

Caregiver skills training for families of children with developmental delays or disabilities

Home visit guide for facilitators



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for families of children
with developmental
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Caregiver skills training for families of children with developmental delays or disabilities: home visit guide for facilitators.

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Introduction

This guide is part of a package of materials for the delivery of *WHO's Caregiver skills training for families of children with developmental delays or disabilities*.

Background

WHO's caregiver skills training was developed to facilitate access to parenting skills and strategies for caregivers of children with developmental delays or disabilities.

The target audience is caregivers of children aged 2–9 years with developmental delays or disabilities, with a specific focus on the caregivers of children with delays and impairments in social and communication domains. However, a child does not need to have a diagnosis for caregiver skills training to be used, and the age range can be adjusted slightly depending on the needs of the setting.

Overview of the course

The caregiver skills training intervention is designed to be delivered in nine group sessions and three home visits by trained and supervised non-specialist facilitators. Additional group sessions and home visits can be offered to allow more time for strategies on caregiver wellbeing and for strategies tailored to the needs of caregivers of children who have little or no spoken language. In addition to this home visit guide for facilitators, the caregiver skills training package includes four other guides while two additional guidance documents are being developed:

- Introduction;
- Adaptation and implementation guide;
- Facilitators' guide: group sessions 1–9;
- Participants' guide: group sessions 1–9;
- Home visit guide for facilitators;
- Caregivers of children who have little or no spoken language: facilitators' and participants' guides (forthcoming);
- Caregiver well-being: facilitators' and participants' guides (forthcoming).

How to use this guide

This facilitators' guide provides information for leading the three home visits. It is a reference manual to be used in conjunction with specific training in caregiver skills training and under supervision. It includes guidance on how to carry out each of the three core home visits. The guide includes detailed descriptions of the objectives and activities for each home visit. Goal setting information and forms are also included, along with information for trouble shooting and problem solving. However, reading the guide is not enough to learn the strategies and be prepared to teach them. It is important that facilitators receive practical training and supervision in order to deliver caregiver skills training to caregivers.

Who is this guide for?

This facilitators' guide is aimed at non-specialists (community health workers, social service workers, nurses, early childhood education facilitators, teachers, experienced caregivers etc.) who are trained in the delivery of caregiver skills training. Facilitators will need to be equipped with formal training on caregiver skills training skills and strategies, the facilitation of group sessions and home visits. Facilitators should receive continuing support and supervision from a trained supervisor. Supervisors should be trained in caregiver skills training, have personal experience of delivering group sessions and home visits, and should ideally have extra training experience in providing supervision.

Home visit structure and goals

The general home visit structure includes:

- Greeting the family and child;
- Discussing with the caregiver issues that are specific to that visit. Visit 1 includes taking a history of the family's contact with support services and assessment of the child's communication behaviour and functioning. Visits 2 and 3 include review of key message strategies and home practice;
- Observing the caregiver interacting with the child and the interaction between the facilitator and the child;
- Demonstration of caregiver skills training skills and strategies (tips) by the facilitator and coaching of the caregiver on those strategies;
- Goal-setting that is based on observation and interview with the caregiver. Goals are identified in visit 1 and discussed and reviewed in visits 2 and 3;
- Planning for the future. Visits 1 and 2 include inviting the family to the next session and discussing possible barriers and solutions, and Visit 3 includes creating a plan for ongoing practice of caregiver skills training strategies.

Goals of the home visits include building rapport with the family, including those family members who do not attend group sessions, learning about the child's developmental competencies and behaviour, and the home environment; helping the caregiver to set target goals for their child; coaching the caregiver to do the strategies learned in group sessions; troubleshooting caregiver challenges; promoting attendance at group sessions; and identifying any additional needs of the family and referring to additional services as needed. Each home visit includes an assessment of the families' needs. Facilitators are to be aware of signs that additional supports are needed – including child health or caregiver health, mental health challenges, potential child maltreatment or material deprivation.

Each home visit has specific tasks and goals which are detailed in this guide.

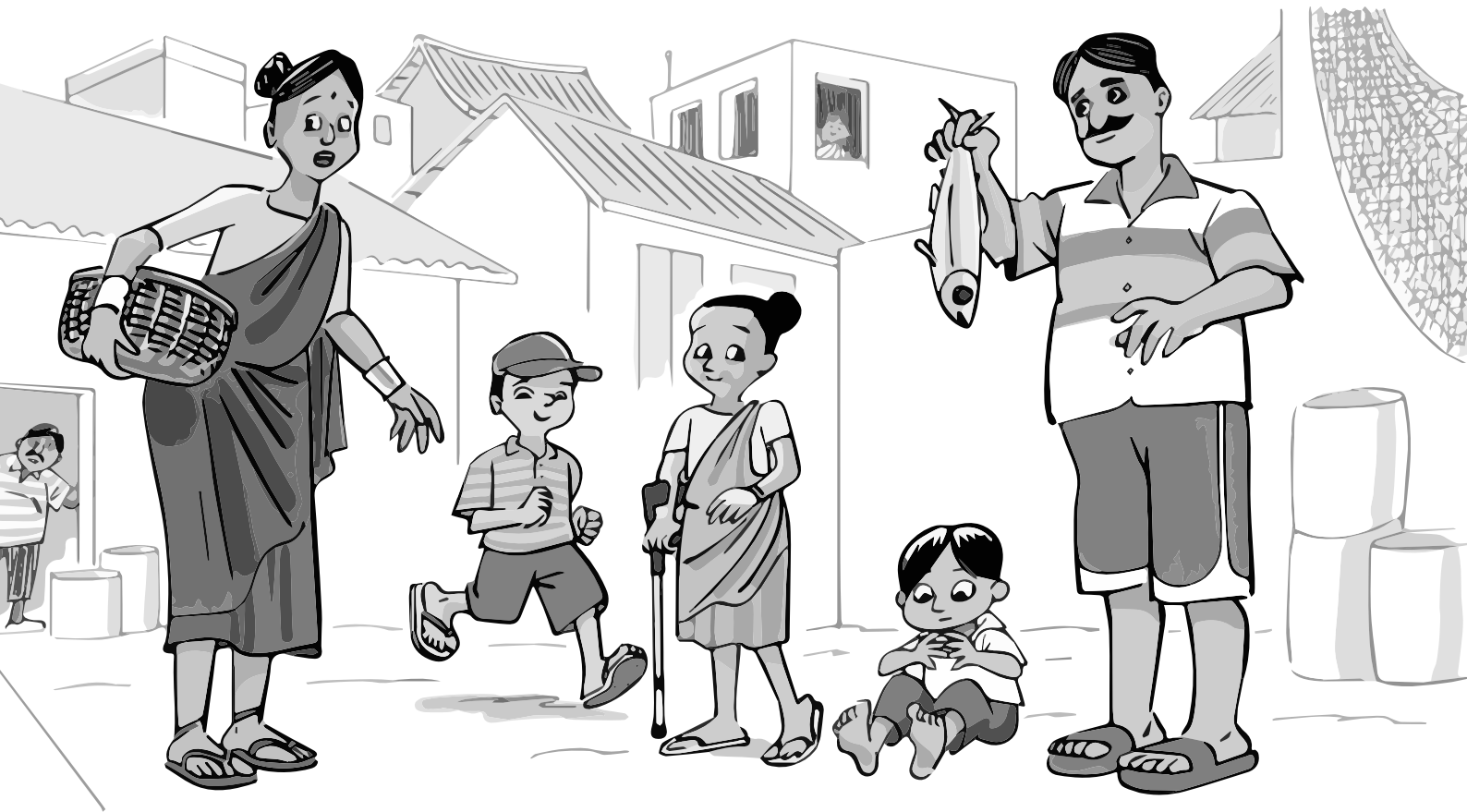
Please see Facilitators' guide sessions 1–9 for information on facilitating group sessions. Adaptation and implementation considerations

This manual was developed with the expectation that it will be adapted to the settings in which it is delivered. For additional information on adaptation of home visits in general or adaptation of this manual, see the *Adaptation and implementation guide*.

For additional information on training and supervision, see the section on facilitator training in the introduction to the caregiver skills training.

1

Home visit 1: Establishing goals



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Introduction to home visits

WHO's caregiver skills training includes three home visits (the first before the beginning of the group sessions; the second between sessions 3 and 6 (preferably after session 5); and the third one after the last group session). This guide will help you prepare for each home visit.

Home visits provide the opportunity to: 1) build a rapport with the family; 2) learn about the child's developmental competencies and behaviour and the home family environment; 3) help the caregivers set goals for caregiver skills training and successfully implement the strategies they have been introduced to during the group sessions; 4) troubleshoot challenges live with the caregivers; and 5) identify any additional needs of the family.

Remember to take the *Home visit goal-setting worksheet* for that session with you each time you do a home visit (See Annex 2 for the worksheet for home visit 1).

If this is the first time you are facilitating caregiver skills training, consult your supervisor ahead of each of the visits to plan the visit. After each visit, consult your supervisor to ask for feedback on families' goals for caregiver skills training, to troubleshoot any difficulties with building rapport, caregiver coaching, or responding to families' inquiries and needs.

Contents of the home visit guides

The home visit guides include detailed instructions on how to interact with the caregiver and the child at home.

The guide to home visit 1 covers instructions for the **assessment component** of the home visits, namely:

- the **interview with the caregiver**;
- the observation of the **caregiver-child interaction**; and
- the **facilitator-child interaction**.

It also includes instructions on the **goal-setting component**.

The guides to home visits 2 and 3 include instructions for the skills training component of the home visits, namely:

- **coaching the caregiver and demonstrating strategies in interaction with the child; and**
- **supporting independent practice of the caregiver.**

Home visit schedules at a glance

	Home visit 1	Home visit 2	Home visit 3
Timing	<i>Before session 1</i>	<i>Between session 5 and session 6*</i>	<i>After session 9</i>
Objective of the visit	<ul style="list-style-type: none"> ▪ <u>Get to know the family and establish goals</u> 	<ul style="list-style-type: none"> ▪ <u>Re-evaluate goals</u> ▪ <u>Provide tailored support</u> 	<ul style="list-style-type: none"> ▪ <u>Re-evaluate goals</u> ▪ <u>Provide tailored support</u> ▪ <u>Longer-term plans</u>
Assessment component	<ul style="list-style-type: none"> ▪ Assessment of child/ caregiver needs ▪ interview with the caregiver ▪ administering facilitator-child interaction ▪ observing caregiver-child interaction 	<ul style="list-style-type: none"> ▪ Assessment of child/ caregiver needs ▪ observing caregiver-child interaction 	<ul style="list-style-type: none"> ▪ Assessment of child/ caregiver needs ▪ observing caregiver-child interaction
Goal-setting component	<ul style="list-style-type: none"> ▪ Establish goals ▪ Complete goal-setting worksheet 	<ul style="list-style-type: none"> ▪ Re-evaluate goals ▪ Consult and adjust worksheet if necessary 	<ul style="list-style-type: none"> ▪ Re-evaluate goals ▪ Consult and adjust worksheet for longer-term goals
Skills training component	<ul style="list-style-type: none"> ▪ First demonstration of strategies [optional] 	<ul style="list-style-type: none"> ▪ Coaching and demonstration of strategies 	<ul style="list-style-type: none"> ▪ Coaching and demonstration of strategies

* Notes to timing of Home visit 2

- **For all sites:** Given the importance of providing coaching on the contents of sessions 4 and 5 on communication, home visit 2 should preferably be scheduled right after session 5. If this is not possible, alternative options for scheduling home visit 2 can be considered, ranked here by preferability:
 - **Option 1** (most preferable): home visit 2 is conducted between session 5 (Promoting communication) and session 6 (Teaching new skills in small steps and levels of help)
 - **Option 2** (intermediate) home visit 2 is conducted between session 4 (Understanding communication) and session 5 (Promoting communication)
 - **Option 3** (least preferable): home visit 2 is conducted between session 3 (Play and home routines) and session 4 (Understanding communication)
- **Research sites** should preferably schedule home visit 2 according to Option 1 above.
- **Research sites** should preferably schedule home visit 2 during the same time frame for all participants, i.e. in between the same two visits, and record the timing of home visit 2 for each family.

Assessment component

What is the assessment component of the home visits?

- During the home visits you assess the child's skills through the caregiver-child interaction and the facilitator-child interaction.

What are the caregiver-child interaction and the facilitator-child interaction assessments?

- The caregiver-child interaction and the facilitator-child interaction are clinical tools that provide valuable information on the child's skills in interaction with his/her caregiver and with an adult that the child is not very familiar with (the facilitator). The caregiver-child interaction and facilitator-child interaction last 12 minutes each. A standard kit of materials is provided.
- For clinical use, video-recording is helpful for monitoring and supervision but is not obligatory. For research purposes, video-recording is a requirement.

Why do we need the assessment component (caregiver-child interaction and facilitator-child interaction)?

- Administered at each home visit, the caregiver-child interaction is a key opportunity to:
 - observe the child's communication, play skills and behaviour (all home visits);
 - observe the caregiver's natural style of interaction with the child (home visit 1);
 - observe the caregiver's progress and need for additional support on the use of strategies during caregiver skills training (home visit 2) and at the end of the training (home visit 3).
- Administered at the first home visit (obligatory) and at the third home visit (optional), the facilitator-child interaction is a semi-structured interaction that enables you to:
 - observe the child's baseline communication, play skills and behaviour (home visit 1);
 - observe the child's end-point communication, play skills and behaviour (home visit 3; optional).
- At home visit 1, your caregiver-child interaction and facilitator-child interaction observations will help you complete the goal-setting sheet and identify the family goals.
- At home visit 3, the caregiver-child interaction and (optional) facilitator-child interaction observations will help you to re-evaluate goals and plan for the family's independent practice after the end of the training.
- Remember to take the goal-setting worksheet with you for each visit.
- You may also use these observations to identify additional needs of the family. Please refer to the *Home visit guide* to help you to prepare for each home visit.

Goal-setting component

- The goal-setting component is a key part of caregiver skills training.
- Reviewing your notes of the interview with the caregiver and of the observations of the caregiver-child interaction and your interaction (facilitator-child interaction) with the child, you will:
 1. establish the **child's current level of skills** and the **caregiver's spontaneous use of strategies**;
 2. identify intervention targets (goals) for the following domains:
 - **Child** targets
 - communication
 - play
 - daily living skills
 - behaviour regulation
 - **Caregiver** targets
 - use of intervention strategies.
- The *guide to Home visit 1* provides detailed instructions on conducting the activities to obtain the information you need to select the intervention targets.
- You will **write the intervention targets in the goal-setting worksheet**, and you will revise those during the programme.

Coaching component

What is the coaching component?

- The coaching component is a key adult learning methodology in CST. It is a form of tailored support provided by the facilitator to the caregiver that consists of assisting the caregiver while she or he is interacting with the child. It is different from the caregiver-child interaction because the facilitator does not simply observe the interaction (as in the caregiver-child interaction) but takes an active role to adjust or improve the interaction. Duration is variable, depending on how the child is responding (from a few minutes to 12–15 minutes).
- There is no standard kit of materials. Either the kit of the caregiver-child interaction or materials available in the home (or a combination of both) can be used.
- For clinical use, video-recording is helpful for monitoring and supervision but not obligatory. For research purposes, video-recording may be a requirement.
- If the child is tired, unwell, or multiple attempts to engage the child have failed, you can use this time to explain and role-play possible strategies with the caregiver.

Why do we need the coaching?

The coaching component ensures that each caregiver receives tailored support to meet her/his needs and the child's needs, including:

- intensive support on the strategies that most suit the child's needs; and
- support to the caregiver.

It is based on the needs and learning preferences of the caregiver.

- The *Guide to home visit 2* provides instructions for **delivering coaching** and **revising the intervention targets** selected in home visit 1, as appropriate.
- The *Guide to home visit 3* provides instructions for **supporting the caregiver's independent practice** and **revising the intervention targets** selected in home visit 2, as appropriate.

When to consult your supervisor

Consult your supervisor:

- whenever this guide is not sufficient to answer your questions;
- when the family has additional complex needs;
- if you suspect or identify problems such as neglect or abuse (even if you feel confident to deal with this yourself you should always inform your supervisor too); and
- at the beginning of your experience as facilitator, after every home visit and every telephone call (you can combine questions about more families for each consultation with the supervisor).

When you are a more experienced facilitator, consult the supervisor at regularly scheduled times (at least after every two sessions and after each home visit).

Home visit 1 (before group session 1)

Things to bring with you

- This guide.
- Home visit goal-setting worksheet.
- Facilitator-child interaction administration instructions; facilitator-child interaction toy kit.
- Caregiver-child interaction toy kit (if standardization on the toy kit is necessary for research or in low-resource contexts).
- Copy of the caregiver skills training programme schedule to share with the family (available in the participant guide).
- Summary sheet of tips and key messages.
- Developmental checklist to assess developmental competencies and behaviour (this should be a locally validated tool, to be chosen by the local project coordinator).
- If available, a copy of previous developmental questionnaires or surveys.
- Clipboard, paper and pencil or pen for taking notes.
- Telephone or video camera capable of video recording (if applicable).

Goals and schedule of activities

Home visit component	What to do	Complete in goal-setting worksheet
❖ Introduction		
Get to know the family and introduce the programme (15 Minutes)	<ul style="list-style-type: none"> ▪ Meet the caregiver, child and other family members. ▪ Explain the course, its aims and structure, and the request for confidentiality of information shared in group sessions (see the confidentiality policy in the participant guide for session 1). ▪ Find out what the caregiver wants and expects from the caregiver skills training. 	//
❖ Gathering information on the child and caregiver		
1. A) ask about the child's development, behaviour and functioning (15 Minutes)	<ul style="list-style-type: none"> ▪ Ask about the child's skills and difficulties. ▪ Ask about contact with support services. ▪ Ask the caregiver(s) what is known about the child's difficulties and their contact with support services. ▪ Ask the caregiver(s) about other health conditions the child may have and if they are receiving services or treatment. 	Part 1A
B) look for and note additional needs of the family (5 minutes)	<ul style="list-style-type: none"> ▪ Look for additional needs of the family. 	Part 1B
C) optional: use a developmental assessment checklist (time to be determined)	<ul style="list-style-type: none"> ▪ Assess the child's current developmental competencies using a locally validated developmental checklist, if available. 	//
❖ Observing the caregiver/child interaction and interacting with the child		
2. A) observe caregiver-child interaction (10 minutes)	<ul style="list-style-type: none"> ▪ Ask the caregiver to interact with the child (during play or other home routine), make notes and provide suggestions (see annex 2 for instructions). ▪ Videorecord this 10-minute child-caregiver interaction, if possible. 	Part 2A
B) facilitator-child interaction (10 Minutes)	<ul style="list-style-type: none"> ▪ Interact with the child to assess the levels of communication and play skills (see annex 2 for instructions). ▪ Videorecord this 10-minute facilitator-child interaction, if possible. 	Part 2B
❖ Identifying child's current level of skills		
3. Identify current communication and play skills	<ul style="list-style-type: none"> ▪ Review your notes of the child-caregiver interaction and the facilitator-child interaction to identify what the child can do now (communication and play skills). 	Part 3

Home visit component	What to do	Complete in goal-setting worksheet
❖ Selecting child targets		
4. Complete child targets chart	<ul style="list-style-type: none"> ▪ Write child targets for communication, play, daily living skills, behaviour regulation and family activities ▪ You can revise and complete this part at a later time, before the first group session. 	Part 4
❖ Selecting caregiver targets		
5. Complete caregiver targets chart	<ul style="list-style-type: none"> ▪ Write caregiver targets for spontaneous use of strategies. ▪ You can revise and complete this part at a later time, before the first group session. 	Part 5
❖ Selecting target routines		
6. Complete target routines chart	<ul style="list-style-type: none"> ▪ Discuss with the caregiver possible play and home routines. ▪ You can revise and complete this part at a later time, before the first group session. 	Part 6
❖ Closing the visit		
7. Review the goals	<ul style="list-style-type: none"> ▪ Review the goals against families' expectations from caregiver skills training (15 minutes). 	//
8. Invite the family to session 1 (5–10 Minutes)	<ul style="list-style-type: none"> ▪ Give the caregiver the schedule with date, time and place of session 1. 	//

Learning objectives for the caregiver

- | |
|--|
| 1) To get to know you and begin to develop a relationship with you. |
| 2) To understand what the caregiver skills training is and how it is structured. |
| 3) To identify 2–3 goals for their child that they want to work on during the caregiver skills training. |

Introduction

Get to know the family and introduce the programme

[15 minutes]

- Introduce yourself (your role in the community, your role in this course).
- Allow the caregiver to introduce herself/himself and any other caregivers present in the home.
- **Identify the primary caregiver**, the caregiver(s) who will attend the group session, and who the caregivers are in the home.
- Remind the caregiver of the **main goal of caregiver skills training** – i.e. to **teach caregivers new strategies to help their child develop, and improve communication and behaviour**.
- Explain that the sessions will cover different areas: communication, play, difficult behaviour and everyday skills.
- Remind the caregiver that any information shared during group sessions or home visits will remain confidential and that the caregiver should also keep information shared by other caregivers confidential.

Part 1: Gathering information on the child and caregiver

1A) Ask about the child's development, behaviour and functioning

Complete Part 1A of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (Annex 2, pages 1–4) [15 minutes]

- Ask about child's **skills and difficulties** (see Annex 2 – Goal-setting worksheet for the full set of probes)
Specifically, ask the caregiver(s) about:
 - 1) their concerns for their child;
 - 2) known difficulties of their child and their contact with support services;
 - 3) activities and materials the child enjoys;
 - 4) how their child communicates to request;
 - 5) how their child communicates to share their interest;
 - 6) how their child plays;
 - 7) the things their child can do in terms of daily living skills;
 - 8) any unusual or challenging behaviour in the child;
 - 9) other health conditions in the child.
- Make a note of **child's relevant spontaneous behaviour** (play, communication, challenging behaviour) while you and the caregiver are talking:
 - 10) child's spontaneous play, communication, challenging behaviour.
- **Ask yourself:** Are these issues already being addressed or do I need to refer the family to other services?

1B) Look for additional needs of the family

Use the opportunity to observe the child and the caregiver at home to **identify any additional needs of the family**:

Complete Part 1B of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (Annex 2, page 5) [15 minutes]

- 1) Look for signs of depression and other mental health issues in the caregiver and other family members (appearing very sad/tired/annoyed, expressing hopelessness/helplessness, difficulty focusing, appearing unkempt/poor personal grooming, appearing underweight/very thin or ill, signs of intoxication etc.).
 - 2) Look for signs of neglect, abuse or maltreatment in the child, caregiver or other family member.
 - 3) Look for signs of material deprivation (child and/or caregiver appears underweight/very thin, evidence of inadequate clothing or housing, severe overcrowding etc.).
- Make a note of any relevant signs and consult your supervisor after the home visit. Always ask yourself: do I need to refer the family to other services?

Warning features of child maltreatment

Physical abuse

- Injuries (e.g. bruises, burns, strangulation marks or marks from a belt, whip, switch or other object).
- Bruising in a child who is not yet pulling to stand or walking.
- Any serious or unusual injury without an explanation or with an unsuitable explanation.

Sexual abuse

- Genital or anal injuries or symptoms that are medically unexplained or the child repeated touching her/his genitals or anus.
- Sexualized behaviours (e.g. indication of age-inappropriate sexual knowledge).

Neglect

- Being excessively dirty, unsuitable clothing (beyond what would be expected due to material deprivation).
- Signs of malnutrition, very poor dental health.

Emotional abuse and all other forms of maltreatment

- Any sudden or significant change in the behaviour or emotional state of the child that is not better explained by another cause, such as:
 - unusual fearfulness or severe distress (e.g. inconsolable crying);
 - new onset self-harm or social withdrawal;
 - new onset aggression;
 - running away from home;
 - development of new soiling and wetting behaviours, thumb-sucking.

Aspects of carer interaction with the child

- Persistently unresponsive behaviour, especially towards a young child (e.g. not offering comfort or care when the child is scared, hurt or sick).
- Hostile or rejecting behaviour.
- Using inappropriate threats (e.g. to abandon the child).
- Using harsh methods of discipline.

1C) Optional: Use a developmental assessment checklist

(time to be determined)

- Assess the child's current developmental competencies using a locally validated developmental checklist, if available.

Part 2: Observing the caregiver-child interaction and interacting with the child

You will use the observation of behaviours occurring during the caregiver-child interaction, during your interaction with the child (facilitator-child interaction), and the child's spontaneous behaviour during the interview with the caregiver to establish the child's current set of skills. You will then set the intervention targets.

It is important to observe carefully and take notes.

2A) Observe the caregiver-child interaction

Complete Part 2A of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (See Annex 2). [10 minutes]

- Before beginning, try to obtain a sense of whether the child's behaviour today is going to be representative of their current skills. Ask:
 - Was there a particular event or change in routine today/this week/ last week that might have upset your child? Is the child well?

- Note the caregiver's response. Proceed with the observation unless the caregiver or child is uncomfortable or there are unusual circumstances that make it very difficult for parent and child to interact, such as:
 - the child or parent is very sick; or
 - the child is already highly dysregulated when you arrive at the home.
- Let the caregiver know that the purpose of the interaction is to see how the child is communicating and engaging with familiar people.
- You are free to answer questions and interact with the caregiver as you usually would – but let the caregiver know that you would like first simply to observe without talking.
- After the interaction, give the caregiver praise and encouragement for participating to the extent that you feel is appropriate and needed.

Instructions for the caregiver-child interaction

- Ask the caregiver to play with the child for about 10 minutes. Explain that you would like to observe how the child behaves in this situation. This will help you to advise the family on appropriate goals for the programme. You will better understand what programme strategies may be most useful for them.
- Ask authorization to video-record the interaction between child and caregiver. The video-recordings will be shown only to supervisors for their expert advice.
- Take time to help the caregiver settle and regulate the child before you begin the observation/ videorecording. Help the caregiver to have a positive experience with the child.
- Provide a kit of toys OR ask the caregiver to play with their own toys.
- See Annex 1: Kit materials, for caregiver toy kit.

Instructions to caregiver

So now we are going to ask you and [child's name] to play together for about 10 minutes [Note: you will record for 12 minutes].

You may use any of the materials from the kit that you like. We have... [name and briefly show the materials to the caregiver, without taking them all out of the container/bag].

You can use what you want, how you want. Play as you would normally do with your child.

Do not worry if [child's name] makes a mess. We can clean the materials up together when you are finished.

I am going to be quiet and hold the camera. If you think of questions during the interaction, we can talk about them right after we finish.

Do not worry about the time. I shall tell you when we are finished.

Do you have any questions before we start?

- Let the parent know that she/he can play as they usually do with their child.
- If the caregiver is already using **picture supports with the child**, let the parent know they are free to use any picture supports they need.
 - They can use any of the materials they like. Remind the parent that it is OK if they make a mess with the materials because we can help them to clean it up.
- Help the caregiver to decide where in the home they would like to play:
 - a quiet area, if possible, with a small table or piece of furniture which could be used as a table; away from other family members.
- If the parent asks you questions during the caregiver-child interaction, let the caregiver know that

you will be happy to talk about it after the interaction. If the parent continues to ask you questions, try to keep your answers short and try not to direct the parent's behaviour.

- **Try not to give instructions related to course strategies** (e.g. about setting up the environment beyond the initial choice of where to tape the interaction; suggestions on materials to use, or others).
 - **This will help you to identify the child and caregiver targets more clearly.** However, if you see the caregiver struggling a lot, or if they directly ask for your help, it is OK to give reminders that you cover in caregiver skills training – such as about setting up the environment. If you see that the caregiver is struggling with the materials, you can also gently point her/him to use certain items that you think are appropriate.

Instructions for caregiver-child interaction video-recording

Hold the camera and video-record the interaction.

- **Ensure that you record get all the important information on camera:**
 - the child's face and hands;
 - the caregiver's face and hands;
 - the object the child and caregiver are playing with.
- If it is not possible to record all three of these things on camera, ask the person filming to prioritize the child's face and hands.
- **Try to observe / video-record for 12 minutes:**
 - Recording for two extra minutes will ensure that you will have at least 10 minutes of interaction on video.
 - If necessary, take a break and then resume the observation, trying to observe/video-record for 12 continuous minutes. If the child becomes very dysregulated and/or either the child or the caregiver is uncomfortable, you should stop the observation/recording.
- **Ensure that you make a good quality recording:**
 - Remember that any source of light (window, front door open) will create a glare. If you are making the video, make sure the source of light is behind *you* (and not behind the caregiver and child).

Observe the interaction and take notes

- The purpose of the caregiver-child interaction is to see the child's communication skills and joint engagement in a play routine with the primary caregiver.
- Use this opportunity of watching how the child and caregiver interact with one another to **collect information that will be useful for identifying the child's treatment goals.**
- Watch for the child's communication, play skills and challenging behaviour.

Observe the child and note:

- Are there activities or materials the child enjoys?
- Is the child communicating to request? How?
- Is the child communicating to share interest? How?
- Is the child playing? How? Does the child show any motor delays (difficulty with body movements, problems sitting, standing, walking, reaching, grabbing, using her/his hands etc.)?

Observe the caregiver's style and identify which strategies and activities might best benefit the caregiver:

- What activities does the caregiver select? What could be a different or alternative activity?
- Does the caregiver talk a lot? Is the child very quiet? Does the caregiver give space (pauses) to encourage the child's communication?

- Does the caregiver ask many questions, do they test the child? (e.g. they like to “teach” a lot)
 - Does the caregiver notice the child’s communication, including weak communicative signals?
 - Does the caregiver respond to all of the child’s communication?
 - Is the caregiver playful? Is play a part of what the caregiver does with the child?

Look for strategies the caregiver is already using. Make a note of these and give positive feedback to the caregiver after the observation.

- **Note:** For some families, the demand to engage the child with someone watching will be too much. If you feel this is the case, as the facilitator you can join in the activity so that you are doing the activity with the caregiver. Allow the caregiver to lead the interaction as much as possible. If the caregiver refuses to interact with the child, skip this activity and proceed with the next one.

2B) Facilitator-child interaction to assess child communication and play skills

Complete Part 2B of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (See Annex 2) [10 minutes]

- Explain to the caregiver that you would like to interact briefly with the child in play. It will help you to better understand the child’s behaviour and interests.

Instructions for the facilitator-child interaction

- Provide the child with materials and opportunities to play. Join in and engage the child in play activity for 10 minutes.
- Ask authorization to video-record the interaction between you and the child. The videotapes will be shown only to supervisors for their expert advice.
- **See the Annex 1: Kit materials, for examples of the facilitator toy kit.**

Instruction for facilitators

- Sit in front of the child.
- Help the child stay engaged and use any support the child needs:
 - environmental supports: sit in a chair at a table;
 - visual supports: picture schedule, timer;
 - behavioural strategies to help the child stay engaged.
- Provide multiple opportunities for the child to display communication and play skills.
- Use a hierarchy of prompts to elicit the most complex skills in the child's repertoire and establish the "ceiling" of her/his skills.
- To assess **communication to share**:
- Provide at least four clear opportunities for joint attention by waiting expectantly when something exciting or new happens.
- Find materials that the child is interested in or excited about and give the child opportunities to communicate to share. Children can use eye contact, gestures, sounds, or words to share with you.
- To assess **communication to request**:
- Provide at least four clear opportunities for the child to communicate to request.
- Find materials that the child wants or needs help to use/access. Children can use eye contact, gestures, sounds, or words to request.
- To assess **play**:
- Provide a variety of play materials at different developmental levels.

Instructions for facilitator-child interaction video-recording

- For this interaction, you will need your partner (facilitator/master trainer) to video-record the interaction. If you are conducting the home visit by yourself, you will need a tripod to hold the camera while you interact with the child OR you can ask the caregiver to record the interaction.
- It is very important that:
 - the child's face and hands are on camera;
 - your face and hands are on camera;
 - the object you are playing with is on camera.
- If it is not possible to get all three of these things on camera, then you should ask the person filming to prioritize the child's face and hands.

Observe the interaction and take notes

The purpose of the facilitator-child interaction is to see the child's communication skills and joint engagement in different contexts.

The adult will set up clear opportunities for the child to communicate both to share (joint attention) and to request. These opportunities may show you a different profile of skills than the child's interaction with the caregiver. This is also an opportunity to assess the child's level of play.

Use the information from the facilitator-child interaction to establish the child's intervention targets.

In the following pages you will find guidelines to help you establish, *while you are interacting with the child*, whether a skill is fully or partially displayed or, conversely, if it does not appear to be mastered yet.

You may use the guidelines to orient your interaction with the child (facilitator-child interaction) and to help you clarify conflicting or unclear information. For example, you may have briefly observed certain skills in the child's spontaneous behaviour during the interview with the caregiver, but these were not displayed during the caregiver-child interaction. You therefore want to give the child more opportunities to display those skills.

Give the child the opportunity to display her/his skills spontaneously.

To ensure that the child has the opportunity to display communication or play skills spontaneously, provide help (prompts) gradually. As described in the guidelines in the following pages, always begin with Level 1 prompts and then proceed to levels 2 and 3 prompts, when necessary. This will help you to see clearly what the child can do *independently* and what the child can do *with prompts* (help).

Give the child multiple opportunities to display her/his skills.

To establish that a skill is truly mastered, you need to observe it in different contexts with different people and different materials. Within your interaction with the child offer a variety of play materials and opportunities to communicate to ensure that you can identify:

1. Play skills:

- how *developed* the child's play skills are (the highest play level where the child can perform play actions);
- how *varied* the child's play skills are (the amount of play actions and play materials within the *same* play level); and

2. Communication skills:

- how *developed* the child's communication skills are (the most complex way in which the child communicates);
- how *varied* the child's communication skills are (communication to request and communication to share).

Consult in the following pages:

- examples of opportunities for communication to request and communication to share;
- guidelines with a hierarchy of prompts for communication to request, communication to share, and play.

Opportunities for child's communication: examples

Opportunities for communication to request	
Bubbles	<ul style="list-style-type: none"> ○ Blow some bubbles, then close the bubble container tightly. Does the child communicate to ask for your help to open the jar? Or to ask you for more?
Scarf-person engagement	<ul style="list-style-type: none"> ○ Create a game with a scarf (e.g. peek-a-boo). When the child is engaged in the game, try waiting for your turn. Does the child ask you to take your turn?
Snack	<ul style="list-style-type: none"> ○ Have two snacks. ○ Put one snack in each container (or one in each hand). ○ Hold up the two snacks out of the child's reach. Does the child communicate to request the snack?
Suction cup poppers / jack-in-the-box / spring-wound toy / balloon*	<ul style="list-style-type: none"> ○ These are difficult for children to use. When the child is interested in the toy, wait expectantly. Does the child communicate to request that you activate the toy again? ○ As an example, after you have blown up the balloon and let the air out, wait expectantly. Does the child communicate to request that you blow up the balloon again?
* [The toy needs to be difficult for the child to activate – wait to assess whether the child asks you to use it again]	

Opportunities for communication to share	
Suction cup poppers/ jack-in-the-box / spring-wound toy / balloon*	<ul style="list-style-type: none"> ○ When the cup pops / jack-in-the-box pops out, wait expectantly for the child to share interest in the toy with you before you comment or do it again.
Balloon	<ul style="list-style-type: none"> ○ Blow up the balloon, do not tie a knot but let go of the balloon so that the air flutters out. Wait expectantly for the child to share excitement about the balloon with you before you comment or do it again. [Wait for the child to first communicate to share – e.g. to point at the balloon or look at the balloon and then at you to share a laugh – before you communicate to share]. If the child does not initiate communication, then you can point at the balloon, or say “balloon!”. Take note as to whether the child tries to communicate to share with you.
Bubbles	<ul style="list-style-type: none"> ○ When you blow the bubbles, wait for the child to share before you comment or do it again.
Pinwheel	<ul style="list-style-type: none"> ○ Wait expectantly before you spin the pinwheel. Will the child share it with you?
Items in bag	<ul style="list-style-type: none"> ○ Give the bag of toys to the child and wait expectantly. See if the child shares with you an exciting toy she/he finds in the bag.
* [The toy needs to be difficult for the child to activate – wait to assess whether the child asks you to use it again]	

Guidelines to assess communication: hierarchy of prompts

Prompts for communication to request		
Level 1	Level 2	Level 3
<p>Present 2–3 objects that are clearly in sight but not within reach: “Look at these things! We have OBJECT and OBJECT”.</p> <p>Pause to observe if the child requests something.</p> <p>Watch for the child to point, reach, make eye contact, vocalize, use words or otherwise request.</p> <p>→ If the child requests by any means, immediately give the object and note the communication used.</p> <p>→ If the child grabs one of the objects, allow the child to play with it and attempt a new opportunity to request at Level 1 with another set of objects at a later time [on the second occasion, do not allow grabbing but move to Level 2 if needed].</p> <p>→ If there is no reaction, proceed to Level 2 with the same objects.</p>	<p>Hold up the two objects, then present them to the child by moving your hand closer when you name each of them.</p> <p>“Want OBJECT or OBJECT?”</p> <p>Pause to observe if the child requests something.</p> <p>Watch for the child to point, reach, make eye contact, vocalize or otherwise request.</p> <p>→ If the child requests by any means, immediately give the object and note the communication used.</p> <p>→ If there is no reaction, proceed to Level 3 with the same objects.</p>	<p>Try to hand the child one of the two objects, saying “OBJECT!”</p> <p>Pause to observe if the child takes the object.</p> <p>→ If the child takes the object, say “OBJECT” and allow her/him to play. Then attempt a new opportunity to request at Level 2 with another set of objects at a later time.</p> <p>→ If the child pushes the object away, say “NO OBJECT” and remove it. Then attempt a new opportunity to request at Level 1 with another set of objects at a later time.</p> <p>Watch for the child to point, reach, make eye contact, vocalize or otherwise communicate and note any communication used.</p>

Prompts for communication to share		
Level 1	Level 2	Level 3
<p>Create something funny or unexpected, or exploit naturally-occurring opportunities, e.g.</p> <ul style="list-style-type: none"> natural opportunities (loud noise coming from outside; something is accidentally dropped or broken...); made-up opportunities (doing something unusual or funny with objects, such as putting a box on your head as if it was a hat, or two blocks near your eyes as if they were glasses or binoculars...). <p>Wait to see if the child shares with you surprise / amusement / concern... or seems otherwise to communicate with you just to share their interest with you.</p> <p>→ If the child uses eye contact, gestures, vocalizations or words to share, respond and note the communication used.</p> <p>→ If there is no reaction, proceed to Level 2 with the same objects.</p>	<p>Model a clear, emphatic (i.e. slightly exaggerated) communication to share (facial expression, gestures, words that convey surprise, amusement, disappointment...) as appropriate to the circumstances.</p> <p>Wait to see if the child shares with you surprise / amusement / concern... or seems otherwise to communicate with you.</p> <p>→ If the child uses eye contact, gestures, vocalizations or words to share, respond and note the communication used.</p> <p>→ If there is no reaction, proceed to Level 3 with the same objects.</p>	<p>Repeat modelling of communication to share.</p> <p>Wait to see if the child communicates, then attempt again with another opportunity with different materials. It may be helpful to proceed with materials that allow for multiple opportunities to model and pause to allow the child to communicate in response (e.g. taking one item out of a dark bag, showing it to the child and modelling surprise or amusement, and then repeating with other items).</p> <p>Watch for the child to point, reach, make eye contact, vocalize or otherwise communicate to share and note any communication used.</p>

Guidelines to assess play: hierarchy of prompts

Prompts for people games		
Level 1	Level 2	Level 3
<p>Begin a locally relevant and appropriate social routine (e.g. a song, peek-a-boo, swinging the child...).</p> <p>Pause as appropriate during the routine to allow the child to ask you to continue/maintain/repeat the routine.</p> <p>→ If the child communicates to continue/maintain/repeat the routine, this indicates that this level of play may be mastered.</p> <p>→ If there is no reaction, proceed to Level 2 with the same routine.</p>	<p>Continue the routine, then restart it and pause again to allow the child to ask you to continue/maintain/repeat the routine.</p> <p>→ If the child communicates to continue/maintain/repeat the routine, this indicates that this level of play is partly acquired with support.</p> <p>→ If there is no reaction, proceed to Level 3 with the same routine.</p>	<p>Model and label (Show and Say) the next step in the routine, then provide some help (such as a verbal prompt or a little physical help).</p> <p>Pause to allow the child to ask you to continue/maintain/repeat the routine.</p> <p>→ If the child then spontaneously performs or attempts to perform the correct next step in the routine, you can stop here [noting that this level of play is not mastered yet but is partly acquired and could be an appropriate play target].</p> <p>→ If the child does not perform any step in the routine, this indicates that this level is not mastered yet.</p>

Prompts for simple play		
Level 1	Level 2	Level 3
<p>Present appropriate materials (e.g. ball, simple puzzle, cause-and-effect toy).</p> <p>Observe what the child does spontaneously. Is the child simply exploring the toy or does the child use the toy as it is intended to be used (at least one appropriate play action, such as roll, shake, bang or drop objects)?</p> <p>→ If the child uses the materials with at least one appropriate play action, this indicates that this level of play may be mastered. Present other materials to confirm.</p> <p>→ If there is no reaction or the child only explores the toy, proceed to Level 2 with the same materials.</p>	<p>Model and label (Show and Say) one appropriate play action (such as roll, shake, bang or drop objects).</p> <p>Pause to allow the child to imitate your action.</p> <p>→ If the child imitates at least one appropriate play action, this indicates that this level of play is partly acquired with support.</p> <p>→ If there is no imitation, proceed to Level 3 with the same materials.</p>	<p>Model and label (Show and Say) one appropriate play action (such as roll, shake, bang or drop objects), then provide some help (such as a verbal prompt or a little physical help).</p> <p>Pause to allow the child to imitate your action.</p> <p>→ If the child then spontaneously performs or attempts to perform the play action, you can stop here [noting that this level of play is not mastered but could be an appropriate play target].</p> <p>→ If the child does not perform any step in the routine, this indicates that this level is not mastered yet.</p>

Prompts for put-together play		
Level 1	Level 2	Level 3
<p>Present appropriate materials (e.g. set of building blocks or building materials, items with containers, toys that require multiple play actions).</p> <p>Observe what the child does spontaneously.</p> <p>Can the child combine two or more play actions to achieve a goal? (at least one appropriate play action, such as stack cups or blocks on top of each other, put in, take out).</p> <p>→ If the child uses the materials combining two or more appropriate play actions, this indicates that this level of play may be mastered. Present other materials to confirm.</p> <p>→ If there is no reaction, or if the child only explores the materials or uses only one play action, proceed to Level 2 with the same materials.</p> <p>Note: if the child easily uses simple “put-together” play materials, you can present materials that allow for more advanced put together play (such as more complex building materials) and proceed as explained above.</p>	<p>Model and label (Show and Say) two or more appropriate play actions (such as stack cups or blocks on top of each other, put in, take out).</p> <p>Pause to allow the child to imitate your action.</p> <p>→ If the child imitates combining two appropriate play actions, this indicates that this level of play is partly acquired with support.</p> <p>→ If there is no imitation, proceed to Level 3 with the same materials.</p>	<p>Model and label (Show and Say) two or more appropriate play actions (such as stack cups or blocks on top of each other, put in, take out, build a structure) and then provide some help (such as a verbal prompt or a little physical help).</p> <p>Pause at each stage to allow the child to imitate your action.</p> <p>→ If the child then spontaneously performs or attempts to perform the play action, you can stop here [noting that this level of play is not mastered but could be an appropriate play target].</p> <p>→ If the child does not perform any step in the routine, this indicates that this level is not mastered yet.</p>

Prompts for early pretend play		
Level 1	Level 2	Level 3
<p>Present appropriate materials (e.g. figurines such as dolls or animals; miniature objects such as toy dishes and spoons; or real-size objects such as a comb, sunglasses, a blanket).</p> <p>Observe what the child does spontaneously.</p> <p>Does the child pretend to do actions, such as pretending to eat from a dish, combing a doll's hair, putting a blanket over their body and pretending to sleep?</p> <p>→ If there is no reaction, the child only explores the materials or there is clear evidence the child is not pretending (e.g. mouths and attempts to chew plastic food), proceed to Level 2 with the same materials.</p>	<p>Model and label (Show and Say) one or more appropriate pretend play actions (such as feeding a doll, putting animals into a farm ...).</p> <p>Pause to allow the child to imitate your action.</p> <p>→ If there is no reaction, proceed to Level 3 with the same materials.</p>	<p>Model and label (Show and Say) two or more appropriate play actions (such as feeding a doll, putting animals into a farm ...) and then provide some help (such as a verbal prompt (e.g. "the doll is hungry"), followed by a little physical help).</p> <p>Pause at each stage to allow the child to imitate your action.</p> <p>→ If the child then spontaneously performs or attempts to perform the play action, you can stop here [noting that this level of play is not mastered but could be an appropriate play target].</p> <p>→ If the child does not perform any step in the routine, this indicates that this level is not mastered yet.</p>

Prompts for advanced pretend play		
Level 1	Level 2	Level 3
<p>Present appropriate materials (e.g. figurines, such as dolls or animals; miniature objects, such as toy dishes and spoons, and non-descript toys that could be used as 'placeholders' for something else, such as a block).</p> <p>Observe what the child does spontaneously.</p> <p>Does the child show advanced pretend play actions, such as:</p> <ul style="list-style-type: none"> ▪ using the characters (dolls, figurines) as if they were animate agents of play (e.g. making them walk, talk, cry or feed themselves)? ▪ pretending to be someone else (role-play), showing sequences of actions and/or talking as if she/he were that character? ▪ using materials or toys as if they were something different, such as pretending that a bottle of water is a telephone, or that a block is a piece of bread? <p>→ If there is no reaction, the child only explores the materials or the child shows only simple pretend play, proceed to Level 2 with the same materials.</p>	<p>Model and label (Show and Say) 1 or more appropriate advanced pretend play action (such as making a doll talk and dance, pretending that a stick is a flute...).</p> <p>Pause to allow the child to imitate your action.</p> <p>→ If there is no reaction, proceed to Level 3 with the same materials.</p>	<p>Model and label (Show and Say) 2 or more appropriate play action (such as making a doll talk and dance, pretending that a stick is a flute...) then provide some help (such as a verbal prompt, e.g. making your character address the child's character: "Would you like some bread?").</p> <p>Pause at each stage to allow the child to imitate your action.</p> <p>→ If the child then spontaneously performs or attempts to perform the play action, you can stop here [noting that this level of play is not mastered but could be an appropriate play target].</p> <p>→ If the child does not perform any step in the routine, this indicates that this level is not mastered yet.</p>

Part 3: Identifying the child's current level of skills

Identify child communication and play skills

Complete Part 3 of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (See Annex 2). [10 minutes]

Step 1: Combine evidence from observations

In order to establish with sufficient accuracy the child's *current* level of skills in the domains of communication and play:

- Combine the notes from your observation of the caregiver-child interaction and the facilitator-child interaction.
- You can also use your observations of the child's spontaneously interaction / communication with the caregiver and/or the child's spontaneous play with objects, toys and materials present in the home (Part 1A, section 10).
- Review your notes.
- Mark all the behaviours you have observed for communication to request and communication to share and play. The highest (most sophisticated or complex) skill is the child's level of competency in each domain.

Step 2: Select the highest skill

To establish the highest mastered skills, consider:

- how much support (levels of prompts) you had to give the child for them to show the skills;
- in how many contexts you observed the skills (caregiver-child interaction, facilitator-child interaction, spontaneous behaviour);
- whether the observations match the information from the interview with the caregiver.

Sometimes you will have conflicting information – e.g. skills that may have been observed during the child's spontaneous behaviour but not displayed during the caregiver-child interaction or facilitator-child interaction.

The general guidance is to be conservative: do not consider a skill to be fully mastered if you have observed it only briefly, partially performed or inconsistently performed (i.e. only with the caregiver, but not with you, or vice versa). Do not consider a skill mastered if it is reported only by the caregiver but is not observed in multiple opportunities during the visit.

If a skill is genuinely part of a child's repertoire, then you are likely to observe it across contexts and people. It is OK to reflect in your notes what you have observed (e.g. child saying one word on one occasion) but consider the *majority of the opportunities* when establishing the current level of skills. This is particularly important as it will guide you in establishing appropriate goals for the child.

Step 3: Complete the child's current level of skills charts**Complete part 3: child's current level of skills**

Put an X next to all behaviours observed and note how frequently/consistently these were observed, as in the example:

Child's name: *Ryan*

Current level of communication to request			Current level of communication to share			Current level of play		
Not yet using gestures or words to request			Not yet using gestures or words to share			Not yet playing with people or objects		
Eye contact (Looks at you or the object)		X	Eye contact (Looks at object, then you, then back to object)		X	People Games (no objects yet)		X
Gestures:	Reaches to request		Gestures:	Shows to share		Simple play with objects		X
	Gives to request (e.g. gives jar for you to open)	X		Points to share		Put-together play		X
	Points to request			Gives to share (e.g. gives you a drawing to show you)		Early pretend play		
Language:	1 word to request	X	Language:	1 word to share		Advanced pretend play		
	2 words together to request			2 words together to share		Notes: <i>very simple put-together play with blocks</i>		
	Multiple words and gestures together to request			Multiple words and gestures together to share				
Notes: <i>Combines eye contact and single words on most occasions</i>			Notes: <i>Eye contact when loud noise from street; no response to other opportunities</i>					

Part 4: Selecting child targets

Complete Part 4 of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (see Annex 2). [10 minutes]

Complete child targets

General instructions

The key to establishing appropriate goals is to collect reliable information that can be used to describe the child's current level of skills (see previous section). Once you are confident that you have a good sense of what the child can do independently in the domains of communication and play, you are ready to establish the child's intervention goals. You will use the information collected during the interview with the caregiver to establish the other targets.

a) Identify communication targets

Step 1: Consult the Communication goal chart

Use this chart to decide on the child's communication goals (targets). These are guidelines and not hard rules. Remember that it is important to have targets for both spoken language and gestures for each child. All gestures to share are important! You can model all of them using "Show and say", regardless of what the child can already do.

Communication goal chart

Examples of child's current skills	Requesting gesture target	Sharing gesture target	Spoken words target
No gestures or words; or uses sounds or tries to talk; or looks at you without sounds or words	One requesting gesture (reach or point)	One sharing gesture (show)	1 word
A request with a word or gesture but does not share	Any requesting gesture the child does NOT yet show (reach, give or point)	One sharing gesture (show)	1 word
Uses one word at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	1–2 words
Uses two or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	2–3 words
Uses three or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	Short phrases/ sentences

Step 2: Complete the communication targets**Complete Part 4a: Communication targets**

Put an X next to the targets, as in the example:

Child's name: *Ryan*

Requesting gesture target		Sharing gesture target		Spoken words target	
Reaches to request		Shows	x	1 word	x
Gives		Points		2 words together	
Points	x	Gives		Multiples words and gestures together	
Notes:		Notes:		Notes: <i>Consistent use of single words (now only rarely uses single words)</i>	

*You will work on communication targets within the target "Play and home routines".
(Part 6)*

b) Identify play targets**Step 1: Consult the Play Skills goal chart**

Use this chart to decide on the child's play goals (targets). These are guidelines and not hard rules. Remember: a play routine is a bigger demand than just a few play actions.

- Think about the majority of the child's play actions – at what level are they?
- Try not to select the highest level you see.

Children may be able to do a few things at a higher level, but they will not be able to sustain this high level in a routine.

Play skills goal chart

Examples of child's current skills	Play target 1	Play target 2	Optional (always good) play routines
<i>Child does not play with objects</i>	Simple play: new play action (e.g. rolling a ball)	Simple play: new play action (e.g. puzzles out of the puzzle board) or same play action with different materials (e.g. rolling car)	People games (song, peek-a-boo...) People games with actions (ring-around-the-roses) Playing with books, magazines or pictures (naming pictures, making animal sounds...) "Reading" books or magazines (telling the story, matching objects to pictures)
<i>Child can roll a car (no other play actions)</i>	Simple play: same actions with different materials (e.g. rolling a ball, rolling trucks...)	Simple play: new play actions (e.g. taking pieces of a puzzle out of the puzzle board)	
<i>Child plays at "simple play" with a variety of materials independently</i>	Put-together play: new actions (combination play actions) with the same materials used for simple play (e.g. building a track for a train)	Put-together play: new actions (combination play actions) with the same materials used for simple play (e.g. building a track for a train)	
<i>Child can do put-together play (builds tower, bridge etc.) and a few simple pretend play actions</i>	Put-together play: new, more complex actions with multiple materials (e.g. building a city with different buildings and roads)	Simple pretend play: new actions with new materials (e.g. simple pretend actions with a variety of characters and miniature objects)	
<i>Child can do advanced pretend play (plays with dolls, animating them: makes them walk and talk)</i>	Put-together play: complex play actions with multiple materials, combined with advanced pretend play (e.g. building a "house" with cushions, boxes and a scarf, then role-play "cooking a meal")	Advanced pretend play: longer sequences of pretend actions with a variety of characters and materials Role-play and dressing up	
....			

Step 2: Complete the play targets

Complete Part 4b: Play targets

Put an X next to the targets, as in the example:

Notes:

1. People play should never be the only play target for a child, but it is good for many children.
2. Put-together play is likely to be a play target for most children. There are several forms of combination (put-together) play, from the simplest (e.g. put items in container, take them out) to the most sophisticated (e.g. complex structures with building materials).
3. Play activities with reading or illustrated materials (books, pictures) can always complement the main play target and can also be combined with different materials (e.g. making a sheep figurine “eat” a picture of grass in a book).

You can advance a child’s play skills by:

- teaching new play actions *at the same current level of play* with the same materials the child currently plays with, and/or with new materials;
- teaching new play actions *at the next level of play*, with the same materials the child currently plays with, and/or with new materials.

Base your decision on whether the child appears to master fully a certain level of play (i.e. the child can play with a variety of different materials using a variety of play actions) as opposed to displaying only a few play actions or playing with only one type of material. If the child does not fully master a level of play, it can be appropriate to teach the child a few play routines at the same level before moving on to the next level.

You can choose from either Option A or Option B to select the play targets:

- **Option A:** Play target 1 may be the child’s current level of play if the child can play with only one or two specific materials at a certain level of play. Play target 2 may be the next play level.
- **Option B:** Both Play target 1 and Play target 2 may be the next play level, if the child appears to fully master their current level of play (i.e. they can play with a variety of materials at the same level of play).

Child’s name: *Ryan*

Play level target 1:	
People games (no objects yet)	
Simple play with objects	
Put-together play	x
Early pretend play	
Advanced pretend play	
Notes: <i>expand put-together play with blocks, cups and boxes</i>	

Play level target 2:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	x
Advanced pretend play	
Notes:	

*You will work on the play targets within the target Play routines
(Part 6)*

c) Identify daily living skills targets

Step 1: Review interview with caregiver, Part.1A.7

Use the information collected during the home visit to identify two daily living skills targets.

Discuss with the caregiver to **help her/him to identify 1–2 goals for their child’s everyday skills.**

Ensure that the goals are very clearly defined, appropriate for the child’s current level of functioning and meaningful for everyday life.

- Help the caregiver to **identify two everyday life skills** that can be targeted first. Ensure that the target skills are meaningful and appropriate for the child’s level of functioning.
 - For instance, if the caregiver would like the child to learn how to dress her/himself, wash her/himself and walk to school independently, help the caregiver to choose the first two life skills to be targeted.
 - Choose a skill in which the child already shows some ability and that is most relevant for the child’s functioning.
- Obtain information about what the child can already do about that skill.
 - Can the child do one or more steps?
 - What help is given to the child?
- Explain that you will work on these skills during caregiver skills training.

Step 2: Complete the Daily living skills targets chart

Complete Part 4c: Daily living skills targets

Make sure to:

- Select skills that are age-appropriate and relevant for functioning.
- Note what the child can do already now within that activity (specify if it is done with or without help).

Child’s name: *Ryan*

	Daily living skills target 1:	Daily living skills target 2:
Skill:	<i>Wearing pyjama</i>	<i>Brushing teeth</i>
Can do now (with/without help):	<i>Holds arms out; mother helps him to put on jacket and bottom</i>	<i>Likes to hold toothbrush under water, tries to squeeze toothpaste (needs help)</i>

You will work on Daily living skills targets within the target Home routines (Part 6)

d) Identify behaviour regulation targets

Step 1: Review interview with caregiver, Part 1A.8

Use the information collected during the home visit (interview with caregiver; observation of caregiver-child interaction and facilitator-child interaction) to help the caregiver select a possible **target of challenging or dysregulated behaviours** that she/he would like to reduce during caregiver skills training.

- Ask the caregiver to select the challenging or dysregulated behaviours that have the highest impact on the child or the family.
- Get information on these behaviours: When do they occur? What happens before? What happens afterwards? How often do they occur?
- Explain that you will work on reducing these behaviours during caregiver skills training.

Step 2: Complete the Behaviour regulation targets chart

Complete Part 4d: Behaviour regulation targets

Make sure to:

- Select behaviours that have the highest impact on the child's functioning or participation.
- Obtain as much information as possible to understand the reasons for the behaviours.
- Note a possible response plan.

Child's name: *Ryan*

	Behaviour regulation target 1:	Behaviour regulation target 2:
Challenging / dysregulated behaviour	<i>Screams and kicks when they need to leave the house to go to school; mother often gives up</i>	
Reason*	<i>to avoid going to school</i>	
Response plan*	<i>give warnings; be consistent and leave the house</i>	

*You can complete these parts at a later stage. The caregiver may be given direct instructions right away, or you can delay the discussion to the relevant group sessions on the management of challenging behaviour (sessions 7 and 8). Consult your supervisor.

e) Identify family activities and priorities

Step 1: Ask the caregiver about family activities and priorities

Ask the caregiver to identify everyday **family or home activities** that she/he would like to engage the child in.

These could be everyday or common activities the caregiver would like to involve the child in, such as:

- *washing dishes;*
- *setting the table at mealtimes;*
- *sorting groceries or clothes;*
- *watering plants or gardening;*
- *cleaning up.*

Step 2: Complete the Family Activities targets chart

Complete Part 4e: Family activities and priorities

Make sure to:

- Select activities that are age-appropriate and meaningful for the family.
- Note what the child can already do now within that activity (specify if the child does it with or without help).

	Family activity 1:	Family activity 2:
Family activity		
Can do now (with/without help):		

You will use these family activities to build home routines (Part 6)

Part 5: Selecting caregiver targets

Complete Part 5 of the goal-setting worksheet – Home visit 1 – for master trainers and facilitators (See Annex 1). [10 minutes]

Step 1: Review notes of the caregiver-child interaction and consult the Intervention strategies chart

Review your notes of the caregiver-child interaction to identify areas of strategies where the caregiver most needs support and areas where you notice some spontaneous use of strategies.

Consult the Intervention strategies chart

Consider the overall interaction under the following domains:

- *Environmental strategies:*
 - How was the management of the environment and materials?
 - How was the positioning of the caregiver?
- *Look and listen strategies*
 - Does the caregiver notice the child's interests, skills and positive behaviour?
- *Routine building strategies*
 - Do you notice any “structure” in the play (steps, repetitions)?
 - Does the caregiver take part in the play? Is the caregiver too passive? Too directive?
- *Understanding communication strategies*
 - Does the caregiver talk too much? Too little?
 - Does the caregiver respond to the child's communication?
- *Responding to communication strategies*
 - Does the caregiver actively try to promote the child's communication? How?
- *Teaching new skills strategies*
 - Does the caregiver try to teach new skills? How?
- *Behaviour regulation strategies*
 - Does the caregiver try to keep the child regulated? How?
 - Does the caregiver notice signs of dysregulation?
- *Response to challenging behaviour strategies*
 - How does the caregiver respond to challenging or dysregulated behaviour, if it occurred?
- *Expanding routines strategies*
 - Does the caregiver try to link one activity to the next one? How?
- Most caregivers will require support under most, or all, intervention domains.
- However, it is important to notice when the caregiver shows some spontaneous (even if partial) use of strategies. **Give positive feedback.**

Intervention strategies chart

S#	Strategy domains	Intervention strategies
1	<i>Environmental strategies</i>	<ol style="list-style-type: none"> 1. Set up the space: remove distractions and make a safe place to interact. 2. Start with 2 or 3 motivating choices and follow your child's choice. 3. Move in front of your child, get down to your child's level and have the activity between you and the child.

S#	Strategy domains	Intervention strategies
2	<i>Look and listen strategies</i>	<ol style="list-style-type: none"> 1. <i>Look and listen</i> – Notice what your child is motivated by and interested in. 2. Find out how your child likes to play and show the child new ways to play. 3. <i>Look and listen</i> – Notice when your child is being good and respond with praise.
3	<i>Routine building strategies</i>	<ol style="list-style-type: none"> 1. Join in the routine – Take your turn by imitating what your child is doing. 2. <i>Show and say</i> – Give your child a new step for your routine. 3. Restart your routine to help your child to spend more time sharing engagement.
4	<i>Understanding communication strategies</i>	<ol style="list-style-type: none"> 1. Respond with words and gestures to all your child's communication, even when it is unclear. 2. Use words and gestures that match your child's language level. 3. Wait to give your child room to communicate. 4. Talk about what your child is looking at and doing.
5	<i>Responding to communication strategies</i>	<ol style="list-style-type: none"> 1. <i>Show and say</i> – Demonstrate words and gestures that your child can use to communicate. 2. Repeat your child's words and expand your child's language. 3. Create opportunities for your child to request. 4. Create opportunities for your child to communicate to share.
6	<i>Teaching new skills strategies</i>	<ol style="list-style-type: none"> 1. Break the skill into small steps and teach your child one small step at a time. 2. Let your child learn! Give the lowest level of help needed for your child to be successful. 3. Give clear and consistent instructions and praise your child for trying. 4. Ask yourself: can I teach a different step?
7	<i>Behaviour regulation strategies</i>	<ol style="list-style-type: none"> 1. Respond to skills and appropriate behaviour with praise and encouragement. 2. <i>Look and listen</i> for signals <i>before</i> the challenging behaviour. 3. Arrange your environment and give warnings before changing activities to help your child stay cool. 4. If your child has a “meltdown” or “tantrum”, stay calm and wait for the child to calm down. Then think about the reason for the behaviour.
8	<i>Response to challenging behaviour strategies</i>	<ol style="list-style-type: none"> 1. Use picture schedules to help your child understand activities and stay calm. 2. Respond to challenging behaviour that aims to get access by teaching your child to use communication skills. 3. Ignore challenging behaviour that is seeking attention if it is safe and OK to do so. 4. Set clear and consistent expectations to reduce challenging behaviour that aims to avoid or stop a routine. 5. Teach safe and appropriate behaviour to replace sensation-seeking challenging behaviour.

S#	Strategy domains	Intervention strategies
9	<i>Expanding routines strategies</i>	<ol style="list-style-type: none"> 1. Expand your routines: use <i>Show and say</i> to add new steps. 2. Link two routines together to expand a routine that the child can do.

Step 2: Complete the Caregiver targets chart

Complete Part 5: Caregiver targets

Use this chart to decide on the caregiver's skills goals (targets). These are guidelines and not hard rules.

- Note under "Needs improvement" some examples of missed opportunities to use the strategies.
- Note under "Done well" some examples of at least partial use of strategies.

Then identify three **intervention strategy domains** to target.

- Make sure to start from the top to select the most foundational domains first.

You can complete this section at a later stage, prior to the first group session.

You will support the caregiver on the Target strategy domains during play and home routines (Part 6)

Child's name: *Ryan*

Strategy domains*	How well is the caregiver using the strategies? Note examples below		Support needed?			Targets**
	Needs improvement	Done well	No	Some	Full	[Select 3]
Environmental	<i>very chaotic; clutter</i>				x	x
Look and listen		<i>immediately praises for skills, usually notices child's interests</i>		x		
Routine building	<i>not observed</i>				x	x
Understanding communication		<i>notices child's communication</i>		x		x
Responding to communication		<i>notices and responds to most of child's communication, only subtle signals missed</i>		x		
Teaching new skills	<i>not observed</i>				x	
Behaviour regulation	<i>misses signs of tiredness</i>				x	
Response to challenging behaviour	<i>n/a</i>				x	
Expanding routines	<i>not observed</i>				x	

Part 6: Selecting target routines

Step 1: Review the goal-setting sheet

Use all the information collected during the home visit and the child and caregiver targets (Part 4 and Part 5) to identify target routines.

Step 2: Complete the target routines chart

Complete Part 6: Target routines

- Select three play routines according to the Play targets:
 - At least one routine should aim at Play target 1 and at least one routine should aim at Play target 2.
- Select three home routines based on daily living skills targets and family activities targets.
 - At least one routine should target daily living skills and at least one routine should target family activities.
- Remember that both play and home routines will also aim at the Communication targets.
- Choose activities that will be motivating for the child and that occur on most days.
- As the child progresses, the same routines may have more or different steps.

You will use play and home routines to work on all child targets

You will support the caregiver on the target strategy domains

Child's name:

	Target play routines	Target home routines
Routine 1		
materials		
notes/steps*		
Routine 2		
materials		
notes/steps*		
Routine 3		
materials		
notes/steps*		

*You can complete these parts at a later stage.

Closing the home visit

Review of goals

Present the child target skills and the target routines and explain how during the caregiver skills training you will practice on the target routines to work towards the targets.

- Explore the caregiver's hopes for the child's communication and other skills.
- Explain that we will focus on the next step (the target skill) that will help the child get closer to the larger goal (but do not promise that the child will be able to reach that goal).
- Explain that, based on your observations and what the caregiver has told you, you have established specific goals for the child's communication.
- If there is a large discrepancy between the caregiver's expectation and the targets you have established (e.g. the caregiver would like the child to speak in full sentences, but child is currently using sounds to communicate), explain with tact and empathy that to achieve longer-term goals it is important to work on small steps. The caregiver skills training will teach them how to do this.
- Explain that one of the ways we will help children to communicate is by playing together at the right play level. Based on your observations and what the caregiver has told you, explain that you have established the child's play level and the next play level that we will aim towards.
- **Explain to the caregiver that, in order to reach the appropriate behaviour, we expect the child to learn in small steps.**
- **For each skill, the first small step is the target you have identified:**
 - e.g. Communication: the child occasionally makes sounds ("ba-ba").
 - The first small step is for the child to use sounds more often when she/he wants something.
 - e.g. Play: the child plays by making objects drop to the floor.
 - The first small step is for the child to add one meaningful action to her/his play, such as putting the objects into a bucket.
 - e.g. Difficult behaviour: the child screams when she/he must leave the house.
 - The first small step is enabling the child to understand that the caregiver wants to leave the home by using appropriate communication (picture/gesture/showing shoes/one word).
- Explain to the caregiver that once the child has learned the first small step, the caregiver can teach the next step. The caregiver skills training will teach caregivers new strategies to help their children learn.
 - e.g. Play: the child can be helped initially to take objects out of a bucket; but once the child has learned the play routine of taking objects out of a bucket, the caregiver can help the child learn how to put the objects into the bucket too.
- Tell the caregiver that you will also discuss these suggestions for target goals with your supervisor. During the first group session, you will talk more about how caregiver skills training will help them work towards these goals.

Invite family to session 1

[5–10 minutes]

- **Give the caregiver a card with the date, time and place of session 1** (and/or immediately send them an SMS so that the caregiver can read it while you are there).
- Ask about and discuss possible **barriers to attendance**:
 - How will you get to the first group session?
 - Who will take care of your child (and your other children) while you are at the group session?
 - Which family members have you talked to about your participation in caregiver skills training? How did they respond?
- If any barriers are identified, **discuss solutions**:
 - Who could help the caregiver? How could the facilitator help?
 - What other resources are available?
 - Would another family member like more information about caregiver skills training?
- **Leave your contact details and say goodbye to the family.**

Telephone calls

After the first home visit and first group session, you will contact each family with a telephone call. The purpose of the telephone calls is:

- to review the content of the home visit/group session, addressing any questions the caregiver may have;
- to review the home practice after session 1;
- to troubleshoot any difficulties; and
- to invite the families to the following session.

Goals and schedule of activities

1. Quick review of home visit/ group session	<ul style="list-style-type: none"> ▪ Address questions and comments about the group session materials. ▪ After session 1, mention the key strategies from the session that are most relevant to the family.
2. After session 1, review the home practice	<ul style="list-style-type: none"> ▪ Ask the caregiver if the child has been practising. ▪ Identify and discuss difficulties. ▪ Ask the caregiver how she/he feels about the experience of practising with the child. ▪ Make notes and consult the supervisor after the telephone call.
3. Troubleshoot any difficulties	<ul style="list-style-type: none"> ▪ Identify and discuss difficulties. ▪ Make notes and consult the supervisor after the telephone call.
4. Invite the family to the next session	<ul style="list-style-type: none"> ▪ Remind the caregiver of the date, time and place of the next session. ▪ Tell the caregiver that the next session will be an important opportunity to learn how to [mention goal/strategy relevant for the family]. ▪ Leave your contact details.

After each telephone call, consult your supervisor to address difficulties in:

- building a rapport with the family;
- addressing difficulties reported by the caregiver;
- dealing with additional unmet needs of the family (mental health, neglect, social deprivation etc.).

Annex 1: Kit materials

Caregiver-child interaction suggested kit materials

The kit includes materials that are intended for a range of developmental play levels.

You may adapt the kit to the local context, sourcing local materials yet ensuring that a range of developmental play levels is maintained.

Caregiver-child interaction suggested kit materials	Local adaptation
• Set of nesting boxes	•
• Animal figures (6)	•
• Board book (simple picture book)	•
• Puppet / doll	•
• Ball	•
• Shakers (2)	•
• Drawing materials: stencils (2), stamps (4), markers or crayons (4-5), paper (4 sheets)	•
• Colouring pages (2)	•
• Tea set: miniature food/drink (4 items) + set for 2 people (2 plates, 2 glasses/cups, 2 spoons)	•

Facilitator-child interaction suggested kit materials

The kit includes materials that are intended for a range of developmental play levels.

For clinical use, while not compulsory, it is recommended to use a similar kit to ensure that the materials cater for a range of developmental play levels. The kit can and should be adapted to include locally-sourced, familiar materials (bearing in mind that these should include a range of developmental levels).

Facilitator-child interaction suggested kit materials	Local adaptation
• Bubbles	•
• Blocks (12)	•
• Scarf	•
• Pinwheel	•
• Jack-in-the-box OR spring-wound toy [toy needs to be difficult to activate for the child] OR balloon	•
• Snack with two small containers to hold the snacks	•
• Dark bag or box that the child can't see through	•

Annex 2: Goal-setting worksheet - Home visit 1

Goal-setting worksheet – Home visit 1 – for master trainers and facilitators

Child's initials: _____ Caregiver: mother father other caregiver (_____)

Date of visit: _____ Trainer/Facilitator initials: _____

Use this form to take notes during the visit and set the child's goals

Part 1A: Ask the caregiver about the child's skills and difficulties

<p>1. Ask about the caregiver's concerns</p> <ul style="list-style-type: none"> ▪ What mostly concerns you about your child? 	
<p>2. Ask the caregiver(s) about the child's difficulties and contact with support services</p> <ul style="list-style-type: none"> ▪ Does the child have a diagnosis? Has any professional expressed concerns? ▪ Are you in contact with the health or developmental services? ▪ Is the child receiving any treatment? ▪ Are schooling and other supports available to the family? 	

<p>3. Ask which activities or things the child enjoys</p> <ul style="list-style-type: none">▪ Are there any activities, objects or materials that the child seems interested in or motivated by?	
<p>4. Ask about the child's communication to request</p> <ul style="list-style-type: none">▪ How do you know when your child wants something?▪ What does the child do in order to?<ul style="list-style-type: none">– ask for something?– get your help?– get comfort or attention from you?– get a break or stop an activity?	
<p>5. Ask about the child's communication to share interest</p> <ul style="list-style-type: none">▪ How does your child share her/his interests with you?▪ How do you know that your child is interested in something – not because she/he wants access to the item or needs help, but purely out of interest (e.g. a big dog in the street)?▪ Does she/he let you know that she/he is interested? How?	

<p>6. Ask about the child's level of play</p> <ul style="list-style-type: none">▪ Is the child playing? With which materials/objects? How?▪ Does the child play with other people? Adults? Peers? How?	
<p>7. Ask about the child's daily activities and skills [change questions to be appropriate to the child's age]</p> <ul style="list-style-type: none">▪ Can the child feed her/himself? Can the child use common tools (e.g. spoon, folded bread etc.) for eating?▪ Can the child dress her/himself?▪ Can the child wash her/himself?	
<p>8. Ask about unusual or challenging behaviour</p> <ul style="list-style-type: none">▪ Does your child have any odd or unusual behaviour (e.g. odd movements, interests, ways of interacting with objects or people)?▪ Are there any behaviours that are difficult for you to manage?	

<p>9. Ask about other health conditions</p> <ul style="list-style-type: none">▪ Are there any illnesses or other health problems?▪ Does the child seem to see and hear well?▪ Does the child have any difficulties in using her/his body (e.g. sitting, standing, walking, reaching, grabbing or using their hands)?▪ Are there problems with feeding or eating?▪ Does the child have low weight or difficulty in gaining weight?▪ Are there any other health problems?	
<p>10. Note relevant child behaviour during the interview with the caregiver:</p> <ul style="list-style-type: none">▪ Child's spontaneous communication and interaction with the caregiver.▪ Child's spontaneous play with objects, toys and materials.▪ Child's unusual or challenging behaviour.	

Part 1B: Look for and note additional needs of the family

<p>1. Look for signs of depression and other mental health issues in the caregiver and other family members, such as:</p> <ul style="list-style-type: none"> – appearing very sad/tired/annoyed; – expressing hopelessness/helplessness, – difficulty focusing; – appearing unkempt/poor personal grooming, appearing underweight/very thin or ill, signs of intoxication etc. 	
<p>2. Look for signs of neglect, abuse or maltreatment in the child, caregiver or other family member</p> <ul style="list-style-type: none"> ▪ See “Warning features of child maltreatment” in home visit 1 facilitators’ guide. 	
<p>3. Look for signs of material deprivation, such as:</p> <ul style="list-style-type: none"> – child and/or caregiver appears underweight/very thin; – evidence of inadequate clothing or housing, severe overcrowding etc. 	
<p>Make a note of any relevant signs and consult your supervisor after the home visit.</p> <ul style="list-style-type: none"> • Always ask yourself: Do i need to refer the family to other services? 	

Part 2A: Observe the caregiver's interaction with the child

Before beginning, try to get a sense of whether TODAY the child's behaviour is going to be representative of their current skills. Ask:

- Was there a particular event or change in routine today/this week/last week that might have upset your child? Is the child well?

Notes:

Observe the child:	Observe the caregiver:
<ul style="list-style-type: none">▪ Are there activities or materials the child enjoys?▪ Is the child communicating to request? How?▪ Is the child communicating to share interest? How?▪ Is the child playing? How?	<ul style="list-style-type: none">▪ What activities does the caregiver select?▪ How is the caregiver communicating?<ul style="list-style-type: none">– How complex is the caregiver's language? Do they ask many questions? Do they pause?– Do they notice the child's communication?– How do they respond?▪ Is the caregiver playing? How?▪ Note strategies the caregiver is already using and give positive feedback to the caregiver after the observation.

Part 2B: Interact with the child to assess her/his skills

- Position yourself in front of the child;
- use any environmental supports that you feel the child needs to help her/him engage (e.g. sit in a chair at a table).
- You may include any visual supports the child needs (e.g. picture schedule, timer) and behavioural strategies to help the child stay engaged.
- Provide multiple opportunities for the child to display communication and play skills.
- Use a hierarchy of prompts to elicit the most complex skills in the child's repertoire and establish the "ceiling" of her/his skills.

	Communication to request		Communication to share	
<i>Opportunity</i>	<i>Materials/activity</i>	<i>Child's communication</i>	<i>Materials/activity</i>	<i>Child's communication</i>
Opportunity 1				
Opportunity 2				
Opportunity 3				
Opportunity 4				

	Play skills	
<i>Level of play</i>	<i>Materials/activity</i>	<i>Child's play actions</i>
People games (no objects yet)		
Simple play with objects		
Put-together play		
Early pretend play		
Advanced pretend play		

Part 3: Child's current level of skills charts – Home visit 1

Review your notes of the caregiver-child interaction and of your interaction with the child.

Put an X next to the gestures and words that the child can use and the child's play level.

Current level of communication to request		
Not yet using gestures or words to request		
Eye contact (Looks at you or the object)		
Gestures:	Reaches to request	
	Gives to request (e.g. gives jar for you to open)	
	Points to request	
Language:	1 word to request	
	2 words together to request	
	Multiple words and gestures together to request	
<i>Notes:</i>		

Current level of communication to share		
Not yet using gestures or words to share		
Eye contact (Looks at object, then you, then back to object)		
Gestures:	Shows to share	
	Points to share	
	Gives to share (e.g. gives you a drawing to show you)	
Language:	1 word to share	
	2 words together to share	
	Multiple words and gestures together to share	
<i>Notes:</i>		

Current level of play	
Not yet playing with people or objects	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
<i>Notes:</i>	

Part 4: CHILD TARGETS – Home visit 1

Communication Goal Chart

Use this chart to decide on the child's communication goals (targets). These are guidelines and not hard rules. Remember that it is important to have both spoken language and gesture targets for each child. All gestures to share are important! You can model all of them using *Show and say*, regardless of what the child can already do.

Examples of child's current skills	Requesting gesture target	Sharing gesture target	Spoken words target
No gestures or words; or uses sounds or tries to talk; or looks at you without sounds or words	1 requesting gesture (reach or point)	1 sharing gesture (show)	1 word
Can request with a word or gesture but does not share	Any requesting gesture the child does not yet show (reach, give or point)	1 sharing gesture (show)	1 word
Uses 1 word at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	1–2 words
Uses 2 or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	2–3 words
Uses 3 or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	Short phrases/sentences

Part 4a: Communication targets

Use the current level of communication on page 8 and the Communication goal chart on page 9 to identify a spoken words target and gestures targets for communication to request and communication to share. Put an X next to each target.

Requesting gesture target	
Reaches to request	
Gives	
Points	
<i>Notes:</i>	

Sharing gesture target	
Shows	
Points	
Gives	
<i>Notes:</i>	

Spoken words target	
1 Word	
2 words together	
Multiples words and gestures together	
<i>Notes:</i>	

Part 4b: Play targets

Use the current level of play on page 8 to identify play targets. Put an X next to the target play levels. You can choose from either option A or option B to select the play level targets.

- **Option A):** Play target 1 may be the child’s current level of play if the child can only play with one or two specific materials at a certain level of play. Play target 2 may be the next play level.
- **Option B):** Both Play target 1 and Play target 2 may be the next play level if the child appears to fully master her/his current level of play (i.e. the child can play with a variety of materials at the same level of play).

Play level target 1:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
<i>Notes:</i>	

Play level target 2:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
<i>Notes:</i>	

Part 4c: Daily living skills targets

- ✚ Use the information collected during the home visit to identify two daily living skills targets. Make sure to:
 - select skills that are age-appropriate and relevant for functioning; and
 - note what the child can already do now within that activity (specify if the child does it with or without help)

	Daily living skills target 1:	Daily living skills target 2:
Skill:		
Can do now (with/without help):		

✚ Part 4d: Behaviour regulation targets

Using the information collected during the home visit (interview with caregiver; observation of caregiver-child interaction and facilitator-child interaction) help the caregiver to select possible targets of challenging behaviours they would like to reduce during caregiver skills training.

	Behaviour regulation target 1:	Behaviour regulation target 2:
Challenging / dysregulated behaviour:		
Reason*		
Response plan*		

*You can complete these parts at a later stage. The caregiver may be given direct instructions right away, or you can delay the discussion to the relevant group sessions on the management of challenging behaviour (7 and 8). Consult your supervisor.

✚ Part 4e: Family activities and priorities

Ask the caregiver to identify everyday family activities that she/he would like to engage the child in.

	Family activity 1:	Family activity 2:
Family activity		
Can do now (with/without help):		

Part 5: CAREGIVER TARGETS – Home visit 1

Use your observation of the caregiver-child interaction to identify categories of strategies where support is needed.

Strategy domains*	How well is the caregiver using the strategies? Note examples below		Support needed?			Targets**
	Needs improvement	Done well	No	Some	Full	[Select 3]
Environmental						
Look and listen						
Routine building						
Understanding communication						
Responding to communication						
Teaching new skills						
Behaviour regulation						
Response to challenging behaviour						
Expanding routines						

* Refer to the Home visit guide for a full list of strategies. **Mark with an X three domains to prioritize when supporting the caregiver.

Part 6: Target ROUTINES

Use all the information collected during the home visit and the Child and Caregiver targets to identify target routines.

- Select three PLAY routines according to the Play targets:
 - At least one routine should aim at Play target 1 and at least one routine should aim at Play target 2.
- Select three home routines on the basis of Daily living skills targets and family activities targets.
 - At least one routine should target daily living skills and at least one routine should target Family activities.
- Remember that both play and home routines will also target the Communication targets.
- Choose activities that will be motivating for the child and that occur on most days.

	Target play routines	Target home routines
Routine 1		
materials		
notes/steps*		
Routine 2		
materials		
notes/steps*		
Routine 3		
materials		
notes/steps*		

*You can complete these parts at a later stage. As the child progresses, the same routines may have more or different steps.

2

Home visit 2: Coaching caregivers



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Home visit 2 (between session 5 and session 6)*

The main goal of the second home visit is to help the caregiver to practise the strategies on shared engagement and set up routines for play and home activities, as presented in the group sessions, and to help the caregiver to review goals for improving communication. This session is designed to help the caregiver have success when trying out the strategies with their child and to further build the relationship between the facilitator and the caregiver. It is important to discuss how caregiver skills training and future group sessions are relevant to the caregiver's situation and to promote attendance at group sessions.

* Guidelines for the timing of Home visit 2

- For all sites: Given the importance of providing coaching on the issues covered during sessions 4 and 5 on communication, Home visit 2 should preferably be scheduled right after these two sessions. Consequently, the three options for scheduling Home visit 2 are ranked here by preference:
 - Option 1 (most preferable): Home visit 2 is conducted between session 5 (Promoting communication) and session 6 (Teaching new skills in small steps and levels of help).
 - Option 2 (intermediate): Home visit 2 is conducted between session 4 (Understanding communication) and session 5 (Promoting communication).
 - Option 3 (least preferable): Home visit 2 is conducted between session 3 (Play and home routines) and session 4 (Understanding communication).
- Research sites should preferably schedule Home visit 2 as per Option 1 above.
- Research sites should preferably schedule Home visit 2 during the same time frame for all participants, (i.e. in between the same two visits).
- Research sites: the timing of Home visit 2 should be recorded for each family.

Things to bring with you:

- Participant booklets or other handout with strategies.
- Goal-setting worksheet completed during Home visit 1.
- Notes on the caregiver's home practice activities.
- Video camera or telephone for video-recording.
- Any picture supports that you think this child might need (e.g. first–then schedule, picture schedule). *Note:* It is OK to teach the caregiver to use these tools prior to session 8 if the caregiver would benefit from using them.
- Caregiver-child interaction toy kit (if standardization of the toy kit is necessary for research or in low-resource contexts).

Goals and schedule of activities:

Home visit component	What to do	Complete in goal-setting worksheet
❖ Introduction		
1. Greet caregivers and family (5 minutes)	<ul style="list-style-type: none"> • Greet caregiver, child and family members. • Congratulate caregivers on attendance and efforts so far. 	//
❖ Reviewing the key messages and strategies and the home practice		
2. A) Review key messages and strategies and home practice (20 minutes)	<ul style="list-style-type: none"> • Review the goals, key messages and strategies of group sessions conducted so far. • Review experience with home practice. • Address questions and comments. 	Part 1A
3. B) Plan the guided practice (10 minutes)	<ul style="list-style-type: none"> • Review the individualized goals. • Ask the caregiver to choose a play/home routine to practice. • Identify and discuss strategies to use in the activity. • Prepare the environment and materials for the activity. 	//
❖ Observing and coaching caregiver interacting with child		
4. A) Observe and coach the caregiver interacting with the child (10 minutes)	<ul style="list-style-type: none"> • Ask the caregiver to interact with the child (during play or other home routine) and provide coaching. 	Part 2A
B) Demonstrate tips: facilitator interaction with child (10 minutes)	<ul style="list-style-type: none"> • Interact with the child to demonstrate useful strategies. 	

Home visit component	What to do	Complete in goal-setting worksheet
❖ Review of the guided practice		
5. Discuss and review the guided practice activity (10 minutes)	<ul style="list-style-type: none"> Revisit the goals and the activities selected for the child. Review the guided practice activity: what worked well and any challenges. Use the tips in the participant guide to show the caregiver the strategies that the child is already using and the strategies the child could try. Discuss with the caregiver how she/he feels about the experience in practising with their child. Wrap up the activity with a positive comment. Note down the revised goals and activities on the goal-setting worksheet. 	//
❖ Revise child targets		
6. Complete child targets charts	<ul style="list-style-type: none"> Write child targets for communication, play, daily living skills, behaviour regulation and family activities. 	Part 3 and 4
❖ Revise caregiver targets		
7. Complete caregiver targets chart	<ul style="list-style-type: none"> Write caregiver targets for spontaneous use of strategies. 	Part 5
❖ Selecting new target routines		
8. Complete target routines chart	<ul style="list-style-type: none"> Discuss with the caregiver possible play and home routines. 	Part 6
❖ Closing the visit		
9. Invite the family to the next group session	<ul style="list-style-type: none"> Remind the caregiver about the date, time and place of the next group session. Address barriers to attendance. Tell the caregiver about a strategy from the next group session that you think will be helpful. 	//

Learning objectives for the caregiver

1. To review the child's individualized goals, home practice and play and home routines.
2. To improve confidence in applying the strategies introduced so far in group sessions (i.e. set up play and home routines; create opportunities for the child to communicate).
3. Identify additional needs of the family and child.
4. Boost motivation to support attendance.

Introduction

The main goal of the second home visit is to help the caregiver to practise the strategies on getting and keeping children engaged, setting up play and home activity routines and improving communication presented in the group sessions. This session is designed to help the caregiver to be successful in trying the strategies with their child and to further build the relationship between the facilitator and the caregiver. It is important to discuss how caregiver skills training and future group sessions are relevant to the caregiver's situation and promote attendance at group sessions.

Greet caregivers and family

- Greet caregiver, child and family members.
- Congratulate caregivers for attendance and efforts so far.
- Discuss any barriers to attendance and problem-solve to reach solutions.

Part 1: Review key messages and strategies and the home practice

Review key messages and strategies and the home practice

Complete Part 1A of the goal-setting worksheet – Home visit 2 – for master trainers and facilitators. [10 minutes]

Step 1: Review the intervention key messages and tips

This is an open time to discuss the caregiver's needs regarding the group session material, the strategies and how to apply the material with the child.

- Review the goals, key messages and strategies of group sessions conducted so far (you can refer to the relevant participants' guide). You can quickly refer to sets of strategies with a similar focus (e.g. you could mention "environmental strategies"). Ask what strategies have been most useful and most relevant.
- Address questions and comments about the group session material.

Step 2: Review the home practice

Complete Part 1A: Review of the home practice

- ASK the caregiver if she/he has tried the home practice:
 - Allow the caregiver to ask questions or show you what they have been practising.
 - For caregivers who have not tried the strategies or who have been less successful, ASK if there was something that they found not relevant or too difficult.
 - Try to correct any misunderstandings about the material.
 - **Take notes on the goal-setting worksheet**

- For each routine that was practised, note what
 - went well:
 - identify positive child behaviour and/or caregiver’s successful use of strategies;
 - try to identify at least one positive aspect;
 - if the caregiver does not identify anything that went well, praise the caregiver for trying the practice.
 - was challenging:
 - identify challenging child behaviour (dysregulated, difficult to engage);
 - note the caregiver’s unsuccessful attempts to use the strategies.
- **Consult the Coaching troubleshooting section in Annex 3 for more detailed guidance.**
 - Consult the supervisor at the end of the visit if you feel that, after the visit, the caregiver was still unclear about the strategies, or for any difficulties in building a rapport with the caregiver.

Note: You do not need to focus on everything that was covered in the group sessions. There may be some information that is more useful or appropriate for this family. Remind the caregiver of two key strategies or concepts that you feel are critical for this family’s needs.

Plan the guided practice activity

- Review the individualized goals identified in Home visit 1 and the group sessions:
 - Are the next steps still appropriate for the child? Are they too easy/difficult?
 - Revise the steps if needed.
- ASK the caregiver to choose one play or home routine that they would like to work on with their child during a guided practice lasting about 10 minutes, in which you will observe the caregiver and child.
- Discuss how the key strategies will be applied to that specific play or home routine.
- Notice if the caregiver seems anxious or worried and give reassurance. Let the caregiver know that:
 - the goal is just to practise and try the strategies out;
 - this is a chance for both of you to learn more about how the child communicates and behaves in these specific activities;
 - this will help you to advise the family on appropriate targets for caregiver skills training. You will better understand which parenting strategies may be most useful for them.
- Prepare for the guided practice activity by:
 - gathering the materials that you need;
 - setting up the environment (e.g. by removing or covering any distracting or unnecessary materials);
 - optional: video-recording the routine [only with the caregiver’s consent].

Part 2: Observing and coaching the caregiver interacting with the child

Observe and coach the caregiver interacting with the child

Complete Part 2A of the goal-setting worksheet – Home visit 2 – for master trainers and facilitators. [10 minutes]

Step 1: Observe the caregiver interacting with the child

Complete Part 2A

- Ask the caregiver to interact with the child, engaging in the planned guided activity.
- Use this opportunity of watching how the child and caregiver interact with one another to collect information that will be useful for re-evaluating the information collected during Home visit 1 and adjust the targets for the child.
- Observe the child's communication, challenging behaviour, and play skills:
 - Are there activities or materials the child enjoys?
 - Is the child communicating to request? How?
 - Is the child communicating to share interest? How?
 - Is the child playing? How?
 - Does the child show any challenging behaviour?

You will use your notes to complete the Targets section of the Goal-setting worksheet

- Observe the caregiver's style and identify which strategies and activities might best benefit the caregiver (consult Table A3.1 in Annex 3: Guidance to coaching contents, per home visit). Ask yourself the following questions:
 - *Environmental strategies:*
 - Which 2–3 activities does the caregiver pre-select? What could be more appropriate activities in terms of the child's developmental /play level?
 - Is the caregiver offering choices and following the child's choice?
 - Can the positioning of caregiver, child and activity be improved? Is the environment set up in a way that is conducive to shared engagement?
 - *Look and listen strategies*
 - Does the caregiver notice and comment on the child's focus of attention?
 - Does the caregiver praise the child's appropriate behaviour?
 - Does the caregiver notice the child's communication, including weak communicative signals?
 - Does the caregiver notice how the child likes to play (child's current level of play)?
 - *Routine building strategies*
 - Is the caregiver playful?
 - Do both the adult and the child have active roles in the routine? (Asking questions or directing the child do not count as examples of having an active role.)
 - Does the caregiver imitate the child's *appropriate* play actions to join the routine?
 - Does the caregiver model (*Show and say*) new steps when the child's actions are not appropriate or are becoming repetitive, or when the child is very passive?
 - Does the caregiver restart the routine and keep it fun and engaging?
 - *Communication strategies*
 - Does the caregiver talk a lot? Is the child very quiet? Does the caregiver give space (pauses) to encourage the child's communication?
 - Does the caregiver comment on (talk about) the child's focus of attention? Or does the caregiver ask many questions, does she/he test the child (i.e. likes to "teach" a lot)?
 - Does the caregiver respond to all of the child's communication including unclear communication?
 - Does the caregiver's level of language match that of the child?

- Does the caregiver demonstrate words and gestures that the child can use to communicate?
- Does the caregiver repeat and expand child's communication?
- Does the caregiver create opportunities for the child to request? And to share?

Look for strategies the caregiver is already using. Make a note of these and give positive feedback to the caregiver after the observation.

Step 2: Coach the caregiver

Coach the caregiver (consult the Annex 3):

- Provide specific guidance on the areas where most support is needed.
- Highlight good implementation of strategies or attempts in the right directions.
- Praise the caregiver for the effort rather than for the performance.
- Note: For some families, the demand to engage the child with someone watching will be too much. If you feel this is the case, as the facilitator you can join in the activity so that you are doing the activity with the caregiver. Allow the caregiver to lead the interaction as much as possible. If the caregiver refuses to interact with the child, skip this activity and proceed with the next one.

Demonstrate tips: facilitator-child interaction to demonstrate useful strategies

Explain to the caregiver that you would like to interact briefly with the child yourself in a play routine. It will help you to better understand the child's behaviour and interests, and will demonstrate some of caregiver skills training strategies.

Provide the child with materials and opportunities to play. Get down at the child's level. Join in and engage the child in a play activity for 5–10 minutes. On the basis of your observation of the child in Part 2, choose appropriate play materials and select the 2–3 strategies/tips to demonstrate that would most benefit the caregiver.

Even if you have had an opportunity to join in and demonstrate tips in Part 2, make sure that you attempt to interact with the child for further demonstration of strategies.

- Focus specifically on strategies from sessions 1–5 to consolidate learning
 - Demonstrate the strategies that the caregiver seems to have most difficulty with.

Part 3: Review of the guided practice

Discuss and review the guided practice activity

- Revisit the goals and the activities selected for the child.
- Ask yourself:
 - Was the identified small step too difficult for the child? Too easy?
 - Was the selected activity boring? Was it fun? (See also Coaching troubleshooting in Annex 3.)
- Discuss with the caregiver:
- Talk about what happened in the guided practice activity – what the caregiver did and said, and the child's behaviour.
 - Use the tips displayed in the relevant participants' guide to show the caregiver the strategies they are already using and the strategies they could try.
 - Highlight successful activities that the caregiver should try again and provide praise for the caregiver's use of the strategies.
 - Discuss and troubleshoot challenging activities.

- Discuss with the caregiver how she/he feels about their experience of practising with their child.
 - Notice if the caregiver seems sad or down and respond by praising the caregiver for working and trying hard.
 - Try to identify at least one positive outcome (e.g. the child did not seem interested but did not have a meltdown; caregiver was very good at pacing the activity without pushing the child too much).
- Wrap up the activity with a positive comment:
 - Praise the caregiver for trying strategies – mention skills the child showed you, and remind the caregiver of the next steps:
 - encourage the caregiver to continue practising with the child;
 - encourage the caregiver to write down or remember their questions as they practise and bring them to the group sessions.

Part 4: Revise child targets

Complete Part 3 and 4 of the goal-setting worksheet – Home visit 2 – for master trainers and facilitators. [10 minutes]

Define child targets

General instructions

Using the same process you followed in Home visit 1, review all the available information to describe the child's current level of skills and then establish the intervention goals. You will use the information collected during the interview with the caregiver to establish the other targets.

A) Revise communication targets

Step 1: Consult the goal-setting worksheet for Home visit 1 and the Communication goal chart

Review the targets established in Home visit 1 and the skills observed during the caregiver-child interaction, then use the chart to decide on the child's communication goals (targets).

Ask yourself:

- Can the child display higher (more sophisticated) skills?
- Can the child display the same skills, but more frequently?
- → If yes, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets.

Step 2: Complete the communication targets

Complete Part 4a: Communication targets – Home visit 2

B) Revise play targets

Step 1: Consult the goal-setting worksheet for Home visit 1 and the Play skills Goal Chart

Review the targets established in Home visit 1 and the skills observed during the caregiver-child interaction, then use the chart to decide on the play goals (targets).

Ask yourself:

- Can the child display higher (more sophisticated) play actions?
- Can the child play at the same play level as before, but with a wider variety of materials?

- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets.

Children may be able to do a few activities at a higher level, but they will not be able to sustain this high level in a routine.

Step 2: Complete the Play targets

Complete Part 4b: Play targets – Home visit 2

C) Revise daily living skills targets

Step 1: Consult the goal-setting worksheet for Home visit 1

Review the targets established in Home visit 1, and ask the caregiver about progress on these skills.

ASK the CAREGIVER:

- Has the caregiver practised engaging the child in that skill?
- Can the child do more steps independently within the skill?
- Can the child do more steps with fewer support?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets, or decide whether it may be best to target a different skill.

Caregivers may also wish to change targets and focus on different skills. If you select new skills, ensure that these are age-appropriate and relevant for functioning.

Step 2: Complete the Play targets

Complete Part 4c: Daily living skills targets – Home visit 2

D) Revise behaviour regulation targets

Step 1: Consult the Goal-setting worksheet for Home visit 1

Review the targets established in Home visit 1, and ask the caregiver about progress on preventing dysregulated or challenging behaviour.

ASK the caregiver:

- Has the caregiver tried preventing dysregulated behaviour? How?
- Is the behaviour occurring significantly less?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets, or decide whether it may be best to offer individualized guidance.

Reassure the caregiver that you will talk about specific strategies for targeting challenging behaviour in two dedicated group sessions.

Step 2: Complete the Behaviour regulation targets**Complete Part 4d: Behaviour regulation targets – Home visit 2****E) Revise family activities and priorities****Step 1: Consult the goal-setting worksheet Home visit 1**

Review the targets established in Home visit 1, and ask the caregiver about progress on engaging the child in family activities.

ASK the CAREGIVER:

- Has the caregiver practised engaging the child in those family activities?
- Can the child do more steps independently within those activities?
- Can the child do more steps with fewer supports?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets, or decide whether it may be best to target a different activity.

Caregivers may also wish to change targets and focus on different activities. If you select new activities, ensure these are age-appropriate and are meaningful for the family.

Step 2: Complete the family activities chart**Complete Part 4e: Family activities and priorities – Home visit 2****Part 5: Revise caregiver targets****Complete Part 5 of the Goal-setting worksheet – Home visit 2 – for master trainers and facilitators. [10 minutes]****Step 1: Review notes of caregiver-child interaction and consult the Intervention strategies chart**

Review your notes of the caregiver-child interaction to identify areas of strategies where the caregiver most needs support and areas where you notice some spontaneous use of strategies.

Consult the Intervention strategies chart

Consider the overall interaction under the following domains:

- *Environmental strategies:*
 - What is the management of the environment and materials like?
 - How is the positioning of the caregiver?
- *Look and listen strategies*
 - Does the caregiver notice the child's interests, skills and positive behaviour?
- *Routine building strategies*
 - Do you notice any structure in the play (steps, repetitions)?
 - Does the caregiver take part in the play? Is she/he too passive? Too directive?
- *Understanding communication strategies*
 - Does the caregiver talk too much? Too little?
 - Does the caregiver respond to the child's communication?
- *Responding to communication strategies*
 - Does the caregiver actively try to promote the child's communication? How?
- *Teaching new skills strategies*
 - Does the caregiver try to teach new skills? How?

- *Behaviour regulation strategies*
 - Does the caregiver try to keep the child regulated? How?
 - Does the caregiver notice signs of dysregulation?
- *Response to challenging behaviour strategies*
 - How does the caregiver respond to challenging or dysregulated behaviour (if it occurs)?
- *Expanding routines strategies*
 - Does the caregiver try to link one activity to the next one? How?
- Focus specifically on the strategies from sessions 1–5
 - Is specific support needed? Which strategies does the caregiver seem to have most difficulty with?
- Most caregivers will require support under most, or all, intervention domains.
- However, it is important to notice when the caregiver shows some spontaneous (even if partial) use of strategies. Give positive feedback.

Intervention strategies chart

S#	Strategy domains	Intervention strategies
1	<i>Environmental strategies</i>	<ol style="list-style-type: none"> 1. Set up the space: remove distractions and make a safe place to interact. 2. Start with 2 or 3 motivating choices and follow your child's choice. 3. Move in front of your child, get down to your child's level and have the activity between you and the child.
2	<i>Look and listen strategies</i>	<ol style="list-style-type: none"> 1. <i>Look and listen</i> – Notice what your child is motivated by and interested in. 2. Find out how your child likes to play and show the child new ways to play. 3. <i>Look and listen</i> – Notice when your child is being good and respond with praise.
3	<i>Routine building strategies</i>	<ol style="list-style-type: none"> 1. Join in the routine – Take your turn by imitating what your child is doing. 2. <i>Show and say</i> – Give your child a new step for your routine. 3. Restart your routine to help your child spend more time sharing engagement.
4	<i>Understanding communication strategies</i>	<ol style="list-style-type: none"> 1. Respond with words and gestures to all your child's communication, even when it is unclear. 2. Use words and gestures that match your child's language level. 3. Wait to give your child room to communicate. 4. Talk about what your child is looking at and doing.
5	<i>Responding to communication strategies</i>	<ol style="list-style-type: none"> 1. <i>Show and say</i> – Demonstrate words and gestures that your child can use to communicate. 2. Repeat your child's words and expand your child's language. 3. Create opportunities for your child to request. 4. Create opportunities for your child to communicate to share.
6	<i>Teaching new skills strategies</i>	<ol style="list-style-type: none"> 1. Break the skill into small steps and teach your child one small step at a time. 2. Let your child learn! Give the lowest level of help needed for your child to be successful. 3. Give clear and consistent instructions and praise your child for trying. 4. Ask yourself: can I teach a different step?

S#	Strategy domains	Intervention strategies
7	<i>Behaviour regulation strategies</i>	<ol style="list-style-type: none"> 1. Respond to skills and appropriate behaviour with praise and encouragement. 2. <i>Look and listen</i> for signals <i>before</i> the challenging behaviour. 3. Arrange your environment and give warnings before changing activities to help your child stay cool. 4. If your child has a “meltdown” or “tantrum”, stay calm and wait for the child to calm down. Then think about the reason for the behaviour.
8	<i>Response to challenging behaviour strategies</i>	<ol style="list-style-type: none"> 1. Use picture schedules to help your child understand activities and stay calm. 2. Respond to challenging behaviour that aims to get access by teaching your child to use communication skills. 3. Ignore challenging behaviour that is seeking attention if it is safe and okay to do so. 4. Set clear and consistent expectations to reduce challenging behaviour that aims to avoid or stop a routine. 5. Teach safe and appropriate behaviour to replace sensation-seeking challenging behaviour.
9	<i>Expanding routines strategies</i>	<ol style="list-style-type: none"> 1. Expand your routines: use <i>Show and say</i> to add new steps. 2. Link two routines together to expand a routine that the child can do.

Step 2: Complete the Caregiver targets chart

Complete Part 5: Caregiver targets

Identify three **intervention strategy domains** to target.

- Make sure to start from the top to select the most foundational domains first.

You will support the caregiver on the target strategy domains during play and home routines (Part 6)

Part 6: Selecting new target routines

Step 1: Review the goal-setting worksheet

Use all the information collected during the home visit and the child and caregiver targets (Part 4 and Part 5) to identify target routines.

Step 2: Complete the Target routines chart

Complete Part 6: Target routines – Home visit 2

- Select three play routines according to the Play targets:
 - At least one routine should target Play target 1 and at least one routine should target Play target 2.
- Select three home routines on the basis of daily living skills targets and family activities targets.
 - At least one routine should target daily living skills and at least one routine should target family activities.
- Remember that both play and home routines will also target the Communication targets.
- You may choose the same routines as selected in Home visit 1 and make them more complex by:
 - adding more steps;
 - changing the order of the steps;
 - adding different steps.
- You may select new routines. Select activities that will be motivating for the child and that occur on most days.
- As the child progresses, the same routines may have more or different steps.

You will use play and home routines to work on all child targets

You will support the caregiver on the target strategy domains

Invite the family to the next group session

- Remind them of date/time of the next session.
- Discuss and address any barriers to attendance.
- Tell the caregiver about a strategy from the next group session that you think will be helpful.
 - This will give them a reason to come to the next session.

Annex 3: Coaching guide

General instructions

How you implement the coaching component can differ according to the caregiver's needs – from a minimal amount of support to a high amount.

You should provide the *right amount* of support to each caregiver. If you provide **too little support** than needed, the caregiver will struggle, and their confidence and rapport with you may be affected. If you provide *too much support* than needed, the caregiver may feel as if you are too intrusive.

Level of support	What coaching looks like
Least	Spoken encouragement and reminders – the caregiver runs the interaction.
↓	Clinician provides hands-on support only to help troubleshoot – gives spoken praise and reminders.
↓	Clinician and caregiver take turns with the child – the clinician gives the caregiver clear directions.
Most	Clinician runs the interaction with the child – models and talks about the strategies.

How do you know which level of support to use?

You can gauge the caregiver's confidence and comfort from observation and discussion. There are many possibilities. Below are some examples:

<i>Clinician is:</i>	<i>Caregiver appears:</i>	<i>Level of support</i>	
Uncertain of caregiver's use of strategies	Uncertain/asking for help/had difficulty in the caregiver-child interaction	Most	Model strategies
Uncertain	Eager and confident		Model briefly; move to turns
Gaining confidence	Gaining confidence		Take turns; add support for challenges
Confident in caregiver's use of strategies	Uncertain/asking for help/had difficulty in the caregiver-child interaction		Take turns
Confident	Confident	Least	Spoken support

Which specific contents should be covered during coaching?

- All strategies could be referenced, verbally explained, or directly modelled during coaching.
- Always make sure to briefly reference the strategies that have been covered in the group sessions so far. See Table 1 below. The dark-coloured cells indicate highly recommended strategies to reference; the light-coloured cells indicate optional contents.
- In addition, ensure that relevant strategies are demonstrated if they are highly relevant to a caregiver, even if these have not been discussed in the group sessions (e.g. behaviour regulation strategies during Home visit 2).

Table A3.1 Guidance on the contents of coaching, per home visit

Session	Category	Strategies	Home visit		
			1	2	3
1	<i>Environmental strategies</i>	<ol style="list-style-type: none"> 1. Set up the space: remove distractions and make a safe place to interact. 2. Start with 2 or 3 motivating choices and follow your child's choice. 3. Move in front of your child, get down to your child's level and have the activity between you and the child. 			
2	<i>Look and listen strategies</i>	<ol style="list-style-type: none"> 1. <i>Look and listen</i> – Notice what your child is motivated by and interested in. 2. Find out how your child likes to play and show the child new ways to play. 3. <i>Look and listen</i> – Notice when your child is being good and respond with praise. 			
3	<i>Routine building strategies</i>	<ol style="list-style-type: none"> 1. Join in the routine – Take your turn by imitating what your child is doing. 2. <i>Show and say</i> – Give your child a new step for your routine. 3. Restart your routine to help your child spend more time sharing engagement. 			
4	<i>Understanding communication strategies</i>	<ol style="list-style-type: none"> 1. Respond with words and gestures to all of your child's communication, even when it is unclear. 2. Use words and gestures that match your child's language level. 3. Wait to give your child room to communicate. 4. Talk about what your child is looking at and doing. 			
5	<i>Responding to communication strategies</i>	<ol style="list-style-type: none"> 1. <i>Show and say</i> – Demonstrate words and gestures that your child can use to communicate. 2. Repeat your child's words and expand your child's language. 3. Create opportunities for your child to request. 4. Create opportunities for your child to communicate to share. 			
6	<i>Teaching new skills strategies</i>	<ol style="list-style-type: none"> 1. Break the skill into small steps and teach your child one small step at a time. 2. Let your child learn! Give the lowest level of help needed for your child to be successful. 3. Give clear and consistent instructions and praise your child for trying. 4. Ask yourself: can I teach a different step? 			
7	<i>Behaviour regulation strategies</i>	<ol style="list-style-type: none"> 1. Respond to skills and appropriate behaviour with praise and encouragement. 2. <i>Look and listen</i> for signals <i>before</i> the challenging behaviour. 3. Arrange your environment and give warnings before changing activities to help your child stay cool. 			

Session	Category	Strategies	Home visit		
			1	2	3
8	<i>Response to challenging behaviour strategies</i>	<ol style="list-style-type: none"> 1. Use picture schedules to help your child understand routines and stay calm. 2. Respond to challenging behaviour that aims to get access by teaching your child to use communication skills. 3. Ignore behaviour to get attention after asking two important questions. 4. Set clear and consistent expectations to reduce challenging behaviour used to avoid or stop a routine. 5. Teach safe and appropriate behaviour to replace sensation-seeking challenging behaviour. 			
9	<i>Expanding routines strategies</i>	<ol style="list-style-type: none"> 1. Expand your routines: use <i>Show and say</i> to add new steps. 2. Link two routines together to expand a routine that the child can do. 			

Tips to optimize coaching:

- Consider providing more support with new strategies or challenging routines.
- If you plan to jump in and out of the interaction (taking turns or hands-on support when you notice the caregiver struggling), remind the caregiver before you start the practice that you are there to help. Explain that, whenever they need it, you will join in to help occasionally.
- When you need to show the caregiver new or challenging strategies, follow these steps:
 - model the strategies first and let the caregiver know what you are doing;
 - give the caregiver one strategy to try at a time.

(e.g. Step 1: *Look and listen* – how is the child communicating? Step 2: respond and expand the communication you notice).

Coaching troubleshooting tips

What if the caregiver does not want to practise with the child?

- This is a new activity. The caregiver may be nervous or anxious. Try to be sensitive and encouraging of even small moments of success.
- Find out what the caregiver really wants to work on with the child. Is it hand-washing? Getting dressed? Is it getting the child to read a book or sing a song with the caregiver? If the caregiver does not have a goal in mind, suggest a goal on the basis of your experience with the child and give the caregiver a choice of activities to target that goal.
- Take more time to show the strategies to the caregiver. Show the strategies repeatedly.
- Bring the caregiver into the activity with a small step. Ask the caregiver to do one clear action while you do the rest of the activity and support the child. Add more steps as the caregiver has success.
- Show the caregiver that mistakes are OK. If a strategy does not work or the child does not immediately engage in the activity, talk about this with the caregiver. It is good to show the caregiver that the strategy will not work every single time. Also show the caregiver that you can try again, or you can try a different strategy.

What if I try a strategy and I think it is not working?

- Try to think about why the strategy is not working before you make a change. For instance:
 - The child is not interested in the activity.
 - The child is distracted (e.g. by the television, other children, food, other objects).
 - The activity is too difficult, and the child is frustrated.
 - The activity is too easy, and the child is bored.
 - The child is hungry, or sleepy, or feeling sick.

What if I am not sure that the caregiver understands the strategy?

- Try asking the caregiver if she/he has questions. Sometimes people do not ask questions because they are afraid they will say the wrong thing.
- Encourage and praise when you see the caregiver use the strategy correctly.
- Discuss other times the caregiver could use the strategy. Does the caregiver correctly choose times to use the strategy in other activities? If not, this is an opportunity to suggest other activities and explain why you chose those times.
- When you are practising, try asking the caregiver what she/he should do next:
 - For example, the caregiver wants to work on snack time. The caregiver is holding the

snack and the child reaches toward the snack. You are not sure the caregiver will use the pause and wait strategy you talked about. This is a good time to ask the caregiver a question: “Dinha wants some more to eat. What can you do to help her ask you with words for more to eat?”

If the caregiver does not use a strategy, **show** the caregiver how to use the strategy and **say** (*explain*) why you are using that strategy. So, you could say “This is an opportunity to help Dinha learn to use words to ask for what she wants. Let us try the pause and wait strategy. I shall show you, and then you can try.”

What if the activity we select is too easy for the child?

- If the child is motivated, excited and engaged in an activity that is easy for the child, this is OK. Help the caregiver to celebrate that the child has mastered this activity and that the child can do it really well!
- Let the caregiver know that tasks that are easy but fun and motivating for the child can be good activities to try when the child is tired or not feeling well because they are fun but not taxing.
- Easy activities that the child can do alone could also be used when the caregiver needs to do something else. If the child can sit and do the simple activity by her/himself, the caregiver may be able to do something else nearby.
- However, if the child is bored, not interested, or does not want to engage in the activity because it is too easy, then let the caregiver know that the child needs a more challenging activity.
- Remind the caregiver that you and she/he are seeking a balance of easy and more difficult activities. Having a balance of activities can help the child stay engaged, can lower frustration, and can teach new skills.

What if I think the activity we select is too difficult for the child?

- If the activity is too difficult you will quickly know because the child will be frustrated or will not engage at all with the activity, even if presented by different people and with different types of materials.
- It is very important that you address this by identifying the correct small step that the child needs to learn in order to get to the long-term goal.
- Explain to the caregiver that you are not “going backwards” but you are trying to find the right step for the child. Explain that the child can progress step-by-step, but you cannot leave out any step.

What if I want to show the caregiver a strategy we have not talked about in the group yet?

- That is OK! If you think a strategy from a later session would be helpful for a family now, you can show the caregiver the strategy during a home visit.
- Remember that you might have to give the caregiver some information about why the strategy might help, and the goal of using the strategy, since the caregiver will not yet have heard this information in the group session.

What if the child finds it difficult to transition between activities?

- You can help the child to transition to the practice session using additional strategies, such as:
 - verbal count down;
 - timer.
- Note: consult your supervisor in order to master these strategies and discuss which is the most appropriate for each family.

What if there are other children in the house?

- Ask if there is another adult who can take care of the children while you and the caregiver practise with one child.
- Try getting the other children interested in a separate game or activity that they can play together while you and the caregiver practise.
- Other children can sometimes join in with activities like snack time and sometimes they may need to if you practise an activity outside of the house (e.g. walking to the market). Try to keep the focus on the child you are there to see.

What if other relatives in the house are unsupportive (e.g. criticising the caregiver and saying that the child is getting spoilt)?

- The first home visit is a good opportunity to meet other relatives and explain caregiver skills training to them. The second home visit can also be used to clarify and explain any concerns the other relatives may have.
- The participating caregiver can share the participant guide with relatives in order to share more widely in the family the key messages, tips and strategies that the caregiver has learned.

What if the family asks for money?

- Explain that this programme cannot provide money; and reiterate caregiver skills training goals.
- Refer the family to any available community resources which might be helpful.

What to do if I find the child is neglected (e.g. dirty, underfed etc)?

- **Inform your supervisor.**
- Approach the local community health worker so that she/he can visit the family and check the health of the child.

What should I do if I suspect or identify child abuse?

- Inform your supervisor.
- Educate the caregiver and other relatives. If you feel confident enough, speak to these caregivers yourself; if not, ask your supervisor to help. Even if you feel confident to speak to the caregiver yourself, you should still always inform your supervisor of the (suspected) abuse. Facilitators should not carry this responsibility by themselves.
- If you are confident enough to speak to the caregiver yourself, explain that their child has special needs and is not deliberately disobedient or misbehaving. Explain that even if beating may seem to have an effect in the short term, harsh punishment will make problems worse in the long term. Explain that, if harsh punishment is a problem in the family or community, you and your supervisor are available to help.

What should I do when one of caregivers cries/shares problems in a group session?

- The best response depends on the context and the problem the caregiver talks about. For some problems (e.g. difficulty travelling to the session) it may be appropriate to discuss the issue with the whole group, because other caregivers may be able to offer support.
- In other cases it may be more appropriate to ask the caregiver if they would like to go for a walk. One facilitator can leave room with the caregiver so that they can talk in private, while the rest of the group continues the session with the other facilitator.
- You can use the tips from session 9 (Self-help and problem-solving) to support the distressed caregiver.
- If the caregiver's stress appears severe, refer to the local health worker/ or health centre.

Annex 4: Goal-setting worksheet - Home visit 2

Goal-setting worksheet – Home visit 2 for master trainers and facilitators

Child's initials: _____ Caregiver: mother father other caregiver (_____)

Date of visit: _____ Trainer/Facilitator initials: _____

Use this form to take notes during the visit and set the child's goals

Part 1A: review of home practice

	Play/home routines practised	
	Went well	Challenges
Routine 1		
Routine 2		
Routine 3		

Part 2: Observe the caregiver's interaction with the child

Before beginning, try to obtain a sense of whether the child's behaviour today is representative of the child's current skills. Ask:

- Was there a particular event or change in routine today/this week/last week that might have upset your child? Is the child well?

Notes:

Observe the child:	Observe the caregiver:
<ul style="list-style-type: none">• Are there activities or materials the child enjoys?• Is the child communicating to request? How?• Is the child communicating to share interest? How?• Is the child playing? How?	<ul style="list-style-type: none">• What activities does the caregiver select?• How is the caregiver communicating?<ul style="list-style-type: none">• How complex is the caregiver's language? Do they ask many questions? Do they pause?• Do they notice the child's communication?• How do they respond?• Is the caregiver playing? How?• Note strategies the caregiver is already using and give positive feedback to the caregiver after the observation.

Part 3: Child's current level of skills charts – Home visit 2

Review your notes of the caregiver-child interaction.

Put an X next to the gestures and words that the child can use and the child's play level.

Current level of communication to request		Current level of communication to share		Current level of play	
Not yet using gestures or words to request		Not yet using gestures or words to share		Not yet playing with people or objects	
Eye contact (Looks at you or the object)		Eye contact (Looks at the object, then you, then back at the object)		People games (no objects yet)	
Gestures:	Reaches to request	Gestures:	Shows to share	Simple play with objects	
	Gives to request (e.g. gives jar for you to open)		Points to share	Put-together play	
	Points to request		Gives to share (e.g. gives you a drawing to show you)	Early pretend play	
Language:	1 word to request	Language:	1 word to share	Advanced pretend play	
	2 words together to request		2 words together to share	Notes:	
	Multiple words and gestures together to request		Multiple words and gestures together to share		
Notes:		Notes:		Notes:	

Part 4: child targets – Home visit 2

Communication Goal Chart

Use this chart to decide on the child’s communication goals (targets). These are guidelines and not hard rules. Remember that it is important to have both spoken language and gesture targets for each child. All gestures to share are important! You can model all of them using *Show and say*, regardless of what the child can already do.

Examples of child’s current skills	Requesting gesture target	Sharing gesture target	Spoken words target
No gestures or words; or uses sounds or tries to talk; or looks at you without sounds or words	1 requesting gesture (reach or point)	1 sharing gesture (show)	1 word
Can request with a word or gesture but does not share	Any requesting gesture the child does NOT yet show (reach, give or point)	1 sharing gesture (show)	1 word
Uses 1 word at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	1–2 words
Uses 2 or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	2–3 words
Uses 3 or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	Short phrases/sentences

Part 4a: Communication targets

Use the current level of communication on page 3 and the Communication goal chart on page 4 to identify a **spoken words** target and **gestures** targets for communication **to request** and communication **to share**. Put an X next to each target.

Requesting gesture target	
Reaches to request	
Gives	
Points	
<i>Notes:</i>	

Sharing gesture target	
Shows	
Points	
Gives	
<i>Notes:</i>	

Spoken words target	
1 Word	
2 words together	
Multiples words and gestures together	
<i>Notes:</i>	

Part 4b: Play targets

Use the current level of play on page 3 to identify play targets. Put an X next to the target play levels. You can choose from either option A or option B to select the play level targets.

- Option A): Play target 1 may be the child's current level of play if the child can play only with one or two specific materials at a certain level of play. Play target 2 may be the next play level.
- Option B): Both Play target 1 and Play target 2 may be the next play level if the child appears to fully master her/his current level of play (i.e. the child can play with a variety of materials at the same level of play).

Play level target 1:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
<i>Notes:</i>	

Play level target 2:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
<i>Notes:</i>	

Part 4c: Daily living skills targets

- + Use the information collected during the home visit to review the two daily living skills targets. Make sure to:
 - select new skills, make sure to select skills that are age-appropriate and relevant for functioning; and
 - note what the child can already do now within that activity (specify if the child does it **with** or **without** help)

	Daily living skills target 1:	Daily living skills target 2:
Skill:		
Can do now (with/without help):		

+ **Part 4d: Behaviour regulation targets**

Using the information collected during the home visit to review progress with targets of challenging behaviours.

	Behaviour regulation target 1:	Behaviour regulation target 2:
Challenging / dysregulated behaviour:		
Reason*		
Response plan*		

*You can complete these parts at a later stage. The caregiver may be given direct instructions right away, or you can delay the discussion to the relevant group sessions on the management of challenging behaviour (sessions 7 and 8). Consult your supervisor.

+ **Part 4e: Family activities and priorities**

Ask the caregiver to review progress on the everyday family activities selected or identify new activities.

	Family activity 1:	Family activity 2:
Family activity		
Can do now (with/without help):		

Part 5: Caregiver targets – Home visit 2

Use your observation of the caregiver-child interaction to identify categories of strategies where support is needed.

Strategy domains*	How well is the caregiver using the strategies? Note examples below		Support needed?			Targets**
	<i>Needs improvement</i>	<i>Done well</i>	<i>No</i>	<i>Some</i>	<i>Full</i>	<i>[Select 3]</i>
Environmental						
Look and listen						
Routine building						
Understanding communication						
Responding to communication						
Teaching new skills						
Behaviour regulation						
Response to challenging behaviour						
Expanding routines						

* Refer to the Home visit guide for a full list of strategies. **Mark with an X three domains to prioritize when supporting the caregiver.

Part 6: Target routines – Home visit 2

Use all the information collected during the home visit and the child and caregiver targets to identify new target routines.

- Select three play routines according to the Play targets:
 - At least one routine should target Play target 1 and at least one routine should target Play target 2.
- Select three home routines on the basis of daily living skills targets and family activities targets.
 - At least one routine should target daily living skills and at least one routine should target family activities.
- Remember that both play and home routines will also target the communication targets.
- Choose activities that will be motivating for the child and that occur on most days.
- You can choose to add or change steps to existing routines, or to identify new routines.

	Target play routines	Target home routines
Routine 1		
materials		
notes/steps*		
Routine 2		
materials		
notes/steps*		
Routine 3		
materials		
notes/steps*		

*You can complete these parts at a later stage. As the child progresses, the same routines may have more or different steps.

3

Home visit 3: Supporting caregivers' independent practice



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Home visit 3 (after session 9)

This is the final home visit of the caregiver skills training. The caregivers have been asked to attend nine group sessions and have had two home visits. Families will not master every strategy and not all strategies will be relevant to the needs of each individual family. Select 2-3 key strategies and tools to focus on in this session. The purpose of the final home visit is to practise the key strategies that will be useful for the family now that caregiver skills training is over. This session is also designed to help the family to troubleshoot the challenges they have experienced with the strategies, to help them appreciate the progress they have made and support them in the independent practice. This is an opportunity to reassess the needs of the family and inform them about any other support available.

Things to bring with you:

- Participants' guide or other key strategy hand-outs.
- Goal-setting worksheets completed during home visits 1 and 2.
- Notes on the caregiver's home practice activities.
- Service and support information that could be relevant for the family.

Goals and schedule of activities for Home visit 3:

Home visit component	What to do	Complete in goal-setting worksheet
❖ Introduction		
Greet caregivers and family (5 minutes)	<ul style="list-style-type: none"> ▪ Greet caregiver, child and family members. ▪ Congratulate caregivers on their attendance and efforts so far. 	//
❖ Reviewing the key messages and strategies and the home practice		
1. A) review key messages and strategies and home practice (20 minutes)	<ul style="list-style-type: none"> ▪ Review the goals, key messages and strategies of group sessions conducted so far. ▪ Review experience with home practice. ▪ Address questions and comments. 	Part 1A
B) plan the guided practice (10 minutes)	<ul style="list-style-type: none"> ▪ Review the individualized goals. ▪ Ask the caregiver to choose a play or home routine to practice. ▪ Identify and discuss strategies to use in the activity. ▪ Prepare the environment and materials for the activity. 	//
❖ Observing and coaching caregiver interacting with child		
2. A) observe and coach the caregiver interacting with the child (10 minutes)	<ul style="list-style-type: none"> ▪ Ask the caregiver to interact with their child (during play or other home routine) and provide coaching. 	Part 2
B) demonstrate tips: facilitator interaction with child (10 minutes)	<ul style="list-style-type: none"> ▪ Interact with the child to demonstrate useful strategies. 	
❖ Review of the guided practice		
3. Discuss and review the guided practice activity (10 minutes)	<ul style="list-style-type: none"> ▪ Revisit the goals and activities selected for the child. ▪ Review the guided practice activity: what worked well and challenges. ▪ Use the tips in the participant guide to show to the caregiver the strategies that the child is already using and the strategies the child could try. ▪ Discuss with the caregiver how they feel about their experience of practising with their child. ▪ Wrap up the activity with a positive comment. ▪ Note down the revised goals and activities on the goal-setting worksheet. 	//
❖ Revise child targets		
4. Complete child targets charts	<ul style="list-style-type: none"> ▪ Write the child targets for communication, play, daily living skills, behaviour regulation and family activities. 	Part 3 and 4

Home visit component	What to do	Complete in goal-setting worksheet
❖ Revise caregiver targets		
5. Complete caregiver targets chart	<ul style="list-style-type: none"> ▪ Write the caregiver targets for spontaneous use of strategies. 	Part 5
❖ Selecting new target routines		
6. Complete target routines chart	<ul style="list-style-type: none"> ▪ Discuss with the caregiver possible play and home routines. 	Part 6
❖ Supporting independent practice		
7. Discuss plans for continuing to practise strategies in the future (10 minutes)	<ul style="list-style-type: none"> ▪ Review goals that the caregiver has set for following months. ▪ Discuss potential challenges in practising strategies and brainstorm to help find solutions. 	
8. Remind about strategies for relaxing and taking care of themselves (5 minutes).	<ul style="list-style-type: none"> ▪ Referring to the participant guide, remind caregivers of useful strategies for relaxation. ▪ Discuss strategies to improve the caregiver's own well-being. 	
❖ Closing the visit		
9. Remind about other available supports and services (5 minutes)	<ul style="list-style-type: none"> ▪ Reassess the needs of the family. ▪ Inform the family about available services and supports. 	//
10. Congratulate the family with the successful completion of course and say goodbye	<ul style="list-style-type: none"> ▪ Congratulate the family. ▪ Update contact information in your records (telephone, address). 	//

Learning objectives for the caregiver

1.	To consolidate the application of selected strategies from sessions 1–9.
2.	To consolidate the use of play and home routines that are appropriate for the child's individualized goals.
3.	To independently identify the next targets and to select appropriate associated activities and strategies. This will improve the family's confidence that progress can be made in future now that caregiver skills training has ended.

Introduction

Greet the caregiver, child and other family members and praise the caregiver and family for their attendance

- Congratulate the family on the progress made so far and remind them this is the last home visit.
- This visit is likely to be emotionally charged. The caregiver(s) may show, or explicitly express feelings of uncertainty or sadness related to the approaching end of caregiver skills training.

Part 1: Review key messages and strategies and the home practice

Review key messages and strategies and the home practice

Complete Part 1A of the goal-setting worksheet – Home visit 3 – for master trainers and facilitators. [10 minutes]

Step 1: Review the intervention key messages and tips

This is an open time to discuss the caregiver's need regarding the group session material, the strategies and the use of the material with the child.

- Referring to the participants' guide, briefly review the key messages and tips.
Address questions and comments about the material from the group sessions.

Note: You do not need to focus on everything that was covered in the group sessions. You can quickly refer to sets of strategies with a similar focus (e.g. you could mention "behaviour regulation strategies"). There may be some information that is more useful or appropriate for this particular family. Remind the caregiver of two key strategies or concepts that you feel are critical for this family's needs.

- Ask the caregiver:
 - in which area would the caregiver like more information;
 - in which area is the caregiver experiencing most difficulties;
 - which strategies have been most useful?

Step 2: Review the home practice

Complete Part 1A: review of the home practice

- Ask the caregiver if she/he has tried the home practice:
 - Allow the caregiver to ask questions or show you what they have been practising.
 - For caregivers who have not tried the strategies or who have been less successful, ask if there was something that they found not relevant or too difficult.
- **Take notes in the goal-setting worksheet**

- For each routine practised, note:
 - what went well:
 - identify positive child behaviour and/or caregiver's successful use of strategies;
 - try to identify at least one positive aspect;
 - if the caregiver does not identify anything that went well, praise the caregiver for trying the practice;
 - what was challenging:
 - identify challenging child behaviour (dysregulated, difficult to engage);
 - note the caregiver's unsuccessful attempts to use the strategies.
- **Consult the coaching troubleshooting section in Annex 3 for more detailed guidance.**

Plan the guided practice activity

- Review the individualized goals identified in Home visit 2 and the group sessions:
 - Are the small steps still appropriate for the child? Are they too easy/difficult?
 - Revise the steps if needed.
- Ask the caregiver to choose one everyday activity or routine that they would like to work on with their child during the guided practice lasting about 10 minutes, in which you will observe the caregiver and child.
- Discuss how the key strategies will be applied to that specific home activity.
- Note: Select 2–3 strategies from all sessions. Strategies from the communication sessions are relevant to most children and should always be incorporated in the practice.
- Notice if the caregiver seems anxious or worried and give reassurance. Let the caregiver know that:
 - the goal is just to practise and try the strategies out;
 - this is a chance for both of you to learn more about how the child communicates and behaves in these specific activities;
 - this will help you to advise the family on appropriate targets for the future. You will better understand which parenting strategies may be most useful for them.
- Prepare for the activity by:
 - gathering the materials that you need;
 - setting up the environment (e.g. by removing or covering any distracting/unnecessary materials).

Part 2: Observing and coaching the caregiver interacting with the child

Observe and coach the caregiver interacting with the child

Complete Part 2 of the goal-setting worksheet – Home visit 3 – for master trainers and facilitators **[10 minutes]**

Step 1: Observe the caregiver interacting with the child

Complete Part 2

- Ask the caregiver to interact with the child, engaging in the planned guided activity.
- Optional: video-record the interaction [only with the caregiver's consent].
- Use this opportunity of watching how the child and caregiver interact with one another to:
 - collect information that will be useful to re-evaluate the information collected during Home visit 2 and adjust the child's targets; and
 - observe the child's communication, challenging behaviour, and play skills.
 - Are there activities or materials the child enjoys?
 - Is the child communicating to request? How?
 - Is the child communicating to share interest? How?
 - Is the child playing? How?

Use your notes to complete the targets section of the goal setting worksheet.

- Observe the caregiver's style and identify which strategies and activities might best benefit the caregiver. (Consult Table A3.1 *Guidance to coaching contents, per home visit*, in Annex 3).
- Ask yourself the following questions:
 - *Environmental strategies:*
 - Which 2–3 activities does the caregiver pre-select? What could be more appropriate activities in terms of the child's developmental /play level?
 - Is the caregiver offering choices and following the child's choice?
 - Can the positioning of the caregiver, child and activity be improved? Is the environment set up in a way that is conducive to shared engagement?
 - *Look and listen strategies:*
 - Does the caregiver notice and comment on the child's focus of attention?
 - Does the caregiver praise the child's appropriate behaviour?
 - Does the caregiver notice the child's communication, including weak communicative signals?
 - Does the caregiver notice how the child likes to play (child's current level of play)?
 - *Routine building strategies:*
 - Is the caregiver playful?
 - Do both the adult and the child have active roles in the routine? (Asking questions or directing the child do not count as examples of having an active role.)
 - Does the caregiver imitate the child's *appropriate* play actions to join the routine?
 - Does the caregiver model (*Show and say*) new steps when the child's actions are not appropriate or are becoming repetitive or when the child is very passive?
 - Does the caregiver restart the routine and keep it fun and engaging?
 - *Communication strategies:*
 - Does the caregiver talk a lot? Is the child very quiet? Does the caregiver give space (pauses) to encourage the child's communication?

- Does the caregiver comment on (talk about) the child's focus of attention? Or does the caregiver ask many questions, does she/he test the child (i.e. tries to "teach" a lot)?
- Does the caregiver respond to all of the child's communication including unclear communication?
- Does the caregiver's level of language match that of the child?
- Does the caregiver demonstrate words and gestures that the child can use to communicate?
- Does the caregiver repeat and expand child's communication?
- Does the caregiver create opportunities for the child to request? And to share?
- *Teaching new skills and strategies:*
 - Does the caregiver introduce a new skill (in either play or home routines) and teach one step at a time?
 - Is the level of help provided appropriate?
 - Are instructions clear and consistent?
 - Is the caregiver praising the child's efforts rather than the performance?
- *Behaviour regulation strategies:*
 - Does the caregiver notice early signs of dysregulation?
 - Are prevention strategies (environmental setting, warnings, praise for appropriate behaviour, picture schedules etc. in place?
 - If dysregulated or challenging behaviour occurs, does the caregiver seem to understand the reason for it?
 - Is the response to challenging behaviour appropriate and effective?
- *Expanding routine strategies:*
 - Does the caregiver model new steps when the routine is mastered?
 - Does the caregiver attempt to link two routines together?
- Look for strategies the caregiver is already using. Make a note of these and give positive feedback to the caregiver after the observation.

Step 2: Coach the caregiver

- Coach the caregiver (consult Annex 3) in Home visit 2:
 - Provide specific guidance on the areas where most support is needed.
 - Highlight good implementation of strategies or attempts in the right directions.
 - Praise the caregiver for the effort rather than for the performance.
- Note: For some families, the demand to engage the child with someone watching will be too much. If you feel this is the case, as the facilitator you can join in the activity so that you are doing the activity with the caregiver. Allow the caregiver to lead the interaction as much as possible. If the caregiver refuses to interact with the child, skip this activity and proceed with the next one.

Demonstrate tips: facilitator interaction with the child

Explain to the caregiver that you would like to interact briefly with the child in a play routine. It will help you to better understand the child's behaviour and interests and will demonstrate some of training strategies.

Provide the child with materials and opportunities to play. Get down at the child's level. Join in and engage the child in a play activity for 5–10 minutes. On the basis of your observation of the caregiver and child in Part 2, choose appropriate play materials and select the 2–3 strategies/tips to demonstrate that would most benefit the caregiver.

Even if you have had an opportunity to join in and demonstrate tips in Part 2, make sure that you attempt to interact with the child for further demonstration of strategies.

- Consider all strategies, and focus specifically on those strategies selected as targets in Home visit 2 to consolidate learning
 - Demonstrate the strategies that the caregiver seems to have most difficulty with.

Part 3: Review of the guided practice

Discuss and review the guided practice activity

- Revisit the goals and the activities selected for the child.
- Ask yourself:
 - Was the identified small step too difficult for the child? Too easy?
 - Was the selected activity boring? Was it fun? (See also Coaching Troubleshooting in the Annex 3 in Home visit 2).

Discuss with the caregiver:

- Talk about what happened in the guided practice activity – what the caregiver did and said, and the child's behaviour.
- Use the participant guide to show the caregiver the strategies they are already using and the strategies they could try.
- Highlight successful activities that the caregiver should try again and provide praise for the caregiver's use of the strategies.
- Discuss and troubleshoot challenging activities.
- Discuss with the caregiver how she/he feels about their experience of practising with their child.
 - Notice if the caregiver seems sad or down and respond by praising the caregiver for working and trying hard.
 - Try to identify at least one positive outcome.
- Wrap up the activity with a positive comment. Praise the caregiver for trying strategies – mention skills the child showed you, and remind the caregiver of the next steps:
 - encourage the caregiver to continue practising with the child now that caregiver skills training has come to an end.

Part 4: Revise child targets

Complete Parts 3 and 4 of the goal-setting worksheet – Home visit 3 – for master trainers and facilitators. [10 minutes]

Define child targets

General instructions

Using the same process you followed in Home visit 2, review all the available information to describe the child's current level of skills and then establish the intervention goals. You will use the information collected during the interview with the caregiver to establish the other targets.

A) Revise communication targets

Step 1: Consult the goal-setting worksheet for Home visit 2 and the Communication goal chart

Review the targets established in Home visit 2 and the skills observed during the caregiver-child interaction,

then use the chart to decide on the child's communication goals (targets).

Ask yourself:

- Can the child display higher (more sophisticated) skills?
- Can the child display the same skills, but more frequently?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets.

Step 2: Complete the communication targets

Complete Part 4a: Communication targets – Home visit 3

B) Revise play targets

Step 1: Consult the goal-setting worksheet for Home visit 2 and the Play skills goal chart

Review the targets established in Home visit 2 and the skills observed during the caregiver-child interaction, then use the chart to decide on the play goals (targets).

Ask yourself:

- Can the child display higher (more sophisticated) play actions?
- Can the child play at the same play level as before, but with a wider variety of materials?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets.

Children may be able to do a few activities at a higher level, but they will not be able to sustain this high level in a routine.

Step 2: Complete the Play targets

Complete Part 4b: Play targets – Home visit 3

C) Revise daily living skills targets

Step 1: Consult the goal-setting worksheet for Home visit 2

Review the targets established in Home visit 2 and ask the caregiver about progress on these skills.

Ask the caregiver:

- Has the caregiver practised engaging the child in that skill?
- Can the child do more steps independently within the skill?
- Can the child do more steps with fewer support?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets, or decide whether it may be best to target a different skill.

Caregivers may also wish to change targets and focus on different skills. If you select new skills, ensure that these are age-appropriate and relevant for functioning.

Step 2: Complete the Play targets

Complete Part 4c: Daily living skills targets – Home visit 3

D) Revise behaviour regulation targets

Step 1: Consult the goal-setting worksheet for Home visit 2

Review the targets established in Home visit 2, and ask the caregiver about progress on preventing dysregulated or challenging behaviour.

Ask the caregiver:

- Has the caregiver tried preventing dysregulated behaviour? How?
- Is the behaviour occurring significantly less?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets, or decide whether it may be best to offer individualized guidance.

Refer back to specific strategies for targeting challenging behaviour in the two dedicated group sessions.

Step 2: Complete the behaviour regulation targets

Complete Part 4d: Behaviour regulation targets – Home visit 3

E) Revise family activities and priorities

Step 1: Consult the Goal-setting worksheet for Home visit 2

Review the targets established in Home visit 2 and ask the caregiver about progress on family activities.

Ask the caregiver:

- Has the caregiver practised engaging the child in those family activities?
- Can the child do more steps independently within those activities?
- Can the child do more steps with fewer supports?
- → If YES, you may have to revise the targets.
- → If you see no progress, or little or inconsistent progress, maintain the same targets, or decide whether it may be best to target a different activity.

Caregivers may also wish to change targets and focus on different activities. If you select new activities, ensure these are age-appropriate and are meaningful for the family.

Step 2: Complete the family activities chart

Complete Part 4E: Family activities and priorities – Home visit 3

Part 5: Revise caregiver targets

Complete Part 5 of the goal-setting worksheet – Home visit 3 – for master trainers and Facilitators. [10 minutes]

Step 1: Review notes of caregiver-child interaction and consult the Intervention strategies chart

Review your notes of the caregiver-child interaction to identify areas of strategies where the caregiver most needs support and areas where you notice some spontaneous use of strategies.

Consult the Intervention strategies chart

Consider the overall interaction under the following domains:

- *Environmental strategies:*
 - What is the management of the environment and materials like?
 - How is the positioning of the caregiver?
- *Look and listen strategies:*
 - Does the caregiver notice the child's interests, skills and positive behaviour?
- *Routine building strategies:*
 - Do you notice any structure in the play (steps, repetitions)?
 - Does the caregiver take part in the play? Is she/he too passive? Too directive?
- *Understanding communication strategies:*
 - Does the caregiver talk too much? Too little?
 - Does the caregiver respond to the child's communication?
- *Responding to communication strategies:*
 - Does the caregiver actively try to promote the child's communication? How?
- *Teaching new skills strategies:*
 - Does the caregiver try to teach new skills? How?
- *Behaviour regulation strategies:*
 - Does the caregiver try to keep the child regulated? How?
 - Do the caregiver notice signs of dysregulation?
- *Response to challenging behaviour strategies:*
 - How does the caregiver respond to challenging or dysregulated behaviour (if it occurs)?
- *Expanding routines strategies:*
 - Does the caregiver try to link one activity to the next one? How?
- Consider all strategies and focus specifically on the strategies selected as targets in Home visit 2 to consolidate learning.
 - Is specific support needed? Which strategies does the caregiver seem to have most difficulty with?
- Most caregivers will require support under most, or all, intervention domains.
- However, it is important to notice when the caregiver shows some spontaneous (even if partial) use of strategies. Give positive feedback.

Intervention Strategies Chart

S#	Strategy domains	Intervention strategies
1	<i>Environmental strategies</i>	<ol style="list-style-type: none"> 1. Set up the space: remove distractions and make a safe place to interact. 2. Start with 2 or 3 motivating choices and follow your child's choice. 3. Move in front of your child, get down to your child's level and have the activity between you and the child.
2	<i>Look and listen strategies</i>	<ol style="list-style-type: none"> 1. <i>Look and listen</i> – Notice what your child is motivated by and interested in. 2. Find out how your child likes to play and show the child new ways to play. 3. <i>Look and listen</i> – Notice when your child is being good and respond with praise. Find out how your child likes to play and show the child new ways to play.
3	<i>Routine building strategies</i>	<ol style="list-style-type: none"> 1. Join in the routine – Take your turn by imitating what your child is doing. 2. <i>Show and say</i> – Give your child a new step for your routine. 3. Restart your routine to help your child spend more time sharing engagement.
4	<i>Understanding communication strategies</i>	<ol style="list-style-type: none"> 1. Respond with words and gestures to all your child's communication, even when it is unclear. 2. Use words and gestures that match your child's language level. 3. Wait to give your child room to communicate. 4. Talk about what your child is looking at and doing.
5	<i>Responding to communication strategies</i>	<ol style="list-style-type: none"> 1. <i>Show and say</i> – Demonstrate words and gestures that your child can use to communicate. 2. Repeat your child's words and expand your child's language. 3. Create opportunities for your child to request. 4. Create opportunities for your child to communicate to share.
6	<i>Teaching new skills strategies</i>	<ol style="list-style-type: none"> 1. Break the skill into small steps and teach your child one small step at a time. 2. Let your child learn! Give the lowest level of help needed for your child to be successful. 3. Give clear and consistent instructions and praise your child for trying. 4. Ask yourself: can I teach a different step?
7	<i>Behaviour regulation strategies</i>	<ol style="list-style-type: none"> 1. Respond to skills and appropriate behaviour with praise and encouragement. 2. <i>Look and listen</i> for signals <i>before</i> the challenging behaviour. 3. Arrange your environment and give warnings before changing activities to help your child stay cool. 4. If your child has a “meltdown” or “tantrum”, stay calm and wait for the child to calm down. Then think about the reason for the behaviour.

S#	Strategy domains	Intervention strategies
8	<i>Response to challenging behaviour strategies</i>	<ol style="list-style-type: none"> 1. Use picture schedules to help your child understand activities and stay calm. 2. Respond to challenging behaviour that aims to get access by teaching your child to use communication skills. 3. Ignore challenging behaviour that is seeking attention if it is safe and okay to do so. 4. Set clear and consistent expectations to reduce challenging behaviour that aims to avoid or stop a routine. 5. Teach safe and appropriate behaviour to replace sensation-seeking challenging behaviour.
9	<i>Expanding routines strategies</i>	<ol style="list-style-type: none"> 1. Expand your routines: use <i>Show and say</i> to add new steps. 2. Link two routines together to expand a routine that the child can do.

Step 2: Complete the caregiver targets chart

Complete Part 5: Caregiver targets

Identify three **intervention strategies domains** to target.

- Make sure to start from the top to select the most foundational domains first.

You will support the caregiver on the target strategy domains during play and home routines (Part 6)

Part 6: Selecting new target routines

Step 1: Review the goal-setting worksheet

Use all the information collected during the home visit and the child and caregiver targets (Part 4 and Part 5) to identify target routines.

Step 2: Complete the Target routines chart

Complete Part 6: Target routines – Home visit 3

- Select three play routines according to the Play targets:
 - At least one routine should aim at Play target 1 and at least one routine should aim at Play target 2.
- Select three home routines on the basis of daily living skills targets and family activities targets:
 - At least one routine should target daily living skills and at least one routine should target family activities.
- Remember that both play and home routines will also aim at the communication targets.
- You may choose the same routines as selected in Home visit 2 and make them more complex by:
 - adding more steps;
 - changing the order of the steps;
 - adding different steps.
- You may select new routines. Select activities that will be motivating for the child and that occur on most days.
- As the child progresses, the same routines may have more or different steps.

You will use play and home routines to work on all child targets

You will support the caregiver on the target strategy domains

Part 7: Supporting independent practice

Discuss plans for continuing practising strategies in the future

- Review goals that the caregiver has set for following months (during session 9).
- Discuss potential challenges in practising strategies and brainstorm to help find solutions.
- Note down the revised goals and activities on pages 5 and 6 of the goal-setting worksheet.

Remind the caregiver about strategies for relaxation and self-care

- Referring to the participants' guide, remind the caregiver of useful strategies for relaxation.
- Discuss strategies to improve the caregiver's own well-being.

Remind the family about other available supports and services

- Reassess the needs of the family.
- Inform them about available services and supports.

Congratulate the family on their successful completion of caregiver skills

- Congratulate the family.
- If applicable, reassure the family that they will be able to contact you with questions or concerns.
- Update the contact information in your records (telephone, address).
- Say goodbye.

Annex 5: Goal-setting worksheet - Home visit 3

Goal-setting worksheet – Home visit 3 for master trainers and facilitators

child's initials: _____ Caregiver: mother father other caregiver (_____)

Date of visit: _____ Trainer/Facilitator initials: _____

Use this form to take notes during the visit and set the child's goals

Part 1a: Review of home practice

	Play/home routines practised	
	Went well	Challenges
Routine 1		
Routine 2		
Routine 3		

Part 2: Observe the caregiver's interaction with the child

Before beginning, try to obtain a sense of whether the child's behaviour today is representative of the child's current skills. Ask:

- Was there a particular event or change in routine today/this week/last week that might have upset your child? Is the child well?

Notes:

Observe the child:	Observe the caregiver:
<ul style="list-style-type: none"> Are there activities or materials the child enjoys? Is the child communicating to request? How? Is the child communicating to share interest? How? Is the child playing? How? 	<ul style="list-style-type: none"> What activities does the caregiver select? How is the caregiver communicating? <ul style="list-style-type: none"> How complex is the caregiver's language? Do they ask many questions? Do they pause? Do they notice the child's communication? How do they respond? Is the caregiver playing? How? Note strategies the caregiver is already using and give positive feedback to the caregiver after the observation.

Part 3: Child's current level of skills charts – Home visit 3

Review your notes of the caregiver-child interaction.

Put an X next to the gestures and words that the child can use and the child's play level.

Current level of communication to request		
Not yet using gestures or words to request		
Eye contact (Looks at you or the object)		
Gestures:	Reaches to request	
	Gives to request (e.g. gives jar for you to open)	
	Points to request	
Language:	1 word to request	
	2 words together to request	
	Multiple words and gestures together to request	
Notes:		

Current level of communication to share		
Not yet using gestures or words to share		
Eye contact (Looks at object, then you, then back to object)		
Gestures:	Shows to share	
	Points to share	
	Gives to share (e.g. gives you a drawing to show you)	
Language:	1 word to share	
	2 words together to share	
	Multiple words and gestures together to share	
Notes:		

Current level of play	
Not yet playing with people or objects	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
Notes:	

Part 4: Child targets – Home visit 3

Communication goal chart

Use this chart to decide on the child's communication goals (targets). These are guidelines and not hard rules. Remember that it is important to have both spoken language and gesture targets for each child. All gestures to share are important! You can model all of them using *Show and say*, regardless of what the child can already do.

Examples of child's current skills	Requesting gesture target	Sharing gesture target	Spoken words target
No gestures or words; or uses sounds or tries to talk; or looks at you without sounds or words	1 requesting gesture (reach or point)	1 sharing gesture (show)	1 word
Can request with a word or gesture but does not share	Any requesting gesture the child does not yet show (reach, give or point)	1 sharing gesture (show)	1 word
Uses 1 word at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	1–2 words
Uses 2 or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	2–3 words
Uses 3 or more words at a time to request or share	Start at the top of the chart on the first page and pick one missing requesting gesture (reach, give or point)	Start at the top of the chart on the first page and pick one missing sharing gesture (show, point or give)	Short phrases/sentences

Part 4a: Communication targets

Use the current level of communication on page 3 and the communication goal chart on page 4 to identify a **spoken words** target and **gestures** targets for communication **to request** and communication **to share**. Put an X next to each target.

Requesting gesture target	
Reaches to request	
Gives	
Points	
Notes:	

Sharing gesture target	
Shows	
Points	
Gives	
Notes:	

Spoken words target	
1 Word	
2 words together	
Multiples words and gestures together	
Notes:	

Part 4b: Play targets

Use the current level of play on page 3 to identify play targets. Put an X next to the target play levels. You can choose from either option A or option B to select the play level targets.

- Option A): Play target 1 may be the child's current level of play if the child can only play with one or two specific materials at a certain level of play. Play target 2 may be the next play level.
- Option B): Both Play target 1 and Play target 2 may be the next play level if the child appears to fully master her/his current level of play (i.e. the child can play with a variety of materials at the same level of play).

Play level target 1:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
Notes:	

Play level target 2:	
People games (no objects yet)	
Simple play with objects	
Put-together play	
Early pretend play	
Advanced pretend play	
Notes:	

Part 4c: Daily living skills targets

- Use the information collected during the home visit to review the two daily living skills targets. Make sure to:
- select new skills, make sure to select skills that are age-appropriate and relevant for functioning; and
 - note what the child can already do now within that activity (specify if the child does it **with** or **without** help).

	Daily living skills target 1:	Daily living skills target 2:
Skill:		
Can do now (with/without help):		

Part 4d: Behaviour regulation targets

Using the information collected during the home visit to review progress with targets of challenging behaviours

	Behaviour regulation target 1:	Behaviour regulation target 2:
Challenging / dysregulated behaviour:		
Reason*		
Response plan*		

*Consult your supervisor when necessary

Part 4e: Family activities and priorities

Ask the caregiver to review progress on the everyday family activities selected or identify new activities.

	Family activity 1:	Family activity 2:
Family activity		
Can do now (with/without help):		

Part 5: Caregiver targets – Home visit 3

Use your observation of the caregiver-child interaction to identify categories of strategies where support is needed.

Strategy domains*	How well is the caregiver using the strategies? Note examples below		Support needed?			Targets**
	<i>Needs improvement</i>	<i>Done well</i>	<i>No</i>	<i>Some</i>	<i>Full</i>	<i>[Select 3]</i>
Environmental						
Look and listen						
Routine building						
Understanding communication						
Responding to communication						
Teaching new skills						
Behaviour regulation						
Response to challenging behaviour						
Expanding routines						

* Refer to the Home visit guide for a full list of strategies. **Mark with an X three domains to prioritize when supporting the caregiver.

Part 6: Target routines – Home visit 3

Use all the information collected during the home visit and the child and caregiver targets to identify target routines.

- Select three play routines according to the Play targets:
 - At least one routine should target Play target 1 and at least one routine should target Play target 2.
- Select three home routines on the basis of Daily living skills targets and family activities targets.
 - At least one routine should target daily living skills and at least one routine should target family activities.
- Remember that both play and home routines will also aim at the communication targets.
- Choose activities that will be motivating for the child and that occur on most days.

	Target PLAY routines	Target HOME routines
Routine 1		
materials		
notes/steps*		
Routine 2		
materials		
notes/steps*		
Routine 3		
materials		
notes/steps*		

*You can complete these parts at a later stage. As the child progresses, the same routines may have more or different steps.



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