

SST Progress Notes

After learning about an SST visit it might feel like there's not enough time to document completely or to include all these requirements in every note you write. Since none of the requirements can be ignored, below you will find suggestions on how to include the requirements.

Requirements - Many of the requirements can be pre-printed on the form, or filled in prior to your visit. This includes the date and place of service, the method, child's name, and the ECI program name. The IFSP outcome you will be working on is included, but does not have to be exact – an accurate abbreviation will work.

Caregiver Engagement - Engagement of the parent or caregiver is the most important component of an SST session and should be documented as such. Parent training and instruction is what sets ECI apart from other providers. The definition of SST specifically includes training and guidance of caregivers, so without good documentation of this component, SST is incomplete. There are several things to consider as we document our work with parents:

- Parent/Caregiver as the learner - The primary learner during an ECI visit is the parent/caregiver, and this should be reflected in your progress note with focus on coaching. What did you coach, teach or demonstrate? What feedback did you provide? What questions did you answer? Was return demonstration successful? What are the next steps for follow-up?
- Service delivery triad – The focus of each SST session is on strategies the caregiver can use to interact with the child to support the child's development and achievement of outcomes. The EIS works not with the child, but with the child and caregiver together.
- Materials in the home – Critical to the success of ECI services is the caregiver's ability to implement intervention strategies when you are not there. The interventions you demonstrate should incorporate materials that exist in their home or community. How did you assist the family in using the objects, materials and toys which they have ready access to, either in their home or in the community?

- Familiar routines for every day learning – Because the caregiver will implement the strategies you are teaching in the child’s daily life, document how you discussed applicable routines with the parent.

Child responses and progress - The engagement of the caregiver is how we ensure maximum learning and development for children enrolled in ECI. Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts. The enrolled child is the target of intervention, and so we must also document the child’s responses and progress. This means documenting:

- the child’s response to the strategies and techniques being used (*not* the child’s response to you as a provider);
- your expert observations of any progress, or lack of progress, toward the stated outcome;
- parent reports about how the child has been responding to the intervention in daily routines and activities (when you are not there); and
- how you adjust strategies and techniques based on the child’s response and progress or lack of progress.

Delivery of a skilled, professional service - Early intervention providers understand play is the work of children, and play can be a therapeutic activity for a child. Your documentation needs to reflect this understanding by describing:

- the purpose, as related to the stated outcome, of play activities;
- how you applied your professional knowledge, expertise and skill; and
- what you did during the session.

Since every reader of the child’s record is not an early intervention provider, the responsibility falls on you to effectively communicate with your application of skilled professional knowledge and expertise in early childhood development. Words like, “observed,” and “encouraged,” have little meaning unless you provide a description of how your observations and encouragement relate to the child’s outcomes. The following list is a collection of examples to help illustrate skilled activities and giving that feedback.

Skilled activities

- Continuously assessing the child’s and parent/caregiver’s growth
- Providing objective data to show progress such as accuracy, speed, frequency, and independence
- Adjusting strategies to help the child and family achieve outcomes

- Providing rationale for how the activity relates to the outcome
- Using expertise in child development and behavior to increase the child's motivation and success
- Sharing expertise in child development and behavior with parent/caregiver to increase the parent/caregiver's motivation and success

SST documentation should contain the following five components:

1. Coaching and instructions to the family or caregiver,
2. Attention to how activities apply to child and family routines,
3. Modeling intervention techniques within everyday learning opportunities,
4. Evidence of a skilled professional service, and
5. The child's response and progress.

The following sample of an SST progress note demonstrates how these five components can come together in a single progress note. You can see this note contains the required components but is still fairly short. The documentation clearly shows the EIS is always thinking about, and helping the parent understand, the purposes of the activities.

In the progress note, look for and identify the five components.

SST Session – Progress Note

Date

5/30/13

Name

Ryan

Current Status; Changes since last visit

Phyllis worked on increasing attention span with books, but he's uninterested. Sister tried rolling car – he picks up, spins wheels won't give it back. Hasn't said "mama" but makes "aa-aa-aa" noises to get attention, instead of grabbing or screaming. Screaming still main way of getting attention.

IFSP Outcomes worked on

Turn-taking; increase attention span and joint attention; say "Mama" to get Mom's (Phyllis) attention.

Activities with caregiver to address outcomes

Phyllis borrowed library books with the word "mama" like SLP recommended. She read to Ryan. I showed how to draw attention back to a picture with exaggerated/ excited speech and using gestures and movements. Suggested books with interactivity, like flaps or tabs, to help hold attention. She practiced with lift the flap book and he attended for about a minute.

Tried ball instead of a car for turn-taking. Demonstrated hand-over-hand assistance to roll the ball back for turn-taking. We switched places and she used the hand-over-hand technique. Also demonstrated taking turns dropping the ball into a laundry basket. Will practice reciprocal ball play in the afternoon with sister.

I reminded Mom saying "aa-aa-aa" can be interpreted as purposeful communication. When he makes the sound, she can say, "You want mama? Here I am" and give him some attention. Reminded Mom ignoring screaming and rewarding purposeful sounds will reinforce appropriate sound development.

Suggested 1) move most toys into closet to decrease distractions 2) move other toys to shelf out of reach to stimulate request with sounds or gestures. Discussed not using cars as a reward, but instead can use physical play he enjoys, like bouncing on knee facing her.

Reminders, things to practice until our next visit

Continue with book techniques practiced today. Rearrange toys as discussed. Ball play with sister in afternoons.

Activity on Notes:

There is no required format for service documentation and the ECI contractor may use any format that works best for their staff. Below are a couple of examples of SST progress notes. Review them and see if you can identify if there's room for improvement.

This activity will help you become more skilled in documentation by providing practice with both reviewing and revising progress notes. The following are real-life progress notes (names have been changed). Identify the skilled activities by answering these questions. Does the note:

- address an identified need and outcome?
- follow the adult learner and service delivery triad?
- provide documentation that the service provider is using daily routines and materials in the home?
- provide documentation of the child's response to intervention?
- Is the application of professional knowledge clear?

Then try your hand at improving the progress note.

Note #1

Toby was seen today at home with mom and brother for scheduled SST session. Toby is doing very well. Mom reports Toby is trying harder to say what he wants. In the session I heard him say: baby, hi, puppy. Mom encourages him to repeat sounds and single words. While playing we worked on:

- Imitation of sounds, movements, single words, and simple phrases
- Encourage her to repeat what we would do
- Looked at books and pointing to and naming pictures
- Finger plays and Toby would try to do movements

Toby did great! Toby had a good session.

Now You Try:

Areas of improvement for Note #1 include:

Addresses an identified need and outcome? There is no indication of the intent of this session. There is no identified need for this service session.

Adult learner and service delivery triad? There is no evidence of the EIS coaching or modeling. "Mom encourages him" does not convey whether or not the mother is using the techniques demonstrated to her. We do not know if the techniques used by the mother were effective or if they need to be modified.

Daily routines and materials in home? While the note mentions things that probably existed in the home (books, finger puppets) there is no indication strategies are being incorporated into daily routines. While the brother is

mentioned as being in attendance, there is no indication the brother was involved in the session.

Child response to intervention? Comments the child did well or had a good session do not convey any information. The note indicates words Toby said but there is no indication if they spontaneously occurred or were the direct responses to the strategies being used.

Application of professional knowledge? We do not know what techniques the EIS demonstrated to facilitate Toby's imitation of sounds, movements, single words, and simple phrases. The EIS did not provide techniques that will encourage Toby to describe what his mom or brother are doing. We did not know who did the looking, pointing, and naming. We do not know the intent of looking at books and pointing to and naming pictures. Similarly we do not know what was done with "finger plays" nor why this will help Toby's development.

Possible improvement:

Today's session included Toby, Milee (mom), and Toby's older brother. Goal – saying words in response to cue. Milee reported they use drive time to practice words. Brother holds up object, brother and mom state the word, 3 times, then complete it if Toby doesn't. Milee says Toby always gives it a real good try – at the very least saying the starting sound. Milee, brother, and Toby demonstrated. I recommended adding movement to facilitate learning. Since Milee will be driving, this task falls to big brother (he was thrilled). We practiced - brother selected the item and the movement – rocking left right, bouncing in seat, etc. Lots of laughter. Toby tried every time. He completed the words, "puppy" and "baby." Much applause and hug from brother. I asked how running narrative technique was going. Milee indicated she felt odd telling a two year old how to make meatloaf. Reminded Milee speech depended upon hearing and seeing others speak. Much discussion. Milee agreed to try bath time, telling Toby how to bathe, to see if that felt more natural.

Note #2

Changes since last visit:

Grandmother reports he is starting to take 1-2 steps on his own now.

Worked toward IFSP outcome(s) of:

To eat table foods.

Today's activities/observations and parent/caregiver participation:

Today Trevor participated in meal time. Observed Trevor kept calling out "mama" and attempted to imitate some words "papa." Discussed using signs to meal time to help Trevor communicate "papa, more, drink, and finished." Trevor began to wave when he heard EIS say "bye bye" as she took turns having a conversation in his language. Trevor practiced bringing spoon to his mouth on his own. Discussed always giving him a spoon at meal times to continue practice bringing spoon to his mouth.

Child's progress and recommended activities:

Use signs to help Trevor communicate what he wants (more, food, drink, and finished)

Give him an extra spoon while feeding him to practice bringing his spoon to his mouth.

Name food items as you offer choices for Trevor to pick and recognize by name.

Now You Try:

Areas of Improvement for Note #2 include:

Addresses an identified need and outcome? No. It is not clear how saying or signing words, waving goodbye, or using a spoon addresses the goal of eating table foods.

Adult learner and service delivery triad? There are two documented recommendations (use sign and give Trevor a spoon). There is no indication of modeling, coaching, or instruction.

Daily routines and materials in home? Yes, routine of eating.

Child response to intervention? We have observations of Trevor's behaviors but they are not connected to an intervention.

Application of professional knowledge? No. The outcome itself, as stated, is a poor match for SST. Review of the IFSP and needs assessment indicates Lela (mother) would like Trevor to "eat finger food solid food." There is no indication

of a behavioral issue related to eating. Other outcomes include “identifying common things.”

Possible improvement:

Changes since last visit:

Grandmother (Dulcea) reports interventions are working – he is starting to take 1-2 steps on his own now.

Worked toward IFSP outcome(s) of:

Self-feeding finger foods. Identify common items.

Today’s activities/observations and parent/caregiver participation:

Arrived at meal time. Dulcea offered pieces of toast, carrots, and fish sticks. Trevor ignored/refused and stared at jar of baby food (carrots) on table. Recommended hiding jar behind napkins and use as reward for finger feeding. Demonstrated. Dulcea picked up quickly – one prompt to not come in too quickly with reward (too much in mouth). Also good time to identify food items. Service Provider coached: Ask Trevor which finger food he wants, name food when offered, name food accepted. Trevor did not name food but repeatedly said “mama” and perhaps “papa.” After meal, service provider coached use of pictures to connect spontaneous speech to correct items. Dulcea implemented w/o assistance. No evidence of effectiveness – will tell over time.

Child’s progress and recommended activities:

1. Hiding baby food jar makes finger food more desirable.
2. Using jarred food as reward encourages him to eat finger food.
3. Naming items when offered and accepted helps Trevor to identify items.
4. Asking Trevor what he wants to eat encourages him to say what he wants.

Routine Checks?

As indicated earlier in this chapter, there are a number of oversight entities who may review your documentation. To address this routinely double check your documentation to make sure your documentation is clear and adequate. The following is a list of things you should be checking.

1. Service is on the IFSP.
2. The note is legible to the reader.
3. All required documentation elements are present.
4. Signature includes the credential of EIS.

5. IFSP outcome is referenced and content of note addresses the identified outcome.
6. Content of note addresses coaching, training, modeling, and instructing of caregiver.
7. Content of note indicates application of provider's professional expertise in early childhood intervention.
8. Language used is understandable to the layperson (if technical language is used, a non-jargon explanation is included).

Using the information in this section of the workbook, create a checklist to use on your progress notes. Reviewing documentation you've already completed will help you identify areas needing improvement. You may want to get together with your supervisor and see if your supervisor has identified areas you may want to strengthen in your documentation. Tailoring your checklist to address areas for your professional development will create a more valuable tool to you.

For example, if your strength is at describing the instruction provided to the caregiver but sometimes you forget to ask the caregiver how they did with the strategies when you weren't there, you'll probably want to be sure to include something like, "Content includes caregiver report on using strategies" on your checklist. Another example would be, "Content includes needs" to help remind you to address the child's strengths and needs.

Activity

After reviewing this information what components must be in a progress note? How will you ensure this will be done in the progress notes written?