Building Family-Provider Relationships via Tele-Intervention

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Purpose

- Introduce coaching model for EI service delivery
- Demonstrate tele-intervention
- Share pilot study experiences
- Present family and provider perspectives
  - Strengths
  - Challenges
  - Recommendations
What is “Tele-Intervention”?  
(ASHA uses “telepractice”)

- Providing services via telecommunications technology
- Used to overcome access barriers due to:
  - Distance
  - Unavailability of specialists
  - Impaired mobility
  - Culture/linguistics
Service Provision Goal

To provide all infants and young children with hearing loss and their families with services that are:

- Timely
- Comprehensive
  - Frequency, duration, and consistency
- Coordinated
- Effective
The Promise of Early Intervention

Developmental Approach

Remediation

Birth to 6 yrs
Informed family choice
Decision-making process
Range of options
Unbiased presentation
Dynamic process (family needs, desired outcomes, assessment guided)
Providers w/expertise in childhood hearing loss
Two Factors Predicted Language, Vocabulary, and Verbal Reasoning Skills at Age 5

Age at enrollment in EI and family involvement

- Family involvement explained most of the variance
  
  Mary Pat Moeller (2000). *Pediatrics, 106*, p. 3

Therefore......

- How do we facilitate Family Involvement?
Support Family Decision Making by...
(Adapted from Roush & Harrison, 2009)

- Recognizing family challenges at identification/diagnosis of hearing loss
  - Respond sensitively to feelings, respect family decisions
- Using a family-centered team approach to encourage family participation
  - Listen to learn parents’ priorities, interests, and concerns
- Providing unbiased information on communication approaches
  - Assist the family in exploring community resources to learn about communication approaches
- Communicating in culturally sensitive and understandable ways
Family EI Tele-Intervention Sessions

Families – *the primary facilitators of language*
(adapted from Rush & Shelden, 2008)
Active parent participation is key and required!

- Parents identify activities, strategies, learning opportunities, and practices that will enhance their child’s learning and communication development
- Parents are able to demonstrate strategies modeled and/or discussed during the session
- Parents can decide which strategies and activities work best for their child/family
- Parent reflection on activities improves overall child participation
Practitioner Role (Teacher, Clinician, EI):
(adapted from Rush & Shelden, 2008)

- Primary person/coach – using current evidence-based practices to facilitate listening and spoken language

- Focus of Intervention
  - Identify activities, learning opportunities, and current practices with the parents
  - Demonstrate and model practices discussed
  - Discuss which strategies/activities work well and discuss what we might want to do differently
Sharing Knowledge and Skills with Families

- Fluent implementation (based on knowledge and experience)
- Teach parents to do the intervention
  - “By focusing on their children’s needs and creating support for the children’s development, we place parents’ learning of new skills in the context of their goals for their children and families.”
- Manage the parent teaching process

(Adapted from Kaiser & Hancock, 2003)
Family EI Sessions

- Areas typically covered:
  - Audiological Management
  - Communication
    - Auditory Learning
    - Language Development
    - Speech Development
  - Development of Inner Discipline/Behavior Management
  - Cognition/Pre-Academic skills/Pre-Literacy
Examples of Tele-Intervention to Deliver EI Services to Families of Children with Hearing Loss
Sound Beginnings and USDB Pilot Project
Birth to 3 year olds and families

- Tandberg Video conferencing equipment w/dedicated internet connections in family’s home and provider office

- Families of 2 children w/hearing loss
  - 1 w/ bilateral cochlear implants
  - 1 w/bilateral hearing aids
  - Middle-class, college-educated 2-parent families
  - Little tech experience beyond email/internet search

- Received language intervention for 1 hour/week via Tele-Intervention

- Received HV’s for general developmental issues 1-2 hours/month via USDB
Family Interview Findings based on external evaluation

What’s Different About T-I?

- It’s hard to describe...but it’s different!
- Parent is the main person interacting with child (vs the provider)
- Child is more responsive to parent
- Therapist provides specific direction to the parent (vs the child)
- Provider has high level of expertise otherwise not available in the community
- Provider is very specific in direction, reinforcing, encouraging
Would Families Choose T-I over Traditional HV’s?

- Yes, definitely!
- Predictable format, schedule, materials
- More control of family routine: Gives us our lives back...
- Child “stranger anxiety” not a problem
- Can hold sessions when child/family member has minor illness
- Recordings allow other family members to be involved
- Can involve other providers (i.e., audiologists)
Family Perspective: What are the Benefits of T-I?

• Stronger parent knowledge of language development process
• Increased skills and confidence in promoting child’s language, listening
• Increased child responsiveness to parent
• Enhanced child language development, listening skills
• Increased skills of family members as coaches themselves
Family Recommendations for Organizing Sessions

- Dedicated equipment and room w/door
- Tech support person for training in home
- Send materials, lesson plans ahead of time
- Involve children in preparing for session
- Let child interest direct activities
- Reinforce parents frequently, specifically
- Have recordings uploaded quickly for others to view
T-I Session Routine

- Discussion of goals from the previous week
  - Update on new communication milestones, new behaviors, sounds, words that have emerged
- Review of goals for current session
- Demonstration of new or ongoing strategies, techniques with appropriate activities
- Coaching the parent as he/she performs the activity
T-I Session Routine

- Discussion of continuation of goals or selection of new goals based on present performance
- Discussion of integration of goals into the daily routines of the home
- Summarizing of the session and goals for the coming week
- Allowing questions from the parents about next steps, goals, short- and long-term outcomes
Nancy & Alex
Nancy & Alex
Nancy & Alex
Provider Perspective: Logistics

- Use of Static IP Address – Essential
- Broadband connection or higher
- Use of “high-end” videoconferencing equipment – placed in the home
- Equipment training with the parents – needed, but brief
- DVD Recorder for capturing the sessions and sharing with working parent
Provider Perspective: Logistics

- High-quality microphone – at both sites
- Use of a document camera – to show smaller toys, books
- Planning therapy sessions – requires more time, logistics due to a pure coaching model
  - Gathering of toys/activities and communicating in advance with the family
  - Bigger toys!
- Sending activities to the family to have
Provider Perspective: Logistics

• Challenges:
  - High-speed internet connections not available everywhere
  - Cost of ‘high-end’ videoconferencing equipment
  - Units are stationary in a designated room – all of the activities must be in that room
  - Clinicians/practitioners who are “techno-phobes”
  - Coaching parents/family members doesn’t come naturally to some professionals
**Provider Perspectives: Outcomes**

- Children are acquiring communication milestones that approximate or are equal to their hearing peers.
- Families/parents are more confident in their own ability to facilitate listening and spoken language goals.
- Fewer cancelled sessions and more overall intervention being provided over time.
Potential for T-I Expansion

- Training University students:
  - Unobtrusive observations
  - Recordings for targeted feedback
  - Decreased travel time = more clinical hours

- Bringing expertise to rural areas
  - Greater frequency of intervention

- Coordinating with other providers
Questions?
Comments?
Ideas?
Thank You for Listening!

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