

Transitioning to Quality Series

Developing Comprehensive and Effective Beginning Joint Plans

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Coaching in Early Intervention Training and Mentorship Program

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TOOLKIT FOR DEVELOPING EFFECTIVE BEGINNING JOINT PLANS

Successful EI sessions occur when providers and caregivers frame the beginning joint plan early in the visit by reviewing previous plans and developing priorities for the session.



FRAMING AND BUILDING

First, we engage the caregiver to review the implementation of the previous between visit plan. The details that emerge from this conversation lead to a mutual understanding of the caregiver's thoughts and actions and typically include strategies used, the routines and activities in which the priority was targeted, results or progress, the caregiver's level of satisfaction, and a discussion of how the caregiver would like to move forward with the priority.

Second, we collaborate with the caregiver to build an explicit, detailed plan for the current visit. Once the caregiver identifies their priority, we support discussion around details, such as the importance of the priority, strategies previously used, the routines and activities in which the priority is situated, and a description of the caregiver's desired outcome for the current visit.

This dialogue sets up implementation of the joint plan with focused observation, targeted action/practice, reflection, and feedback to address outcomes that are important to the family.

Click below to view a video discussion around developing effective beginning joint plans





As in construction, building a solid joint plan requires the right set of tools. Even with the same child and family, the plan for each session will be different, so it's helpful to have a toolkit available to keep progress on track. We will look at some common scenarios that arise and consider how to use our toolkit for each.

WHEN A PRIORITY ISN'T INDICATED

Tool: Scaffold

It is common for us to have a caregiver not answer or say, 'I don't know' when we ask a reflective question during joint planning. **Scaffolding** is a great tool for engaging caregivers. In scaffolding, a structure of support is provided when needed, until it can be removed. We scaffold by rephrasing, or reducing the complexity of a question (e.g., change an analysis or action question to an awareness question) and/or by providing ample wait time. We can also scaffold by recalling previous conversations/plans or by encouraging the caregiver to ultimately choose the priority and details for the joint plan. As caregivers become accustomed to the rhythm of coaching, we typically see increased engagement and reflection allowing scaffolding to be removed.





Tool: Blueprint

Blueprints are another tool we can use when caregivers do not indicate their priority. In early intervention, the family assessment drives the development of the IFSP, which serves as the blueprint, or overarching plan for services. We can review IFSP outcomes or revisit the family assessment, as well as offer choices based on previously discussed priorities, to support the caregiver in identifying their priorities for the session.

Click below to view a video example of supporting a caregiver to identify their priority.



SAME PRIORITY EACH VISIT

Tool: Tape Measure

It is also common for caregivers to choose the same priority each visit. A **tape measure** is an effective tool for precise measuring. Being flexible and responsive to caregiver ideas while setting incremental targets as they choose their priorities, followed by measuring progress, is a strategy to move the priority and session forward.



Tool: Chisel

A **chisel**, which shapes, can be used to refine the priority, strategies, and routines. For example, the use of reflective questions could ultimately lead to the caregiver discovering the purpose for the session, as well as differentiate how the current session will involve new approaches, ideas, or practice.



Click below to view a video example of using questions to shape the plan for the visit and setting a target



CAREGIVER LEADING

Tool: Compass

Sometimes, caregivers are very motivated to share, and they may begin an observation, lead an activity, or even just talk quite a bit before we have a chance to initiate the joint planning conversation. This is a good problem to have—we want caregivers to be engaged and leading! After listening and observing, we can respectfully circle back around like a **compass**, to confirm the priority and tweak strategies that were observed or discussed.



Click below to view a video example of circling back around to confirm the priority.





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Successful EI sessions occur when providers and caregivers frame the beginning joint plan early in the visit by reviewing previous plans and developing priorities for the session. This dialogue sets the stage for implementation of the joint plan with focused observation, targeted action/practice, reflection, and feedback to address outcomes that are important to the family.

These tools address common scenarios to keep joint plans on track

WHEN A PRIORITY ISN'T INDICATED

Scaffold

- Rephrase question
- Reduce question complexity
- Provide ample wait time
- Recall previous conversations
- Encourage caregiver to choose



Blueprint

- Review IFSP Outcomes
- Revisit the Family Assessment
- Offer choices

SAME PRIORITY EACH VISIT



Tape Measure

- Being flexible and responsive to caregiver ideas while setting incremental targets

Chisel

- Use reflective questions to shape and refine session plans



CAREGIVER LEADING

Compass

- Circle back around
- Confirm the priority





We are always looking to expand our toolkit.

What other tools do you find handy in joint planning?

Click [here](#) to visit the First Steps webpage for more information about the Coaching in Early Intervention Training and Mentorship Program

Click [here](#) to visit our YouTube channel for more information about the Coaching in Early Intervention Training and Mentorship Program



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