

PROTOCOL FOR THE ROUTINES-BASED INTERVIEW™

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Introduction

The Routines-Based Interview™ (RBI) is a semi-structured clinical interview designed to help families decide on outcomes/goals for their individualized plans, to provide a rich and thick description of child and family functioning, and to establish an immediately positive relationship between the family and the professional. Ideally, interviewers are trained to conduct the RBI. On the other hand, with the use of this protocol, a professional who is knowledgeable about child development, knowledgeable about child and family functioning, and who has good interview skills should be able to conduct a successful RBI.

The protocol can be used from the beginning of the process (i.e., making arrangements) through to the family's putting goals they've selected into priority order. Space is provided for the professional to write down information at the different stages of the interview. Because the RBI is a needs assessment as well as a descriptive assessment of child and family functioning, some professionals will want to keep a copy of a completed protocol. The family should approve of how the protocol is being used.

The protocol is organized in the order in which steps in the process happen. Spoken statements, which of course the interviewer can modify, are in ***bold italics***. The document is organized as a fillable pdf to protect the original version. It can be completed by hand or with typing.

Arrangements

1. When scheduling the RBI, tell the family,
 - a. ***"The meeting will last 2 hours;***
 - b. ***"It's an intense discussion about your day-to-day living or as much of it as you want to tell us;***
 - c. ***"The main purpose is to help you identify your priorities to go on the intervention plan we'll be developing;***
 - d. ***"The meeting works best if there aren't too many distractions, so is there anyone to watch the child(ren)? If not, it's OK. We can manage.***
 - e. ***"Remember, we'll need 2 hours, but we do this only once a year."***
2. Decide on location. It can be the home or another quiet place, as the family chooses. If the child is to be present, ask for the home to increase the likelihood that materials such as toys, diapers, and food will all be available.
3. Decide on a time.
4. If you prefer, find a secondary interviewer. This is recommended, especially for inexperienced interviewers or those who find it difficult to take notes while keeping a conversation going.
5. Be clear with the secondary interviewer what role you would like them to play. Examples include
 - a. Writing notes;
 - b. Helping to ask questions about most routines (if you really want the secondary interviewer to do almost a joint interview);
 - c. Asking questions if you miss something important (if you really want to do the interview mostly on your own);
 - d. Minimizing distractions, such as by entertaining children (always the role of the secondary interviewer, not the primary, if someone has to do it);
 - e. Scoring an instrument based on the interviewees' answers.

Name of parent making arrangements: _____

Child's name: _____

Child's age: _____ **Date & Time of interview:** _____

Place of interview: _____

Primary interviewer: _____

Secondary interviewer: _____

Set Up

1. Seat primary interviewee (e.g., mother) at 45 degrees to primary interviewer.
2. Seat family members together and secondary interviewer next to primary.
3. If given a choice, a kitchen or dining room table is slightly better than living room furniture, but it's not worth insisting.
4. Introductions: Make sure everyone knows who everyone is and why he or she is there.

Present for Interview

Name	Role

Introduction to Interview

1) "The purpose of today's meeting is to go through your day-to-day activities with your family to find out what you really want and need from early intervention. This is the best way of organizing our thoughts. Is that OK? Anything you don't want to say, don't say! You can end this at any time. OK? At the end, we'll have a list of items that you would like the team to work on. OK? If we don't finish today, we'll find another time, but we should try to finish today so we can get started on interventions as quickly as possible."

2) "Let me begin by asking who lives in the house with your child."

Who Lives in the House	Ages of Children

a) "Why is [your child] in [or referred for] early intervention?"

Reason for early intervention:

3) "Before we get into the day, can you please tell me what your main concerns for your child and family are?"

Main concerns:

- a) [Show interest and write these down but do not seek much elaboration.]
- b) [At any time in the interview, if the parent mentions something that is a problem, a desire, or otherwise a likely candidate for an outcome, mark it for easy retrieval. I draw a star next to it.]
- c) "I will ask you more about these things as we go through the day."**

The Day

Getting Into the Routines

- 4) **"How does your day begin?"**
 - a) [Make sure the discussion is about how the parent's day begins, not the child's]
 - b) **START TAKING NOTES ON ROUTINES PAGES.**
- 5) **"What's everyone else doing?"**
 - a) [If the child is awake, get a description of what the child is doing?]
 - b) [Regardless of whether the child is awake,] **"On a scale of 1 to 5, how much do you like this beginning of your day?"**
- 6) **"What happens next?"**
 - a) [This is the transition question throughout the interview. It allows the parent to describe their day, rather than having the interviewer assume what the family does, including the order in which they do it.]
- 7) **"Let's back up and deal just with your child's getting up."**
 - a) [Commonly, parents have to be slowed down, because they don't yet know the level of detail desired. These early-morning routines are the time to show the parent how much information to give in each routine.]
- 8) [Assuming this is the first routine involving the child,] **"What is everyone else doing?"**
[Trying to determine normative conditions for this routine and what the family has to contend with.]
- 9) **"What is your child doing?"**
 - a) [Allow a response to the open-ended question and then, if necessary, follow up with these next questions.]
 - b) **"How is your child participating in this activity?"**
 - i) [Try to find out whether the child is highly engaged, just following the routine, or not participating.]
 - c) **"How much does your child do for him- or herself?"**
 - i) [Ask developmentally appropriate questions about the child's independence. You have to know your child development!]
 - d) **"How is your child interacting [use simpler terms if necessary] with others at this time?"** [Ask developmentally appropriate follow-up questions about communication, self-regulation, cooperation, and social skills. Generally, getting along with others during the routine.]
- 10) **"On a scale of 1-5, how well do you feel this time of day goes for you?"** [This is a variation on the satisfaction question.]
- 11) [Repeat Questions 5)-10) for each routine.]
- 12) [If necessary,] **"Let's skip to dinner preparation time"** [or another possible later routine. With some interviews, it is necessary to move the conversation along].

Routines

Concern ★		Routine Rating

- What does this look like? Where is everyone?
- How does the child participate?
- How independent is the child?
- What's the child's communication like?
- How does the child get along with others?
- Anything else?
- Optional: What else could the child be doing?
- 1-5 (terrible-fantastic) scale

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End of Interview

- 13) [After the last routine,] ***“Is there another typical event or activity we should discuss?”*** [If time, ask about weekends.]
- 14) ***“Now let me ask you a (couple of) general question(s). When you lie awake at night, what do you worry about?”*** [Write down the answer, marking it as a concern, if appropriate.]

Worry:

- 15) ***“If there’s anything you’d like to change about your life, what is it?”*** [Write down the answer, marking it as a concern, if appropriate.]

Change:

- 16) ***“Now I’ll go back through and remind you of the concerns you mentioned.”***
- a) [Review the list of marked items so the parent can see them. The parent is looking at the notes with the interviewer. This is symbolically important as well as pragmatic.]
- b) [Parents will sometimes elaborate, but this is not encouraged at this late stage.]
- c) [Do not write a list of starred concerns.]

Outcome selection

- 17) [Setting the pages down,] ***“Now tell me what you would like to be on the actual list of things to work on.”***
- a) [Write down what the parent chooses. If necessary, refer to the marked items to remind the parent.]
- b) [If the parent mentions a skill with no reference to the context or function (e.g., “I just want him to be able to talk”), ask during which “times of the day” it would be helpful for the child to be able to have that skill.]
- c) [If the parent mentions a service with no reference to the function (e.g., “I just want him to have physical therapy”), ask what skill that would be helpful for, and then, if necessary, during which times of the day it would the skill would be helpful.]
- d) [Refer back to starred items if the family doesn’t remember important things, especially if the parent seems to think some things, such as parent-level needs, shouldn’t be on the plan.]
- 18) [Once 6-10 priorities have been listed and no more seem to be forthcoming,] ***“Now let’s put this list into order of importance. Which one is the most important one to you?”*** [Put a 1 next to that priority.] ***“Which is next?”*** [Continue for the whole list.]

Things to Change—to Work On (Outcomes/Goals)

Priority Order	Outcome/Goal

19) *“This is a great list of things to work on. I’ll consult with other team members and the next time we meet we’ll write down their ideas and your ideas for the strategies to begin addressing these. At that time, we’ll decide what services are needed to get these priorities or “outcomes” addressed.”*

McWilliam, R. A. (in press). *Routines-based early intervention*. Baltimore, MD: Brookes Publishing.