

Dysphagia Telehealth **Facilitator** Instructions

Getting Started: Please help the patient connect to the telehealth platform.

Download the application for the specific telehealth platform onto the device you will be using.

EXAMPLE USING ZOOM PLATFORM:

Download the Zoom Client for Meetings application onto your computer using this link:

<https://zoom.us/download>

You can join a Zoom Test Meeting to familiarize yourself with Zoom before the first tele-encounter that you will help with using this link [https://zoom.us/test!](https://zoom.us/test)

How To Connect With Us

<u>Connecting to the Meeting</u>
Make sure the patient is connected to the Internet and has a good connection.
If other people in the household are connected at the same time, ask them politely to disconnect for the duration of the therapy session to help improve the connection.
Open the Zoom desktop client.
Join a meeting by clicking "Join a Meeting".
Enter the Meeting ID number that was provided by the clinician and if you are not signed in, also enter the Display Name.
Connect your audio and video and click Join.

How Should I Help The Patient Set Up For The Therapy Session?

Please help the patient set up their area and materials for the therapy session.

<u>Set-up the Patient's Space</u>
Make sure the patient is in a private room.
IF NEEDED, help the patient set the computer up on a table or desk so the camera is level with the patient's face when sitting in a chair facing it directly.
IF NEEDED, position the patient's chair/seating so they are comfortably sitting upright at 90-degrees facing the computer/camera straight-on.
IF NEEDED, make sure the patient is positioned so they have a wall behind them instead of a window or open doorway, if possible.
Turn the lights on in the room. For the lighting, so the clinician can see both the patient and you well, ensure there is no overhead light or light directly behind the patient. (You may want to shut the blinds too).

<u>What to Bring to the Session (If the Patient Cannot Prepare These Themselves)</u>
Water or other liquid (prepared to recommended liquid consistency). Place the liquid in a clear cup.
Foods needed for the evaluation or therapy session as specified by the clinician.
A spoon, straw, gloves, napkins, and hand sanitizer. A face or surgical mask for you is advisable as well.

The Facilitator – You May Be Asked To Help!

The clinician providing the therapy session may ask you, the facilitator, to help out by changing the opposition of the patient or the camera, making environmental changes, or to help during the sessions! The clinician will provide you with detailed instructions on what to do, where or when to touch the patient (if needed), or when, what, and how to feed the patient (if necessary). Do your best and please ask questions if anything is unclear!

When Should I Participate or Intervene?

If our connection is interrupted, please let the clinician know via phone call or email (provided at the bottom of this instruction sheet). Then disconnect from the session by clicking “end call”. Try to reconnect following the steps outlined in the “How to connect with us” in the first page of this handout. You should stay on the phone with the clinician while you try to get reconnected so that they can provide troubleshooting help in real-time.

The clinician will provide you direct and clear instructions on what they would like you to do; however, you **SHOULD** intervene if the **patient is choking** (**perform the Heimlich maneuver, provide CPR, and/or call 911**). **This is extremely rare and we will take all precautions to minimize this risk.**

Technical Assistance

Clinician phone number: _____

Clinician email address: _____

Zoom Technical Assistance Phone Number: 1.888.799.9666 ext 2

Zoom Platform Technical Assistance Support Web Address: <https://support.zoom.us/hc/en-us>

What Do I Do If There Is An Emergency?

In case of an emergency, the facilitator should call 911

Additional emergency contact information:

Provider Facility’s Phone Number: _____

Local Hospital Phone Number: _____

Local Urgent Care Phone Number: _____

Patient’s Emergency Contact: _____

Patient’s Home Address: _____

Patient’s Phone number: _____

Facilitator’s phone number: _____