligned with your philosophy.

A lot of these questions too, you're going to ask to the references. Reference calls are really, really valuable if you ask very probing questions like, how long did she work with you? If they say, we used her for overnights for 6 months, that person did not get the baby sleeping through the night. I mean, except in the rare case that there's some kind of medical issue, we have babies sleeping through the night by like 4 months at the latest. Usually, it's even earlier by like 3 months.

If someone calls us for sleep training and the baby's 8 months and they're like, "oh yeah, we still have the baby nurse because the baby wakes up so much during the night." I'm like, what was that person doing? Why were they not getting the baby sleeping? And when I say medical issues, I don't mean like normal baby reflux. I mean like a micro preemie that was born at 26 weeks and is still only 9 pounds at 3 months old or whatever. Unless there's a major issue and it's something that you want.

If it's not something that you want or you care about, you want someone who's going to wake up and feed the baby 100 times during the night when they're 4 or 5 months old, you do you. But if it's important to you that this phase of your life where you have a stranger coming over at night is over quickly, then you want someone who's gonna get the baby sleeping for you.

What if the caregiver becomes unavailable while you're working together? This is a great question to ask agencies. I've already talked about asking that to your solo caregivers, but that's a great question. What if something happens to them? What if their next client delivers early and they're like, "oh, sorry, I can't stay. I have to go to my next client." They really truly do this because it's really hard to

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predict when a baby's going to be born. And when you're trying to map out your schedule, you're just very dependent on the due dates lining up.

We had 2 babies due a month apart, born on the same day. One was late, one was early. If those families had both hired the same caregiver who said, "oh great, like this baby will be born on October 1st, I'll work with them for a month, then this baby will be born on November 1st, and I'll be done with the October 1st baby." What if both of those babies are born on October 7th? Then what? What do you do then?

You know, if you're working with an agency or a team or even a solo provider, what if we discover that this is not a fit? What if after we start working together, we're not aligned? I don't feel comfortable with the care or whatever. What are my options? In our company, it's rare, but if a client tells us they didn't love one of the caregivers or the vibes were off or whatever, we're like, fine, no problem. We can send you someone else. That is no issue at all.

Then there's no awkwardness and they don't have to talk to the caregiver directly and say, "oh, you know, we like you, but we don't feel comfortable working with you anymore." They don't have to do that. We handle all the awkwardness for them. So how is that awkwardness going to be handled? Are they going to get a new caregiver for you?

Certainly, you want to know that someone is following the safety practices and procedures that you want. Are they always going to put the baby down according to the guidelines? We had a sleep training client a few years ago who hired a baby nurse for her twins who put them on their stomachs, which is like a huge no-no, swaddled, swaddled on their stomachs.

Like, was she trying to kill them? And I think they might have also been on like a boppy pillow or something. I'm like, you are just actively trying to suffocate these babies? Listen, at the end of the day, if you put your kid on their tummy for tummy time and they fall asleep and their arms are out, they're probably not going to die. Don't tell the American Academy of Pediatrics I said that.

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But you put them on their tummy swaddled with no arms to push themselves up or do anything, that's chaos. So that's a good question to ask the references. Did they follow the safe sleep guidelines? Did they try to tell you it was okay to put a loose blanket over the baby or something like that? Like, did they follow the safety guidelines?

Some other questions to ask their references, their past clients, are they glowing? I want the references to be glowing. I have hired caregivers to work for my company or been in the process of hiring someone. And if I talk to one of their previous clients and they're like, "yeah, she was all right." I'm going to really probe that and see where that's coming from.

Sometimes they're glowing. They're like, "oh, she was amazing. She changed our lives. She got her baby sleeping through the night. I felt so confident. You know, I felt amazing." And that person I'm going to hire to work with us, I'm going to use them as one of our team members. But if they're like, "yeah, it was fine, whatever, it was our second baby, we got sleep, it's fine." I don't want that person on my team.

And what I hear from a lot of people who hire some of these solo care providers, these inexpensive solo care providers in New York City, we call them baby nurses or sometimes night nurses. I mean, night nurse is kind of a general term for all of us. We are newborn care specialists and postpartum doulas, but I'll accept night nurse. A baby nurse is generally like someone who moves in with you for like months at a time or weeks at a time and gets no sleep. They're exhausted. Don't hire someone who is trying to work 7 nights a week without a break or without trading off with someone else. Just don't do it. They are too exhausted. I should have said that earlier and I didn't.

So anyway, the questions as the references, first of all, I want the references to be glowing. "Oh, we loved her. What did you love about her? What did she do to make you feel comfortable? What are some of the ways that they went above and beyond? Did they get the baby sleeping through the night in the time that you wanted them to? What did they do for you? What did they do in addition to caring for the baby? What was their communication like? Were they willing to

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keep a log of what happened with the baby overnight? How did you guys communicate with each other?"

I've heard horror stories of people who just take the baby and are not interested in logging anything, hand the baby off in the morning, tell you nothing, or they're there all day and they just are locked away in the room with the baby and you never even get to see the baby. Or they're sitting on your couch blaring soap operas and holding the baby while you're trying to live your life. So ask, what was their communication like? What was it like relating to them?

Are they reliable? Are they on time if that's important to you? I'm going to tell you right now, I used to not really be on time all the time. And my clients knew that. And they knew that if I was 15 minutes late, I was going to stay 20 to 30 extra minutes in the morning. I was going to make up for that time. They didn't care. If I got there at 9:15 instead of 9 o'clock, they were fine with that. I always made the time up in the morning.

Is that something that you're comfortable with? If they're not super punctual, are you cool with that? Or do you want someone who's super, super punctual? Are they tidy? Do they wash the bottles? Do they do baby laundry? Are you going to find a mess left behind in the morning? Do they take out the diaper pail? These are all great questions to ask the references.

How was their reliability? Did they call out a lot? Did they have transportation issues? I think if you ask references vague questions like, "oh, how were they?" They'll be like, "oh, they were good. Great. Yeah. You know, we really like them." Okay, cool. Like is there anything you'd say wasn't great? Like, no, you know, people don't want to say bad things about other people.

But if you let them know that you're comfortable hearing whatever they want to say, that will go a long way to get them to really open up. And if you ask specific questions, because if you say, were they on time all the time, the person's not going to lie and say, no, they weren't. They might say, "you know what, they weren't, but it wasn't a big deal because they always made up the time in the morning and they were so great that we didn't care." That's what I imagine my clients say about me.

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What I'm saying is things like that are not necessarily a deal breaker. We have very punctual people that we've hired that the clients don't love as much. Another note about that sort of thing is I don't think years of experience is the metric that you should be basing your decision on. Because first of all, someone who's been doing this a bazillion years may not have come up to date. They may not have the latest guidelines.

They may not know what people are doing nowadays with babies. They might be stuck in their ways. Listen, I'm old school in a lot of ways when it comes to babies, but I stay up to date on the latest guidelines for safety and the latest food feeding recommendations and feeding products and all that kind of stuff.

And then also, I've had caregivers that come to work for my company after taking a training and they've just been doing some other job that was totally unrelated to this. And from their first night with their first client, they are beloved. They are requested back. There's just something about the person that you have caring for your baby at night that you want them to be someone that you want to have around. You want them to be someone that you're excited to see, not someone that's like a necessary evil. So somebody with no experience at all, other than maybe with their own kids, could be fantastic right out of the gate, especially if they're working with an agency and a team that's mentoring them. Maybe not so much a solo provider, I don't know...

But then I've had people that have had 10 years of experience. I'll send them to some clients and the clients are very "meh" about them and very tepid. I'm like, "okay, I don't know what you've been doing the last 10 years, but it's certainly not been making clients happy." So that is kind of all the factors. The biggest thing I want you to take away from this is, find out about their reliability. Find out what they are doing to stay in good shape for your family, for your baby.

If they're telling you they work 7 nights a week, that is a red flag. Do not hire that person. If they are doing a day job and a night job, don't hire that person. Reliability, tiredness, taking care of themselves, and you get what you pay for.

I would love to hear your questions. Please post them on Instagram or you can email them to us. Everything is at happyfamilyafter.com or on Instagram at

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HappyFamilyAfter or you can leave a voicemail on our website and I look forward to hearing from you. Have a great day. Bye.

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Thanks for listening to this week's episode of *Parenthood Prep*. If you want to learn more about the services Devon offers, as well as access her free monthly newborn care webinars, head on over to www.HappyFamilyAfter.com.