When working with children and young people with cerebral palsy, it is important for clinicians to connect with families, consider individual needs and preferences and empower families to feel that they have the skills and knowledge to support their child.

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**CONNECT**

Building a collaborative relationship with children and families is key to effective intervention. Families know their child better than anyone else and should be considered as experts in their child’s care.

Listening, understanding individual family needs and preferences, and building a strong, collaborative relationship leads to families being more likely to follow through on clinical recommendations, which in turn leads to better outcomes for the child.

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**SHARE KNOWLEDGE & EVIDENCE**

Clinicians should proactively provide children and families with up to date evidence and intervention options to enable families to make informed decisions about which intervention best suits their child and family. Interventions that research suggests are not suitable for the child, based on their age, ability or diagnosis should be discouraged, as should interventions that have been shown to be ineffective.

Families of younger children may appreciate information regarding developmental and prognostic trajectories in children with cerebral palsy. This information should be delivered using positive language that focusses on the potential of the child.

Information can be overwhelming for some families. Adapt the amount of information you provide according to what suits the individual child and family.

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**EMPOWER SELF PRACTICE**

Practice at home has been shown to be the most effective way to achieve goals when families are provided with knowledge, resources and ongoing support. Clinicians should seek to ensure families are confident practicing goals outside of the therapy setting, including assisting families to access any services and equipment they may need.

Clinicians can use a coaching approach to empower children and families to feel like they can face new challenges and attempt new goals, without necessarily relying on a clinician to support this process.

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**ADAPT TO INDIVIDUAL NEEDS & PREFERENCES**

Intervention should focus on direct practice of the child’s goals. A plan for how and when practice can happen should be made collaboratively with the child and family to ensure the plan is feasible and acceptable to the child and family. How much practice is needed will vary depending on the child and the complexity of the goal.

Intervention should be enjoyable and motivating for the child and challenging enough that the child improves. Interventions that are painful or distressing should be modified and alternative interventions be considered.