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Without Borders: Using Tele-therapy to Expand Access

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Changed World for Hearing Loss



•Early identification and intervention are proving that auditory-based intervention is enabling children with all degrees of hearing loss to "have access to spoken language through listening".





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Paradigm Shift

- From using technology and a more visual approach to using technology to create an accessible auditory world for children with hearing loss.
- From training the brain to substitute visual cues to recognizing sound and developing the brain naturally.(carol Flexer)





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Technology is NOT correction:

- Cochlear implants and Digital Hearing Aids do not restore normal hearing.
 - Amplified acoustic information is not the same as "normal" hearing.
 - "Electronic" signals through a cochlear Implant are different from "normal" hearing
 - Intense instruction in auditory skills helps children learn to listen and interpret what they hear through cochlear implants and hearing aids





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Implications

- Early identification and intervention can result in normal language and speech development by age 5.
- The demand for access to highly-trained listening and spoken language specialists is increasing far beyond availability, especially in rural areas





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What does Early Intervention do?

- Coach parents to be a part of the habilitation process
- Educate children early in favorable "signal-tonoise ratio" environments to improve auditory brain development
- Focus on more than one year growth in listening, speech and spoken language
- Goal- to "catch up" with peers by school age





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Services through tele-therapy

One-on-one auditory-verbal therapy

Access to highly trained staff

 Sessions designed to work directly with a parent, SLP, or Early Interventionist







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Therapy focuses on:

- Equipment functioning-Ling 6 sound check
- Listening as a continuum- detection, discrimination, identification, comprehension
- Verbal responses- auditory feedback loop
- Language development- pre-linguistic, semantics, syntax, and pragmatics
- Aural habilitation strategies
- Repair strategies





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Barriers to Teletherapy Provision: Administration

- Funding and reimbursement
 - Part C funds
 - Insurance
 - Private Pay
- Structure for authorizing and verifying provision of services
- Licensure



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Barriers to Teletherapy Provision: Regulation

- Managing a private/confidential place for the professional conducting the session.
- Managing conflicting activity while working with a child and family.
- Establishing a system for verifying provision of services in writing





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Barriers to Teletherapy Provision: Infrastructure for Providers

- Build a system around the goals of the program
 Who Where How many
- Establish internal resources/needs
 - HIPAA compliance
 - End user security and peace of mind
 - Availability of tech support
- Resources/needs of your end-users
- Budget availability to build necessary infrastructure





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Barriers to Teletherapy Provision: Infrastructure for families

- Access to fast speed internet
- Computer
- Web camera
- Microphone/Speakers
- Software (video conferencing)
- Back-up phone with speaker capabilities



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Barriers to Teletherapy Provision: Structure

- Ensuring constant presence of caregiver with child
- Utilization of coaching techniques
- Provision of support materials
- Assessment of progress
- Provision for face-to-face counseling and support





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Barriers to Teletherapy Provision: Equal Access

- Providers/Agencies may provide additional hard or soft ware under individual agreement with the family.
- The family must have computer/internet access in the home.
- The family must know how to use the equipment prior to the first therapy session.
- Technical problems will need to be worked out before starting therapy.



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Questions?

- You can find St Joseph Institute for the Deaf on the web at www.sjid.org
- Teri Ouellette at touellette@sjid.org
- Cindy Costello at <u>ccostello@sjid.org</u>







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Resources

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