Telehealth Prep Tip Sheet for Parent-Child Therapy

There are several things we can do to help Telehealth sessions run smoothly. Before starting:

		Ensure there is stable and reliable internet connection of at least 10 mbps. This can be tested at www.speedtest.net
		Electronic device: You can use any computer, tablet or smartphone with video and audio capabilities. It helps to
		have the HIPAA compliant telehealth software app installed but it is not required (e.g. Simple Practice, Zoom)
		Have all other devices charged (Bluetooth headset/AirPods before the session)
		Utilize a wireless Bluetooth ear piece.
		If you are using a mobile tablet or laptop for video and your phone for audio, make sure that both are charged, and they have appropriate wired or bluetooth headphones.
		Do not blur your background. The clinician will need to see your space.
		Have your phone with you and charged for the session. Have your clinician's phone number in your phonebook. The phone may serve as the primary device or the back-up device if another mobile device fails during the session (e.g., if sound does not work in either direction, if the battery dies, etc.).
		Make sure to obtain all the devices you need for the session at least 1 hour before session starts. This will avoid a situation where you have to take a device that a child is playing with (e.g., an iPad or tablet) away from the child to use during the session. This could lead to significant challenges.
		Preparations if our internet connection drops: It's important that we have a Plan B if our internet Telehealth connection drops or fails for any reason. Your clinician will create a back-up plan with you of what to do if this happens. It's important that we have a way to reach each other if the connection fails.
Preparing Your Space:		
		The first session is intake and completed without your child present. This gives an opportunity for the clinician to gather information on your child.
		Your clinician will complete a virtual walk-through "tour" of the family home or space.
		☐ Identify rooms with possible distractions, breakables, or anything we do NOT want the child to get into.
		Safety hazards removed (open windows, outlets, rolling chairs,
		beverages, hot water, fragile or breakable objects such as lamps,
		television sets; bookcases should be removed unless anchored to wall)
		• What types of breakables/valuables are in the room? Do they need to be removed?
		Practice setting up the camera angle so the clinician has a wide view of the parent.
		Make sure the child will stay in the room. Ideally choose a room that has the option to close a door opposed to an open plan area.
		If the child is likely to leave the room, then the clinician will have you position yourself sitting
		against the door during play. For younger children, a door knob child safety cover (see below) could be put over the door so they stay in the room with you.
Opt	ional	Purchases:
		<u>Flexible Tripod Mount for Phone</u> . If you have a child who is particularly interested in playing with devices, it may be
		helpful to mount your device in a place out of reach. For toddlers, a door knob cover is often sufficient to keep children in one area.
		Door Pinch Guards (6 Pack) Baby Proof Doors Extra Soft Foam, Sleek Design, Child Safety, Baby Safety Finger
		Protectors - Jool Baby https://a.co/d/fDOgbU6 or cut a pool noodle and put on door
		Lay-n-Go 2-in-1 Portable Drawstring Toys Storage Organizer and Play Mat for Room and Travel, Made for Kids and Toddlers with a Durable Patented Design https://a.co/d/8iw6SZQ