**One-hour TeleCIMT therapy session – suggested format**

The one-hour therapy sessions via video call with the participant are an excellent opportunity for you as a therapist to monitor how the program is going, problem solve with the participant and progress the program forward. Most importantly however, the sessions are an opportunity to highlight and celebrate successes with the participant and supporter, and motivate them to continue with the program.

The exact content of the hour session will vary depending on the participant but we have created a table of suggested timings and activities to carry out in the one hour therapy session, particularly for those therapists new to CIMT.

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| --- | --- |
| **1-hour therapy**  **video call**  **elements** | **Recommended activities** |
| Therapist review form  (10 mins) | * Complete form with participant/supporter as a prompt for the rest of the session. Look for the positives within the form with the aim of making the participant feel good! |
| Task practice  (15 mins) | * Observe any tasks that are causing difficulties. Simplify/adapt the task if necessary – problem solve together. * If tasks are too easy, discuss and where possible observe progressions. Add to tasks to create a bank of 15-20 tasks if not yet achieved. If time allows, observe new tasks. * Praise and celebrate all achievements. |
| Shaping practice  (20 mins) | * Observation of progressions for shaping tasks in those tasks where improvements have been made over 10 trials. * Ensure progressions are achievable and that the environmental set up produces the movement desired. * Model for the supporter yourself demonstrating the task over the call, providing encouragement through the task, offering suggestions on how to improve on the task and celebrating results with them. * If progressions are not being added, observe a couple of trials of each current shaping task. * If the participant is struggling with a task, observe simplifications/ adaptations to make the trial more ‘do-able’. * Add and observe new shaping tasks if necessary, to create the desired bank of 8-10 tasks. |
| Homework  (5 mins) | * As per the therapist review form, observe any activities that are causing issues. Problem solve together. * Add to homework activities if becoming too easy. Consider adding homework to anyone who is recording themselves as ‘not very active’ during mitt wearing time and currently not doing homework. |

**TeleCIMT therapist review form: additional guidance on use**

**How many hours did you wear your mitt for yesterday?**

**How active were you during mitt wearing time?** Very active  Active  Not very active

Comments on mitt wear:

If participant reports low levels of activity during daily living with the mitt, consider how to increase their activity levels during these hours. Adjust the Daily TeleCIMT schedule if required.

**What were the highlights?**

Encourage participant to identify what went well and focus on multiple achievements made the previous day.

**Tell me about task practice yesterday**

Encourage participant to consider ways they could progress ‘easy’ tasks to increase the level of challenge (remember to adjust 1 parameter at a time). Problem-solve how difficult tasks could be made more achievable

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| **Task practice** | | **Difficult** | **Manageable** | **Easy** | **Progressed?** |
| *No.* | *Description* | *Please tick as appropriate* | | | |
| e.g. ‘3’ | Potting plants |  |  |  |  |
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**Tell me about shaping practice yesterday**

Any task where the average score increases consistently should be progressed in its level of challenge.

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| **Shaping practice** | | **Average score**  **1-5** | **Average score**  **6-10** | **Progressed?** |
| *No. / Description* | *First score / time* |  | | |
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**What shaping and task practice activities will you work on next?**

**How many homework tasks did you practice yesterday / today?**

Consider introducing new tasks or increasing the challenge of tasks. Ensure participant records down tasks to practice.

**What were the challenges? How did you overcome them?**

Explore any additional concerns e.g. mitt adherence, safety considerations, pain\*, fatigue etc. Acknowledge any frustrations/difficulties and provide positive encouragement for persisting with program. If participant is persistently low in confidence / mood, consider adjusting program to increase their level of achievement. Consider any challenges experienced by the supporter on the program and problem-solve difficulties.

**Therapist name and profession:**       **Signature and date:**

\*Some muscle soreness/aches can be expected due to the intensity of the program. If the participant reports dull pain or muscle ache/fatigue, consider adjustment to practice regime structure and/or program duration or changing activities/tasks. If the participant reports new or persistent sharp pain consider ceasing or pausing the program until further investigations are completed, in line with your organisation’s protocols/policies.

**TeleCIMT therapist review form**

**Date:**       **Program Day:**

**How many hours did you wear your mitt for yesterday?**

**How active were you during mitt wearing time?** Very active  Active  Not very active

Comments on mitt wear:

**What were yesterday’s program highlights?**

**Tell me about your task practice yesterday**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Task practice** | | **Difficult** | **Manageable** | **Easy** | **Progressed?** |
| *No.* | *Description* | *Please tick as appropriate* | | | |
| e.g. ‘3’ | Potting plants |  |  |  |  |
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**Tell me about your shaping practice yesterday**

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| --- | --- | --- | --- | --- |
| **Shaping practice** | | **Average score**  **1-5** | **Average score**  **6-10** | **Progressed?** |
| *No. / Description* | *First score / time* |  | | |
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**What shaping and task practice activities will you work on next?**

**How many homework tasks did you practice yesterday / today?**

**What were the challenges? How did you overcome them?**

**Therapist name and profession:**       **Signature and date:**