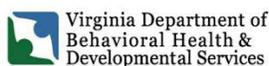


COACHING FAMILIES DURING SERVICE COORDINATION



A PRACTICE GUIDE

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WHAT IS COACHING?

The use of coaching as an interaction style and tool for engaging families has been strongly recommended in the early intervention (EI) field over the past ten years (Kemp & Turnbull, 2014). Coaching is commonly defined according to the work of Rush and Shelden (2011) as:

“an adult learning strategy in which the coach promotes the learner’s (coachee’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.” (p. 8)

This definition encourages the use of reflective practices to help the coachee (who in the case of EI is the caregiver) actively participate in the EI process. The coach, or EI practitioner, acts as a guide to the caregiver, helping the caregiver feel confident in his or her ability to promote the child’s development, facilitate the child’s participation in daily routines and activities, and access resources to meet needs. Coaching allows the EI practitioner to impact the child’s development through supporting family interactions that will continue when the practitioner is not present.

Early childhood coaching includes five characteristics: **observation, action/practice, reflection, feedback, and joint planning** (Rush & Shelden, 2005, 2011). These characteristics are implemented in a fluid manner, with the coach flowing in and out of them during a visit or contact with a caregiver as needed. Each characteristic can be used by any EI practitioner to build a caregiver’s capacity to support their child’s development and solve any problems that arise (Rush & Shelden, 2011; Swanson, Raab, & Dunst, 2011). For a detailed description of each characteristic and an overview of coaching, see [Evidence-based Definition of Coaching Practices \(Rush & Shelden, 2005\)](#).

Coaching is commonly thought of as an interaction tool primarily used by EI service providers, such as physical therapists, speech-language pathologists, occupational therapists, and developmental service providers. Service coordinators often struggle with seeing how coaching “fits” with the important support they provide to families. This practice guide is designed to help service coordinators understand coaching and how they can use it to build the capacity of families to participate in the EI process, share information, access resources and solve problems. Service coordinators, supervisors, and mentors can use the *Coaching during Service Coordination Fidelity Checklist* at the end of this document to reflect on and develop coaching practices.

HOW TO USE COACHING TO HELP FAMILIES PARTICIPATE IN THE EI PROCESS

Early intervention is grounded in collaborative, respectful, and active relationships between caregivers and EI practitioners (Bruder, 2010; Workgroup on Principles and Practices in Natural Environments, 2008). It is within the context of these relationships that support is provided to the caregiver to ensure her active engagement in the EI process. For service providers, the relationship provides the vehicle through which intervention strategies are developed, guidance is provided as the caregiver practices using strategies with the child, and plans are put in place for how the caregiver will use the strategies with the child during daily activities (Division for Early Childhood, 2014; Friedman, Woods, & Salisbury, 2012). Similarly, the relationship between you, the service provider (and any other team members), and the caregiver provides the context in which much planning and support occurs that is designed to enhance the caregiver's active participation in the EI process.

Service coordinators can either plan *for* families or plan *with* families. The difference is important to understand. When you plan for families, you tell them how processes work and tell them what they are expected to do. For instance, you might explain the assessment process and tell the caregiver that she will be asked questions about the child's development and daily activities. You can tell her who will participate in the assessment, when it will be, and how long it will last. When you plan for families, they are passive recipients of information. This information might have very little context for the family so all that they know is what you tell them. This limits their ability to prepare for how they want to participate in the process – a process that is really designed to learn about them and their child. Instead, service coordinators should be intentional in planning *with* families and encouraging their active participation throughout the EI process, as it unfolds for their family.

Family Participation (FP) Practices

FP Practice 1: Prepare the Family. The first practice here may seem like a simple one but it is one that is easily forgotten. Since most families will be new to EI and do not have a frame of reference for how to participate, you must first explain the specific process for which you are planning. Help the caregiver understand how important her participation is and that she is invited to participate however she is comfortable. Invite the caregiver to ask questions and provide answers that lay a foundation for the caregiver's role in the process (Woods, Wilcox, Friedman, & Murch, 2011).

Family Participation (FP) Practices

1. Prepare the family
2. Help the caregiver consider options and make decisions
3. Develop a joint plan.

FP Practice 2: Help the Caregiver Consider Options and Make Decisions. When you plan with families, many of the decisions are not predetermined. You use coaching skills, such as observation, reflection, action/practice, feedback, and joint planning to work together to make these decisions (Rush & Shelden, 2011). You still explain how the process works, but you also look for opportunities where the caregiver can provide input and help plan so that the process is individualized for the child and family. With our assessment example, you could ask the caregiver what information she would like to share with the rest of the assessment team and how she would like to share it (e.g., by writing it down ahead of time, sharing a video of her child, discussing it during the assessment). You can help her prepare for sharing the information by providing tools such as a handout with some of the questions she can expect. You can enlist the caregiver's assistance with helping plan for who

will participate in the assessment (if possible in your program). Perhaps the caregiver really wants a speech-language pathologist to attend; you can explain the options and let the caregiver help decide the makeup of the team. You can offer options for scheduling by asking about the caregiver's schedule, the child's best times of day, and if there are any other people the caregiver would like to invite.

When you include the caregiver in the planning, you can use your coaching skills to help her consider her options and arrive at decisions that best meet the needs of her family. Examples of questions or statements you can use to help families participate in planning include:

- What would you like the rest of the team to know?
- How would you like to share that information?
- Who would you like to participate in the assessment?
- What day and time would work best for you?
- What would you like to see happen?

You can use a similar approach when helping families participate in other processes. When you coach families through preparing for IFSP meetings, the transition conference, etc., you engage the caregiver in ways that intentionally help her build on prior knowledge and experience, consider options and preferences, and prepare for what she wants to bring to the table. Coaching, rather than telling the caregiver what to do, builds the caregiver's capacity to confidently enter into these situations empowered to be the best representative for her child (Rush & Shelden, 2011; Swanson, Raab, & Dunst, 2011). It also reminds the caregiver that her participation is vital to the process; without it, there would be no way to make important decisions.

FP Practice 3: Develop a Joint Plan. After decisions have been made, you and the caregiver should verbally agree on what each of you will do next. In this manner, you are developing a joint plan for supporting the caregiver's participation (Rush & Shelden, 2005). After the activity you planned for, always check in with the caregiver to see how it went. Invite her feedback and share your own observations and insights. Processing the caregiver's experience will help both of you plan for future activities in the EI process more effectively.

HOW TO USE COACHING TO HELP FAMILIES SHARE INFORMATION

As the service coordinator, you help families share information with the rest of the team. Some families are ready to share a great deal of information from the earliest contacts. Others may find sharing personal, family-specific information difficult. You can use coaching to help families understand why their input into the Individualized Family Service Plan (IFSP) and the implementation of intervention is so important. Coaching can also help you help families share information in a way that is comfortable for them.

Information Sharing (IS) Practices

IS Practice 1: Ensure that the Caregiver Understands.

One of the first things you can do is make sure that the caregiver understands what information is being asked and why it is important (Woods & Lindeman, 2008). In order for the caregiver to feel comfortable with participating in the EI process, she must understand her role in it. Helping the caregiver understand how EI works, what to expect, and the importance of the caregiver's role are activities that often occur during first contacts between families and service coordinators. Continuing this conversation throughout the EI process is also important, as is regularly checking in with the caregiver about her understanding. Once a caregiver understands, sharing information may be easier.

Information Sharing (IS) Practices

1. Ensure that the caregiver understands
2. Respond to the caregiver's questions and attend to the caregiver's needs and comfort
3. Use open-ended questions/statements to facilitate reflection and information sharing
4. Provide feedback

IS Practice 2: Respond to the Caregiver's Questions and Attend to the Caregiver's Needs and Comfort.

Coaching is often misconstrued as a process of asking caregivers many open-ended questions. While service coordinators do use questions to facilitate reflection, they must also be responsive to questions from the caregiver and attend to the caregiver's needs. You do this in many ways, such as being an active and engaged listener, observing the caregiver's body language, repeating back what you heard, and being responsive to needs and other information shared by the caregiver. You also attend to how caregivers share information to determine what level of support is needed.

You will play an important role during meetings and other contacts with families in reading their communication. Honing your abilities to recognize when families are feeling comfortable or uncomfortable is important because you are the link between the family and the rest of the EI system. For example, a caregiver may indicate discomfort during an IFSP meeting by:

- averting gaze
- crossing arms
- turning away
- becoming more quiet or more agitated
- sighing more frequently
- appearing to tune out during discussions.

When you see these signs, you can pause the meeting and/or discreetly ask the caregiver if she is comfortable, has questions, or needs to take a break. Observing the caregiver's behavior, listening closely to what is said and how it is said, and responding in a sensitive manner are all important when coaching families.

IS Practice 3: Use Open-ended Questions and Statements to Facilitate Reflection and Information Sharing. You can also use open-ended reflective questions and statements to help caregivers share information. These questions and statements are designed not as an interview, but as a tool to facilitate conversation (Woods & Lindeman, 2008). It is important to remember that we do not barrage caregivers with questions; instead, we ask them in the flow of conversation to help the caregiver reflect, share what she knows, and gather information that is useful to developing and implementing the IFSP. Examples of reflective statements and questions that you might use at an IFSP meeting include:

- Tell us about the parts of the day that go really well/are easy for Aidan.
- Which parts of the day are challenging for him? For you?
- What are some of your child's favorite things to do? What makes him laugh?
- What would you like to see your child be able to do in six months/a year from now?
- What would make things easier for you/your family?
- When you think of your child being able to do _____, what would that look like to you?
- When would you like for the therapist to come?
- How often do you think it would be helpful to have the developmental service provider visit?
- How can we help you?

You can use these questions to help the caregiver share her input during IFSP meetings, service coordination contacts, etc. The intent of reflective conversation is to support the caregiver in being an active participant and decision-maker, rather than a passive listener (Rush, Shelden, & Raab, 2008). Asking open-ended questions like this helps the caregiver share her expertise, or knowledge about her child and her family's daily life. This information is vital to a meaningful IFSP and it is often up to the service coordinator to help the caregiver share it.

IS Practice 4: Provide Feedback. While the caregiver shares information (or afterwards), you can provide feedback to let her know that what is being shared is valued. For instance, you can use affirmative feedback such as:

- Okay, I understand, thanks.
- What I am hearing you say is _____.
- You sound really excited about his progress!
- He (child) really seems to like that.

This type of feedback lets the caregiver know that you are paying attention and that you value her information. Being responsive also contributes to strong rapport and trust, which are both necessary for high quality service coordination.

When families are sharing information, it can be very tempting to jump in with suggestions and instructions, such as "Have you tried...?" or "One thing you could do is..." When using coaching, it is best to be careful about interjecting your own opinions or directions so that the caregiver has the space needed to fully participate in the conversation. Interjecting in this manner may suggest to the caregiver that what she said or did was incorrect. Instead, try to "step back" and focus on the importance of what the caregiver is sharing. Once you have sufficient information from the caregiver, you can then begin the next phase of the conversation, which may include problem-solving and planning.

HOW TO USE COACHING TO HELP FAMILIES ACCESS RESOURCES AND SOLVE PROBLEMS

As a service coordinator, you are a key contact for families when they need assistance with problem-solving and accessing resources. When families need assistance with basic needs, such as housing, food, clothing, or diapers, they are likely to call you for help. Examples of other needs you might assist with include finding a pediatrician or other medical specialist, identifying child care options, or applying for a Medicaid waiver. You will also help families with problem-solving more specific concerns, such as helping the caregiver determine how to address a concern with the child's service provider, how to pay for expensive equipment such as a bath chair or adaptive stroller, or how to adjust to a child's new diagnosis. Whatever the need, an important part of your job is collaborating with families to help them solve their own problems. This is very different from you solving problems for the family. When you think of applying coaching here, it is important to think about how you help families.

Two Options for Helping Families Access Resources and Solve Problems

As a service coordinator, you have two options for how you help families access resources and solve problems:

Option 1: Locate the resource for the family, make the contact, and provide the family with the information. Solve the problem by sharing what you know and hoping that it helps or hoping that the family follows through.

Option 2: Assist the family in determining what they need, then coach the caregiver in how to solve the problem for himself, including collaborating on what steps need to be taken and how to go about it, and planning for the desired outcome.

In Option 1, you would be doing most or all of the work for the family. While this may seem natural to you, you must consider that this option does not build the family's capacity to help themselves. Instead, it may build their dependence on you as their go-to person for all problems and needs. Service coordinators are typically natural helpers, but must keep in mind how they can help in a more long-term sense. Solving an immediate problem may be very appropriate when the need is urgent or associated with a safety risk (Rush & Shelden, 2011); most needs, however, are not so immediate. Whenever possible, choose Option 2.

In Option 2, you would be using your coaching skills to build the family's capacity to solve their own problems and access resources when they need them. At first, some families may need more of your assistance with this process. Over time, though, a good service coordinator helps a caregiver become an independent problem-solver so that she has the knowledge and skills to solve problems without (or with less of) the service coordinator's help.

Practices for Accessing Resources/Solving Problems (AR/SP)

AR/SP Practice 1: Reflect on the Joint Plan from the Previous Visit. Problem-solving often requires more than one interaction between the service coordinator and the caregiver. When a resource need was discussed or problem-solving occurred during a previous visit and a joint plan was established, the service coordinator should begin the next visit by revisiting the previous joint plan. Following up on the previous plan offers the service coordinator and the family the opportunity to reflect on what was discussed and check in on any progress the caregiver has made toward meeting the need. Revisiting the plan establishes accountability and helps the service coordinator ensure that the family has the information they need to be successful with accessing resources and solving their own problems between visits.

Practices for Accessing Resources and Solving Problems

1. Reflect on the joint plan from the previous session
2. Help the caregiver reflect on prior knowledge and experience
3. Facilitate collaborative problem-solving and provide feedback
4. Share what you know
5. Develop a joint plan

AR/SP Practice 2: Help the Caregiver Reflect on Prior Knowledge and Experience. Whether the discussion is focused on a previously discussed need or problem, or a new one has arisen, service coordinators can help families reflect on what they know and what they have already tried to address the problem or access the resource. As a service coordinator, you are expected to be very knowledgeable about community resources (Bruder & Dunst, 2008). Rather than making the call for the parent or providing a resource list right away, help the parent think through how she could go about solving the problem or finding the resource. This discussion will probably only take a few moments but is important. Try using some of the following statements and reflective questions:

- Can you tell me more about this problem?
- What do you feel that you need?
- Who could you call to help you? Family? Friends? Neighbors?
- What have you already tried to do to solve this problem?
- What are all of the possible options we can consider?
- What did you do last time this need arose?
- How did it work when you used that strategy/accessed that resource last time?
- What could you do differently this time?
- Which strategy/resource would you like to use to solve this problem?
- How can I help you?

Asking a few good open-ended questions is helpful for more than simply gathering information. These questions are an integral part of coaching because when you use them, you are facilitating the caregiver's thinking process and helping him learn how to think beyond simply asking for help. The goal of coaching in this situation is to build the caregiver's capacity to problem-solve and access resources independently (Rush, Shelden, & Raab, 2008). This does not mean that you withhold the information you have. Instead, you are helping the caregiver identify informal resources first (like family, friends, neighbors who can assist) before going to more formal resources (like the list of agencies you know about). You are also helping the caregiver identify strategies she has successfully used before or resources she has accessed previously, which helps her see that she may have the capacity within herself to solve the problem.

AR/SP Practice 3: Facilitate Collaborative Problem-Solving and Provide Feedback. After you know more about the caregiver’s thoughts and resources, you can transition to collaborative problem-solving. This involves a reciprocal exchange of ideas with a continued focus on helping the caregiver brainstorm possible solutions (Woods, 2018). You can use informative and affirmative feedback to respond to the caregiver’s ideas as you continue the conversation toward a solution. Examples of feedback that you might use when problem-solving include:

- It’s really helpful to hear more about the problem, thank you.
- It sounds like that strategy worked well for you last time.
- I’m glad you thought of that resource. It sounds like it could be helpful again.

You may find that you flow in and out of Practices 2 and 3 here, as you reflect, problem-solve, and brainstorm together. Flexibility is helpful here in order to facilitate the conversation. When the caregiver does not have any prior knowledge or experience to pull from, or does not have the information needed to develop possible solutions, it is time to move to Practice 4 and share what you know.

AR/SP Practice 4: Share What You Know. You may need to share what you know about community resources to raise the caregiver’s awareness of available options to consider. At this point, asking the caregiver if you can share a few ideas or a resource is very appropriate, but always after you have given the caregiver the chance to think the problem through first. *The important thing to remember here is pausing before you offer direct assistance or information so that you can learn more about the problem or need, what the caregiver knows and has already tried, and what assistance she needs.* This increases the likelihood that the assistance or information you provide will be helpful to the family. After you share what you know, circle back to reflection by using an open-ended question, like “What do you think about that?” to invite the caregiver to decide if the resource or information you shared will help solve the problem. Ultimately, it is the caregiver’s choice.

AR/SP Practice 5: Develop a Joint Plan. Once you share a resource or suggestion, either coach the caregiver in how to address the issue at that time (e.g., coach the caregiver in how to make the phone call to the new child care center while you are present) or help the caregiver plan for what she will do next (e.g., discuss plans for calling the center later). A joint plan is also helpful when the caregiver arrived at a solution without you sharing your expertise. Consider writing down the plan or inviting the caregiver to write it down and always follow-up on that plan to see if the caregiver was successful or if further assistance is needed.

COACHING ENHANCES SERVICE COORDINATION

When service coordinators integrate coaching practices into their interactions with families, they are working toward an ultimate goal of a good service coordinator – to build family confidence and capacity. Good service coordination results in families who are confident and competent with sharing information about their child, accessing resources and solving problems with minimal assistance, and actively participating in the processes within EI and beyond. How the practices described above are implemented will, like much of your work, depend on the situation, the strengths and needs of the child and caregiver, and your ability to facilitate the conversation. None of these practices should add greatly to your work; instead, they will make your interactions with families more effective. You will have more information and be better able to individualize the support you provide. How you provide service coordination matters (Bruder & Dunst, 2009) – make sure you are building the capacity of families to help themselves, rather than building their dependence on you.

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