

Going Virtual: Tips for OTs, by OTs

The following information has been collected from OTs with experience practicing virtually. The data presented below are paraphrased and organized according to the eight steps of the Canadian Practice Process Framework (CPPF)*. These considerations are generic in nature; they may or may not apply to your practice setting or College regulations. For supplementary paediatric tips, please refer to our resource titled *Going Virtual: Tips for the Paediatric OT*.

STEP 1: ENTER & INITIATE

Consent

- Consult the **policies and standards** of your organization and provincial regulatory bodies
- **Be sure to establish consent.**
 - Consider using [consent forms](#) to send to clients prior to their appointment
 - Receive and document consent to email clients follow-up information and to confirm appointments
- Always document the type of consent obtained (e.g. verbal, email, fax, text)
- **Be transparent** with clients about your experience with virtual practice and its existing evidence base; transparency may also include saying “this is a new way for us to meet.. let me know if anything you are seeing/hearing isn’t clear or if you are uncomfortable in any way”
- **Focus on the benefits**, while acknowledging the potential limitations of virtual OT services
- Describe any differences/similarities between what you can offer virtually versus in-person

STEP 2: SET THE STAGE

Setting Norms & Expectations

- **Establish clear boundaries** for the virtual therapeutic relationship
- **Plan for delays and disruptions**, technological issues, and initial learning curves
- Consider shorter, more frequent sessions to accommodate client fatigue
- Encourage the client to explore the virtual platform before the first session
- Ask clients what their preferences are for platform of service delivery and accommodate
- Establish a **back-up plan** if technology fails (e.g. phone, alternate platform)
- If applicable, **establish the supports you need from caregiver(s)** during sessions for safety

Developing Rapport

- Entering a client's homes requires **cultural humility**
- Expect that rapport building may take longer virtually, depending on your client's experience with technology
- Becoming familiar with the technology together is a great opportunity for rapport building
- Always **consider the client's level of comfort** in their home and if appropriate, use what you see in the client's environment to engage them (e.g. virtual tour, pets)
- Be **mindful of your non-verbal communication**



Setting Up Your Space

- [Consider ergonomic principles](#)
- Ensure you are in a **private, quiet space** free of distractions
 - Let other members of your household know you are in a session and use earphones or a soundproof space to ensure privacy
 - Ensure any charts or confidential information are not visible, especially if you will be sharing your screen
- Test your internet speed at *fast.com*
- **Practice the technology** and familiarize yourself with its features
- Have a plan in case technology fails (e.g. technical support, phone call)
- **Have a crisis plan** in place should your client show signs of immediate mental or physical distress

STEP 3: ASSESS & EVALUATE

Choosing Assessments

- Consider the **shortest assessments** that will provide you with the most salient information
- Look for **modified versions** of standardized assessments (e.g. modified MoCA) and if they have been validated for virtual assessment
- Consider using **less structured** assessments (e.g. COPM, GAS, social history)
- **Engage the caregiver** by explaining what you are assessing and why, and how they can help
- Consider how technology can **enable team-based interdisciplinary assessments** (and interventions)

Administering Assessments

- Take time to consider the best way to set up your materials (e.g. split screen between the video call, the assessment, and your notes)
- **Be creative!** Use items in the client's home
- Take advantage of opportunity for **functional/occupation-based assessment** in the client's own environment
- Consider asking the client not to watch the screen as they do an action; seeing an image of oneself can distract/cause anxiety for some

Physical Assessments

- Be cautious and creative, caregiver engagement is extra important here
- When safe, ask clients to palpate or move their extremities as you would facilitate in-person
- Demonstrate movements on camera
- Ensure clients have a clutter-free space around them
- Ask client to send videos for certain movements not possible during session (e.g. biking outside)

STEP 4: AGREE ON OBJECTIVES, PLAN

Goal Setting

- Therapy goals should be **clearly set and documented**
- Consider **simplifying goals** and interventions/recommendations for clients as they may be more difficult to comprehend or complete virtually
- Give yourself **more time to achieve goals** with clients virtually
- Focus on **occupation-based, client-centered** goal setting



Choosing a Platform

- Consult your organization's expectations for virtual service
- **Encryption is key!**
- Refer to list of PHIPA compliant platforms
- Some virtual platforms used by OTs include:
 - OTN (if your organization is registered)
 - Zoom Health through Embodia Academy
 - Google Meet
 - Doxy.me
 - Attend Anywhere
 - Jane App

Scheduling & Planning

- **Give yourself enough time** between each virtual encounter to:
 - Complete documentation
 - Send client a summary of their completed session and plans for next appointment
 - Prepare for next sessions
- **Prepare multiple plans** prior to session in case Plan A doesn't work
- **Anticipate materials needed** for the session in advance (links, videos, photos, assessments, resources, etc.)
- Send **reminder emails** to clients of upcoming appointments
- Explore apps, websites, resources that could support and enhance your practice
 - e.g. Boom Cards, screen sharing, PowerPoint, whiteboard, Jamboard

Collaborate

- Consider joining **social media groups** on Facebook or Reddit for tips more specific to your area of practice!

“It's still about delivering person-centered compassionate care... technology is just the way to do that.”

STEP 5: IMPLEMENT PLAN

- Consider if the client's environment is safe for intervention of interest and adapt if needed
- **Again, be creative!** Use materials available in their home
- If special equipment is required, consider sending it by mail
- Interventions may require **more reliance on client/family-coaching**
 - Consider hosting caregiver support sessions and facilitating peer support
- If client has limited internet bandwidth, consider emailing visual information guides and home program information to use at their own time and pace
- **Consider prevention:** when unable to provide treatments that are more physical in nature, many clinicians have turned to interventions to prevent deterioration and provide psychological support
- **Consider consultation** model of service delivery: if you are unable to engage the client, try focusing on education

Equity & Accessibility

- Consider financial, infrastructure, resource, training/comfort, and cybersecurity barriers to access and **take action** to minimize them
 - E.g. consider alternative modes (e.g. text, WhatsApp)
 - Have a procedure in place for clients who require translation
- Virtual practice can be an opportunity to reach clients who **live far away**, and may not otherwise have access to in-person therapy

Group Sessions

- Consider having **two facilitators**, with one to manage the platform (e.g. unmuting, sharing screen, etc.); consider **"breakout" room** functions for different activities

Engaging the Client

- It may take extra effort to keep the client engaged
- **Celebrate all victories**, use online interactive activities, and revisit client-centered goals frequently
- Consider engaging caregivers if appropriate (provide reassurance)

STEP 6: MONITOR & MODIFY

- **Acknowledge achievements!** Any progress counts
- Consider doing **quick check-ins** that you may not otherwise be able to do in person due to appointment constraints and travel time
- **Continuously request feedback** from clients/caregivers about what is working and what is not through the virtual platform
- Reflect on what is working and what is not for you
- **Try new things!** Many clients and clinicians experience "virtual fatigue," where they lose interest in virtual interactions over time

STEP 7: EVALUATE OUTCOME

- Use **apps that track client progress**, and can be shared with clinician
- Clients who use **diaries/journals** may reflect on their virtual care experience and choose to relay their insights
- When available, use validated virtual measures
- When necessary, use an informal approach to gather feedback

Extra Tips

- Be **flexible and open-minded** about what therapy should look like
- Meet clients where they are at
- **Be present;** address moment-to-moment challenges
- Screen share, screen share, screen share!
- **Consider the opportunities** technology presents, not just the barriers

STEP 8: CONCLUDE/EXIT

- Obtain client feedback before exiting therapeutic relationship
- Provide a clear list of recommendations and/or a home program, with useful handouts and resources
- **Have client/caregiver summarize your recommendations** to ensure a clear understanding