Using Video in an Integrated, Team-based Approach

Videos can be a very useful tool for teams working with young children and their families as they provide the opportunity to create content, share context, and build and strengthen relationships among professionals and families. Videos can be used as a “learning object” to help advance knowledge and skills among those involved in early intervention. Videos can show everyone involved in an interaction (e.g., children, families, and professionals) and the context in which the interaction occurs, and can therefore be used to facilitate communication and shared understanding.

Service providers can use videos to promote an integrated service delivery model. Videos can be used for different purposes during early intervention processes. These include gathering information, evaluation, team consultation, family education, coaching, self-reflection, and progress monitoring.

**Gathering Information:** Using video to record information gathered during interviews and discussions with family members can help recall important information, to clarify notes or to share with team members who were not present during the home visit or meeting.

**Evaluation:** Videos can be used to document observations and capture a child’s behavior as the child participates in typical routines, activities, and interactions. In the evaluation process, videos can be used to gain input from practitioners who did not attend the assessment session. The use of videos can help reduce the number of unfamiliar people who might otherwise be present during an assessment.

**Team consultation:** Videos can help a service provider and family benefit from the expertise, perspectives, and ideas of other team members. Video allows other team members to see the child in “real time,” in the context of everyday routines so that teams have enough information to offer direction and support to other team members.

**Family education, collaborative planning, informal support, and joint problem solving:** Videos can be viewed by families and team members to plan intervention strategies and to problem solve together.

**Coaching:** Videos can be used in both live and asynchronous coaching. Use of videos in coaching provides increased opportunity for delivering supportive and corrective feedback to service providers and families.

**Self-reflection:** Videos can be used by service providers to capture their interactions with families or other team members and view them later to identify their strengths and areas for continuous improvement.

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Progress monitoring: Videos can be very useful tools for collecting and organizing observational information for ongoing authentic assessment. When used to monitor progress, videos can provide the family with ongoing documentation of their child’s progress.

Video Consent

Provide information early on to help families understand the uses and benefits of videos. Do not wait until a visit in which you would like to videotape the family and child to obtain consent.

Discuss the potential benefits of using videos:

- A way to gain perspectives and ideas from all team members including the family.
- A way to enhance communication among all team members including the family.
- A strategy to equalize the roles of family members and early intervention providers as they both become collaborative “watchers” and assessors. Video allows the entire team (including the family) to look at the child together and encourage collaboration in developing outcomes and engaging in goal setting and problem-solving. Videos can be shown to other family members who did not attend the visit.
- Tool for professional development among providers.

ALWAYS obtain a family’s written consent before videoing.

- Develop an informative consent form for your program (see example provided by North Central Early Steps). Assure parents that video will only be used with their consent for the specific purposes outlined in the consent form (i.e. at team meetings, to be shared with other assessment or intervention partners, for supervision, or as part of professional development).
• **Shooting Tips**

  - **Keep it Steady**
    - When possible use the tripod. This will be important if you record yourself interacting with the child and/or family. Place the camcorder strategically so that it will capture all the action and you can just let it run.
    - When handhold shooting, make sure you keep your hand steady and avoid jerky movements. When panning, do so very slowly to retain detail.
    - Use the digital zoom sparingly. When possible, move physically closer to the subject.
    - Stay focused so you do not miss any of the action.

  - **Sound Tips**
    - Remember that the microphone is on the camcorder so the closer you are to the camcorder, the better the sound will be.
    - Be aware that if you shoot in a place with a lot of background noise it is likely that voices will be drowned out, so pay attention to your surroundings.

  - **Lighting and Composition**
    - Sunlight is good, but be sure to keep it at the shooter's back. This will help you avoid backlight situations, which leave those you most want to capture on film blacked out.
    - If using artificial light, try to get more than one light source.
    - Video camcorders do okay in low-light situations but you will always get the best footage when you have good lighting.

  - **Practice**
    - Take some practice videos, watch them with your team member(s) and get feedback on the technical merits of your work. Ask your team member(s) what they might need to see in order to provide consultation or coaching.

  - **Avoid making video a big production and keep the purpose or goal in mind**
    - Always keep in mind your goal for making the video. Plan the shot and make your decisions based on achieving your purpose.
      - Video tape only 2 to 5 minutes of a segment of parent/caregiver interaction within an activity.
      - Review video stream with parent/caregiver.
      - Initiate and prompt conversations with parent/caregiver.
      - If the parent has difficulty describing what they have seen you may prompt by saying: “I've noticed that while you were giving (child name)...”
      - Problem solve by asking parent/caregiver: “What do you think would happened if you tried...?”

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