

MAKING PROGRESS WITH PARENT COACHING

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ABOUT ME

Graduated from UT Austin in 2014

Graduated from Baylor University in 2016

I have worked in a private practice, children's hospital and early intervention

I primarily work with infants and young children with complex needs and pediatric feeding disorders.

I am a member of SIG 13 and a volunteer for Dysphagia Outreach Project.

I currently live in Austin, TX with my husband and goldendoodle, Bevo.



FINANCIAL DISCLOSURES

Financial: Employee of Bluebonnet Trails Community Services. Pediatric consultant for Taste for Life, LLC.

Non-Financial: SIG 13 member and Dysphagia Outreach Project volunteer

LEARNER OUTCOMES

List the 5 components of the coaching model.

Describe the purpose of reflective questions.

List 3 benefits of the coaching model.

WHAT IS EI?

- Every state has a different name for Early Intervention
 - Louisiana is called "Early Steps"
- Services are provided to children under the age of 3 with a qualifying medical diagnosis or a developmental delay
 - <https://ldh.la.gov/index.cfm/page/139/n/139>
- "EarlySteps services are designed to improve the family's capacity to enhance their child's development."

WHO IS A PART OF THE TEAM?

- PARENT
- SLP
- OT
- PT
- EIS/Special Instructor
- SC
- RD
- LPC
- and more!

WHAT IS CAREGIVER COACHING?

Coaching is an adult learning strategy in which the coach promotes the learner's ability to reflect on his or her actions as a means to determine the effectiveness of an action or practice and develop a plan for refinement and use of the action in immediate and future situations.

(Rush & Shelden, 2004)

PARENT EDUCATION VS PARENT COACHING

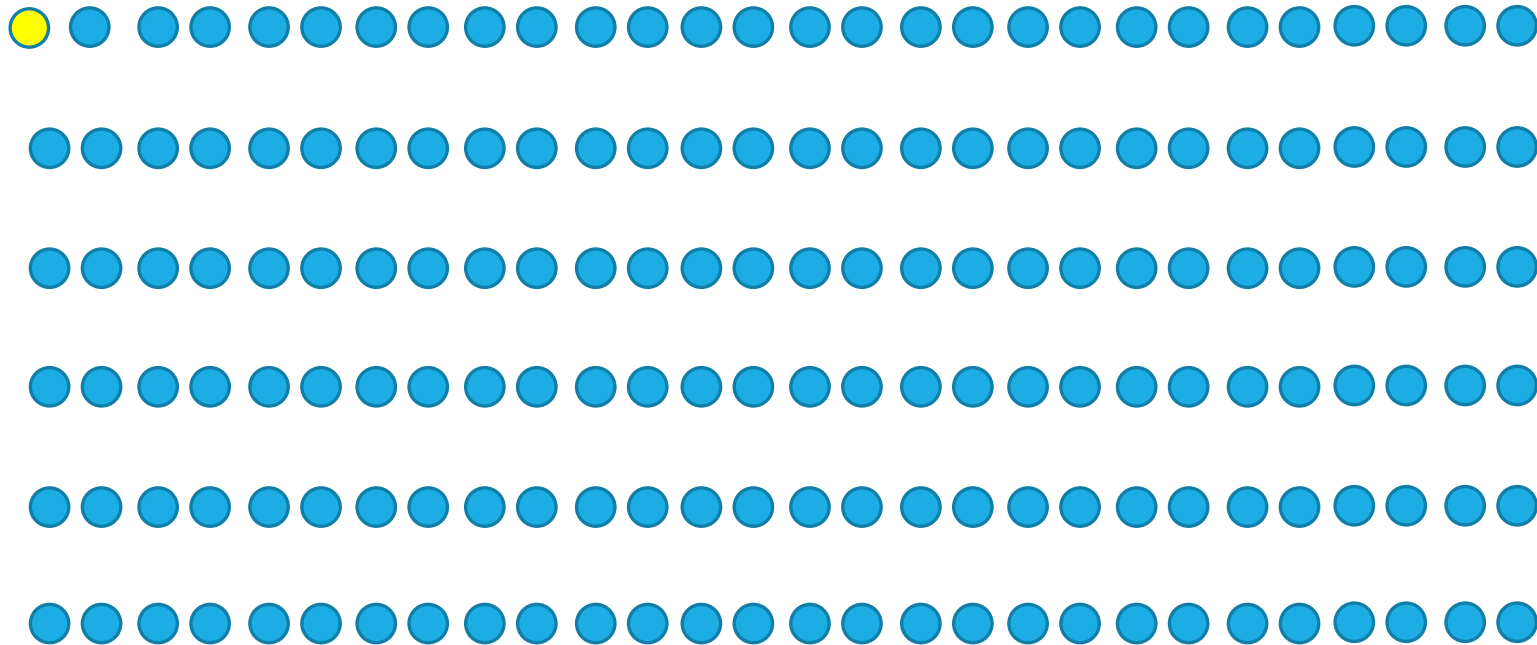
Parent education

- Instructing the family on what to do and how to do it

Parent coaching

- Working alongside the family
- Listening to their needs and ideas
- Instructing through joint planning, observation, action, feedback and reflection.

WHY USE PARENT COACHING?



WHY USE PARENT COACHING?

- Research shows that caregiver-implemented therapy is more effective than therapist-implemented in the early intervention population. (Deveney et al., 2017)
- We are empowering the caregiver to become the driver of their child's care.
- We are empowering the caregiver to become the child's therapist.
 - Erasing the idea that SLPs have a magic wand
- It is more culturally sensitive

FAMILY- CENTERED FROM THE START

Caregivers are involved in the development of the Individualized Family Service Plan (IFSP)



Caregivers identify what is a priority for them.

This is done with a routines-based or Concerns, Priorities, and Resources interview

• Problem with standardized testing

As clinicians, we can provide suggestions, but the family has the final say when creating goals

When we do this, we get better buy-in!

KEY PRINCIPLES

Infants and toddlers learn best through every day experiences

All caregivers can enhance their child's learning and development

The provider's primary role is to support the caregivers

Every interaction must be individualized

Goals must be functional and based on child's needs and family's priorities

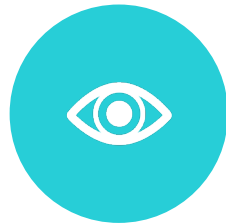
Good teaming practices

Interventions need to be evidence-based

COMPONENTS OF THE COACHING MODEL



JOINT PLANNING



OBSERVATION



ACTION/PRACTICE



FEEDBACK



REFLECTION

JOINT PLANNING



Review strategies that have been practiced since last visit

Ask caregiver to reflect on successes and challenges related to the strategy practiced

Avoid broad ?s 'how have things been going?'



Identify activity setting for today's visit



Identify caregiver's goal for today's session



Ask awareness questions to discover what the parent already knows or what they have been trying.

OBSERVATION



Observe how caregiver and child engage in a typical activity setting

This is a critical step that we often forget about



Therapist comments on observation

“I notice that...”]



Ask caregivers for their ideas FIRST before providing strategies

“How could we get them to say a word here?” “What ideas do you have for...”

Avoid yes/no questions “Do you have ideas?”



Therapist verbally explains or models a strategy while caregiver observes

Consider the parents learning style



Always provide an explanation of WHY each strategy is beneficial

ACTION/PRACTICE



Ask caregiver to demonstrate the strategy



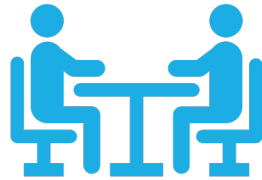
Use verbal feedback when necessary to support the parent in using the strategy



Identify other activity settings where caregiver can practice strategies.

Bathing
Dressing
Mealtime
Nap/Sleep

FEEDBACK



Provide positive feedback to caregiver to show that you are actively engaged in the session and to reinforce their participation



Provide informative feedback

I love how you gave him a choice for snack because that gave him an opportunity to use his words.

Avoid vague 'great job!'

REFLECTION

Ask analysis questions



Ask alternative questions



Ask action questions



Avoid yes/no questions

SOME CHALLENGES OF PARENT COACHING

Coordinating between multiple caregivers and getting them all on the same page

- Parents, daycare providers, grandparents, other relatives

Changing their idea of what therapy looks like, especially if they have prior experience with a medical model

- Scheduling
- What visits look like

Some parents may feel awkward or uncomfortable in the beginning

- Providers must be empathetic, caring, respectful and develop trust with the families
- Embrace silence!

MORE BENEFITS OF PARENT COACHING

Sessions can occur (pretty much) at any time of day

- Decreases cancellations/no shows because they will be doing mealtime/dressing etc whether you are in a session or not
- Therefore, it is critical to schedule during daily routines and not just play for every session

A session's success does not depend on the child's mood

Telehealth services become an option

- This decreases cancellations due to sibling illness/intrastate travel etc.

Bagless/no-prep therapy sessions

- This can be hard at first

Capacity-building

CAPACITY-BUILDING

“Family capacity-building practices are used to support and strengthen parents and other caregivers’ abilities to provide their children everyday learning opportunities. This is accomplished using a number of different strategies for supporting and strengthening parents’ use of everyday activities to promote child learning and development.” (ETCA Center, 2017)

Why is this important?

CAPACITY-BUILDING: RESOURCES

▶ Helping families access resources is a part of ECI services.

▶ However, we want to be mindful of the type of help we are giving.

▶ We want to aim for participatory help giving

▶ This builds a caregivers capacity by:

- ▶ Showing them that they are capable of problem-solving
- ▶ Decreasing the stress/anxiety they may feel as the child gets close to age 3.

CAPACITY-BUILDING: RESOURCES

01

Develop their own goals

02

Develop their own plans with support

03

Implement the plans with support

04

Evaluate the effectiveness of their actions

05

Develop new plans as needed

06

Recognize the results of their actions (self-attribution)



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