Setphanie Hawkins poses with her daughter, Rylee. Without virtual services, “I wouldn’t be learning new skills that help her progress,” she said. “I think her progression would be a lot slower if we weren’t doing this.”

Up to 3 has provided services to young children in their homes for more than 30 years. Then came COVID-19, bringing challenges with it—and a silver lining or two.

Up to 3 provides physical, occupational, speech and other therapy services to children who have or are at risk of having developmental delays. It is part of the Center for Persons with Disabilities at Utah State University. And since mid-March, its services have become 100 percent virtual. Even the signing of documents happens via Zoom, a videoconferencing app.

The pandemic has not just changed the way the services are delivered. It’s also changing how children are admitted to the program in the first place. Before the pandemic, a child was often referred well-child check in a doctor’s office, when developmental milestones have not been met. But when the pandemic started, many Utah families may have stopped going to the doctor for well-child checks.

The majority of referrals to Up to 3 used to come from doctors, Nef said, but that is not a requirement. Parents, friends, and childcare providers can refer a child too.

“If children are not talking, walking, eating, sleeping or interacting with other people in their lives as children their age normally do, a phone call to Up to 3 can begin the evaluation process.”

Determining eligibility online looks different than with in-person evaluations. Rather than playing with a child, the therapists watch the child doing specific play. They interview the parents about what they are seeing, and may also ask parents to send a video of the child during problematic daily routines. When assessment moves forward in this way, rather than delaying evaluation due to the pandemic, children and families find access to proven strategies and training that improve their child’s development. It can decrease stress for the whole family.

At a time when families are spending a lot more time together at home, “I would guess their family time might be a little harder,” Nef said.

“Because we are a parent training program, we coach parents,” she said. That has been especially true over the last few months, since therapists are not in the home while services are delivered. Parents have truly taken a hands-on approach during the sessions. “Video conferencing helps keep us from getting in the way.”

The format has its challenges, said Stephanie Hawkins of Logan. Her 21-month-old daughter, Rylee, has Down syndrome. Rylee has been enrolled in Up to 3 since before she was 1 month old.

Stephanie does miss having a therapist coming into the home and assessing how Rylee is doing. “Now it’s more me telling [the occupational therapist] if she’s doing certain things,” Stephanie said. “It’s harder, but they’ve just been awesome.”

The shift to online services hasn’t really changed Stephanie’s focus. “I’ve always looked at it as more them teaching me,” she said. “It’s an adjustment… I like in-person better, but I still feel like I get a lot out of it.”

What’s more, the online services mean that Riley’s support continues throughout quarantine. Without them, “I wouldn’t be learning new skills that help her progress. I think her progression would be a lot slower if we weren’t doing this.”

For more information on when to refer a child for services, visit the Up to 3 website.