

(512) 463-9000

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This document provides guidance on how LEAs may plan to provide counseling as a related service to students that is required by their individualized education programs (IEPs). While LEAs may be able to implement many of the services described in students' IEPs, they should communicate with families and document services not able to be provided due to the COVID-19 pandemic response to inform decisions regarding compensatory services that may be appropriate to provide when normal operations resume. For more information on actions and considerations for remote counseling and student support services generally, please see the *Remote Counseling and Student Support Services FAQ* on the <u>TEA Coronavirus (COVID-19) Support and Guidance webpage under SPED & Special Populations</u>.

Some students with disabilities receive **counseling as a related service** from a licensed specialist in school psychology (LSSP) or other service provider (e.g., school counselor, social worker) as part of their IEPs. Students receiving counseling as a related service are often working on goals related to social skills, behavior, coping skills, or other areas connected to overall student growth and development. This document is designed to **help service providers identify ways they can continue to deliver supports to students through virtual or remote learning**.

#### **Action Steps**

# Step 1: Review student needs and identify priorities

Think about your student's needs by reviewing their present levels from the IEP, counseling notes and data, and any updated information from parents or teachers who have had recent interactions with them. Sometimes an exact IEP goal may not make sense in a remote environment, but you may be able to identify related skills that, if strengthened, would still assist the student in progressing towards mastery of the overall counseling goals. It is important to consider ways to maintain and strengthen existing skills and the overall counselor/student relationship during this time. The following questions may help you identify some areas of focus.

- What skills does this student most need to work on given the current learning environment? What skills, if strengthened now, would best position this student to make progress on goals once traditional school resumes?
  - For example: You have a student with whom the counseling sessions are very introspective or personal in nature (e.g., talk therapy). However, now you have limitations on this type of session due to both the nature of the conversations and the student's access to a private location. In this instance, you may look at pivoting to providing more skills-based sessions (e.g., teaching and reinforcing coping strategies) that you anticipate, based on history, will be needed by the student during this time of increased stress. Practice with these skills will well position the student for continuation of introspective type counseling once circumstances change.
- Are there skills or strategies that you have covered earlier in the year that can be revisited and/or revised to build performance fluency, minimize regression, and/or fit the current environment?
  - For example: You and the student previously completed an activity calendar where you brainstormed enjoyable activities that the student committed to engage in each week as a

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behavioral strategy to combat depression. Given the current environment, it would be important to revisit with the student to create a new list and brainstorm ways the student can continue to engage in activity scheduling. Similarly, there may be coping skills the student previously mastered but that merit revisiting for continued practice and reinforcement. This is also an opportunity to generalize strategies and skills to use in the current situation and circumstances.

#### **Step 2: Identify Potential Service Delivery Options**

Now that you have identified skills or areas of focus for the student, it is time to brainstorm possible service delivery methods that you could use to meet those needs. Consider a combination of methods to create a service delivery package that will best position the student to continue progressing in identified areas of need.

#### Service delivery options include, but are not limited to, the following best practices:

- Providing permanent product activities. This might include creating packets, using workbooks, engaging
  in a book study, practicing guided journaling, or creating other products that the student turn in to the
  counselor as homework and/or for feedback and discussion.
- **Consultation with parents (indirect service)**. This might include activities such as supporting parents in the creation and implementation of:
  - Daily schedules to maintain routines
  - Simple strategies to prevent challenging behavior (e.g., first/then, reinforcement breaks, use of choice, simple reward systems, etc.)
  - De-escalation strategies, scripts, and tools
  - Guided relaxation strategies, scripts, and tools
  - Tips and information on talking to children about the current health crisis
  - Reviewing any coping skills that the student has been taught and providing parents with suggestions on facilitating continued use
- Recorded content general lessons. The counselor provides general video lessons connected to areas of need (e.g., emotional regulation, social skills, problem solving, etc.) for the student to watch. These videos might be pulled from a variety of sources and provide general content lessons in areas of needed skills acquisition for the student.
- **Recorded content individualized lessons**. The counselor creates recorded lessons geared around personalized student goals and messages of support for the student.
- Telephone calls
- Text messages or other "chat" communication (per local policy and parent permission)
- Tele-conferencing (including options that are with and without a video feed)

### **Step 3: Gather Parent and Student Input**

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Proactive and ongoing communication and collaboration with families is essential. Once you have brainstormed delivery methods that may be effective for the student, it is important to communicate next steps with the parent and student (as appropriate). Parents are best positioned to help you determine if the potential delivery methods you have identified will work for the family. Be sure to document input gathered from the family and how you used it to determine the service delivery plan. The following considerations may help in thinking through the conversation with families.

#### **Technology**

- Does the student have the technology needed to support the delivery method(s) you are proposing?
  - o Computer, laptop, iPad, and/or phone that can support a tele-conferencing program or app?
- Does the student have an internet or phone plan that can support the program or app? Be cognizant of the family's data plan connected to the family/student phone or availability of internet access and the impact on the family that the method of delivery will have.

#### Confidentiality/Privacy

- Is the family able to provide a private space for the student? If so, during what time(s) of day is this available to the student? Who can see and who can hear the counseling session? Does the student have access to headphones and/or a noise machine to assist with providing a confidential space? If considering video teleconferencing, can cameras be positioned to minimize intrusion into the student's home? (e.g., camera to student and wall behind student vs. camera facing living area). Consider how the answers to these questions will impact privacy/confidentiality and the student's comfort level in self-disclosure.
- Discuss the possible benefits and risks pertaining to various options.
- Discuss the confidentiality within a tele-health model and when the provider would need to break confidentiality (suspected child abuse, expressed imminent harm to self or others, etc.).
- Discuss the student's rights within a tele-health model (the ability to stop a session if privacy or confidentiality cannot be maintained in the session).
- Discuss informed consent and informed assent. Remember that informed consent is a process, not a
  form. Ethically, informed consent requires that those who are consenting to the services are fully
  informed of the nature of the service, the limits of confidentiality (which is different in tele-health
  situations), and the opportunity for the consent to be withdrawn.

## **Family and Student Preferences**

• What works well for the family and the student? What limitations do the parents have in terms of their time and ability to assist the student in any necessary components (e.g., setting up technology for younger students, assisting in completion of workbook activities, etc.). How much time is the family able to set aside for the student to engage in these services? What methods is the student most interested in pursuing? What will engage and motivate the student to continue the work? Talk through any logistic barriers that need to be worked through (e.g., if doing packet pick up, what can be done if the parent does not have transportation to the pick-up location?)

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#### **Step 4: Document and Communicate Service Delivery Plan**

After discussion with the family, you should be able to identify the service delivery method(s) that will be most effective under the current circumstances to continue the provision of related services counseling, to the extent practicable, to assist the student in meeting his or her goals. The plan should be carefully documented and communicated to families in writing. Keep a copy of the plan and detailed notes on how the plan was determined for the student's file. Be sure to document both what is and is not being provided as it relates to the IEP.

As part of communicating the plan with families, be sure to address the following:

- Description of the services being provided
- Student expectations: What, when, where, and how often is the student expected to engage?
- Parent expectations: Does the student require any parental support for implementation of the plan? If so, what is expected? Describe any materials or supports that the parent has agreed to provide (e.g., private room, headphones, etc.) and expectations (e.g., packet pick up, helping student upload materials, etc.)
- Any emergency contacts or contingency plans for a student who may experience crisis

### **Step 5: Implement Plan and Progress Monitor**

Documentation and data will be critical for Admission, Review, and Dismissal (ARD) committees to review once traditional schooling resumes. Be sure to keep progress monitoring notes in relation to the skills and goals that you are working on.

- Document the student's skills and progress prior to the school closure (what was the most recent progress update/ information from your counseling notes and/or IEP goal progress updates?)
- Keep detailed records of the services that were provided and reasons for any missed services or deviations from the plan created in Step 4.
- Document student progress regularly. Be prepared to compare the progress from prior to school closure to progress during remote services.
- Keep the following in mind.
  - It is possible that the student may show new behaviors due to the stress of school closure or regress on goals already mastered. Document these changes in behaviors and skills.
  - For some students with school anxiety or refusal, progress or reduction of anxiety/behavior may be observed/reported. Document these observations, as this will be needed for any school reentry plans that may be necessary once school resumes. For students with a history of school refusal and/or anxiety around school, the long break from traditional school may create the need for a reentry plan.

#### Resources



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- The National Association of School Psychologists (NASP) has developed a webinar that assists LSSPs in thinking through the ethical issues related to the provision of tele-health services, including matters of informed consent. <a href="https://www.nasponline.org/resources-and-publications/resources-and-publications/resources-and-publications/resources-and-podcasts/covid-19-resource-center/webinar-series/legal-and-ethical-considerations-for-remote-school-psychological-services">https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/webinar-series/legal-and-ethical-considerations-for-remote-school-psychological-services</a>
- NASP has also developed webinars to assist in thinking through the issues related to the practice of counseling utilizing distance technology. <a href="https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/webinar-series/when-one-door-closes-and-another-opens-school-psychologists-providing-telehealth-services">https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/webinar-series/when-one-door-closes-and-another-opens-school-psychologists-providing-telehealth-services
- NASP has amassed a large collection of resources that are updated daily related to the practice of school psychology during this time of crisis. <a href="https://www.nasponline.org/resources-and-publications/resources-and-pu
- American Psychological Association (APA) is offering a series of free webinars (non-members included) titled "Telepsychology Best Practice 101 Series." While some elements of this series will not apply (e.g., reimbursement), there is information regarding selecting and using technology for tele-health counseling. https://apa.content.online/catalog/product.xhtml?eid=15132
- Special thanks to Education Service Center Region 13 for providing access to content from its <u>COVID-19</u> resources, some of which was utilized in the development of this document.

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