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Hi, everyone. Welcome back to the new PossibilOTs Podcast. We are so excited to have you join us again today. We hope you've been enjoying the podcast so far. Today we thought we would talk about rapport building and what that looks like. In the previous episodes, we've talked about goal setting using standardized assessments. So naturally we felt the next step in the OT process is all about building rapport. So, Larissa, maybe you want to start off by telling everyone how our rapport building looks in our clinic and our practice and how that OT process looks like.

**Larissa Ferrari**

I think it's good to say that we're very lucky to have the opportunity to talk to the parents first. I must say that this is a very good strategy for us to talk about the child's strengths, the things they like, and then to do goal setting with the parents based on their point of view. And I must say that this helps me a lot to plan and prepare for this first session, which I think is very important for me, for the client, for the client to know the place where he's going to, because we are clinic-based. So, I guess we start with that. That goal setting process where we talk to the parents, they can openly talk about their concerns, and I think that makes a massive difference. And it helps us to prepare for that first session, which is step number two, when we consider the age, the environment, the things they like, and then we can get our tools ready for that first moment. Is there anything I'm missing Mahek, what do you think?

**Mahek Bansal**

No. I completely agree that we are very lucky. And something that we have really worked towards into implementing consistently is that first parent session that we have without the kids there - just therapist and the parents to really have an open conversation. And it gives us, as therapists as well, the space to guide the conversation as we want to ensure that we're sort of looking for certain pieces of information. One of them, particularly, as you said, Larissa, is the child's strengths and interests, because that's really important. I think the other part that's really helpful with this parent session is also to determine what type of OT service is most appropriate for the child. Of course, rapport building, we will be talking about it mainly in a one on one individual session type of situation. But of course, as OTs, we can offer lots of different services. And in our clinic, we are lucky to have lots of different services, including group sessions, including Aqua occupational therapy and school based sessions and things like that. So I think that first parent meeting is really great, but I am aware that it's not always possible depending on the practice setting or where you're at. And sometimes it might happen side by side, where you have your first session and your opportunity to meet and speak to the parents at the same time, or you might have your first

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session without having spoken to the parents yet at all. And so I guess rapport building still in those three circumstances is still equally as important.

**Larissa Ferrari**

And I think, considering that we, being paediatric occupational therapist, we do learn a lot, and I must say, every day about the child's development, we can prepare based on these things, considering which school they're going to, what's their age, what topics kids this age is talking about or what songs they like, what's the more popular toys, what is Kmart selling the most and things like that. And that really helps to prepare that first session and that might make parents think, oh, so it is a fun play based first session and what's the purpose of that. And I guess this is a first topic we could really dive into just so if there's any parents listening, they could understand why this is a fun play based session, but why so important that it is that way.

**Mahek Bansal**

Definitely. And also, I think to make us as therapists confident to communicate that to parents or whoever else that why are we doing this and why is it so important? Because Larissa, rapport building in occupational therapy and paediatric occupational therapy is highly recorded in the literature, very evidence based. There's a lot of literature around the benefits, why its impact onto outcomes, different methods of rapport building and things like that. And some of those resources we can link as well with the show notes.

**Larissa Ferrari**

Great. It's good that you said that because we are all about being evidence based. But I think from a parent perspective or a new grad OT perspective, we can try to put their shoes on, the client's shoes on and think imagining you're going to an activity for the first time, like a group activity at the gym, for example, and you're going by yourself. So the environment is new, the people is new. You feel like everybody's looking at you. And I can only imagine a child being that situation in a clinic with a therapist and imagine we are jumping straight away on the things that the child feels that they're not as good, or if there's already any feeling of failure, how pushback that's going to be for them to be involved in the session. So for the same reason that we feel like we could warm up and after a few sessions we're going to show our best, once we feel comfortable in the activities we do. That's what we want with a child to feel comfortable enough to show us their true self without being afraid of being judged or knowing that we are partners in that.

**Mahek Bansal**

Yeah, definitely. And I only think about also what happens if you don't rapport build. Like what happens if you have a client that you're trying to work on goals, but they're not engaged, they don't trust you, they don't communicate with you effectively. Are you going to achieve those goals? Are you going to achieve them effectively or in a way that's going to

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transfer skills to different environments? Probably not. And if you do, then it might take double the time, triple the time. So I think, yes, it might look just very play based and fun at the start, but I think it's really important in terms of getting the best outcomes and building that relationship of safety and trust so that when you do get into the more challenging things or the child feels like there's a lot of demands, then you need that relationship to be able to have that security for the child, to be able to navigate with that with you. So I think it's definitely a really important part of the process. And while it looks fun and play based now, it will definitely set you up for success in the future.

**Larissa Ferrari**

And we're saying about being fun and play based as this is something super easy, but sometimes it's not. So maybe we should talk a little bit about how we conduct that our first session and how we start building that rapport with the clients, maybe with some practical examples or maybe even considering what might go wrong. What do you think, Mahek?

**Mahek Bansal**

Yeah, 100%. I guess we have some general tips and strategies that we use and the clinical reasoning that we have when we are sort of starting this process with a client and we can share that.

**Larissa Ferrari**

So I think the first thing, as I said before, is to try to consider the age and the strengths and the goals, or challenges, because I do have the opportunity of getting some of this information in advance and then I consider which room I'm going to use. So now the clinic we're based, we have tabletop rooms, like with barely any distractions at all. And we also got a big sensory gym with lots of sensory opportunities and a small sensory gym which is smaller and with less opportunities but still a sensory gym. So I guess considering the equipment I'm using, the room, any toys or games, taking turn games or things like that, when appropriate is the first thing I do. And then moving forward, I observe a lot the child and observe what types of communication is working well. So do I have to lower myself to the child's eye level? Do I have to use more playful interaction or does that encourage the child to be less attentional? So therefore it needs to be more straightforward. Do I have to use some of the child's strengths and then taking turns on the child's choice or should I just bring my own choices? And especially by the time that I'm offering these things, am I keeping this child attentive to myself, or do I have to come up with last minute changes just to get the attention and the child can feel motivated interacting with me? I guess that would be one of the first things I would consider in my first session. What about you, Mahek?

**Mahek Bansal**

Yeah, I guess in terms of preparing for the session, I'm very, I guess, intentional in my choices. And I want the session to have a child led component where I'm allowing the child

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to really explore the environment and I'm letting them have natural opportunity to engage in play or interaction because that's also allowing me to ascertain what their interests are, what do they gravitate towards. But even though it's child led, it's only child led to the opportunities that I provide. So what I mean by that is if I'm using suppose the sensory space, then what am I putting out that's available for use? Or what games am I having ready in the room? Or how am I setting up and preparing that environment to allow for plenty of opportunity? But the opportunities that match their strengths and interests and their goals and their age, as you said Larissa.

So I think that's probably what I consider a lot from the information that I get talking to the parent and what I know of the child prior to the session. And then I guess in terms of conducting the session or even the activities that I'm bringing, I'm also considering the level of demand. I think often the level of demand or the level of challenge that you place or have for a child can have an impact on their engagement, particularly in that first session. And so I don't want to put a lot of demand, I want it to be, again, a very safe, open environment that the child feels like they can explore without any worries of failure or not doing their best or not sure how to communicate effectively and things. So I really try and decrease that level of demand and then am very aware of my use of myself in how I might be fostering or creating demands through the session.

And for example, how am I engaging with the child? Is this child going to engage best in just sort of parallel play with me or can I try and initiate some reciprocal turn taking or can I sort of try and add ideas to their play or is that going to disengage them? So I'm sort of in the moment trying to adjust how I interact with the child and what level of interaction I have to keep them engaged throughout the session.

**Larissa Ferrari**

Yeah, I feel like we're very much multitasking all the time in that first session. Because while we and I agree with you, there is a component of child led session in there, but at the same time, we are also observing child's potential, interests, how they are motivated by what we are offering while we are working on that rapport. So it is multitasking, and it requires again, not only practice, but also for us as an OT to understand that's the appropriate time to do that, that's important. And we can just try to focus on these things when appropriate because once we build that, then we can work on the more specific goals. So sometimes I feel like we can feel the pressure of jumping in straight away to the goals or if we're losing time. But I feel like this observation is so valuable for future sessions and sometimes when the child leaves that first session wanting more, that's when, you know, I got this child next session that will be amazing. We can build from there. You can start from where you stop and just start adding the goals and the other components you want to bring to your session.

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No I agree. I guess, multitasking I think, is OT. Like as a therapist, it's constantly as we've described it before, it's this dance, right, that you're trying to sort of interact with this child. You're trying to guide this interaction in a way that's going to foster that safety and that trust. But at the same time, you've also got your clinical hat on that you're trying to make observations, assessments, related to your goals and gather information that you'll need for the future sessions without the child really cluing into you having that hat on as well. And you need to be also really present in yourself at the same time because you need to be able to adjust your tone of voice, adjust your positioning, adjust your gestures. Even just that really affective part of our communication we need to be very aware of in every interaction in that first session so that we can adjust it as needed depending on how the child is responding to us.

**Larissa Ferrari**

And I agree when you said that this is like a dance, and I feel like this is an ongoing dance. So even though when we super succeed in that first rapport building session, this is a constant in my practice. So all the sessions moving forward will have a little bit of that rapport building maintenance component because it is a dance. So to understand when the child is more tired than usual, when they're getting sick, but they're not sick yet, or when they're overexcited, or when just picking up all these little clues that child's giving to us and then how engaged they are, if we found an activity that provides the just right challenge, or if it's too challenging or not that challenging. So that dance when you know the child a lot, when you prepare a beautiful session, but nothing seems to work on that day, that's when you really have to work on your rapport building and that dance and just trying to be present, as you said, but at the same time offering the right support for that child to participate.

**Mahek Bansal**

And as you say, I think it just comes back to engagement, right? If a child isn't engaged with you, with the environment, with the activity, then you're not going to be achieving what you've set out to achieve. So even if that means then having to scrap your entire plan that you've worked so hard and put so much thought and preparation and printing and laminating and whatever, if you have to scrap all of that just to work on that engagement in that moment, then that's what you have to do. Because without that engagement, you're not going to be able to achieve what you're set out to, but also the child is potentially going to withdraw from you even more and not see you as that trusted person and see you as, okay, she's making me do things when I'm not in the right space to do this. How can I trust her? So we need to be confident in our own clinical reasoning to say actually right now we need to go right back and just work on our engagement because unexpected things can happen. Unexpected things even unrelated to therapy or intervention can happen that can impact this child and impact how they're presenting that day.

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And I agree. I was just thinking while you were saying that I've worked in some places that was so resourceless and you can prepare so much right when you don't have a lot of resources, but because you have that engagement component, and you're present, I had sessions with so little that turned out to be so powerful in that sense. Oftentimes when you plan a lot of things and they don't really work out, but then you just try to do something different, and it just works even better than what you've planned before just because you had that child's engagement, and you were present just to pick up these little clues and make the best out of it. I'm pretty sure that the OTs that are listening can relate to that because there's no OT I've ever spoke about that didn't have both situations like making a beautiful plan that nothing worked or not having a lot planned in that sense of not having the resources and just had the most beautiful session ever.

**Mahek Bansal**

100%. And that's where I think that we need to be confident in ourselves in the moment that we are doing what's best for the child and for our relationship with the child, even if that means getting a few weird looks from parents or being questioned. But I think that we need to put that relationship first.

**Larissa Ferrari**

I agree. And I feel like if we know what we're doing and the purpose of what we're doing, I guess it's a great opportunity also to advocate for that rapport building for the parents or the carers or whoever's bringing the child to the session and might not understand. And with time, I think they understand once they see how motivated the child is in the session that makes sense to them. Like beautiful relationship.

**Mahek Bansal**

Definitely. And I think paediatrics is a unique setting in the sense where our client is the child, but we work in a family centred approach as well, where a client can also be the parent. And part of the rapport building is of course with the child, but it's also with the parents and the carers we need to work on our relationship with them. And I think the first step in that relationship is being confident to have these open conversations about this is what I'm doing, this is why I'm doing it, this is why it's important. Do you have any questions? Is there anything you want to chat through? Because then the parents can also see that you're willing to have these open conversations with them, that you want to provide some education and you want to do what's best for the child because the rapport building is also not just about the child.

We also need to have a good relationship with the parents that they can trust us, they can

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trust our clinical reasoning, our decision making for what we're doing in this intervention process.

**Larissa Ferrari**

Yeah, I couldn't agree more and that's totally right. And to that end, when the parents are sharing their concerns with us about the children or even grandparents or carers that probably takes care of this child for a long time, they're also sharing something very important of their life with us. So I couldn't agree more with you. I feel like it is a collaborative space and that rapport and that work, it's teamwork, so it's the teachers and the parents and the carers and the child which is our client. But we're working in collaboration so the child can achieve the goals and keep achieving the best in their life to being the best version of themselves.

**Mahek Bansal**

Yeah, I think that we could keep going about rapport building because it is such an important part of our OT process. But I hope everyone has sort of taken away that rapport building is really important, but it is that ongoing process. And we need to, as therapists, feel comfortable and confident in advocating and educating about why it's such an important part of the process and why we're spending so much time doing it at the start, but also throughout the intervention process. And hopefully we've been able to share some tips and some of our own thought processes around how we prepare and conduct these types of rapport building sessions.

**Larissa Ferrari**

I guess it's also important to say that we are very much open to conversations in that sense. So if people want to connect with us and let us know their challenges in building rapport in that first session, barriers of the places they might work at, and maybe this could become another conversation for another time. But that would be great to hear some feedback.

**Mahek Bansal**

Yeah, that would be amazing. So we will wait to hear from you all and also hope to join you again in two weeks' time. Thank you so much for listening and connect with us on our social media at New PossibilOTs podcast and we will see you next time. Thank you. Bye.