

Strategies for Turning Your In-Person OT Session into a Telehealth Session
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I have been receiving questions from my readers and Facebook followers about handwriting development strategies that are appropriate for use in a telehealth session. I love helping out when I can. But what I'm going to advise will most likely come as a disappointment to you, as you are probably looking for some Handwriting With Katherine gems of wisdom.

As an experienced telehealth provider, I've found that the same strategies that I use in my 1:1 OT room sessions most often are the most appropriate for this venue. Forget about the distance gap and the fact that you are on opposite sides of the camera. None of that will make a difference when you use your critical thinking skills to engage your students. At the beginning of my sessions, I like to high-five my students to engage their visual perceptual skills and trick those skills into thinking that the students are actually sitting right across from me. It's a natural thing for me to do and it works to set everyone at ease.

I've put together some hints that have helped me through my work with telehealth. Try not to be too disappointed if you are already using them. If you are, keep honing them. Because they work.

I'm going to frame my guidelines below based on a reader's question. She asked about activities that are "cool and interesting and will keep.... 5th and 6th grade boys in special ed who are high functioning, distractible, easily bored, have phones, etc....engaged on line." That made me chuckle! Aren't all boys that way? Anyway, here are some guidelines that may help lots more than finding the "just right" activity and that will work for sessions with students of any grade or age.

1. You MUST (and I cannot stress the "must" enough) have a responsible adult sitting with the students, if not right next to them then very, very close by. No matter the students' ages. **This person will be your eyes, ears, and hands during the session. This person, in effect, is YOU during the session. He or she will be following your guidance relative to the items below.**
2. **It's very important to consider seating and table adaptations (Link Below).** Have the students show you their chair and table arrangements. Are they sitting at the dining room table on a dining room chair? Are they sitting in their rooms at a desk that may still be too big or small for them? Are they using a bean bag chair to provide calming sensory input or a ball to bounce on to maintain attention? Work with all of these to ensure that they have the best possible opportunity for success. Some suggestions are chair adaptations to raise or lower their bodies to allow their elbows to rest on the desk, decreased noise in the background if they are in the mainstream part of the house, an adequate lighting source, a 3-ring binder if they are in a bean bag chair, and so on. Their physical foundation is the most important item in any successful handwriting or telehealth remedial session.
3. Think about the typical strategies that you use in a session to keep these high functioning boys attentive and interested. Do you remove any and all distracting devices or items from the OT table? Do you make that an OT Room Rule? **Then it should be a rule during teleconferencing sessions, as well. Any "classroom strategies" that you use in school should be reinforced here so that the students recognize that telehealth IS their OT session and they can understand that**

their role and responsibilities in the session are the same as when they are in your room in school. It's important to set the ground rules right away. Avoids confusion. Students can become easily confused about the transference of skills in these unfamiliar instances, especially when they're using a form of technology that mimics Skyping or FaceTiming like they may do with their grandparents.

4. Do you use personal space strategies to gain and maintain attention to the task at hand? By personal space I mean strategies like placing your hands close by theirs, close enough to use a finger to point out what you are working on, to draw their attention to it, or to clarify your directions? Or do you use a pencil or pointer object of some sort if the student feels uncomfortable with you being so near or if you are sitting across from him or her? If so, then you can demonstrate these strategies to their parents and ask them to use them as you work on activities in the session. Again, it is very important to gain the cooperation and trust of that responsible adult.
5. You should follow the exact session plan that you use in school. This helps the students understand that their therapy has simply moved to their home and that everything else remains the same. Less confusion. For example, my sessions always follow the same pattern. In fact, if I decide to skip around, the students will usually call me on it! We do a gross motor activity first, then a vision skill warm up, a fine motor warm up, and then a handwriting specific task, even if it is just doing [Minute Mania](#) (link below) for 5 minutes. Each of these can be done in a telehealth session – even the gross motor portion – which is critical to get them “out of their living rooms and into your session!”
6. Select activities that you have completed with them in school and show them the different ways that you will use them now. For example, there was a discussion on my Handwriting With Katherine FB page about using tic-tac-toe in telehealth. Many readers were offering up their ideas for ways to include different facets of handwriting in the game. But one reader asked how we could use it in telehealth. She offered her own solution right in her question. The students do the writing for the therapist! Double “win” there for handwriting development skill practice, right? Be a creative OT. Trust your OT skills!
7. To continue with the guidance above, nearly any strategy that you've used in your sessions can be adapted for use in telehealth. The students will love helping you create a new way to play the game – you can even put them in charge of writing down the new rules of engagement – who plays what role in the game, how you will participate, who will keep score. There's no rush to make it all work smoothly right off the bat. I enjoyed listening to the students' ideas and most often they were better than mine. If a strategy demands an certain amount of “hands on” that you cannot provide and that the responsible adult is not able to perform, then change strategies. There's always more than one way to get results.
8. After No. 1, this is the most important guideline: Obtain an inventory from your students and their parents about the types of games and activities that they have on hand so that you can work with what they have. Not only does this make the sessions seem more natural and “real,” it also helps the students to engage more freely – they are using their own materials. Also, if you have an activity in mind that requires other tools, ask the parents beforehand if they have them or if they can get them. If they don't or can't, no one gets disappointed or frustrated. And lastly, determine up front if the parents have the means to download and/or copy materials that you'd like to use in the sessions. If not, then it's important to simplify your strategies. Use just plain old paper and pencils versus downloaded activity sheets. Demonstrate what you would like to have the students or their parents write on the paper to create the worksheet you would have liked to use. For example, the parents can write the words that your students will copy or uppercase letter formations for which that the students will write their lowercase matches.

I know that Handwriting With Katherine should have some astounding things to say in this area. But truthfully, it really is simple if you let yourself consider the goal and not the task as the most important issues you will have in telehealth. The goal is the end game. And the tasks can take the form of any move you want to play – even if it is not the ideal one you’d have chosen for your OT room session. And it’s more important than ever to give the students a voice or a choice about what they want to use to achieve that goal. If they have a game you’re not totally convinced will cover all of the skills you want to address in that session, it’s most likely going to be more effective to use it to address the lesser amount of skills than it would be to try and encourage the students (especially distractible boys) to choose the game that addresses all of the skills on the session plan.

Some Resources:

1. Seating and Table Adaptations: <http://blog.handwritingwithkatherine.com/5-reasons-handwriting-needs-good-seat/>
2. Minute Mania: <http://blog.handwritingwithkatherine.com/minute-mania-turning-handwriting-into-a-functional-tool/>
3. My blogs on telehealth might help. I’ll share them just in case:

This is Part 1 in a 2-part series on telehealth that addresses legalities that may have changed during this special time in OT and telehealth practice. I offer it as a resource; however, if you are working as part of a school-district online program, most likely you won’t need it right now.

<http://blog.handwritingwithkatherine.com/telehealth-in-occupational-therapy-practice-part-1-legalities-competency-best-practices/>

4. This is Part 2 in the above series. It offers practical advice on engineering a successful telehealth session:

<http://blog.handwritingwithkatherine.com/2018/03/>

5. This is my most current blog on the topic and condenses the information in Part 2 above:

<http://blog.handwritingwithkatherine.com/2020/03/>

Best wishes for a successful and delightful telehealth experience,

Katherine