

# ESIT Alternate Service Delivery Methods

## COVID-19: Virtual Home Visits and Beyond

In response to Governor Inslee's Stay Home, Stay Healthy order, typical Early Support for Infants and Toddlers (ESIT) service delivery methods have been adjusted to support the health and wellness of children, families and the dedicated providers who are serving them. While many things in our world have shifted, the program's mission remains the same:

*To build upon family strengths by providing coordination, supports, resources and services to enhance the development of children with developmental delays and disabilities through everyday learning opportunities.*

This guide is designed to provide strategies for delivering services through modalities beyond telepractice (a detailed [guide on the use of telepractice is available on the DCYF website](#)).

### Equity

Providing equitable access to early intervention services is always important and may require especially innovative and flexible thinking to support continuity of services during the COVID-19 pandemic.

It is important to explore different ways to respond to the individual needs of infants, toddlers and their families. Considering cultural and language preferences, families' living situations, available resources and other factors that may impact service delivery options is essential.

The importance of maintaining a supportive relationship with families cannot be emphasized enough. If something isn't working, it's important to try another way:

- Promote learning experiences utilizing a variety of materials and methods that support success in a range of settings that are meaningful to the family.
- Design materials and activities that support both technology and technology free experiences for children and families.

### Tips from your Colleagues

Meaningful services are occurring across the state thanks to a commitment to families and a host of innovative strategies that ESIT providers are using to engage families and support ongoing services. The bulleted advice outlined below has been shared by your ESIT colleagues from across the state.

## Referrals and Intake

- Create YouTube videos of the FRC reviewing intake paperwork that can be posted on your agency's website or sent directly to families through email or text. [Click Here for Example.](#)
- Email or mail information packets and paperwork before the first virtual visit.
- Create a resource binder for new families with a description of services and all initial paperwork. This can be dropped at their doorstep before the first virtual visit.
- Drop off paperwork at the family's door and review it together over the phone from the car. Once the parent has signed, they can then leave it outside the door for the provider to pick up.

## Family Resources Coordination

- Reach out to families often. Take the time to check-in and ask them how they are doing before jumping into planning and scheduling.
- Many families need access to additional resources to meet basic needs before they are ready to participate in early intervention services. Work in partnership with families to connect them to available community resources.
- Explore different modes of communication and find what works best for the family (text, email, phone, zoom, [other secure messaging and video chat platforms](#)).
- Discuss resources to enhance participation in early intervention services. Share information about a variety of online resources and support groups available on social media platforms.
- Re-connect with families that initially declined virtual visits may be helpful the longer we are required to forgo in-person services.
- Arrange for mental health providers to connect with families who may need additional support during this time.
- Provide a chance for parents to talk with each other by hosting virtual parent support group gatherings.

## Intervention Strategies

- If the family is hesitant to participate in virtual meetings, offer a phone call or suggest a trial run on the telepractice platform to help ease the family's anxiety. If they still decline, be sure to follow up in a few weeks to see if things have changed.
- Send pre-recorded videos back and forth. Ask families to send clips of their child doing an activity for the provider to observe and the provider can then follow up with a video or call. This can be especially helpful for evaluations.
- Encourage siblings to participate in virtual visits.
- Motor evaluations are especially challenging with the tools that are parent report only, try supplementing with items from other tools to support 'observing' items on video.
- Try using a doll to demonstrate hand placement for parents in virtual sessions
- Provide recorded circle time/story time/activity ideas on YouTube or your agency's website. (Link with example)
- Create at-home activity packages or kits with hands-on materials for families that can be mailed, picked up or delivered on a regular schedule.

- Some programs have arranged to ship materials directly from the retailer to families or arranged a time for families to pick up items through a “drive-through” arrangement, some agencies have been able to mail from their offices.
- Drop off loaner therapy equipment or supplies at the family's door.
- Provide resources/directions with all activities, to support families and caregivers — consider including older siblings help with instruction.
- Consider taking advantage of the opportunity that virtual visits provide to meet with families during different daily routines such as during a family meal.

### A few Additional tips from your Colleagues

- Share relevant YouTube or other videos during Zoom visits.
- Post activity ideas on your agency’s Facebook page.
- Email regularly scheduled newsletters to families. Include articles about child development, suggestions for learning activities or links to online resources.
- Make sure that families receive technical training in how to use the virtual platform and/or any other technology used for services
- Phones are less effective for virtual visits; tablets or laptops are preferable if possible.

### Child Outcome Summary (COS) Process

Visit the [Early Childhood Technical Assistance \(ECTA\) Center website](#) for guidance regarding COS completion when teams can’t meet in-person. Some ideas for completing the Child Outcome Summary Process when the team is unable to meet in person might include:

- Let the family know you'll be sending them information to review before the meeting (e.g., a summary of functional performance, questions about the child's functioning, a decision tree and other parent resources for outcome measurement).
- Mail or email the decision tree before the IFSP meeting or use screen sharing during a virtual visit.
- When sharing information with the family, consider the accessibility of materials, including providing them in the family's preferred language.
- Make sure that parents understand the meeting purpose and reinforce the importance of their partnership in the process. Acknowledge that parents know their child best.
- Ensure complete documentation including resulting decisions and the meeting format.
- Send a follow-up note with the formal paperwork that thanks participants, summarizes decisions and indicates the next steps.

## Alternative Service Delivery Activities

	Service delivery is...	Service delivery is not...
<b>All methods</b>	Two-way communication exchange that lasts 15 minutes or more and <u>directly supports progress toward outcomes identified on the IFSP.</u>	Brief one-way communication that supports services but <u>does not directly support progress toward IFSP outcomes.</u>
<b>Phone call</b>	A phone call of 15 minutes or longer to discuss progress and challenges since the last visit that also incorporates parent coaching strategies. <i>(intervention activity)</i>	A single or back and forth series of brief messages between the provider and family. <i>(administrative task)</i>
	A series of phone calls on behalf of the family to identify or support access to resources that address outcomes on the IFSP. <i>(family resources coordination)</i>	Making a single call and leaving a message. <i>(administrative task)</i>
<b>Text/Email</b>	Engaging in a back and forth conversation with a family regarding what they have been trying at home and offering strategies and/or links to online resources applicable to the IFSP outcome. <i>(family resources coordination or intervention activities)</i>	Texting a family to confirm an upcoming appointment. <i>(administrative task)</i>
	Sharing resources and following up with a phone call or additional texts about whether or not they were useful. <i>(family resources coordination)</i>	Sharing resources without follow-up support to the family that does not result in a dialogue such as a mailing a newsletter. <i>(administrative task)</i>
	Sending pre-recorded videos of the family participating in a routine/activity for the provider to observe and respond with a recorded video coaching strategies or written information. <i>(intervention activity)</i>	Check-ins with the family that do <b>not</b> result in a back and forth exchange address emerging family needs, or link to IFSP outcomes. <i>(administrative task)</i>