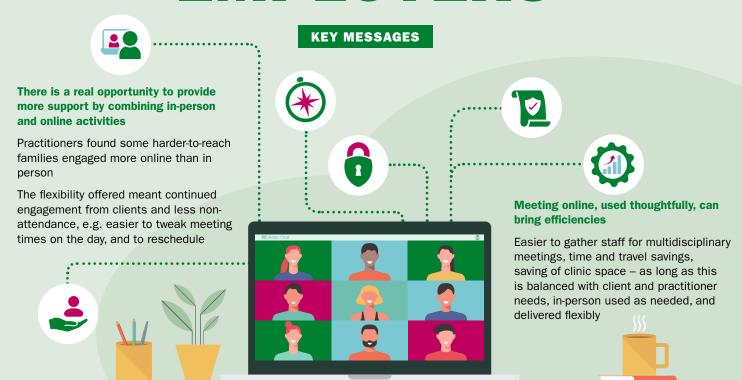
EMPLOYERS



GUIDELINES FOR EMPLOYERS

SUPPORT

All practitioners need time and support for online meetings, including:

- Time to prepare fully for online meetings: tech planning and mental space
- Post-meeting admin and reflection time
- Post-meeting debriefing/supervision, especially if working from home (WFH) with high-risk clients

Stronger guidance and checks are needed on screen time use and health when WFH, e.g. encouraging and building screen breaks into agendas and diaries

Clear boundaries are needed between work and personal life when WFH, e.g. ensuring set lunch breaks, ensuring high-quality colleague contact with boundaries and supporting flexibility

Clients: consider the need to provide safe spaces and technology support for online meetings for clients without them: can new bookable local safe spaces be provided?

INFORMATION GOVERNANCE AND POLICY GUIDANCE

Local authorities/NHS trusts need to manage the challenges of balancing therapy need and secure information governance involved in meeting vulnerable people online. Sharing of effective practice is needed across education, health and social care

Online documentation: WFH requires transferring paper records to online ones, with clear and safe data management procedures

There is potential for online assessment: agreement is needed on which are reliable and best suited to online work, with appropriate licences

SAFEGUARDING

risk

Online work needs clarity on risk assessment and troubleshooting procedures: the online visual window is not under practitioner control, technology can fail, a client may leave unexpectedly

Safeguarding procedures need regular review, with practice-wide ground rules available for clients

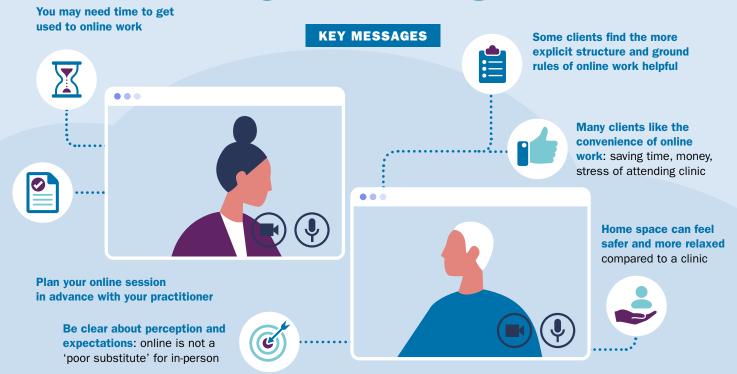
NATIONAL LEVEL POLICY



All clients need fast reliable broadband, especially lacking in rural areas: there is clear potential for avoiding transport difficulties and including those 'hard to reach'

All stakeholders need suitable technology, support and space: this could be phones, tablets or laptops; some need in-person show-and-tell, some need safe private spaces and technology outside the home

CLIENTS



GUIDELINES FOR CLIENTS

Using home space can feel safer and more relaxed compared to clinic

You may lack equipment or private space, e.g. in shared housing: ask your practitioner's advice

Consider what to show online, e.g. privacy, lighting levels, are other people in view, might you hide the 'self' view?

Online home visits can help your practitioner understand your home and family environment, to inform their guidance and help generalisation of any therapy gains

Discuss ways to manage the setting, e.g. considering fidget toys or time out/

e.g. considering haget toys or time out/ downtime, finding ways to share e.g. making/ sharing a cup of tea

Aim to have other tasks hidden or on silent (on screens or other devices)

Think about and discuss with your practitioner how to manage after the session: especially if you stay in the same space after discussing difficult topics

Speak to your practitioner about any concerns you have with online meetings

Sometimes an in-person meeting might be safer and more effective for you, e.g. for clinical needs or practicing skills

Agree ground rules e.g. suitable clothing, presence of other people (visual or audio)

Look after yourself: take time and screen breaks, movement breaks, in-person support from friends or family



Key messages and guidelines should be shared with you ahead of time



Making a treatment plan blending online and in-person can increase your say in your treatment



GUIDELINES FOR PRACTITIONERS

PLANNING

Consider the most appropriate communication technology for the purpose of the meeting, e.g. when getting to know the client, client preferences and best interests e.g. phone call, videocall, text or other messaging services

Risk assessments for online meeting need particular care for some conditions, e.g. paranoia, anxiety

Plan for dealing with technical difficulties or unexpected disconnection; how will you reconnect? Aim to become comfortable with small disruptions

An initial in-person meeting can work well. It can take longer to build rapport with clients online: consider online getting-to-know-you sessions

Online meetings often take longer to cover the same material than in-person ones and can feel more tiring

 Consider something playful to get interaction started and plan to cover less in one meeting; consider more frequent shorter sessions Look after yourself first: breaks away from screen, full body movement, seek support from supervisor or colleagues

GROUND RULES

Agree with client how to use online meetings: opportunity for greater engagement

Agree ground rules e.g. suitable clothing, presence of others (visual or audio)

Aim to have other tasks hidden or on silent (on the screen or other devices)

Be explicit about off-screen behaviour, e.g. if you are hand-writing notes and need to look away

Consider what each side is comfortable to see, seeing each other can help communication but some clients may start by hiding self-view

Safeguarding: have a routine plan for disrupted meetings, e.g. having phone numbers

STRATEGIES



Consider how to respond if a client has tuned out

Expressing emotion: it is harder to transmit empathy for sadness but easier to be detached from anger: consider using words more to name what you see, feel and hear, and checking how the call is working

It may help to exaggerate nonverbal cues, to wait and to slow down: it is useful to become comfortable with pausing and silence

Consider using objects to share attention: not just each other's faces, but external referents such as photos or video, drawing or showing and talking about an object, slide-sharing, shared document editing, e.g. software whiteboard functions

Observe how clients can show high adaptability to online communication, e.g. young children often quickly understand how to share attention to objects



GUIDELINES FOR GROUPS

Have clear ground rules e.g. whether cameras and mics are on or off, who can speak when

Remember it can be harder to pick up when someone wants to speak: be alert to initiatives from group members and invite them to speak if appropriate or have another person take this role

It can help to express clearly in words what you have heard or understood from the group to compensate for the restrictions of information in online communication

A skilled facilitator can add guidance and structure, e.g. to manage turntaking, to receive or reflect back what has been said and to draw comments together

Balance use of technology to enable accessibility, provide variety and use different ways to contribute, e.g. chat boxes, break times, reactions such as putting a hand up virtually or physically, shared documents, polls

Consider the purposes of video and audio in group meetings; joining on mute without video can feel more comfortable for some people initially, but needs balancing with the feedback and interactivity that comes with video and audio

Personal connection between facilitator and peers is crucial:

Consider using small break out rooms or 1:1 time with facilitator during other activities and pre- or post meeting informal chat

These guidelines were informed by data from a survey of 72 practitioners, in-depth interviews with 13 therapists and video analysis of 51 clips of therapy in the Zoom or Room project by Nicola Yuill, Devyn Glass & Zubeida Dasgupta, University of Sussex UK. Updates on published work are posted on http://www.sussex.ac.uk/psychology/chatlab/projects/zoomorroom. The research was funded by National Institute of Health Research, Kent Surrey Sussex Applied Research Consortium. Views are those of the authors and not necessarily of the NHS, NIHR or Department of Health and Social Care.



