Telehealth for Children and Adolescents: April 21, 2020

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Participant Question & Presenter Response

Q1 How do you engage young children or children with special needs in telehealth services and sustain their attention?

A1 It is important to work with the caregiver on how to set up the environment for the session to provide some structure and limit distractions. For example, keep interesting toys/items close, but in bags or storage bins that caregivers can control. Have the parent position the camera so that both the parent and child are in view – for example, by moving the camera to the floor if the parent and child are playing on the floor. If the parent has access to Bluetooth/wireless headphones, encourage their use for providing in vivo coaching (e.g., providing live feedback to the caregiver while they are interacting with the child) as needed. Using headphones or speakerphone is also useful if conducting the session over the telephone.

You can also set up brief learning opportunities and shape up the sessions to gradually increase over time as attention is sustained. Visual cues and positive reinforcement can also help with this. Additionally, you can break sessions into smaller time periods, such as twice a week for two short sessions instead of longer weekly sessions. Use show-and-tell time or interactive activities to connect with the child on a topic in which they are especially interested.

Q2 How do I engage parents in telehealth services if I was primarily doing individual work with children and adolescents?

A2 Set the stage for what the parent should expect prior to the session. With younger children, provide tips and strategies to help the session run smoothly, such as having the parent prepare materials that can occupy the child’s focus and attention and seeking support from other caregivers if possible to manage other children in the household. Once in-session, introduce the parent to the skill you are working on and provide opportunities for the parent to practice with the child as appropriate. If you are working with older children, set specific parameters for parent involvement and outline expectations up front. Outline parameters of confidentiality with the adolescent and parent together.
Q3  At what age would you recommend that children are able to start having individual time during telehealth sessions and how do you provide a safe space to do individual work?

A3  Doing individual work depends on the developmental level and presenting concern of the child or adolescent. It is recommended to engage parents to the greatest degree possible to ensure that they have strategies to support the child with therapeutic goals in the home setting. When presenting concerns become more private events (e.g., difficult thoughts, feelings, memories) having more individual time with the child may be appropriate, but parents should still be included to some degree to develop strategies to support the child at home. To ensure children have a safe space for individual work, as mentioned above, set up expectations for how to do so with parents and adolescents in advance. Invite the parent into the session for the beginning and/or end of the session to check in and debrief, then have the adolescent find privacy during the session. Brainstorm a quiet space where you can conduct the session and encourage the adolescent to use headphones for privacy. How you handle privacy should also take into account how you conducted sessions prior to physical distancing and how much the parents were involved.

Q4  How do you manage groups with adolescents via telehealth?

A4  As you would in person, establish group rules and safety plans at the start of the group session. Revisit these rules at the start of each group session and whenever needed in sessions. Ensure that you have emergency contacts for each student in advance and that you have established a safety plan with the contact person. It can also help to have a co-lead who can chat with students privately, perhaps in a Zoom breakout room or a separate session, if needed.

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