



IFSP Online Modules: Quick Reference Guide for Supervisors



A University Center for Excellence
in Developmental Disabilities
Education, Research and Service



NEW MEXICO
Family Infant
Toddler Program



Overview of the IFSP Online Modules

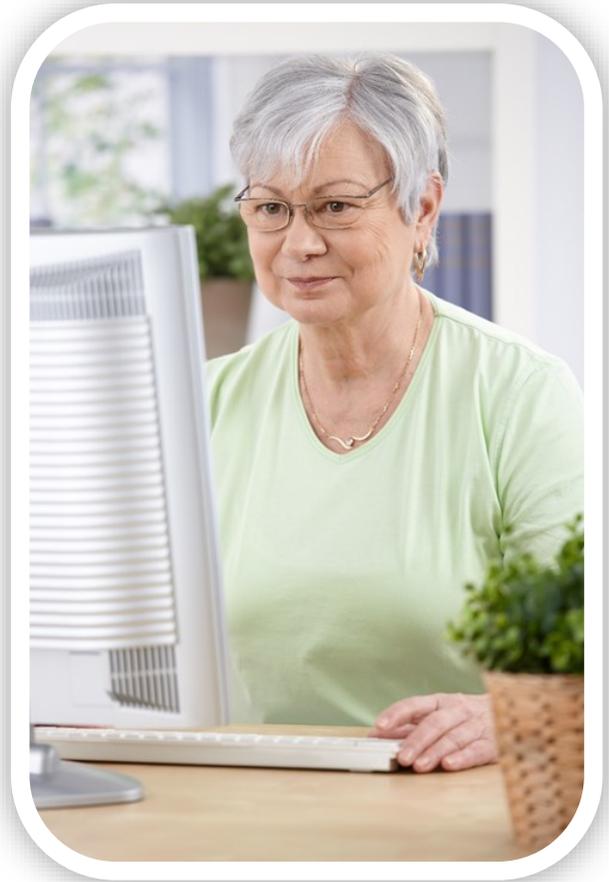
The IFSP Online Modules are three (3) web-based learning modules that are designed to support early interventionists gain an understanding of the process that is required to develop high-quality IFSPs in the NM FIT Program. These modules are a source of beneficial information to support ALL IFSP team members in contributing to the development of a functional IFSP. **These modules are REQUIRED for Developmental Specialists with an Exemption in the NM FIT Program.**

As with all of our online trainings, each participant will access the modules through Moodle. If the participant has already created an account in Moodle, she/he simply needs to log and choose the course that is desired. If the participant does not have a Moodle account, she/he will need to create one before being able to see the course listings. More specific information on how to access and all online trainings can be found on the ECN website:

<http://www.cdd.unm.edu/ecn/ECN/index.html>

Each module is broken into 2-3 smaller lessons to allow more flexibility for the learner to complete at her/his own pace and to allow greater ease of access over the internet. The modules are approximately 2 hours each and offers **CEUs for OTs, PTs, SLPs, and SW/Counseling** as well as certificates for Developmental Specialists.

In addition, each module contains handouts/resources for use during the training or as a support following the module. Each module provides 2 follow up activities for participants to consider doing to enhance their learning and to support their practice. Also, once a participant has completed the modules, she/he will be able to download the entire sample IFSP that is being developed within the modules.



Using this “Quick Reference Guide”

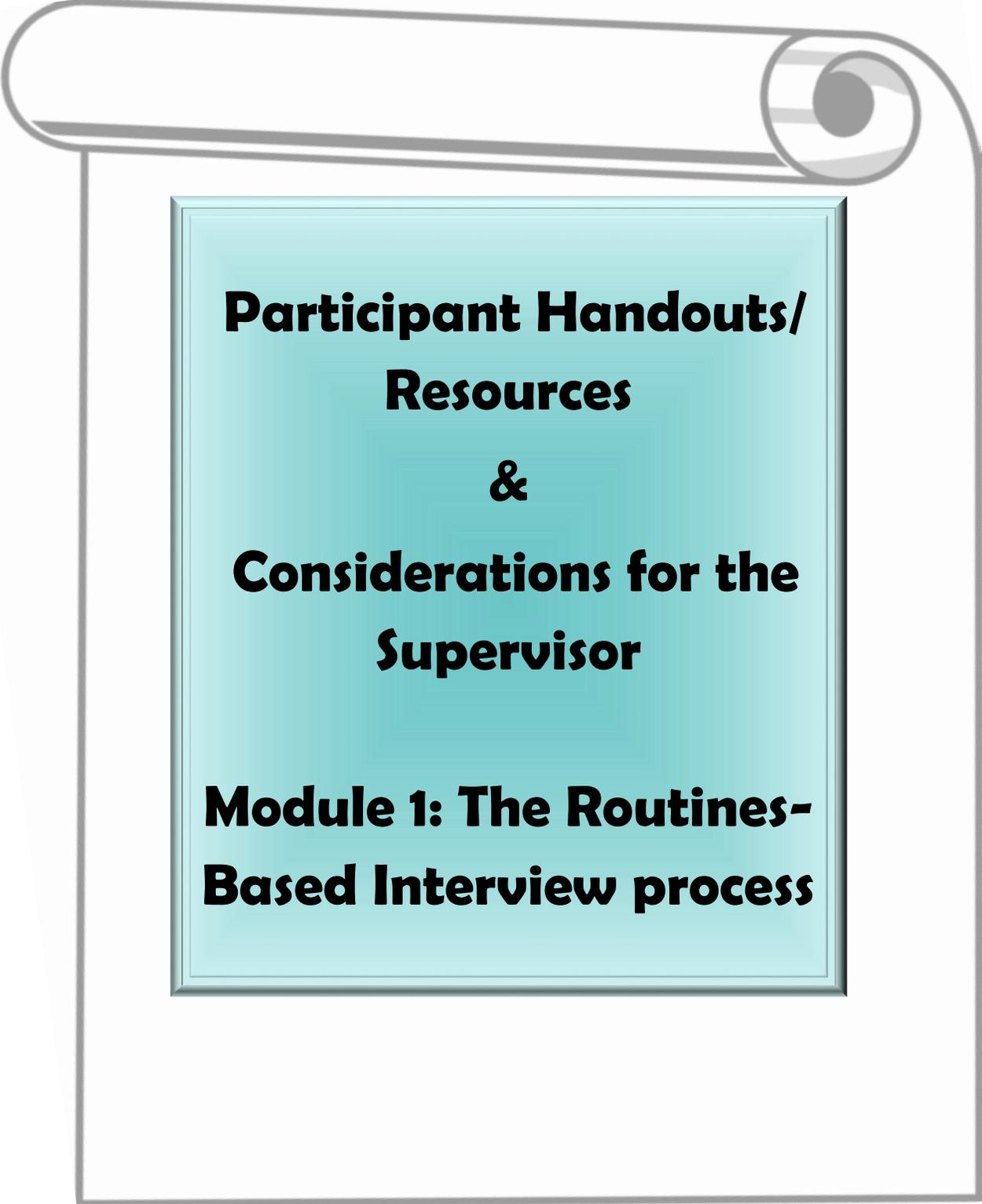
This guide is designed to support supervisors in mentoring new staff by providing you, the supervisor, with an overview of the information presented in the modules. Included in the guide is:

- ◆ Abbreviated Power Points of the modules. These are included as a reference for the content that is presented in each module. The basic information is in the PowerPoint, but not all content from the participant modules is included.
- ◆ Relevant handouts/resources to accompany the training. These handouts are tabbed in **BLUE** and titled “Participant Handout– Module _____”
- ◆ Guidance for supervisors in terms of practical application suggestions for staff, follow up reflections, and agency process considerations. These are tabbed in **YELLOW** are titled “Supervisor’s Considerations” and immediately follow the accompanying handout.

This guide is not meant as a substitute to taking the actual IFSP training. All supervisors are encouraged to participate in the online modules directly to have a firsthand experience of the materials and the way in which the concepts are discussed. Use this guide as a resource to support your thinking about how to provide individualized mentoring experiences for your staff and to answer any relevant questions.

If you need additional assistance and/or information regarding how to use this guide and/or designing a mentoring system within your agency, please contact your ECN Program Consultant.





**Participant Handouts/
Resources**

&

**Considerations for the
Supervisor**

**Module 1: The Routines-
Based Interview process**






Individual Family Service Plan (IFSP)

The Routines Based Interview (RBI)

Completing the "Your Family" section of the IFSP

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Presentation Goals

Your Family

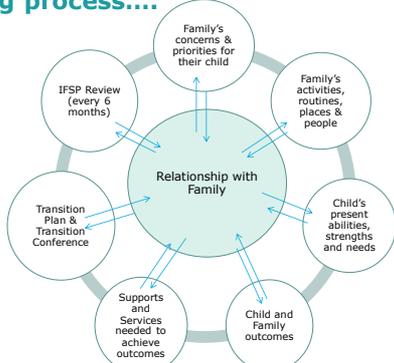
- Understand importance of RBI
- Children learn during routines
- RBI information gathering
- Identifying concerns

Quality



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Building the Relationship: It is an ongoing process...



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Children Learn through Incredible Amounts of Practice!

- The amount of a toddler's experience with walking is the **only predictor of improved proficiency**
- Toddlers practice walking for more than 6 hours daily
- Average 500 – 1500 steps per hour
- 9000 steps per day (length of 29 football fields!)



Adolph, K. E., Vereijken, B., & ShROUT, P. E. (2003). What Changes in Infant Walking and Why. *Child Development*, 74(2), 475-97.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Mastery



Mastery of functional skills occurs through high-frequency, naturally occurring activities in a variety of settings that are consistent with family and community life

Shelden, M. L., & Rush, D. D. (2001). The ten myths about providing early intervention services in natural environments. *Infants & Young Children*, 14(1), 1-13.

Durst, C. J., & Bruder, M. B. (1999). Family and community activity settings, natural learning environments, and children's learning opportunities. *Children's Learning Opportunities Report*, 1(2).

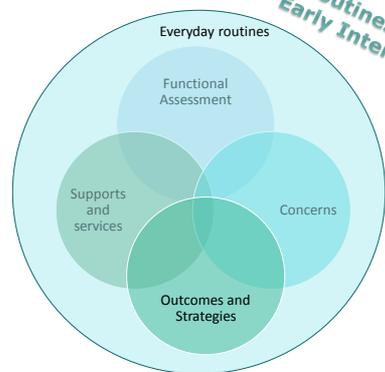
Durst, C. J., Bruder, M. B., Trivette, C. M., Hamby, D., Raab, M., & McLean, M. (2001). Characteristics and consequences of everyday natural learning opportunities. *Topics in Early Childhood Special Education*, 21(2), 68-82.

Durst, C. J., Bruder, M. B., Trivette, C. M., Raab, M., & McLean, M. (2001). Natural learning opportunities for infants, toddlers, and preschoolers. *Young Exceptional Children*, 4(3), 19-25. (Erratum in *Young Exceptional Children*, 4(4), 25)

Durst, C. J., Hamby, D., Trivette, C. M., Raab, M., & Bruder, M. B. (2002). Young children's participation in everyday family and community activity. *Psychological Reports*, 91, 875-897.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Everyday routines



Routines Based Early Intervention

Everyday routines

Functional Assessment

Concerns

Outcomes and Strategies

Supports and services

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing

- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.
- Family selects priority areas



McWilliam, R.A., & Clingempeel, Beth (2003) *Functional Intervention planning: The Routines Based Interview*. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Preparing Families

Examples of ways to explain why we conduct the RBI

Ask for Permission

- In exploring routines, we learn more about how your concerns impact daily life.
- We learn what the family is already doing and where the successes and challenges are in daily life.

Instead of setting aside time during your busy day to address concerns with your child, we will try to embed "interventions" into activities you are already doing.

We begin to get a better picture of your family and an understanding of how you spend your day.

We learn what the child and family really enjoy so that we can incorporate service strategies into those activities, making it fun for everyone..

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Preparing Families

- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.
- Family selects priority areas

McWilliam, R.A., & Clingenpeel, Beth (2003) Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Discussing Routines

- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.
- Family selects priority areas

Beginning the Interview

McWilliam, R.A., & Clingenpeel, Beth (2003) Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Lesson 2

The Routines Based Interview (RBI)

Completing the "Your Family" section of the IFSP

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Discussing Routines

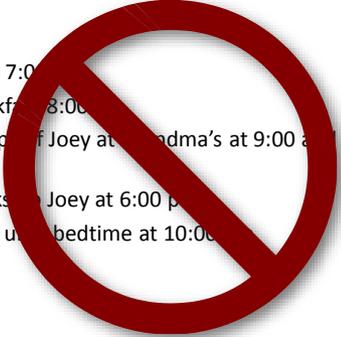
- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.
- Family selects priority areas

Family has "no concerns"

McWilliam, R.A., & Clingenpeel, Beth (2003) Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Schedule???



- Wakes up 7:00
- Eats breakfast 8:00
- Mom drops off Joey at grandma's at 9:00 and goes to work
- Mom picks up Joey at 6:00 p
- Watch TV until bedtime at 10:00

NEW MEXICO
Department of Education
Family Infant
Toddler Program

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Discussing Routines



For every routine:

1. What is everyone doing?
2. What is the child doing?
3. How engaged is the child? (does he participate/enjoy routine?)
4. What can child do by himself?
5. How does the child socialize/relate during the activity?
6. How satisfactory is this routine?

McWilliam, R.A., & Clingenpeel, Beth (2003) Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

NEW MEXICO
Department of Education
Family Infant
Toddler Program

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Discussing Routines



For every routine:

- Open ended questions
- No Assumptions
- Follow up questions
- Obtain enough information to allow IFSP team to visualize the routine

NEW MEXICO
Department of Education
Family Infant
Toddler Program

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Discussing Routines

- During the interview, the family is supported in identifying routines that are working well and routines where they have concerns.

NEW MEXICO
Department of Education
Family Infant
Toddler Program

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines, Routines, Routines

NEW MEXICO STATE UNIVERSITY
Family Infant
Toddler Program

For every routine:

1. What is everyone doing?
2. What is the child doing?
3. How engaged is the child? (does he participate/enjoy routine?)
4. What can child do by himself?
5. How does the child socialize/relate during the activity?
6. How satisfactory is this routine?

• Bathing Waking up. Meals & Snacks

Bedtime
PLAYTIME
DRESSING/
DIAPERING

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Lesson 3

The Routines Based Interview (RBI)

Completing the "Your Family" section of the IFSP

NEW MEXICO STATE UNIVERSITY
Family Infant
Toddler Program

UNM
HEALTH SCIENCES
CENTER

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Discussing Routines-Childcare

NEW MEXICO STATE UNIVERSITY
Family Infant
Toddler Program

- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.
- Family selects priority areas



McWilliam, R.A., & Clingenpeel, Beth (2003)
Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Reviewing Concerns & Strengths

NEW MEXICO STATE UNIVERSITY
Family Infant
Toddler Program

- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.
- Family selects priority areas



McWilliam, R.A., & Clingenpeel, Beth (2003)
Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines Based Interviewing- Selecting Priorities

- Prepare families to report on routines.
- Families report on their routines.
- If a childcare provider is involved, ask that provider about routines during their time with the child.
- Review concerns and strengths based on the interview.



McWilliam, F.A., & Clingerpeel, Beth (2003) Functional Intervention planning: The Routines Based Interview. National Individualizing Preschool Inclusion Project. Vanderbilt Medical Center.

➤ Family selects priority areas

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Your Family

Everyday routines, activities, places, and people in your life

Young children learn best through routines and activities that they are interested in and participate in often. It is helpful for us to know where and how your child regularly spends time so that we can develop this plan. As you and your Family Service Coordinator talk about your daily routines, she/he will summarize that information below.

Typical Daily Routines and Activities	Describe what your child does during this activity and who participates.	<ul style="list-style-type: none"> • What do you and your child enjoy about this activity? • What makes this routine/activity challenging or difficult?
	<ul style="list-style-type: none"> •What's everyone doing? (who is participating in the activity) •What's the child doing? What's his engagement like? What's his independence like? How is he relating to others during routine 	<ul style="list-style-type: none"> •How satisfactory is this routine? •What makes it difficult or challenging? •What would make it better?

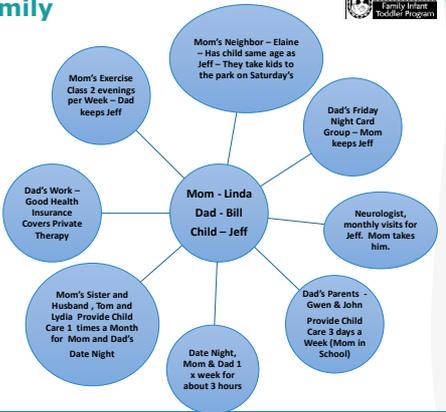
A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

"Your Family" Resources

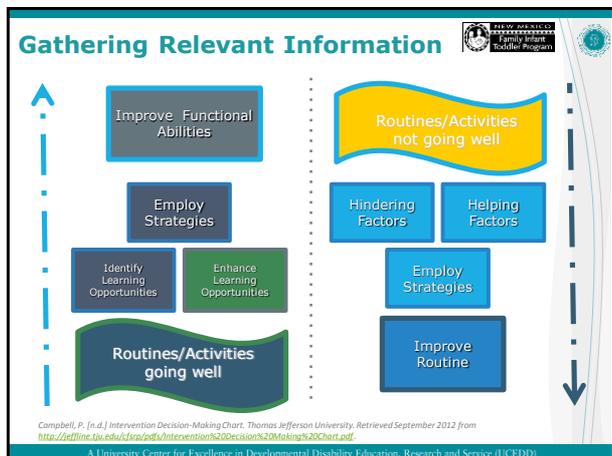
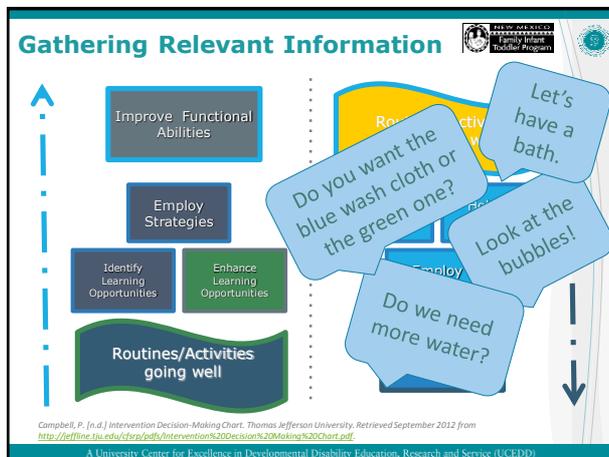
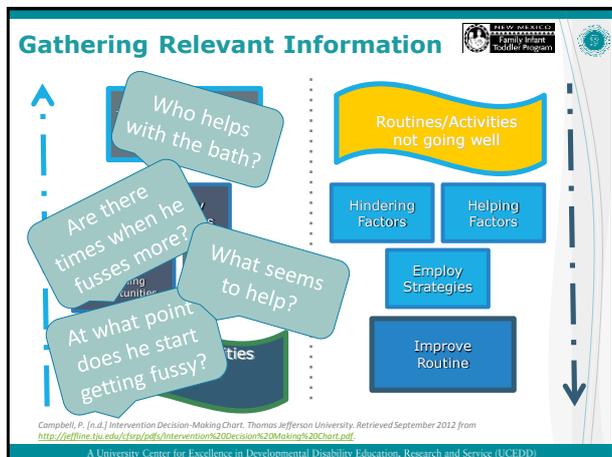
- Who are the people who are routinely in the child's life and what role do they play (e.g., siblings, grandparents, aunts & uncles, child care provider, baby sitter)?
- Who are the people who support the parent and what role do they play?
- What other agencies/organizations (e.g., medical provider, WIC, place of worship, support group) that support the family?

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Your Family



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Example of Completed "Your Family" Section of IFSP

Area	Parent/Teacher Report	IFSP Goal
Family	<p>Everyday routines, activities, places, and people in your life</p> <p>Describe what you do every day during the week and on weekends</p> <p>Describe what you do during the week and on weekends</p>	<p>Identify the family members who are involved in the child's life</p> <p>Describe the family's routines, activities, and places</p>
Learning	<p>Describe what you do during the week and on weekends</p> <p>Describe what you do during the week and on weekends</p>	<p>Identify the family members who are involved in the child's life</p> <p>Describe the family's routines, activities, and places</p>
Activities	<p>Describe what you do during the week and on weekends</p> <p>Describe what you do during the week and on weekends</p>	<p>Identify the family members who are involved in the child's life</p> <p>Describe the family's routines, activities, and places</p>

The additional space is needed to describe everyday routines, activities & places in another page.

I choose NOT to share information about my everyday routines, activities & places. (Parent initials)

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Example of Completed "Your Family" Section of IFSP

By understanding who plays an important role in your child and family's lives, we can better include the people who routinely support your child and family as we develop this plan.

Who are the people who are routinely in your child's life and what role do they play (e.g., siblings, grandparents, aunts & uncles, child care provider, baby-sitter)?

Grandma (Dad's mom) comes M, W, and F and stays with Jeff while Mom goes to school. Grandma will take Jeff to doctor and dentist appointments if needed.
 Next door neighbor and her son Eric go to the park with Jeff and mom on Saturdays.
 Mom's parents will come over several times a week. Mom's mom helps by staying with Jeff so mom can go grocery shopping.
 Dad has a group of friends that he plays cards with on Friday nights while mom keeps Jeff.
 Dad does the evening story and bottle with Jeff so mom can study. Dad also does the nebulizing treatments.

Who are the people who support you as a parent and what role do they play?

Both sets of grandparents give us support and encouragement and come stay with Jeff when needed. Our friends who listen when we feel stressed and who help us keep our sense of humor.

What other agencies/organizations (e.g., medical provider, WIC, place of worship, support group) that support your family?

Jeff's doctors who helped save his life, get him home, and keep him as healthy as possible. Jeff has private PT and speech therapy.

Would you like us to help you to learn about or identify other resources, services or support (e.g., assistance with housing, utilities, finding a pediatrician, child care, respite). If yes, which one?

Not at this time

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Example of Completed "Your Family" Section of IFSP

Routines Based Early Intervention



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Your Family		Everyday routines, activities, places, and people in your life	
Typical Daily Routines and Activities	Describe what your child does during this activity and who participates.	What do you and your child enjoy about this activity? What makes this routine/activity challenging or stressful?	What do you and your child enjoy about this activity? What makes this routine/activity challenging or stressful?
Getting Ready	We get up early around 6am so that we can get everybody (mom, dad, Geneva, 2 other sisters) ready for work and school. Geneva usually wakes up happy and then to pull the blankets off of her sisters to wake them up. She will help with getting dressed (e.g., pull arms into sleeves). Sometimes she will not be dressed at home and sometimes she won't eat breakfast until she gets to school. It depends on how crazy the morning is at home.	Geneva really likes to interact with her siblings in the morning.	Geneva really likes to interact with her siblings in the morning.
Mealtime at Child Care	Geneva will typically push to the counter if she is hungry. The daycare staff will let her snack to the table. Geneva will sometimes push the drinks with snack and then spit it out. She is not drinking during mealtimes and she will push around snack off of her tray. The children bring lunch from home so many snacks knock that she knows Geneva will not share. Geneva typically wants to get out of her seat before she is finished eating.	Geneva really likes to interact with her siblings in the morning.	Geneva really likes to interact with her siblings in the morning.
Free Play at Child Care	Geneva typically enjoys songs, music and doing crafts, cutting dolls and pushing them in strollers. Geneva's current favorite song is "Bounce on the Bay" and she will initiate several of the hand motions to the song. She enjoys the water table and seems to be able vocal during this time, including imitation of some sounds such as "the fish". She is comfortable with familiar staff but will withdraw and be more "shy" with new staff in the room.	Geneva really likes to interact with her siblings in the morning.	Geneva really likes to interact with her siblings in the morning.
Dinner at Home	The girls do their homework at the table while mom starts to make dinner around 5:30. Geneva sits at her high chair during this time and will toy with some food and "bang" with spoon. Once dinner is ready, Geneva is given food right away while everyone else is getting ready for dinner and coming to the table. She is alone in my through for dinner by the time everyone else starts to eat. Geneva will want to be alone when she is not eating. She will want to be alone when she starts to grab other people's food. She also likes to throw her food and spill up after she finishes and then she will push at it to get it back. It's like a game.	Geneva really likes to interact with her siblings in the morning.	Geneva really likes to interact with her siblings in the morning.
Bed Time	Geneva has a bath almost every night just before bed. She has a lot of colorful dolls that she plays with in the tub and often and stays are all in the bathroom singing songs like Old MacDonald. Geneva likes to try and make some of the animal noises for the song and she will also play games like Furry Cakes and "Milk's your aunt".	Geneva really likes to interact with her siblings in the morning.	Geneva really likes to interact with her siblings in the morning.

Summary of RBI Presentation

- Children learn through lots of practice.
- The success of intervention strategies are dependent on being embedded in family routines.
- Information is gathered through routines based interviewing
 - Routines must be explored thoroughly
 - Learn what is working and what is not working.
 - What are family's concerns and priorities

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Summary of RBI Presentation

Services Focus on Successful Participation

- Services should strengthen family and caregivers capacity to use multiple routines and activities as learning opportunities
- Successful participation = learning and practice = **mastery of skills**



Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-iepgoals/ifspoutcomes-iepgoals.asp>.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Summary of RBI Presentation

Parents and Caregivers Influence Learning

- **What happens between intervention visits is most critical for learning**
- **The consistent adults in a child's life have the greatest influence on the child's learning and development – not providers**
- **All families/caregivers have strengths and capabilities that can be used to help their child develop and learn**

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-iepgoals/ifspoutcomes-iepgoals.asp>.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Follow up Activities to Consider to Increase your Knowledge & Skills!



- Plan a session with another colleague to practice your interviewing skills. Use **Conversation Starters to use during a Routines Based Interview**, to guide the conversation.
- Use the **RBI Quick Guide** on your next visit with a family to help you organize the conversation.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Quick Guide for a Routines Based Interview

Use this checklist to guide your conversation with the family when conducting a RBI and to complete the IFSP process.

- 🗨️ Explain to the family the purpose of the Routines Based Interview and how this information will guide the development of IFSP outcomes and strategies.
- 🗨️ Ask about any concerns the parent/caregiver may have at this time.
- 🗨️ Begin by asking about the day to day life of the family:
 - “What is a typical day like for you?”
 - “How does your day start?”
- 🗨️ Follow the family’s description of their day to learn about:
 - What the child is **doing** (in each routine or part of the day).
 - What’s **working** for the child and parent/caregiver within that routine?
 - What does the child **enjoy**?
 - What **social** opportunities does the activity/routine provide?
 - What are the child’s **reactions** to this specific routine, time of day, activity or place?
 - What are the child’s **developmental capacities and needs**?
 - What are the **stressful/challenging** parts of the day?
- 🗨️ Review what you have discussed with the parent. Look at your notes together.
- 🗨️ Make a list of the key issues that have been discussed:
 - Concerns mentioned (medical, physical, financial, developmental, etc)
 - Questions the parent may have
 - Unresolved issues
 - Family needs
- 🗨️ Review this list together with the parent and select 2-3 items. These can be considered the top priorities that will be addressed in the IFSP.
- 🗨️ Explain to the parent/caregiver that there may be other priority areas identified after the evaluation.
- 🗨️ Share the information from the RBI with the rest of the transdisciplinary team according to your agency’s procedures.
- 🗨️ Begin to use the information from the RBI to develop IFSP.

Ask these Reflective Questions to Support the Learner...

- What do you know about the Routines-Based Interview?
 - ◇ NOTE: Does the participant explain the purpose of the RBI? Does (s)he describe the importance of learning about the family's routines in terms of intervention?
- Considering what you learned in the modules, how might you introduce the RBI to a family?
 - ◇ NOTE: You may want to have the participant actually role play these pieces with you and/or other staff members to have some practice before trying it themselves
- What do you think might be the biggest barrier for you to effectively complete this process with a family?
 - ◇ NOTE: How can you, as the supervisor, support the participant in overcoming this barrier?

Consider these questions for yourself as a supervisor...

- ◇ What additional information/support do I need so that I can effectively mentor my staff in conducting a successful RBI with a family?
- ◇ How can I explore how this process is going for staff during the initial training and mentoring processes? Later on after they have been doing this for a while?
- ◇ How do I support ALL staff in understanding their roles and the ways in which they can ALL gather information from the families during every interaction?

Consider these questions for your program structure/processes...

- How is the RBI described/discussed in our program?
 - ◇ NOTE: Does this description match the information from the modules?
 - ◇ If not, what can our program do to shift our practice to reflect this process?
- How do we support new staff in experiencing this process in a structured and logical manner that allows them to learn quality practices from the beginning?
 - ◇ Do we have them observe with a "vetted" staff member, take the online modules, observe again and debrief the process before asking them to practice and/or complete a "live" RBI?
- How can our program look at this process from the perspective of a Continuous Quality Improvement process?
 - ◇ What resources might we need to do this?



Conversation Starters to use During a Routines Based Interview

General questions:

1. Tell me how your day begins?
2. Who lives in your home?
3. Who works in the family? Is anyone home during the day?
4. Where is the child during the day? Where does he/she spend most of his/her day?
5. With whom does your child spend a majority of his/her day?
6. How long have you lived here in this community?
7. Are there other agencies/programs that provide assistance to your family?

Questions to ask about dressing:

1. How does dressing go for you and your child?
2. Who helps your child with dressing?
3. How involved is your child with dressing?
4. What kind of communication goes on during dressing? Can your child follow simple instructions or commands such as....?
5. Do you give your child choices about what to wear? Ask for a description.

Questions to ask about meal times:

1. Can you describe mealtimes for me?
2. Who usually helps your child with eating?
3. What are some of his/her favorite foods? What foods does he/she dislike?
4. Does he/she have any difficulty with eating (swallowing, chewing)?
5. What are other family members doing during meal times?
6. How involved is your child with feeding him/herself? Ask for a description of what the child can do.
7. How does your child tell you what he/she wants or that he/she is finished?
8. Are there any challenges around mealtimes? What would make it easier for you and your child?

Questions to ask about going places:

1. What are some places you and your child enjoy going to?
2. How do you get your child ready to go out?
3. Who helps with getting your child ready?
4. How does your child respond to going out to new places?
5. Are there any places that your child does not like to go to?
6. Are there any challenges to going places with your child?

Module 1: RBI

Questions to ask about playtime/hanging out:

1. What do you and your child enjoy doing at home when you're just hanging out?
2. What does your child enjoy playing or doing?
3. What are his/her favorite toys, activities, TV shows, etc.?
4. How does your child let you know what he wants to do or when he wants to interact with you or other family members?
5. Does your child have opportunities to interact with other children?
6. How does your child interact when playing with other children?

Questions to ask about bath time/toileting/diapering:

1. Who usually helps your child with bathing/toileting/diapering?
2. How does your child respond to these activities? Are these challenging parts of the day for you?
3. How involved is your child with these activities? Does he/she help to wash, help to undress/dress, etc.?

Questions to ask about special events the family likes to do or is engaged in during the year:

1. Are there any special activities you and your family like to do together? What time of the year does this happen?
2. Are there any cultural events/activities you and your family participate in?
3. How involved is your child in these activities? How is this working for you and your family?
4. Are there any times of the year that are especially busy and/or stressful for your family?
5. Are there any days during the week that you and your family are involved with cultural/community activities?

Ask these Reflective Questions to Support the Learner...

- How can you use these questions to create a dialogue with the parent?
 - ◇ NOTE: “How “ we ask the questions matters—can the participant use the checklist items as a “jumping off” point to start creating a conversation with a parent?
- What are some other ways you might get information during the RBI without asking questions?
 - ◇ NOTE: How skilled is the participant at observation?
- What other things might be helpful to know about daily routines?
 - ◇ NOTE: Can the participant think beyond the checklist?

Consider these questions for yourself as a supervisor...

- ◇ What supports and resources can I provide to staff in order to help them build skills in interviewing families?
- ◇ How can I create opportunities for staff in becoming more skilled in using the RBI to create conversations with families?
- ◇ How can I support staff in using observational skills during the RBI?

Consider these questions for your program structure/processes...

- What is our understanding of the RBI as a process in our program?
 - ◇ NOTE: Are we all in agreement?
 - ◇ If not, how can we get there?
- Do we all agree on the purpose and the value of the RBI?
- Do we understand how to use the information gathered in the RBI?
 - ◇ Is this information reflected the strategies and outcomes of the IFSP?
 - ◇ What resources might we need to do this?

Resources and References:

A relationship based approach to early intervention

Edelman 2004. *Resources & Connections* July-September, 2004. Volume 3, Number 2
http://cacenter-ecmh.org/wp/wp-content/uploads/2012/03/relationship_based_approach.pdf

The National Individualizing Preschool Inclusion Project

Robin Mc William has developed the Routines-based Interview and other materials to gather information from families and preschool teachers about daily routines and activities. Supporting materials are available on the Vanderbilt Children's Hospital website.

(downloaded 6/11/09) <http://www.siskin.org/www/docs/112.190/>

- **Routines-Based Assessment and Intervention Planning Checklist**
- **Routines-Based Interview Report Form (January 2006)**
- **Scale for Assessment of Family Enjoyment within Routines (SAFER)**
- **Scale for the Assessment of Teachers' Impressions of Routines Engagement (SATIRE)**
- **McWilliam Goal Functionality Scale II (GFS II)**

Questions for Eliciting Family Interests, Priorities, Concerns, and Everyday Routines and Activities

Anne Lucas (NECTAC, 2005) gathered information based on a literature review that yielded typical questions a service provider may consider using in conversations with families.

http://www.ectacenter.org/~pdfs/topics/families/questions_family_interests.pdf

Family Guided Routines Based Intervention

The section describing the FGRBI model includes #2 Routines based Assessment in Natural Environments. <http://fgrbi.fsu.edu/>

Family guided Approaches to Early intervention Training and Services (FACETS)

This project focuses on natural environment and family guided intervention. Module 2 of the training modules has resources for learning about the child and family.

<http://facets.lsi.ku.edu/>

Ask these Reflective Questions to Support the Learner...

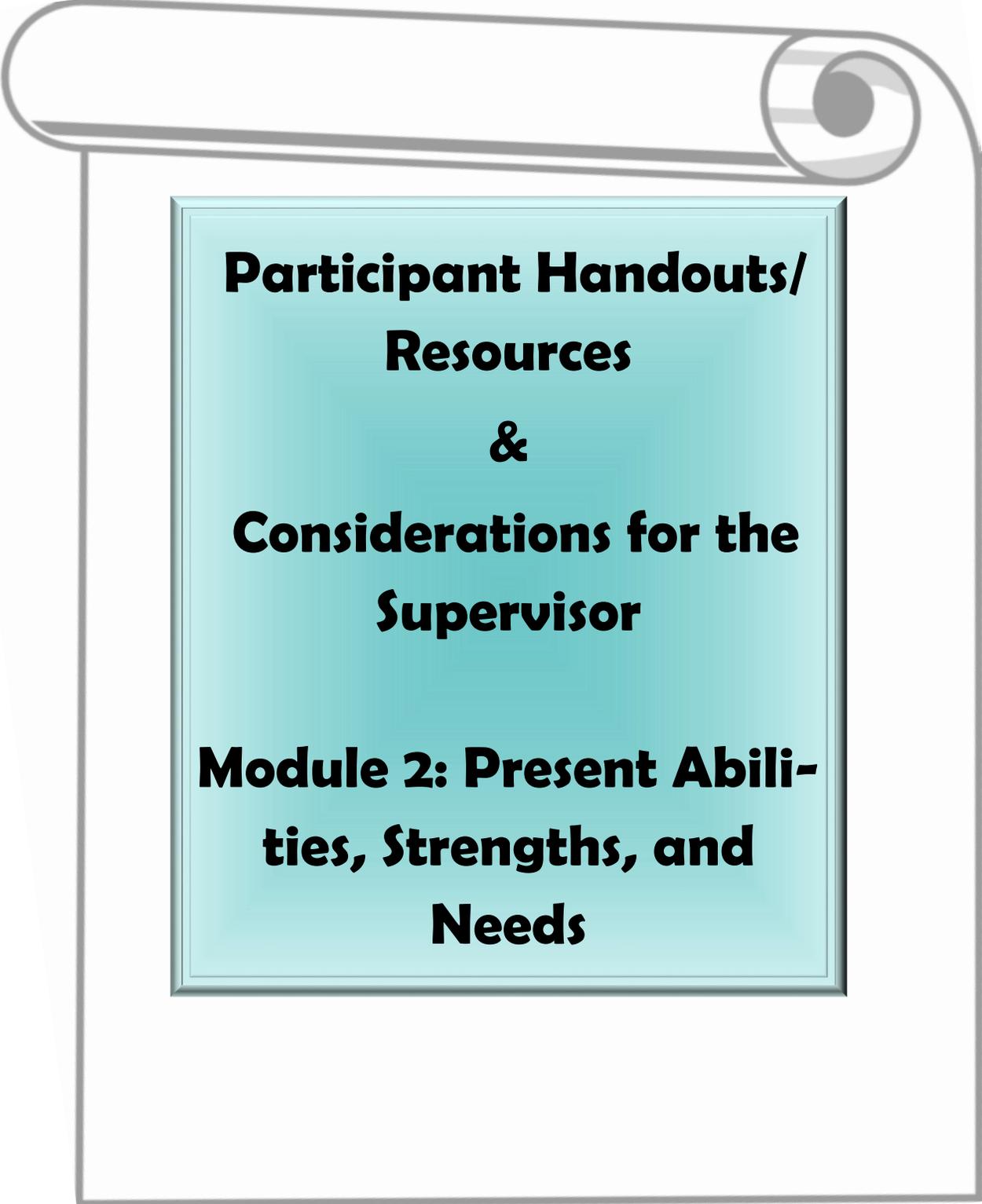
- How do you help parents feel comfortable with the RBI questions?
 - ◇ NOTE: How can you help the participant understand the RBI process in the context of relationship?
- What are some things you feel most families need in order to feel safe in sharing this information with you?
 - ◇ NOTE: How can you support the participant in thinking about what it's like to be a parent during the RBI process?
- Have you experienced "getting stuck in this process"? If so, why?

Consider these questions for yourself as a supervisor...

- ◇ What skills are needed in order to conduct an effective RBI and build relationships? How do I model these skills in my own interactions with staff?
- ◇ How can I support staff in seeing the value of developing and using these skills beyond the RBI?
- ◇ How can I continue to provide opportunities for staff to practice these skills?

Consider these questions for your program structure/processes...

- How do we communicate effectively in our program?
 - ◇ NOTE: Do we communicate with each other in the same ways we want staff to communicate with families?
- Are there opportunities to reflect on this process together as a team?
 - ◇ If not, can we build in opportunities to do this?
- Question
 - ◇ What resources might we need to do this?



**Participant Handouts/
Resources**

&

**Considerations for the
Supervisor**

**Module 2: Present Abili-
ties, Strengths, and
Needs**








Individualized Family Service Plan

Present Abilities, Strengths and Needs

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)




Introduction

The focus of this module is to support the IFSP **team** in considering how the information gained through the RBI process and the results of the evaluation are used to understand how the child uses her skills in functional ways (within the context of the three Early Childhood Outcomes) throughout her day.



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)




Objectives/Outcomes

- Identify and describe a child's functional strengths and needs
- Understand how the three Early Childhood Outcomes tie evaluation/assessment, planning and intervention together
- Understand how to facilitate discussion and decisions on what needs to be put into the IFSP
- Understand how to write clear, complete, comprehensive, and functional descriptions of the child including strengths, abilities, and needs using family friendly language within the context of the three Early Childhood Outcomes

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)




Present Abilities, Strengths and Needs

The Present Abilities, Strengths and Needs page of the IFSP is designed to help you use the following information:

- What you gain from the family through an RBI process
- From your observations
- Learned during the evaluation and/or assessment



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

IFSP Present Abilities, Strengths, and Needs

• We use this page to describe the child's Present Abilities, Strengths, and Needs based on three areas of child functioning, namely the three Early Childhood Outcomes

• The child's developmental levels, as determined through evaluation and assessment, are reported (typically) in age-ranges

Present Abilities, Strengths, and Needs

For children for whom an individual participant in IFSP will be developed, they need to describe skills in the three functional areas described below. We use this information about your child's abilities and your concerns and priorities to understand your child's program.

Date of evaluation/assessment: _____ Based on: Initial Evaluation Ongoing assessment

Child's Chronological Age: _____ Child's Corrected Age (if applicable): _____

HOW DOES YOUR CHILD... YOUR CHILD'S STRENGTHS... YOUR CHILD'S NEEDS... YOUR CHILD'S DEVELOPMENTAL LEVELS...

Because the child's abilities, strengths, needs, and assessment results are on one page it supports the IFSP team in considering how the child's "assessed skills" relate to the child's functional abilities

UCFDD

Describing Early Childhood Outcomes

Describing Early Childhood Outcomes

1. Child has positive social relationships

Involves	<ul style="list-style-type: none"> Relating with adults Relating with other children Following rules related to groups or interacting with others
Describe how the child...	<ul style="list-style-type: none"> Demonstrates attachment Initiates & maintains social interactions Behaves in a way that allows them to participate in a variety of settings & situations Demonstrates trust in others Regulates emotions Understands & follows social rules Complies with familiar adult requests Shares toys & materials with others Initiates, responds to, & sustains interactions with others Listens, watches, & follows activities during groups
In different settings consider how the child...	<ul style="list-style-type: none"> Interacts with & relates to others in day-to-day happenings Displays, reads & reacts to emotions Initiates, maintains, & closes interactions Expresses delight or displays affection Transitions in routines or activities (familiar & new) Engages in a joint activities/interactions Shows awareness of contextual rules/expectations Responds to arrivals & departures of other

Which of these activities demonstrates **Outcome 1: Positive Social Relationships?** (click on the most appropriate picture)



Feeds Self



Squeals with Pleasure



Uses Gestures & Vocalizations to Protest

Describing Early Childhood Outcomes

2. Child acquires and uses knowledge and skills

Involves	<ul style="list-style-type: none"> Thinking/reasoning problem solving Understanding routines Understanding the physical & social world
Describe how the child...	<ul style="list-style-type: none"> Displays curiosity & eagerness for learning Explores their environment Explores & plays with people & objects (toys, books, etc.) Engages in appropriate play with toys & objects Uses vocabulary either through spoken means, sign language, or through augmentative communication devices to communicate in an increasingly complex form Learns new skills & uses those skills in play (e.g., completing a puzzle or building a fort) Acquires & uses the precursor skills that will allow them to begin to learn reading & mathematics in kindergarten Shows imagination & creativity in play
In different settings consider how the child...	<ul style="list-style-type: none"> Initiates others & learn to tries new things Persists or modifies strategies to achieve a desired end Solves problems & attempt solutions others suggest Use the words/skills he has in everyday settings Understands & responds to directions/requests Displays awareness of the distinction between things Interacts with books, artifacts, print Demonstrates understanding of familiar scripts in play

Which of these activities demonstrates **Outcome 2: Using Knowledge and Skills?**
(click on the appropriate picture)



Maintaining Attention to Speaker Fussing When Diaper Needs to be Changed Uses Gestures & Vocalizations to Protest

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Describing Early Childhood Outcomes

3. Child takes action to meet needs	
Involves	<ul style="list-style-type: none"> Faking care of basic needs Contributing to own health & safety Getting from place to place & using tools
Describe how the child...	<ul style="list-style-type: none"> Moves from place to place to participate in activities, play, & routines Seeks help when necessary to move from place to place Manipulates materials to participate in learning opportunities & be as independent as possible Uses objects (e.g., forks, switches, other devices, etc.) as tools appropriately Uses gestures, sounds, words, signs or other means to communicate wants & needs Makes self-care needs (feeding, dressing, toileting, etc.) Seeks help when necessary to assist with basic care or other needs Follows rules related to health & safety
In different settings consider how the child...	<ul style="list-style-type: none"> Gets from place to place Assists with or engage in dressing, eating, toileting, hygiene tasks Conveys needs & desires & preferences Responds to challenges Responds to delays in getting what he wants Gets what he wants (e.g., toys, food, attention...) Shows awareness of or respond to situations that may be dangerous Announces himself or seeks out something fun

Adapted from Younggren, N. (2014) Measuring Child & Family Results in Early Intervention Workbook. Army Educational and Developmental Intervention Services (EDIS) Comprehensive System of Personnel Development (CSPD). U.S. Army Medical Command (MEDCOM), San Antonio, TX.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Which of these activities demonstrates **Outcome 3: Using Appropriate Action to Meet Needs?**
(click on the appropriate picture)



Feeds Self Waves in Response to Bye-Bye Dropping a Ball & Observing the Fall

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Why not use the domains from our assessment tools instead of the three early childhood outcomes??

We learn how the child accomplishes certain important functions The outcomes are broad and cross all domains

We begin to think about how the child can be active and successful They help us to understand how the child integrates skills and behaviors

We come to understand and appreciate what the child knows and can do

Ushy? Ushy? Ushy?

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional vs. Skills-Based Descriptions of Abilities, Strengths and Needs



When we begin to assess a child's functional skills we get a snapshot of:

- The whole child
- The status of the child's current functioning
- The functioning across settings and situations

Rather than:

- Skill by skill
- In one standardized way
- Split by domains

Adapted from Developing High Quality, F. L. (2014). Developing High-Quality Functional IFSP Outcomes and IFP Goals. Retrieved from The Early Childhood Technical Assistance Center (ECTAC): <http://ectacenter.org/knowledgebase/functional-outcomes-approach/functional-outcomes-approach.html>

10.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

But what do the three outcomes have to do with evaluations or assessments?



Evaluation	Assessment
Eligibility	Intervention
Outcomes	Outcomes
Intervention	Informs Evaluation

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Please click on one of the FUNCTIONAL areas that you noticed during the activity.

Problem-solving abilities	Stacking Blocks
Fine Motor Skills	Independence

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Lesson 2

Present Abilities, Strengths and Needs

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Are there any resources to support me?



Shifting from discrete skills in an evaluation, to functional skills in daily life, and then to put them all into the context of the three Early Childhood Outcomes may be challenging for some folks.

In the next few slides, is one resource that may help. For more information on resources, please see the NM FIT online training on ECO, located on the FIT Training & Resource Portal-

<http://www.cdd.unm.edu/ecln/FIT/index.html>

Early Childhood Outcome Crosswalks



Crosswalks display how content on a given assessment instrument is related to each of the three child outcomes.

Example of IDA-ECO Crosswalk

The Infant Toddler Developmental Assessment (IDA)
Crosswalk to Child Outcomes

Outcome 1: Children have positive social relationships	Outcome 2: Children acquire and use knowledge and skills	Outcome 3: Children take appropriate action to meet needs
<p>Involves:</p> <ul style="list-style-type: none"> Relating with adults Relating to other children <p>Includes:</p> <ul style="list-style-type: none"> Attachment/separation/autonomy <ul style="list-style-type: none"> P1 Looks at adult responds to voice P3 Social smile P3.1 Distinguishes parent P4 & P5 Vocalizes or initiates social response P5.1 Unexpressed or loss of social contact P7 Creates social contact P8 Reacts to strangers P8.2 Clings to familiar adult in distress E12 Begins to show anxiety of separation from parent P11.1 Understands "no" P11.3 Begins to object to separation E12 Begins to show anxiety of separation from parent P16.1 Shows oppositional behavior P16.2 Shows affection or reassurance P17 Uses words to make needs known P19 Helps parents 	<p>Involves:</p> <ul style="list-style-type: none"> Thinking Reasoning Remembering Problem-solving Using symbols and language Understanding physical and social worlds <p>Includes:</p> <ul style="list-style-type: none"> Early concepts – symbols, pictures, numbers, classification, special relationships <ul style="list-style-type: none"> R12 puts one object inside another SM11.1 Recognizes cube into cup L10.2 Recognizes names of 2 objects L14 Names 3 pictures L15.1 Identifies 5 objects or pictures L16.2 Names 5 objects or pictures L17 Identifies 7 pictures L18 Responds to 7 comprehension question L18.2 Tells use of 3 objects L19 Names 10 pictures R19.2 Places items in bin 	<p>Involves:</p> <ul style="list-style-type: none"> Taking care of basic needs Getting from place to place Using tools <p>Includes:</p> <ul style="list-style-type: none"> Integrating motor skills to complete tasks <ul style="list-style-type: none"> C.3.2 Comforts self with thumb or another C.4 Uses toys to amuse self GM9.2 Moves from sit to crawl C.6 Seeks or avoids objects by color C.7 Pushes away an unwanted person or object C.8 Uses locomotion to seek attention C.11 Begins to detour around obstacles C.12.1 Plants or asks for desired object C.13 Tries to do things for self C.17 Tries to defend self Self-help skills (e.g., dressing, feeding, grooming, toileting, household responsibility) <ul style="list-style-type: none"> SH7 Feeds self cookies or crackers SH9 Actively helps in

Consider the following questions as you review the crosswalks:

- What do you notice about the crosswalk?
- Which outcome area(s) have the most items? Which the least?
- To what extent are the items functional vs. discrete skills?
- What types of information would you want to know in each outcome areas that is not included in the assessment? How would you go about gathering that additional information?
- What are the implications for your evaluation and assessment process?
- What are the implications for the need for other data sources?



HOW DOES YOUR CHILD...?		YOUR CHILD'S STRENGTHS	YOUR CHILD'S NEEDS	YOUR CHILD'S DEVELOPMENTAL RANGE OR ASSESSMENT
DEVELOPING POSITIVE SOCIAL-EMOTIONAL SKILLS Gianna's Skills	<p>This involves how the child relates to and communicates with adults and other children. For older children consider how the child follows rules related to groups or interacting with others.</p>	<p>Gianna enjoys interacting with all of her family members, especially her older sisters, and expresses affection with hugs, kisses, smiles, and laughter. She enjoys interacting with the teachers and other children at daycare. Gianna is shy around new people and will take a little while to warm up to them. If given this time, she will usually enjoy interacting with new people.</p>	<p>Gianna does not yet communicate well with words and she will sometimes loudly grab toys away from other children. She will get frustrated when not understood and may throw herself on the floor and cry. Gianna is also not yet using words to request assistance.</p>	<p>18-24 months</p>
	<p>ACQUIRING AND USING KNOWLEDGE AND SKILLS</p>	<p>Gianna walks, runs, and dances, but she falls a lot. She is trying to use a cup and a spoon and she can drink from a straw. She will assist in getting dressed and loves her bath time. Gianna has a few words and will growl, grunt, point, gesture, and pull an adult to communicate her needs. She responds well to music and singing when she is distressed, such as during longer car rides.</p>	<p>Gianna doesn't like a lot of foods - she likes meat but not foods like pudding and yogurt. She also does not like to be dirty/sticky when eating. She will stuff her cheeks and then spit her food out. Gianna tends to take a little while to settle down at bedtime; she may squirm and/or cry and get out of bed. Gianna is not yet using words to communicate her needs.</p>	<p>13-18 months</p>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

HOW DOES YOUR CHILD...?		YOUR CHILD'S STRENGTHS	YOUR CHILD'S NEEDS	YOUR CHILD'S DEVELOPMENTAL RANGE OR ASSESSMENT
Abilities Gianna's Skills	<p>This involves thinking, reasoning, remembering, problem solving, using symbols and language.</p>	<p>Gianna seems to understand most things that are said to her and she can follow simple 1-2 steps directions. Gianna enjoys exploring on her own in familiar places. She is able to play with one toy or activity for several minutes and uses early problem solving skills to achieve greater success as she plays and explores (e.g. - changing grasps to achieve greater success in playing with blocks and toys with several smaller pieces). Gianna loves music and will imitate many of the hand motions to favorite songs such as Wheels on the Bus.</p>	<p>Gianna's lack of spoken words and other methods of communication do not allow her to express everything that she knows or understands about her world. She is not yet consistently imitating words and her vocabulary is very limited. She communicates most often by pointing and/or pulling a person to what she would like. This method of communication is more typical of a younger child and Gianna gets frustrated when she cannot get others to understand her.</p>	<p>13-18 months</p>
	<p>ACQUIRING AND USING KNOWLEDGE AND SKILLS</p>	<p>Gianna walks, runs, and dances, but she falls a lot. She is trying to use a cup and a spoon and she can drink from a straw. She will assist in getting dressed and loves her bath time. Gianna has a few words and will growl, grunt, point, gesture, and pull an adult to communicate her needs. She responds well to music and singing when she is distressed, such as during longer car rides.</p>	<p>Gianna doesn't like a lot of foods - she likes meat but not foods like pudding and yogurt. She also does not like to be dirty/sticky when eating. She will stuff her cheeks and then spit her food out. Gianna tends to take a little while to settle down at bedtime; she may squirm and/or cry and get out of bed. Gianna is not yet using words to communicate her needs.</p>	<p>13-18 months</p>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

HOW DOES YOUR CHILD...?		YOUR CHILD'S STRENGTHS	YOUR CHILD'S NEEDS	YOUR CHILD'S DEVELOPMENTAL RANGE OR ASSESSMENT
Skills & Abilities Gianna's Skills	<p>This involves taking care of and communicating basic needs, getting from place to place and using objects as "tools".</p>	<p>Gianna walks, runs, and dances, but she falls a lot. She is trying to use a cup and a spoon and she can drink from a straw. She will assist in getting dressed and loves her bath time. Gianna has a few words and will growl, grunt, point, gesture, and pull an adult to communicate her needs. She responds well to music and singing when she is distressed, such as during longer car rides.</p>	<p>Gianna doesn't like a lot of foods - she likes meat but not foods like pudding and yogurt. She also does not like to be dirty/sticky when eating. She will stuff her cheeks and then spit her food out. Gianna tends to take a little while to settle down at bedtime; she may squirm and/or cry and get out of bed. Gianna is not yet using words to communicate her needs.</p>	<p>13-18 months</p>
	<p>USING APPROPRIATE ACTION TO MEET NEEDS</p>	<p>Gianna walks, runs, and dances, but she falls a lot. She is trying to use a cup and a spoon and she can drink from a straw. She will assist in getting dressed and loves her bath time. Gianna has a few words and will growl, grunt, point, gesture, and pull an adult to communicate her needs. She responds well to music and singing when she is distressed, such as during longer car rides.</p>	<p>Gianna doesn't like a lot of foods - she likes meat but not foods like pudding and yogurt. She also does not like to be dirty/sticky when eating. She will stuff her cheeks and then spit her food out. Gianna tends to take a little while to settle down at bedtime; she may squirm and/or cry and get out of bed. Gianna is not yet using words to communicate her needs.</p>	<p>13-18 months</p>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Did you know?

The Family Service Coordinator (FSC) can record the information on the Present Abilities, Strengths and Needs page prior to the IFSP meeting.

Although page 5 can be completed prior to the IFSP meeting, it must be reviewed for accuracy at the IFSP meeting and any additional information from the family and team members should be added.



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Early Childhood Outcome Summary Form (ECO form) → **ECOSF?**

When completing the IFSP

- We are looking at this child's strengths and needs based on the three early childhood outcomes.
- We are gathering information to plan for this child to make progress.

When completing the ECOSF

- We are looking at the child's functional skills compared to typically developing children.
- We select a "rating" and we consider if a child has made progress.



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Follow up Activities to Consider to Increase your Knowledge & Skills!



- With one or two families consider using the ECOSF discussion prompts handout during your regular visits with the families. Opening up conversations with families gives us the opportunity to build our relationship and see the child through the parent's eyes
- Review crosswalk tools and other resources to support you in looking at the child's strengths through the three early childhood outcomes

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Describing Early Childhood Outcomes

1. Child has positive social relationships	
Involves	<ul style="list-style-type: none"> • Relating with adults • Relating with other children • Following rules related to groups or interacting with others
Describe how the child...	<ul style="list-style-type: none"> • Demonstrates attachment • Initiates & maintains social interactions • Behaves in a way that allows them to participate in a variety of settings & situations • Demonstrates trust in others • Regulates emotions • Understands & follows social rules • Complies with familiar adult requests • Shares toys & materials with others • Initiates, responds to, & sustains interactions with others • Listens, watches, & follows activities during groups
In different settings consider how the child...	<ul style="list-style-type: none"> • Interacts with & relates to others in day-to-day happenings • Displays, reads & reacts to emotions • Initiates, maintains, & close interactions • Expresses delight or displays affection • Transitions in routines or activities (familiar & new) • Engages in a joint activities/interactions • Shows awareness of contextual rules expectations • Responds to arrivals & departures of other

2. Child acquires and uses knowledge and skills	
Involves	<ul style="list-style-type: none"> • Thinking reasoning problem solving • Understanding symbols • Understanding the physical & social world
Describe how the child...	<ul style="list-style-type: none"> • Displays curiosity & eagerness for learning • Explores their environment • Explores & plays with people & objects (toys, books, etc.) • Engages in appropriate play with toys & objects • Uses vocabulary either through spoken means, sign language, or through augmentative communication devices to communicate in an increasingly complex form • Learns new skills & uses these skills in play (e.g., completing a puzzle or building a fort) • Acquires & uses the precursor skills that will allow them to begin to learn reading & mathematics in kindergarten • Shows imagination & creativity in play
In different settings consider how the child....	<ul style="list-style-type: none"> • Imitates others & learn to tries new things • Persists or modifies strategies to achieve a desired end • Solves problems & attempt solutions others suggest • Use the words/skills he has in everyday settings • Understands & responds to directions/requests • Displays awareness of the distinction between things • Interacts with books, pictures, print • Demonstrates understanding of familiar scripts in play

3. Child takes action to meet needs	
Involves	<ul style="list-style-type: none"> • Taking care of basic needs • Contributing to own health & safety • Getting from place to place & using tools
Describe how the child...	<ul style="list-style-type: none"> • Moves from place to place to participate in activities, play, & routines • Seeks help when necessary to move from place to place • Manipulates materials to participate in learning opportunities & be as Independent as possible • Uses objects (e.g., forks, switches, other devices, etc.) as tools appropriately • Uses gestures, sounds, words, signs or other means to communicate wants & needs • Meets self-care needs (feeding, dressing, toileting, etc.) • Seeks help when necessary to assist with basic care or other needs • Follows rules related to health & safety
In different settings consider how the child....	<ul style="list-style-type: none"> • Gets from place to place • Assists with or engage in dressing, eating, toileting, hygiene tasks • Conveys needs & desires & preferences • Responds to challenges • Responds to delays in getting what he wants • Gets what he wants (e.g., toys, food, attention...) • Shows awareness of or respond to situations that may be dangerous • Amuses himself or seeks out something fun

Adapted from Younggren, N. (2014). Measuring Child & Family Results in Early Intervention Workbook. Army Educational and Developmental Intervention Services (EDIS) Comprehensive System of Personnel Development (CSPD). U.S. Army Medical Command (MEDCOM), San Antonio, TX.

Ask these Reflective Questions to Support the Learner...

- What is your understanding of Early Childhood Outcomes?
 - ◇ NOTE: Do participants understand the reason behind collecting this information?
- How do you introduce this to parents? How comfortable are you in having discussions around outcomes with parents?
 - ◇ NOTE: How does the participant talk about the Three Global Outcomes Statements with families? What is the comfort level of the participant in having discussions around this with parents?
- Are there areas of confusion or discomfort around this for you?

Consider these questions for yourself as a supervisor...

- ◇ What additional information or support do I need so that I can support staff to increase their comfort level with this process?
- ◇ How can I support staff in understanding typical as well as atypical development?
- ◇ Do staff have a clear understanding of how to use this information to guide their practice?

Consider these questions for your program structure/processes...

- What are the formal and informal supports our program can provide to staff around this process?
 - ◇ NOTE: How can we assess our effectiveness in understanding this process?
- How can we ensure that all staff have a basic understanding of child development?
 - ◇ Follow up/Note: Do we need to implement a mechanism for determining the level of child development knowledge for our staff?
- Question
 - ◇ What resources might we need to do this?

Introduction to the ECO “Crosswalks” of Birth-to-Five Assessment Instruments to Early Childhood Outcomes

The “crosswalks” identify relationships between assessment instruments and the three child outcomes on which state Part C and 619 programs must report to the Office of Special Education Programs (OSEP). States must report children’s progress in the outcome areas of:

1. Positive social emotional skills (including positive social relationships)
2. Acquisition and use of knowledge and skills (including early language/communication and early literacy)
3. Use of appropriate behaviors to meet their needs

Understanding the Three Child Outcomes

The three child outcomes reflect a global, overarching goal for all children: to be active and successful participants now and in the future, in a variety of settings. Accomplishments in various dimensions of each outcome area move a child toward that goal, as follows.

Outcome 1: Positive social emotional skills involves relating with adults, relating with other children, and, for older children, following rules related to groups or interacting with others. This outcome includes attachment/separation/autonomy, expressing emotions and feelings, learning rules and expectations, and social interactions and play.

Outcome 2: Acquisition and use of knowledge and skills involves thinking, reasoning, remembering, problem solving, using symbols and language, and understanding physical and social worlds. This outcome includes early concepts (symbols, pictures, numbers, classification, spatial relationships), imitation, object permanence, and language skills.

Outcome 3. Use of appropriate behaviors to meet their needs involves taking care of basic needs, getting from place to place, using tools and, for older children, contributing to their own health and safety. This outcome includes integrating motor skills to complete tasks, self-help skills (dressing, feeding, grooming, toileting, household responsibility), and acting on the world to get what one wants.

The three child outcomes are **functional** in that they reflect a child’s ability to take meaningful action in the context of everyday living. The outcome areas cross developmental domains, emphasizing the integration of skills and behaviors across domains for meaningful action. The presence of an isolated skill or behavior gives limited information about a child’s functioning. The outcomes address whether a child can integrate skills and put them to use across settings and situations. A child’s natural use of pointing to indicate what he needs or wants, for example, reflects functioning better than his ability to point to objects when asked to do so by a tester as part of an assessment.



Assessing the Three Child Outcomes

Assessing children's functioning in the three outcome areas requires multiple sources of information, including observation, family input, and data from one or more assessment tool. Observation and family input provide information about children's functioning across situations and settings. Data from the administration of a commercial assessment tool can be used to compare a child's skills and behaviors to those of his same-age peers. A limitation in the use of currently available assessment tools, however, is that they are not designed for direct measurement of the three outcomes. Most are organized around domains, with items separated into discrete areas of development, such as expressive language, receptive language, cognitive, gross motor, and fine motor. Some call for standardized assessment items to be administered in a setting other than the child's natural environment, making it difficult to use the information to determine whether a child uses this skill in everyday life.

The review of currently available assessment tools has been a primary activity for states as they consider options for measuring child outcomes. A key question is 'how much information will an assessment tool provide about the attainment of the three outcomes?' ECO developed the crosswalks to assist states and programs in making decisions about what instruments might be useful to include in an outcomes measurement system, including reporting to OSEP. The crosswalks indicate how the contents of the assessments maps to the three outcomes. The crosswalks also allow comparisons across instruments to see their various strengths and weaknesses with regard to the three outcomes.

Crosswalking Purposes

The ECO crosswalks display how content on a given assessment instrument is related to each of the three child outcomes. Organized in a table format with assessment areas assigned to each outcome, they provide a visual depiction of coverage. By showing how an assessment tool covers each of the three outcome areas, the crosswalks are meant to help states, programs, and providers see the extent of information available in an outcome area from a given assessment tool. Some of the crosswalks include examples of assessment items to illustrate the types of skills and behaviors the tool targets. In addition to comparing tools, states can use the crosswalks to determine areas in which additional information will need to be collected, such as through observation and family input, to make up for any shortcomings in the data provided by an assessment tool.

The crosswalks are not meant to be used as a "checklist" or "score sheet" for measuring child outcomes. ECO does not recommend the use of isolated items or areas of items from any given tool. We support the use of assessment instruments in the way in which they were designed to be used. In addition, given the functional nature of the outcomes, we support the use of assessment tools in conjunction with other sources of information about a child's functioning, such as observation and family report.

Crosswalks were generated for instruments based on the frequency of informal requests from states. Priority was also given to instruments that states identified for outcomes measurement in the State Performance Plans submitted to the Office of Special Education Programs in 2005. These crosswalks are presented as a service to the field. **The ECO Center does not endorse the use of any specific assessment instrument.** Thus, a completed crosswalk does not constitute the endorsement of an instrument. If a crosswalk of an instrument is not available it is because, given the reality of finite



resources, it has not yet been completed. For more information about crosswalk content or specific instruments, please email a request to staff@the-eco-center.org.

Crosswalking Processes

We use the following guidelines in completing the crosswalks.

Level at which assessment tools are crosswalked. Criterion-referenced or curriculum-based assessment tools are typically crosswalked at the sub-area level, using the developer's headings. As appropriate, examples of items from a sub-area are included to illustrate the aspects of development that relate to the outcome. Norm-referenced tests¹ always are crosswalked at the lowest level that the tool developers recommend valid interpretation of the data and have provided normative information. This is usually at a subscale or sub-domain level,

Assignment of assessment area or sub-area to an outcome. We place areas/sub-areas/items from each assessment tool under the outcome to which they are most closely linked conceptually. For example, items about getting along with peers go with Outcome 1. Decisions are based on content of the area rather than the heading title because headings do not always reflect the range of behaviors and skills included. Particularly in the sub-areas of language and learning, it is difficult to assign items to outcomes when item content lacks specificity. In such cases we assume that the item pertains to a general, overarching acquisition and use of knowledge and skills, and therefore make the assignment to Outcome 2.

Double classification. Although many sub-areas or items can be double classified because of the interrelated nature of development in young children, we try to minimize double classification in order to minimize redundancy. Sub-areas or items that relate to a second outcome area, but not as strongly as they relate to a primary outcome area, are only classified with the primary area. Sub-areas or items are double classified when it is felt that the information contributes equally or nearly equally toward understanding achievement of more than one outcome.

“Precursor skills.” Some items on assessment tools target skills that, while not functional in and of themselves, may lead to functional behaviors. For example, a child's ability to use a pincer grasp may lead to his ability to feed himself or hold a pencil. Precursor skills that are clearly linked to one of the outcomes are placed with that outcome. We assign general or cross-cutting precursor skills to Outcome 2, as part of general acquisition and use of knowledge and skills. We also note in the crosswalks when precursor skills for functional behaviors skills, such as those associated with motor development, may not be appropriate or expected for children with sensory, motor, or other impairments.

Inclusion of every skill in a crosswalk. Not all skills in an assessment tool can be classified. Items/areas are left out that do not contribute to understanding the child's functional abilities in any particular outcome area. The decision not to classify areas such as sleeping, riding a tricycle, or moving to music is not meant to imply that such experiences are not important for young children.

¹ Crosswalks of norm-referenced instruments include a note providing information about the lowest appropriate threshold for crosswalking on that specific instrument.



Status of the Crosswalks

Crosswalks are available on the ECO website in draft form. On each crosswalk, a footnote indicates the date and the status of the draft. For instance, some drafts are preliminary; others have been revised based on input from assessment tool authors or publishers. Please compare the date on any crosswalk you are using to the version on the web site to see if you have the latest version since revisions are frequently posted.

Questions and comments are encouraged and should be sent to staff@the-eco-center.org. Also, please contact us if you are interested in a crosswalk that is not found on our website. Additional information about measuring outcomes can be found on our website at www.the-eco-center.org.



Ask these Reflective Questions to Support the Learner...

- What is your understanding of looking at development across domains vs. looking at development in the context of discrete domains?
 - ◇ NOTE: Is the participant familiar with this concept? Can the participant articulate why this is important?
- How do you support parents in seeing their child's development in functional ways?
 - ◇ NOTE: Can the participant talk about development in the context of daily routines, natural environments, etc.?
- Can you tell me all of the different ways you gather information about the child's development over time?

Consider these questions for yourself as a supervisor...

- ◇ How do I mentor staff around integrating information across domains and settings?
- ◇ Are there opportunities for me to observe staff talking with parents about outcomes?
- ◇ Thinking back, can I remember how I came to understand child development in the context of this process?

Consider these questions for your program structure/processes...

- How well are we utilizing and integrating all aspects of evaluation and ongoing assessment as an agency?
 - ◇ NOTE: Is this information being captured and documented accurately on the IFSP?
- Do we have a way of observing this in home visits?
 - ◇ NOTE: Is ongoing assessment information being utilized to inform our work with families? How do we know?
 - ◇ NOTE: If so, how do we know this? If not, what supports are needed?
- Question
 - ◇ What resources might we need to do this?

Child Outcome Summary Form (COSF) Discussion Prompts

The pages that follow provide a few ideas for some types of questions or prompts that could be used to elicit conversation about a child's functioning with regard to the three global child outcome statements. As teams discuss child functioning in these outcomes areas, they generally draw on many sources of information and ask excellent questions that provide a specific description of what the child generally does with regard to each outcome. However, some teams have looked for further guidance about the kinds of questions that might help them focus on functional skills and span many of the components reflected in each outcome. The list that follows is by no means a comprehensive list of the types of questions or topics that might be discussed. It also is not intended to be used as a checklist necessary for discussion or as a checklist that will always constitute a complete discussion. However, it might provide some ideas to expand team approaches. It also may be helpful if individuals new to the COSF are quickly training other staff in using it and want more information for that purpose. As you begin to use this resource, we encourage you to share comments and additions with us at staff@the-eco-center.org so that we can include and circulate them as well!

The following pages include an abbreviated version of the prompts for each of the Three Early Childhood Outcomes. For the full list that is contained in this handout, please see the downloadable handout in the training modules.

Outcome 1: Child has positive social relationships.

Thinking about relating to adults, relating to other children, and (for those older than 18 months) following rules related to groups or interacting with others.

- △ How does the child relate to his/her parent(s)?
- △ How does the child relate to other relatives or extended family and close family friends (e.g., grandparents, aunts, extended kin, etc.)? Do these interactions with people differ depending on the setting the child is in with these people?
- △ How does the child interact with familiar caregivers (e.g., child care providers, babysitters)?
- △ How does the child relate to strangers? At first? After a while? In different settings and using different approaches?
- △ How does the child interact with/respond to people in community settings (e.g., park, library, church, grocery store, with neighbors on walks, at the bus stop, in restaurants, at playgroups or outings, etc.)?
- △ How does the child interact with/react to peers (e.g., at child care, in the park, in the neighborhood, in brief interactions in stores or at restaurants)?
- △ How does the child relate to his/her siblings, cousins, or kids he/she sees frequently?

Outcome 2: Child acquires and uses knowledge and skills.

Thinking, reasoning, remembering, and problem solving; understanding symbols; and understanding the physical and social worlds.

- △ How does the child use the words and skills she/he has in everyday settings (e.g., at home, at the park, at child care, at the store, with other kids, at child care, in restaurants, with different people)?
- △ Tell me about a time when he/she tried to solve a problem (e.g., overcome an obstacle/problem interfering with something important to him/her). What did he/she do?
- △ What concepts does the child understand? Does the child incorporate these into strategies that he/she uses to accomplish something meaningful? How?
- △ How does the child understand and respond to directions and requests from others?
- △ How does the child imitate others' actions (e.g., peers, adults) across settings to learn or try new things?

Outcome 3: Child takes appropriate action to meet his/her needs.

Taking care of basic needs; getting from place to place and using tools; and (if older than 24 months) contributing to own health and safety.

- △ What does the child do when she/he can't get or doesn't have what she wants?
- △ What does the child do when he/she wants something that is out of reach or hard to get?
- △ What does the child do when he/she is upset or needs comfort?
- △ What does the child do when she/he is hungry?
- △ What does he/she do when he/she is frustrated?
- △ What does the child do when she/he needs help?
- △ How does the child convey his/her needs?
- △ How are the child's actions to seek help or to convey his/her needs different from one setting to another? How do they differ with different people? (e.g., child care vs. home vs. community setting, with parent vs. grandparent, familiar person vs stranger)

Ask these Reflective Questions to Support the Learner...

- How comfortable are you asking these questions?
 - ◇ NOTE: Do participants struggle with this process?
- What do you do if a parent is seeing something you don't see?
 - ◇ NOTE : Does the participant see the parent as the "expert" regarding their own child?
- How do you see this information being useful to you in your work with a family?
 - ◇ NOTE: Is this information utilized and reflected in the IFSP and/or during home visits?

Consider these questions for yourself as a supervisor...

- ◇ What can I offer staff beyond formal training and resources to support their learning around this process?
- ◇ What is my own experience and comfort level with talking to parents about how their child is doing?
- ◇ How do my own current or past experiences with parents impact the way I talk with staff around this process?

Consider these questions for your program structure/processes...

- How can we help staff who are uncomfortable with this process see the importance of it?
- What are the opportunities for skill building with staff in having these conversations with parents?
 - ◇ Follow up/Note : Can we create opportunities through "shadowing", mentoring and role play to support staff in building their skills?
- Question
 - ◇ What resources might we need to do this?





Individualized Family Service Plan

Functional Outcomes and Strategies

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)




Your Family
(Routines Based Interview)

Present Abilities,
Strengths & Needs

Child/Family
Outcomes

Routines Based
Strategies

Supports and Services

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

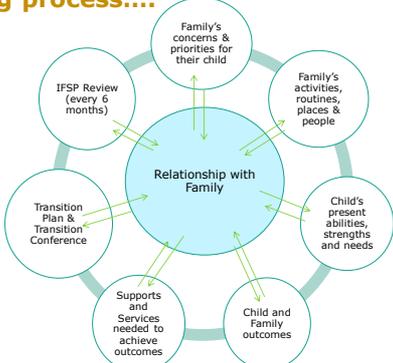
Considerations



- All learning happens in the context of relationships
- The consistent adults in a child's life have the greatest influence on the child's learning and development, not providers.
- What happens between intervention visits is most critical for learning

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Building the Relationship: It is an ongoing process...



The diagram illustrates a central circle labeled "Relationship with Family" connected to several surrounding circles: "Family's concerns & priorities for their child", "Family's activities, routines, places & people", "Child's present abilities, strengths and needs", "Child and Family outcomes", "Supports and Services needed to achieve outcomes", "Transition Plan & Transition Conference", and "IFSP Review (every 6 months)".

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Introduction

Developing routines-based strategies

The focus of this module is to support the IFSP team in understanding and developing functional IFSP outcomes based on the results of the routines based interview, family concerns, priorities, resources, observations and evaluation information.

Then, this module will support providers in moving from the development of functional outcomes into implementation strategies the family will be able to use during their daily routines and activities.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Presentation Goal

Outcomes & Strategies

Embedding strategies into existing family routines

Strategies involve individuals who interact with child regularly

functional vs. skill based outcomes

Routines Based Strategies

Progress and timelines are meaningful to the family

functional measurable outcomes



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Presentation Goal

Outcomes & Strategies

Utilize RBI and PASN information to create outcomes and develop strategies.



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Requirements for IFSP Outcomes

The IFSP must include:

- A statement of the measurable results or measurable outcomes expected to be achieved for the child and family ...
- The criteria, procedures, and timelines used to determine the degree to which progress toward achieving the results or outcomes is being made and whether modifications or revision of the expected results or outcomes or services are necessary

34 CFR §303.344 (c)

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Functional IFSP Outcomes

Definition
Family outcomes that focus on the child's development and use of skills within daily activities and routines.

Child outcomes should be functional and developmentally appropriate for the child, reflect the family's priorities for the child, and build on child and family preferences and interests. Child outcomes are connected to family activities and routines.

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-1099080/ifspoutcomes-1099080.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Characteristics of Functional IFSP Outcomes

Development of IFSP outcomes should be an individualized process, based on the family's concerns, priorities, strengths, and resources as well as the child's current abilities, strengths, and needs.

The outcomes:

- describe something that the family wants to change;
- help the family to meet their goals;
- help the child to function more effectively in his or her natural environment;
- make it clear to the family what success looks like

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Using Information to Develop Outcomes

2. Consider what families are wanting, challenging, disability priorities, abilities and activities participation in everyday routines and learning/development and/or family's needs

Child / Family Outcome

Given what you've shared about your family's daily life, what would you like to see in your daily routines as a result of early intervention supports and services?

For example, "I would like Joey to be able to sit at the table and eat dinner with the family about three times a week."

Outcome # _____

And CME Results

Present Abilities, Strengths, and Needs

Area	Present	Strengths	Needs
Communication			
Motor			
Self-help			
Social Interaction			
Learning			
Health			
Family			
Other			

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

The Role of the Early Intervention Provider



- All EI providers contribute to the development of IFSP Outcomes
- EI providers can be instrumental in supporting parents in developing outcomes that reflect specific areas of the evaluation
- EI providers can offer guidance on developing outcomes based on their own experience, expertise and professional wisdom

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Using Information to Develop Outcomes

1. Start with the family's concerns and priorities about the child's learning/development and/or family's needs

Child / Family Outcome

Given what you've shared about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services?
 For example, "I would like Joey to be able to sit at the table and eat a meal with the family."
 Outcome # _____

Tell us what progress will look like. When would you like to see this happen?
 For example, "By Thanksgiving, we would like Joey to sit at the table for about 20 minutes and eat dinner with the family about three times a week."

Your Family

Everyday routines, activities, habits, and people in your life

What are the people who support you and your child's life? (e.g., family, grandparents, friends, neighbors, community, etc.)

What are the people who support your child's life and what do they do for you? (e.g., family, grandparents, friends, neighbors, community, etc.)

What are the people who support your child's life and what do they do for you? (e.g., family, grandparents, friends, neighbors, community, etc.)

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

Using Information to Develop Outcomes

2. Consider what's working and what's challenging in everyday routines and activities

Child / Family Outcome

Given what you've shared about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services?
 For example, "I would like Joey to be able to sit at the table and eat a meal with the family."
 Outcome # _____

Tell us what progress will look like. When would you like to see this happen?
 For example, "By Thanksgiving, we would like Joey to sit at the table for about 20 minutes and eat dinner with the family about three times a week."

Your Family

Everyday routines, activities, habits, and people in your life

What are the people who support you and your child's life? (e.g., family, grandparents, friends, neighbors, community, etc.)

What are the people who support your child's life and what do they do for you? (e.g., family, grandparents, friends, neighbors, community, etc.)

What are the people who support your child's life and what do they do for you? (e.g., family, grandparents, friends, neighbors, community, etc.)

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

The Routines Based Interview (RBI)

The RBI is:

- a conversation with a parent that helps us to get to know a family;
- helps us understand what a typical day looks like for a child;
- helps a parent to identify what is going well, and where there are challenges.
- Information that is used to help develop outcomes for the IFSP

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

Using information from the RBI to develop functional IFSP outcomes

Through the RBI, providers and parents can determine the routines for which to create functional IFSP outcomes and learning opportunities.

For example, if a child loves her bath time, it may be a natural opportunity to encourage the learning and use of more words, improving balance, reaching for and grasping toys, etc., by developing a functional outcome around this routine.

Such as:

Sarah will talk, sing and use more words, with her sister and mom during bath time.

14.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

Using Information to Develop Outcomes

3. Consider how the child's developmental skills, needs and disability influence the child's learning and participation in everyday routines and activities

Child / Family Outcome

Given what you've shared about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services?
For example, "I would like Joey to be able to sit at the table and eat a meal with the family."

Outcome # _____

←

Present Abilities, Strengths, and Needs

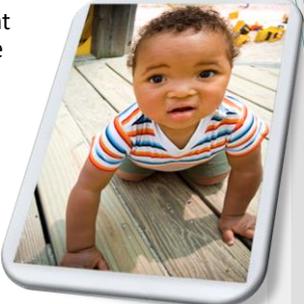
What are your child's current abilities, strengths, and needs? How do these abilities, strengths, and needs influence your child's learning and participation in everyday routines and activities?
For example, "Joey has good gross motor skills and enjoys playing with blocks. He has difficulty sitting still and listening to instructions."

And CME Results

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

Evaluation/Assessment

Information from the evaluation/assessment is used to identify the level of functioning and unique needs of the child in each developmental area across settings



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

RBI and PASN for Gianna

- If you have completed the first 2 modules in the IFSP training, The Routines-Based Interview and Present, Abilities, Strengths and Needs, you will recall that we met a little girl named Gianna and her mother.
- We will be visiting with them again in this module as we discuss outcomes and strategies. Please refer back to what you have learned about Gianna and her family (RBI) as well as her functional abilities (PASN). *Remember to look back!*
- Again, if you have yet taken these modules, you are encouraged to do so before continuing on as the information from the RBI and the Present, Abilities, Strengths, and Needs (PASN) sections are critical to the completion of functional IFSP outcomes.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)





Lesson 2

Individualized Family Service Plan

Functional Outcomes and Strategies

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDDD)

Writing the Outcomes

Functional Outcomes are **NOT**:

- statements of needed services;
- statements of developmental progress;
- skill-based;
- therapy goals or discipline specific;
- specific to only one setting;
- written in jargon specific to professional disciplines



25.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional IFSP Outcomes vs. Skill-based Outcomes

Skill – Based Outcomes are organized around specific developmental tasks or domains, often utilize toys or “special equipment” that a provider brings into the home, written in professional jargon. For example: *Jake will be able to pick up a small pellet with a pincer grasp and release it into a bottle with a narrow opening.*

vs

Functional IFSP Outcomes are necessary and meaningful to families. They reflect the use of family friendly language and involve “real life” activities, family members and familiar places and daily routines. For example: *Kay will be able to feed herself Cheerios by picking them up and putting them in her mouth.*

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional IFSP Outcomes vs. Skill-based Outcomes

Skill – Based Outcomes are organized around specific developmental tasks or domains, often utilize toys or “special equipment” that a provider brings into the home, written in professional jargon. For example: *Jake will be able to pick up a small pellet with a pincer grasp and release it into a bottle with a narrow opening.*

vs

Functional IFSP Outcomes are necessary and functional (meaningful) to families. They reflect the use of family friendly language and involve “real life” activities, family members and familiar places and daily routines. For example: *Kay will be able to feed herself Cheerios by picking them up and putting them in her mouth.*

26.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional IFSP Outcomes are necessary and functional (meaningful) to families.

- Supports participation in community life and family activities
- Based up on what is important to the family



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional IFSP Outcomes vs. Skill-based Outcomes

Skill – Based Outcomes are organized around specific developmental tasks or domains, often utilize toys or “special equipment” that a provider brings into the home, written in professional jargon. For example: *Jake will be able to pick up a small pellet with a pincer grasp and release it into a bottle with a narrow opening.*

vs

Functional IFSP Outcomes are necessary and functional (meaningful) to families. They reflect the use of family friendly language and involve “real life” activities, family members and familiar places and daily routines. For example: *Kay will be able to feed herself Cheerios by picking them up and putting them in her mouth.*

26.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional IFSP Outcomes vs. Skill-based Outcomes

Skill – Based Outcomes are organized around specific developmental tasks or domains, often utilize toys or “special equipment” that a provider brings into the home, written in professional jargon. For example: *Jake will be able to pick up a small pellet with a pincer grasp and release it into a bottle with a narrow opening.*

vs

Functional IFSP Outcomes are necessary and functional (meaningful) to families. They reflect the use of family friendly language and involve “real life” activities, family members and familiar places and daily routines. For example: *Kay will be able to feed herself Cheerios by picking them up and putting them in her mouth.*

26.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Functional IFSP Outcomes Reflect Real-life, Contextualized settings

- Everyday activity settings and routines for the child and family
- Includes typical routines such as meal time
- Also includes routines and activities specific to the family.
- **Test items are not real-life or contextualized**



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Got It?



Functional IFSP Outcomes

Skill Based IFSP Outcomes

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

PROGRESS statement- How will we know we've made progress?



- **When:** Time line, date, meaningful to the family, **when they want to see this change happen**
- **What:** Criteria-describes **what** the change will "look like" or "what will be happening"
- **How:** Procedure-how will the IFSP team know that the criteria is met
- **Who:** Who will report this?

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

The IFSP Form: How to Document Child/Family Outcomes

Child / Family Outcome
<p>Given what you've shared about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services? For example, "I would like Joey to be able to sit at the table and eat a meal with the family." Outcome # 1</p> <p>We would like Nicholas to communicate his wants and needs to us using signs or words, in socially appropriate and safe ways.</p>
<p>Tell us what progress will look like. When would you like to see this happen? For example, "By Thanksgiving, we would like Joey to sit at the table for about 20 minutes and eat dinner with the family about three times a week."</p> <p>By Christmas 2014, parents will report that Nicholas can use 10 or more signs or words to express his wants and needs, such as "hunger," "thirst," "more," "help," or "all done."</p>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Outcome for Gianna

- Frequently parents will offer very little or too much information to formulate an outcome from what their initial statements
- Open-ended question to help the family describe what they want to see, specifically, for their child will assist in the discussion and the development of the outcome with the progress statement
- Here is what Gianna's team came up with based on mom's desires for her daughter...

Child / Family Outcome
<p>Given what you've shared about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services? For example, "I would like Joey to be able to sit at the table and eat a meal with the family." Outcome # 1. We want Gianna to use more words so that we can understand what she needs during dinnertime.</p>
<p>Tell us what progress will look like. When would you like to see this happen? For example, "By Thanksgiving, we would like Joey to sit at the table for about 20 minutes and eat dinner with the family about three times a week." By Grandma and Grandpa's 40th wedding anniversary (November, 2016), we would like Gianna to sit in her highchair during dinner and tell us with words or signs if she wants more food or if she is finished eating and would like to get down.</p>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)





Lesson 3

Individualized Family Service Plan Functional Outcomes and Strategies

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

IFSP Outcomes-Moving to Strategies

Child / Family Outcome
 Describe what you've observed about your family's daily life, what would you like to see happen in your daily routines as a result of early intervention supports and services?
 For example: "I would like Joey to be able to sit at the table and eat a meal with the family about three times a week."
 Outcome # _____

Tell us what progress will look like. When would you like to see this happen?
 For example: "By Thanksgiving, we would like Joey to sit at the table for about 20 minutes and eat dinner with the family about three times a week."

Strategies: Who will do what in which everyday routines, activities and places to meet this outcome? As appropriate, document which IFSP team member(s) will implement each strategy.

1	During daily activities, your family (and/or childcare provider) should continue to:
2	IFSP team members will support your family to use the following ideas and strategies:

Referrals or assessments that would be helpful:

Why Look at Routines?

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

How Children Learn

- Natural learning opportunities
- Every day routines and activities of children and families
- Within family and community life

Dunst, C. J., Bruder, M. B., Trivette, C. M., Raab, M., & McLean, M. (2001). Natural learning opportunities for infants, toddlers, and preschoolers. *Young Exceptional Children*, 4(3), 18-25. (Erratum in *Young Exceptional Children*, 4(4), 25)

Shelden, M. L., & Rush, D. D. (2001). The ten myths about providing early intervention services in natural environments. *Infants & Young Children*, 14(1), 1-13.

Adapted from: *Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package*. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-approach/ifspoutcomes-approach.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Context for Learning: Child Interest and Competence

Dunst, C. J., Hester, S., & Shields, H. (2000). Interest-based natural learning opportunities. *Young Exceptional Children Monograph Series No. 2: Natural Environments and Inclusion*, 37-48.

Adapted from: *Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package*. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-approach/ifspoutcomes-approach.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Interest-based Learning



Children's interests influence:

- Participation in activities
- Level of engagement in activities
- Amount of practice of new skills
- Development of new competencies
- Sense of mastery

Raab, M. (2005). Interest-based child participation in everyday learning activities. CASEinPoint, 1(2). Retrieved from <http://www.fopcase.org/index.php>

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifuoutcomes-iggoals/ifuoutcomes-iggoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Defining Engagement

"...amount of time children spend interacting appropriately with their environment."



McWilliam, R.A. (April, 2010). Enhancing Services in Natural Environments [webinar]. Retrieved from

<http://www.eciacenter.org/~pdfs/calls/2004/partcsettings/mcwilliam.pdf>

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifuoutcomes-iggoals/ifuoutcomes-iggoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Engagement of Children with Disabilities

"Children with disabilities spend more time non-engaged (e.g., wandering around, crying or waiting) than do their typically developing peers."



McWilliam, R.A. (n.d.) Engagement. Siskin Children's Institute.

Retrieved August 2012 from http://www.siskin.org/www/docs/112_181

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifuoutcomes-iggoals/ifuoutcomes-iggoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Practice for Children with Disabilities

- Research on young children with disabilities tells us they need even more practice: **twice as much for 50% delay**, etc.
- They need opportunities to learn – in context (walking on rugs and yards and gravel); instruction, coaching and most of all... **practice!**

Practice Occurs in Everyday Routines

Mahoney, G. (2008). The critical role of practice in the early childhood curriculum. Presentation at South Carolina Early Intervention Conference for Families and Providers.

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifuoutcomes-iggoals/ifuoutcomes-iggoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Mastery



Mastery of functional skills occurs through high-frequency, naturally occurring activities in a variety of settings that are consistent with family and community life.

Shelden, M. L., & Raab, D. D. (2001). The ten myths about providing early intervention services in natural environments. *Infants & Young Children*, 14(1), 1-13.

Dunst, C. J., & Bruder, M. B. (1999). Family and community settings: natural learning environments and children's learning opportunities. *Children's Learning Opportunities Report*, 1(2).

Dunst, C. J., Bruder, M. B., Trivette, C. M., Hamby, D., Raab, M., & McLean, M. (2001). Characteristics and consequences of naturally occurring learning opportunities. *Topics in Early Childhood Special Education*, 21(2), 18-32.

Dunst, C. J., Bruder, M. B., Trivette, C. M., Raab, M., & McLean, M. (2001). Natural learning opportunities for infants, toddlers, and preschoolers. *Young Exceptional Children*, 4(2), 16-24.

Dunst, C. J., Hamby, D., Trivette, C. M., Raab, M., & Bruder, M. B. (2002). Young children's participation in everyday family and community activity. *Disability and Society*, 16(1), 81-95.

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-igpgoals/ifspoutcomes-igpgoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Keys to Development

- Child's opportunities to practice are increased when parents/caregivers/teachers:
 - select everyday activities that are interesting to the child or foster situational learning
 - are responsive to a child's play
- Without adequate practice to master a fundamental skill, a child cannot move to the next developmental level
- ***It takes the time it takes!***

Mahoney, G. (2008). The critical role of practice in the early childhood curriculum. Presentation at South Carolina Early Intervention Conference for Families and Providers.

Raab, M. (2005). Interest-based child participation in everyday learning activities. CASEinPoint, 1(2). Retrieved from <http://www.fippcase.org/index.php>

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-igpgoals/ifspoutcomes-igpgoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Strategies Focus on Successful Participation

What will we do to accomplish the outcome?

- Strategies should strengthen family and caregivers capacity to use multiple routines and activities as learning opportunities
- Successful participation = learning and practice = ***mastery of skills***
- Strategies should also help families and caregivers figure out how to address challenging activities by improving the child's skills, making adaptations so she/he can be more successful

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-igpgoals/ifspoutcomes-igpgoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Parents and Caregivers Influence Learning

- What happens **between intervention visits** is most critical for learning
- The consistent adults in a child's life have the greatest influence on the child's learning and development – **not providers**
- All families/caregivers have **strengths and capabilities that can be used to help their child** develop and learn

Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/ifspoutcomes-igpgoals/ifspoutcomes-igpgoals.asp>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Shifts in the Role of the Early Intervention Provider

Previous Child-Centered Practices	Current Family-Centered Practices
<p>Professional in the primary interactive role with and doing something "to" the child</p> <p>Showing strategies to the families and then asking them to fit them into their daily routines</p> <p>Providing services by pulling a child out of or away from their peers or siblings</p>	<p>identifying activities that family are interested in and engagement</p> <p>Professionals working as collaborative "coach" to support families (from the side) as they help their child</p> <p>Professionals assisting families in identifying routines that will support the desired outcomes</p> <p>Focusing intervention strategies on the caregivers ability to promote the child's participation in naturally occurring, developmentally appropriate activities with peers and siblings</p>

Annotations: A pink circle with a slash through it contains the text "Provider is Expert". A green circle contains the text "Provider is Coach".

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

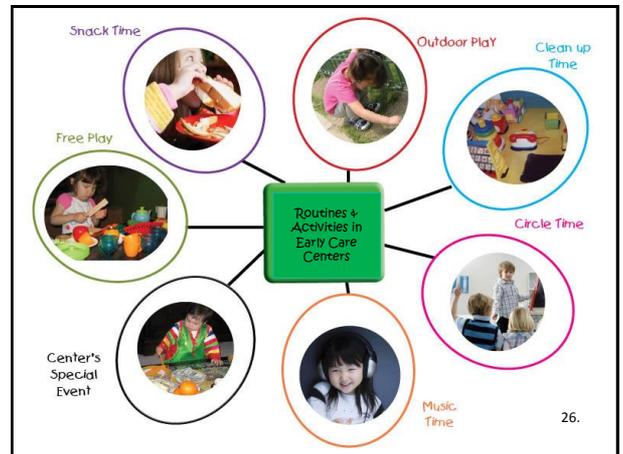
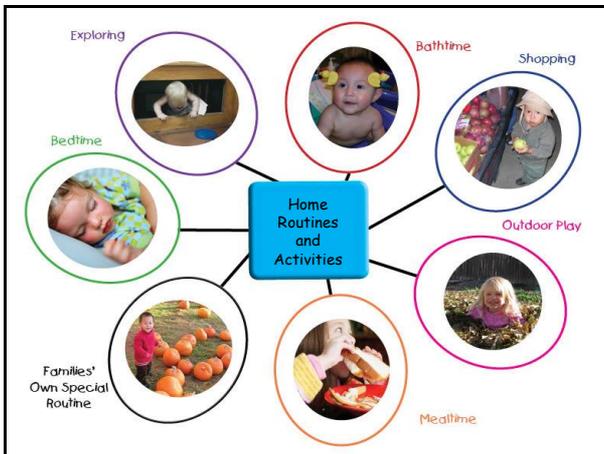
Strategies to Meet Functional IFSP Outcomes

Strategies and objectives specify **who** will do **what** in **which** everyday routines, activities and places.



Adapted from: Developing High Quality, Functional IFSP Outcomes/IEP Goals Training Package. Retrieved from <http://www.nectac.org/knowledgepath/9/outcomes-9goals/9outcomes-9goals.aspx>

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Let's Look at What Functional Strategies are *not*...



- Stating that strategies will be provided
 - E.g. – The DS will provide strategies to the family to encourage more word use for Nicholas.
- Solely describing what the caregivers will do = the professionals do not have a role
- Suggestions without any context of daily routines
- Written in jargon specific to professional disciplines



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Strategy Examples



Not This

- “The DS will work with Victor in front of a mirror to encourage oral-motor imitation”

This

- “During play time, Victor and his brother and sister will play games making silly faces in the mirror (making an “o” with his mouth, doing raspberries, sticking out tongue) so that he can see what he is doing and become more aware of how to imitate with his mouth”



A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)



Another Strategy Example



Not This

- “The SLP will introduce new foods and textures.”

This

- “The SLP will assist mom to identify 3 new foods to attempt at dinner time. Mom will introduce 1 new food and continue with the same food for one week. Mom will introduce the second new food the second week and so on for three weeks and 3 new foods.”

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Child / Family Outcome	
Given what you've shared about your family's daily life, what would you like to see happen?	
Strategies: Who will do what in which everyday routines, activities and places to meet this outcome? As appropriate, document which IFSP team member(s) will implement each strategy.	
1	During daily activities, your family (and/or childcare provider) should continue to: <ul style="list-style-type: none"> • Parents will continue to use signs with Nicholas (e.g. “more,” “help,” “all done”). Parents will also continue to ask Nicholas to communicate what he wants before giving it to him, and give him chances to sign “more” at mealtime.
2	IFSP team members will support your family to use the following ideas and strategies: <ul style="list-style-type: none"> • Speech therapist will show family signs to use with Nicholas, as well as games to use during playtime and bath-time. SLP will teach family how to hold toys near their mouths when they say the name of the toy before giving it to Nicholas • OT will help SLP and family learn how to help Nicholas achieve a quiet state to be able to attend to adults for learning opportunities, social engagement and turn-taking. • Speech therapist will coach family to help Nicholas learn to ask for their attention by tapping their arm or saying, “Ma-ma” or “Da-da” (instead of biting). • DS and Speech Therapist will coach Family to label Nicholas' emotions, e.g. “You seem angry.” Or “You sound frustrated.” To help him identify and express his emotions appropriately.
3	Referrals or assessments that would be helpful: None at this time Information or resources that would be helpful: None at this time
4	Co-visits between ___OT and SLP___ will help us coordinate strategies.

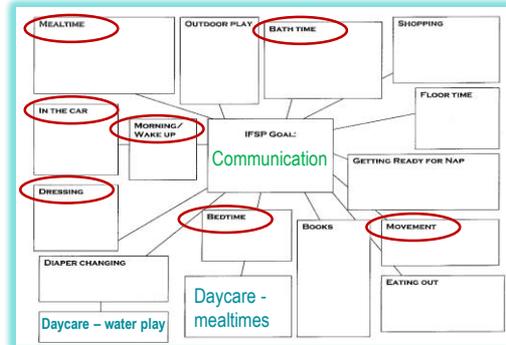
A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Incorporating Strategies into Routines

- Together with parent identify 2-3 existing routines (ex. snack time, diaper changes, book sharing) during which parent will implement agreed upon strategies.
- Strategies should only require that parents make minor modifications during the routine.
- Early Interventionist will provide modeling and gentle coaching to support parents in incorporating strategy.



Identifying Daily Routines and Activities



Strategies Need to be *Discussed* with the Family

Click on the button below to play a short video of this discussion with Gianna's mom (it might take a moment to begin playing)



Worksheet for Developing Functional Strategies

Worksheet for Developing Functional Strategies for IFSP Outcomes

Outcome/Goal		
<p>1. What strengths, resources and supports are already in place? (Consider all of the information from the IFSP and evaluation processes)</p> <p>What strengths (e.g., skills, interests, motivations) does the child already have that will help to achieve the outcome?</p> <p>What supports are already in place (e.g., things the family has tried and been successful with, what is currently working) to help meet this outcome?</p>	<p>2. Are changes needed to make these strengths more effective in progressing toward the outcome goal? (Consider assisting technology and/or modifications as needed)</p> <p>What skills does the child need to work on to achieve this outcome?</p> <p>What skills/supports does the family/caregiver need to work towards this outcome?</p>	<p>3. What possible opportunities exist within existing family/daycare routines or environments for meeting the outcome (e.g., possible learning opportunities or activity-based learning)</p> <p>What is the setting in which the opportunity typically presents itself?</p> <p>How can peers and/or siblings be involved?</p>

Adapted from ECTA Center by URM Center for Development & Disability Early Childhood Learning Network, 2014

Worksheet for Developing Functional Strategies

Worksheet for Developing Functional Strategies for IFSP Outcomes

4. What strategies will help us achieve the changes that we want (considering existing strengths, resources, supports (Column 1), needed changes (Column 2) and learning opportunities in everyday routines/activities (Column 3)?

5. Who can help? What roles can team members or others play? (Consider individual assessments and/or referrals to outside agencies as well)

Click here to download the Strategy Worksheet that Gianna's team completed to support their creation of functional strategies.

Adapted from ECTA Center by URM Center for Development & Disability Early Childhood Learning Network, 2014

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Strategies for Gianna

Child / Family Outcome
Given what you've shared about your family's daily life, what would you like to see happen in your daily routine as a result of early intervention supports and services?

Strategies: Who will do what in which everyday routines, activities and places to meet this outcome? As appropriate, document which IFSP team member(s) will implement each strategy.

1	During daily activities, your family (and/or childcare provider) should continue to: use songs and finger motions with Gianna to encourage her imitation skills with both gestures and words. Since Gianna enjoys doing these activities during bath time, encourage her to respond with either words or a sign to request a particular item (e.g. - ducks, bubbles) or song (e.g. - Old MacDonald, Wheels on the Bus).
2	<p>IFSP team members will support your family to use the following ideas and strategies:</p> <ul style="list-style-type: none"> The Developmental Specialist, mom, and the child care staff will discuss and identify which words would help Gianna move through her day and lessen her frustration. The Developmental Specialist will coach mom, dad, and child care staff in using simple signs combined with spoken words to encourage Gianna to imitate more frequently. The Developmental Specialist and the Speech Therapist will observe Gianna during mealtimes at home and at childcare. They will support the family (mom, dad, and older sisters) and childcare staff to ask Gianna a question, such as "Do you want more milk?", and to pause and wait for a response (words or signs) from Gianna before offering anything to her. The Speech Therapist will support the family and the Developmental Specialist to identify specific words and sounds to target and expand upon during routines and activities. For example, identifying specific sounds (da-da, pa-pa, etc.) that could be incorporated into the imitation games that Gianna likes to play during bath time at home and/or water play at child care. The Developmental Specialist will support mom in identifying additional toys or activities that will interest Gianna while dinner is being prepared so that she can be engaged in an activity and also spend less time in her highchair.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Review

DEVELOPMENT OF FUNCTIONAL OUTCOMES

- differentiate between functional and skill based outcomes
- use what is meaningful to a family to help us develop functional outcomes and measure progress and identify timelines, and
- understand how to write a functional IFSP outcome that can be measured

DEVELOPMENT OF FUNCTIONAL STRATEGIES EMBEDDED IN EVERYDAY ROUTINES

- Understand how to write functional strategies that integrate service into everyday routines, activities and places in order to strengthen and promote a child's competence and development.
- Look at all those individuals who interact regularly with the child to develop strategies that involve not only the parents, but siblings and peers.

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

In Conclusion...

- The IFSP process follows a sequence to help each step build upon the previous step
- Children learn best within the context of relationships
- Functional strategies focus on the child's ability to *participate* in her everyday routines and activities (Routines-Based Early Intervention)
- Strategies emphasize the ways in which the professionals will support the *care givers*; they are NOT focused directly on the child

A University Center for Excellence in Developmental Disability Education, Research and Service (UCEDD)

Routines are the Context

- Intervention occurs between home visits in the context of the child’s routines.
- Intervention is provided by the child’s parents/caregivers.
- Role of the Service Provider is to support the parents/caregivers in implementing agreed upon strategies in selected routines.

Follow up Activities to Consider to Increase your Knowledge & Skills!

Individually or in Small Groups Within the Agency:

- Choose 2-3 children on your caseload and review the information from the initial RBI, initial ECO and CME. Review the outcomes and then use the **IFSP Outcomes Checklist** to determine if all of the components are represented.
- Next, choose one family from your caseload and, based on what you now know about the family and what you have learned about functional strategies, consider how you would rewrite the outcomes and/or strategies to meet the criteria in the **IFSP Outcomes Checklist**. Use the supplemental handout **How Do We Implement Strategies**, to enhance your ideas. **PLEASE NOTE:** You CANNOT change the outcomes/strategies on the actual IFSP without Prior Written Notice (PWN) and approval of the family.

Resources

- Just Being Kids Videos http://www.cde.state.co.us/resultsmatter/rmvideoseries_justbeingkids
- Baby’s First Wish- Parent Newsletter <http://babysfirstwish.aces.nmsu.edu/babys-first-wish.html>
- HELP & AEPS = two examples of curriculum-based ongoing assessment tools
- Routines-Based Early Intervention: Supporting Young Children and Their Families by Robin McWilliam, 2010.

Guidance Card for FSC’s

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 2)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 3)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 4)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 5)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 6)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 7)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 8)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 9)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 10)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 11)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 12)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 13)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 14)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 15)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 16)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 17)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 18)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 19)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 20)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 21)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 22)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 23)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 24)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 25)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 26)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 27)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 28)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 29)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 30)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 31)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 32)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 33)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 34)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 35)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 36)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 37)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 38)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 39)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 40)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 41)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 42)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 43)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 44)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 45)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 46)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 47)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 48)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 49)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 50)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 51)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 52)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 53)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 54)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 55)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 56)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 57)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 58)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 59)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 60)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 61)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 62)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 63)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 64)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 65)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 66)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 67)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 68)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 69)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 70)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 71)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 72)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 73)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 74)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 75)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 76)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 77)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 78)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 79)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 80)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 81)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 82)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 83)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 84)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 85)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 86)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 87)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 88)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 89)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 90)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 91)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 92)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 93)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 94)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 95)

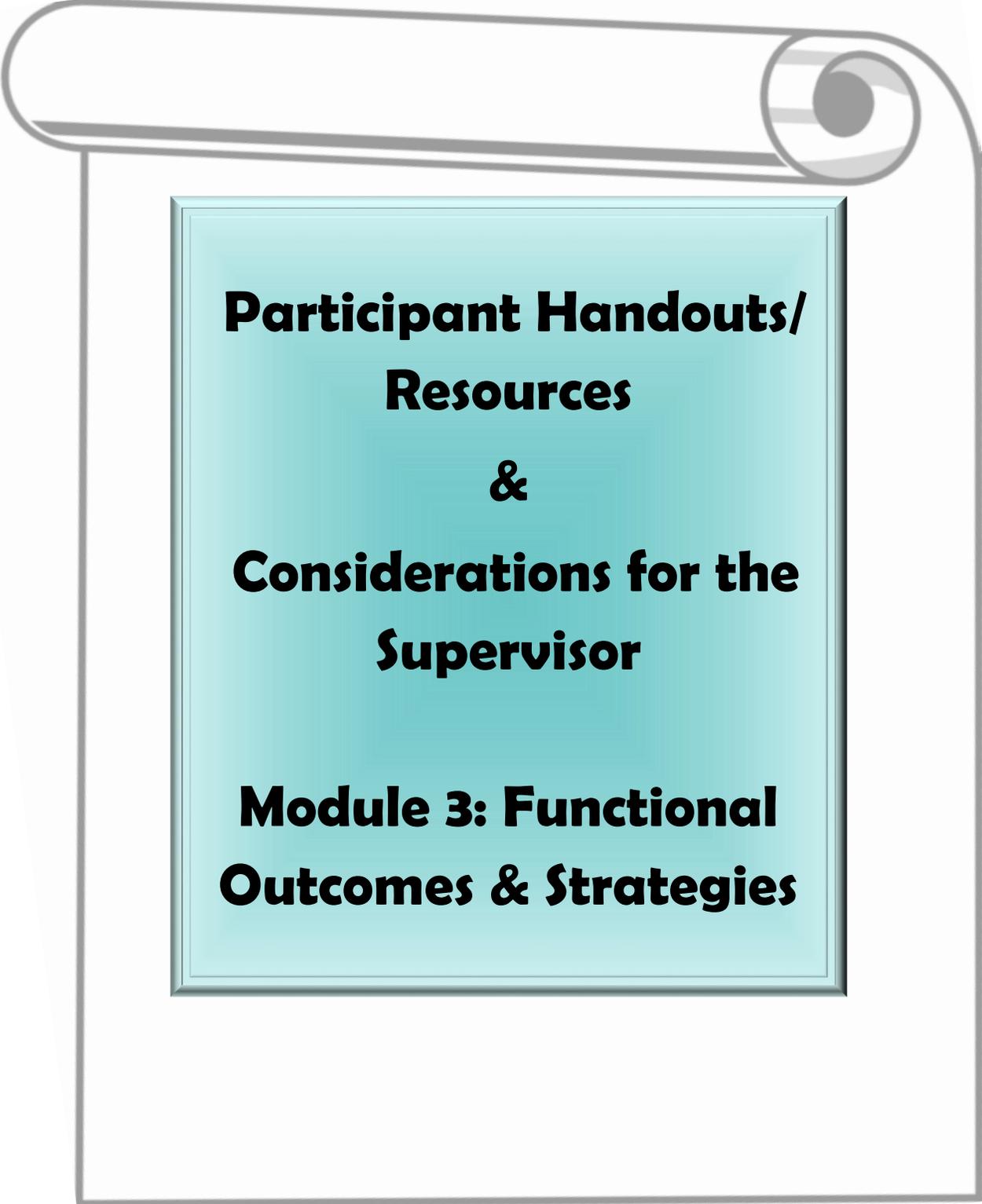
IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 96)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 97)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 98)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 99)

IFSP Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 100)



**Participant Handouts/
Resources**

&

**Considerations for the
Supervisor**

**Module 3: Functional
Outcomes & Strategies**



IFSP Outcomes Checklist

Outcome Statement			
Yes	No	N/A	
			Describes what we want to see for the child/family as a result of early intervention supports and services
			Reflects the family's priorities
			Functional and meaningful to the family
			Written in the family's words as much as possible.
			Written in a way that all team members can understand
			Written as a positive statement of change
Progress Statement			
Yes	No	N/A	
			Observable and measurable
			Describes what progress will look like
			The timeline reflects an event or date that is meaningful to the family
			Indicates who will observe/report progress
			Uses the name of family members, pets, friends or activities as part of the context for measuring progress
Strategy			
Yes	No	N/A	
			Has high Child Interest (fun factor)
			Developmentally appropriate
			Describes the way the service will be delivered using verbs (i.e., consult, provide, assess, design, support, explore)
			Tells us who would will be implementing the strategy
			Takes place within the activities and environment of the child and family (family's typical routines, activities and places)
			Incorporates preschool readiness skills when possible
			Supports peer and/or sibling interactions
			Supports parent/child interactions

Ask these Reflective Questions to Support the Learner...

- How do you use all of the information gathered from the CME & the RBI to develop the IFSP?
 - ◇ NOTE: Does the participant understand how to use the data from the CME to write an effective IFSP?
- How do you ensure that the parent's priorities are reflected in the IFSP outcomes and strategies?
- What if the information in the CME and the parent's priorities differ?
 - ◇ NOTE: Does the participant have an understanding of how to integrate both parent input and information from the CME into the process of developing the IFSP?

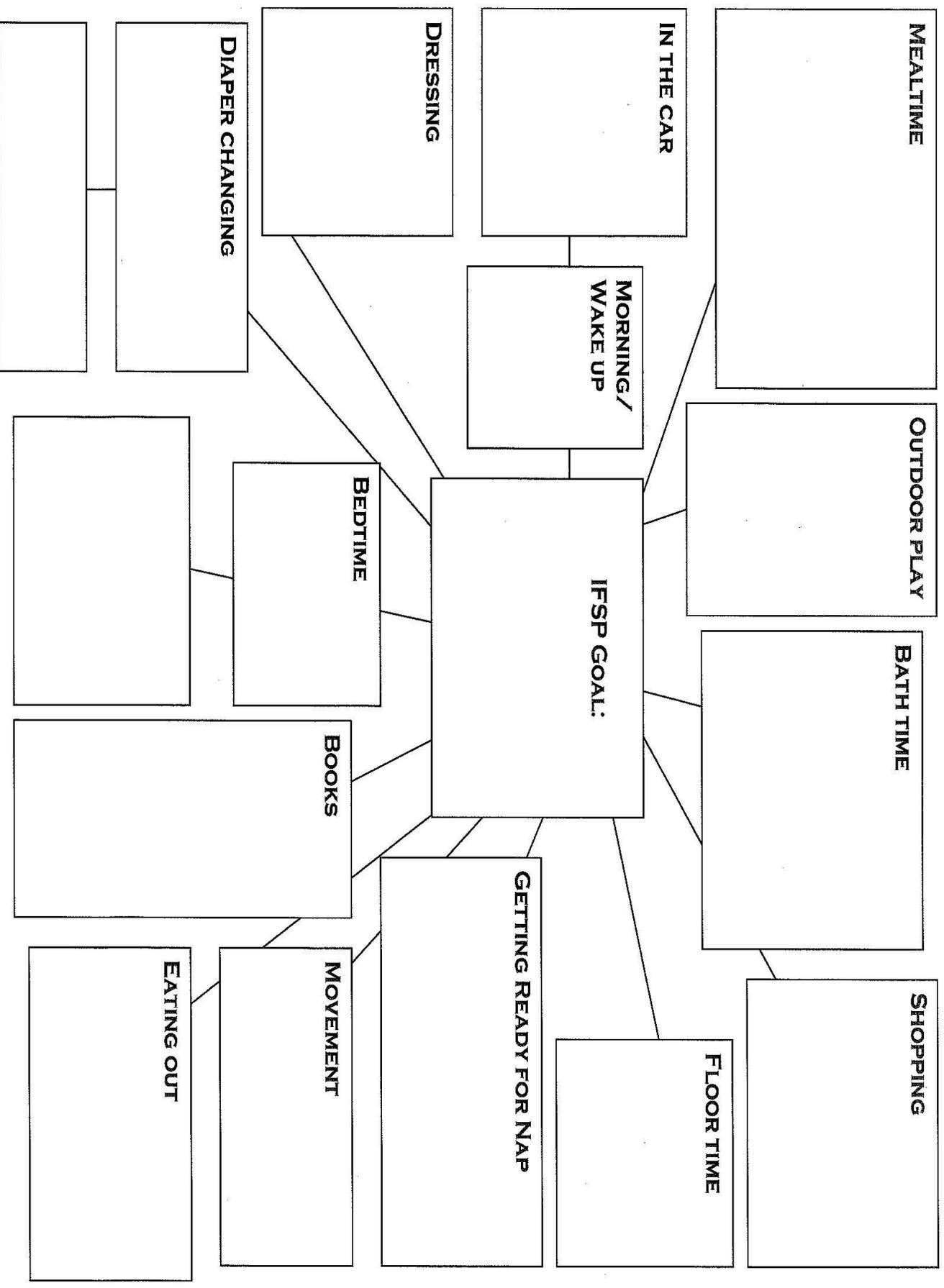
Consider these questions for yourself as a supervisor...

- ◇ What can I share from my own experiences in developing IFSP Outcomes and strategies to support staff in this process?
- ◇ Do I feel comfortable in understanding how to use the IFSP to guide our work with families?
- ◇ What can I do to support staff that struggle with this process?

Consider these questions for your program structure/processes...

- How does our agency monitor the quality of written IFSPs?
 - ◇ NOTE: Do we have a systematic process for reviewing IFSPs periodically?
 - ◇ NOTE: What is the mechanism for providing feedback to staff on the quality of their written IFSPs?
- Do our initial IFSP meetings reflect the process outlined in this module?
 - ◇ How do we know this?
- Question
 - ◇ What resources might we need to do this?

Participant Handout—Outcomes & Strategies Module



Ask these Reflective Questions to Support the Learner...

- How do you incorporate the information the parent shares with you about their daily routines into the IFSP?
 - ◇ NOTE: Does the participant understand the connection between the RBI process and the development of the IFSP?
- How might you talk about routines during an IFSP meeting?
 - NOTE: Does the participant understand how to refer back to the RBI as needed when developing outcomes and strategies during an IFSP meeting - e.g. "I remember you mentioned he has a hard time going to bed".....
- Do you typically struggle developing strategies?
 - ◇ NOTE: How thorough is the RBI information?

Consider these questions for yourself as a supervisor...

- ◇ What do staff need from me to feel more competent in this area?
- ◇ How do I support staff in seeing the value and importance of this?
- ◇ How can I build in opportunities to help staff see the connection between daily routines, development of IFSP outcomes and strategies and how this impacts the work with families?

Consider these questions for your program structure/processes...

- How do we discuss this process as an agency?
 - ◇ NOTE: Is this discussed as part of our TTA process?
- Do we have a system for ensuring that RBI information around daily activities and place is reflected in IFSP outcomes and strategies?
 - ◇ Follow up/Note: If so what does that system look like? If not, how can we implement a system?
- Are there activities beyond training that we can implement program wide to support skill building in this area?
 - ◇ What resources might we need to do this?

Participant Handout—Outcomes & Strategies Module

Worksheet for Developing Functional Strategies for IFSP Outcomes

Outcome/Goal:

<p>1. What strengths, resources and supports are already in place? (<i>Consider all of the information from the RBI and evaluation processes</i>)</p> <p><i>What strengths (e.g., skills, interests, motivators) does the child already have that will help to achieve this outcome?</i></p>	<p>2. Are changes needed to make these strengths more effective in progressing toward the outcome/goal? (<i>Consider assistive technology and/or modifications as needed</i>)</p> <p><i>What skills does the child need to work on to achieve this outcome?</i></p>	<p>3. What possible opportunities exist within existing family/classroom routines or environments for meeting the outcome (e.g., possible learning opportunities or activity-based learning)</p> <p><i>What is the setting in which the opportunity typically presents itself?</i></p>
<p><i>What supports are already in place (e.g., things the family has tried and been successful with, what is currently working) to help meet this outcome?</i></p>	<p><i>What skills/supports does the family/caregiver need to work towards this outcome?</i></p>	<p><i>How can peers and/or siblings be involved?</i></p>

Participant Handout—Outcomes & Strategies Module

Worksheet for Developing Functional Strategies for IFSP Outcomes

<p>4. What strategies will help us achieve the changes that we want (considering existing strengths, resources, supports [Column 1], needs/ changes [Column 2] and learning opportunities in everyday routines/activities [Column 3])?</p>	<p>5. Who can help? What roles can team members or others play? (Consider additional assessments and/or referrals to outside agencies as well)</p>

Ask these Reflective Questions to Support the Learner...

- As a practitioner, what are the most important things you need to consider in developing quality outcomes and strategies?
 - ◇ NOTE: Can the participant identify all of the pieces that need to be considered when developing IFSPs?
- What are the challenges for you in this process?
- What are you still wondering about in terms of writing outcomes and strategies?
 - ◇ NOTE: If a participant needs more support in developing IFSP's, how can you address this?

Consider these questions for yourself as a supervisor...

- ◇ Do I fully understand the components that make up a quality IFSP?
- ◇ If so, how can I ensure that staff are proficient in this area? If not, how can I improve my knowledge and skills in this area?
- ◇ What types of individual support can I offer to staff around this?

Consider these questions for your program structure/processes...

- As an agency, how do we orient new staff on the development of IFSP outcomes and strategies?
 - ◇ NOTE: Beyond initial training, what other supports do we have in place to support new staff in their understanding of this process?
 - ◇ Is this an area for development?
- What ongoing supports do we provide for existing staff to ensure continuous quality improvement around the IFSP process and development?
 - ◇ Is this an area for discussion for the program?
- Are there opportunities for managers to observe IFSP meetings with families, and provide feedback to staff on the process?
 - ◇ What resources might we need to do this?

FIT Program IFSP: Brief Guidance Card for Family Service Coordinators

Initial/Cover Page: *This page captures required demographic information needed for FIT-KIDS.*

1. Make sure to complete all sections.
2. There is added space to list foster parents, biological parents, or social worker.
3. "Physical address" space can be used to write directions or describe where the child will receive services, if other than family home (e.g., grandparents' home or child care).
4. Current Eligibility: Remember, a child may be eligible under more than one category.
5. ICD-9 codes: Only 3 can be entered in FIT-KIDS, but you should document all that apply.

Your Family: *These pages guide conversation with the family and documents their concerns, priorities and resources/supports.*

Page 1: *Note that you can attach an additional page if needed.*

1. If you have already done a routine based interview, this may be a review and summary.
2. If you have not completed the interview, *See Conversation starters below.*

Page 2: *Note: If you feel it is helpful, you can draw an Eco map on another page.*

If parent supports are the same as the child supports, you can write "same as above". However, sometimes the people who support the child do not support the parents.

Conversation Starters to Support Your Family Life

- *How does the day begin?*
- *What are mealtimes, naptimes, and playtime like?*
- *Who does your child spend time with?*
- *Does your child attend daycare/childcare? How often? For how much time?*
- *Are some activities more enjoyable than others?*
- *Are some activities more difficult than others?*
- *Note: If the parent/care provider is having a difficult time identifying activities or routines, ask more specific questions about how the child participates in some of the following: dressing, breakfast, watching TV, preparing meals, household chores, nap or bedtime, bath time, lunch and evening meals, yard work, bedtime stories, travel in the car, going to the park or the store, or just hanging out.*
- *Are there any places that you go (e.g., shopping, doctor's appointments) that occur on a less than regular basis (e.g., once a week, every few days)?*
- *Are there other events or activities that occur fairly regularly or on the weekend (e.g., sport events for siblings)?*

Summary of Health Information:

1. Use as much space as needed to summarize the child's health/medical history.
2. Documentation of Vision and Hearing screening results/recommendations is important. Note: There is a place to add/document follow-up results even at a later time.

Present Abilities, Strengths and Needs: *This documents required evaluation/assessment results and the child's strengths and needs in terms of the child's functional skills using the Early Child Outcomes (ECO) format. See the ECO guidance document for more specific questions and guidance. Although the information from this section can be used as measurement during the ECO process, the rating of each Early Childhood Outcome is not done on this page.*

1. Top paragraph: Gives a brief explanation for the family and team.
2. Columns on the left: The three (3) Early Childhood Outcomes with a brief description.
3. Middle two columns: Document the most important strengths and needs based on the evaluation/assessment results and discussion with the parents and team.
4. Column on the right: Document the age ranges/levels from the CME or Annual redetermination of eligibility.

Child/Family Outcome: Summarize areas the family described as challenging in their daily routines and areas of concern from the evaluation to assist the family in identifying possible outcomes.

Conversation Starters to Support Child/Family Outcomes Page

Outcome:

- *What would you like to do or feel you could do more easily if you had help or more information*
- *What would you like your child to be able to do that would make life easier for you or more fun for your child (at home or in the community)?*

FIT Program IFSP: Brief Guidance Card for Family Service Coordinators (Page 2)

- *If you could change one activity or routine tomorrow that would make your day go smoother related to your child, what would it be?*
- *Examples: "I would like Joey to be able to sit at the table and eat a meal with the family." "Sarah to use more words to tell us what she wants."*

Progress:

- *How will you know that your child/family has made progress toward this outcome?*
- *What will your child be doing? What will you be doing?*
- *By when do you want this to happen? Think about special occasions or life events that are meaningful for your family.*
- *Examples:*
"By Thanksgiving, Joey will be able to sit at the table and eat a meal with our family without tantrums and we will all enjoy ourselves"
"By the beginning of summer, Sarah will say more words and be able to ask for the food, drinks and toys that she wants."

Strategies: Remember that strategies should be embedded in the activities that the child and/or family are already doing during their daily activities and/or routines

- *Describe the way the service will be delivered using verbs (i.e., consult, provide, assess, design, support, explore).*
- *Which team members will be implementing each strategy?*
- *Where/when will it take place? During which routines/activities and places?*
- *How will the team support the child during peer and/or sibling interactions?*
- *How will the team support parent/child interaction?*

Transition Plan: *At the top are the key dates in the process based on the child's 3rd birthday. Make sure to write in all "key dates" and all projected dates (this is a "plan").*

Supports and Services: Remember: A Prior Written Notice (PWN) is still required.

1. Amendments: Use this to add, modify or end a service while the IFSP is in effect.
2. Non-FIT services: These are listed separately in the section below the FIT services table.
3. Natural Environments: Required when services are provided in a non-typical setting.

Try to write / type the full service name or abbreviate so the family will understand the services they will receive.

Service Codes	Setting Codes	Funding Source Codes
AT = Assistive Technology	H = Home (may include some services outside of the home)	M = Medicaid (fee-for-service)
Aud = Audiology		
DI = Developmental Instruction	CBS = Community Based Setting (child care, Early Head Start, park, pool, etc.)	DOH = Dept. of Health (State General Funds)
FSC = Family Service Coordination		
FTC&T = Family Therapy, Counseling & Training	DDP = Center based Developmental Delay Program (< 50% typically developing children)	O = Other (SALUD, WIC; Head Start; CYFD; Optum Health)
HS = Health Service (to support EI services)		
MS = Medical Services (to support EI services)	IPL = Center based Inclusive Provider Location (> 51% typically developing children)	
Nur = Nursing Services		
Nut = Nutrition Services	OS = Other Setting in the community (Hospital, clinic etc.)	
OT = Occupational Therapy		
PT = Physical Therapy		
Psy = Psychological Services		
SLCL = Sign Language & Cued Language		
SW = Social Work Services		
SLP = Speech Language Pathology		
Trans = Transportation (to receive EI services)		
VS = Vision Services		

Signature Page: *Obtain all required signatures and dates. Make sure that family checks all pertinent boxes, signs and dates this page.*

Periodic Review: *Document each time the IFSP is reviewed and check the "type" of review in the appropriate box*

Note: *If a 6 month review was delayed, write in the reason for delay.*

**Please contact your ECN Training and Development
Consultant and/or your FIT Provider Manager
for more assistance in supporting staff/contractors in
developing high quality IFSPs.**