IMPLEMENTING FLORIDA EMBEDDED PRACTICES AND INTERVENTION WITH CAREGIVERS (FL-EPIC) MODEL VIRTUALLY

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Virtual home visits are not expected to look like a professional video. Using the Florida Embedded Practices and Intervention with Caregivers (FL-EPIC) model, providers will support caregivers during everyday activities and routines to embed learning opportunities for their child. Every family is unique and interactions will look different across homes, families, and routines.

**BASIC TIPS**

- **Lighting**
  - Adequate lighting ensures both parties can see each other. Lighting that is aimed toward a person's face is better than lighting coming from behind a person.

- **Secure Surface**
  - Place the device (e.g., laptop, camera, phone, tablet) on a firm secure surface for clear picture. It is helpful to position the device farther away to increase the viewing space.

- **Save Recording**
  - Save the virtual home visit recording to your desktop or selected folder. You can adjust your settings to ensure the video uploads to the correct folder.

  - Test audio with the family if possible. Some families or providers may need an external microphone.

**CONNECTION MATTERS**

**REMINDERS**

- If possible, hardwire computers or laptops directly to a router.

- Update computer software and delete unused programs to increase memory.

- Close all other programs that are not needed during the virtual session (e.g., browsers, calendar).
## Virtual Home Visiting Session

### Implementing FL-EPIC Home Visiting Practices Virtually

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<th>In Person</th>
<th>Virtual</th>
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### Set the Stage
- These practices are implemented the same in person and virtually.

### Observe
- In person, providers may not explicitly tell the caregiver they are observing.
- Virtually, providers should explicitly tell caregivers they are observing; long periods of silence may indicate a connectivity issue.

### Provide Embedded Opportunities
- In person, the provider demonstrates and narrates a strategy with the child.
- Virtually, the provider may use a doll, stuffed animal, other materials, or video examples to demonstrate and narrate a strategy.

### Problem Solve and Reflect
- These practices are implemented the same in person and virtually; however, the caregiver may be prompted to provide additional descriptions of child behavior, materials, people, or routines that are not visible or audible.

### Review
- In person, the caregiver is encouraged to write their responses on the 5Q Visual Model.
- Virtually, the provider may share their screen and type caregiver responses into the 5Q Visual Model, then email to caregiver.

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Additional Tips for Successful Virtual Home Visits

- Coach caregivers to implement strategies during routines when and where they normally occur.
- Avoid the caregiver bringing everything to one location (e.g., snack, toy play, and book reading are all done at kitchen table).
- When asking questions, increase the amount of time you give for caregivers to respond.
- Internet connections may result in delayed responses.
- Ask the caregiver to provide contextual information that may not be visible or audible to the provider (e.g., repeating a child’s vocalization, describing materials).

RESOURCES

- A to Z of Early Childhood: H is for Home Visiting
- A to Z of Early Childhood: E is for Everyday Learning Opportunities
- Service Delivery through Tele-Intervention and Distance Learning
- Resources within Reason: Using Telepractice to Support Children and Families