



Objectives

- Review Initial IFSP form
 - New requirements
 - Frequent errors/findings from QA and Monitoring
- Review Periodic Review IFSP form
 - New requirements
 - Frequent errors/findings from QA and Monitoring

Poll – Does the
Initial IFSP have to
be conducted
Face to Face?



Poll – Who must
participate in
the Initial IFSP?



IFSP Form and Requirements

- Team Members - Initial
 - Parent
 - Service Coordinator
 - LPHA
 - One person from the evaluation team
 - Others the parents want to invite

Frequent Findings - Initial IFSP

- Measurable Outcomes Resources
 - MIW IFSP Section 6.3 "[Writing Functional Outcomes](#)"
 - [Extra guidance SMART Outcomes practice](#)
 - [ECTA IFSP Training](#)
 - [Handout](#)
 - [Case Story](#)

Making it Work

- Slides are unlocked
- Index of topics



Initial – Frequent Findings/Errors

Description of the child

- A picture of the family's routines and the child's developmental skills within the routines
- Gross motor is not always covered

How does the child play?

- Description includes what the child likes to play with, but not how he plays

You can modify the questions

- Young Infants

Example – Gross Motor

Bathing, dressing, diapering and toileting						
	X	X	How does your child help with dressing? (communication, adaptive/self-help and motor)			
When Mom asks him to get a diaper, Eli will walk over to the diaper stacker, pick out a diaper and bring it back to her.						
Eli holds his arms up to help while Mom is putting on his shirt. If Mom holds his pants, Eli will pick up one leg at a time and step into the leg holes. He does hold onto Mom for support while doing this. He is also able to pull his pants up when prompted (if they have an elastic waist) once he has his pants on.						
Eli loves bathtime. When Mom says, "time for bath", he will run to the bath room. He will pull his pants down when prompted, but needs help taking off his shirt. He will hold his arms up to help when Mom is taking off his shirt. Eli can climb into the tub by himself. He points at the toys he wants in the tub with him and signs "more" when he wants more toys. He does not tell Mom verbally what toys he wants. He splashes and makes noises while in the tub. He sometimes attempts to sing "row, row, row your boat" with Mom.						

Example - Play

Playtime and other daily activities						
X	X	X	How does your child play? What does he/she like to play with? Are there times that are easier or more frustrating than others? (cognitive, communication, motor and social-emotional)			
Joshie loves to play with trains. He rolls them across the floor. He line them up side by side and one behind the other. He also rolls them on the track. Joshie will sometimes make the trains crash into each other or into the wall. Once Joshie is involved with his trains, he does not like to move to a different toy. It is difficult for him to share his trains with his cousin. He usually gathers them up in his lap and screams if his counsin tries to take one. Joshie also likes to stack his legos. He doesn't pretend that his legos are something else (cars or trains, etc.). He stacks them into tall towers. If the tower falls over, Joshie gets very upset and starts throwing the legos.						

Initial- Frequent Findings/Errors

Describe the parent's resources available to meet all developmental concerns and priorities identified.

- Parent's resources available to meet **developmental** concerns and priorities identified.
- Does not take the place of the **case management** concerns and priorities on the next page.
- This is where additional therapy should be documented

Example – Parent Resources

Describe the parent's resources available to meet all developmental concerns and priorities identified.

Samantha has an opportunity to be around typically developing peers when she attends Gymboree on Saturdays. Samantha has access to numerous developmental toys and books at home. Samantha and her mom like visiting the library and attending storytime. They usually go at least twice a month.

Example – Parent's Resources

Describe the parent's resources available to meet all developmental concerns and priorities identified.

Austin receives physical therapy twice a week from Little Tesoros. This therapy is arranged and paid for by his family. It is in addition to the services recommended by the ECI team. Austin has access to numerous developmental toys and books at home. He has opportunities to play with other children his age at the neighborhood park and at his Mother's Day Out program. Austin attends the Mother's Day Out program on Tuesday and Thursday mornings.

Example – Parent's Resources

Describe the parent's resources available to meet all developmental concerns and priorities identified.

- Family dog is a great motivator to encourage Lindsay to move around the house
- Lindsay has opportunities to be around other children her age at her aunt's house (cousin and other children – Aunt has an in-home daycare)
 - Library is an option for books
- Mom likes going to garage sales - need ideas for developmental toys

IFSP Procedures

Procedures describe:

- How the family and staff will work together to achieve the outcome.
- Methods for coaching and teaching.
- Continual assessment of change.

Procedures are NOT:

- Detailed instructions about how to achieve the outcome.
- Independent of meaningful family activities and routines.

DARS-ECI, FY

Procedure Example

Outcome: I want Robert to be able to sit up by himself, especially in his highchair and in the cart at the grocery store, before the end of the school year. (June, 2011).

- An ECI team member will meet you at the grocery store and will come to your home during lunch time to try out different ideas.
- We will show you ways to place him in different seats, and will show you exercises you can do when you change his diaper that can help make him stronger.
- Your ECI team will ask you often how the ideas are working for you and about other activities you want to work on that involve Robert sitting up, and they will ask you how you feel about his progress.

DARS-ECI, FY

Services Page – Routine Caregiver

- [New requirement - Rule 108.1016](#)
- Routine caregiver's name (or entity's name) must be documented in IFSP if services will be provided in the absence of the parent
- Justification of how the child will benefit
- Obtain written parental consent before releasing personally identifiable information to the routine caregiver
- Obtain written authorization



Example of justification

Child's name: Thomas Clark

Client ID: 123548

If services will not be provided in the presence of the parent, list the name(s) of individual(s) and/or entities who will participate:

Melinda Brown

Justification of how the child will benefit from delivering the specified services with the routine caregiver:

Melinda cares for Thomas 45 hours during the week. Because Thomas spends so much time with her and participates in many daily routines with Melinda, it is important she understand his IFSP outcomes and the procedures to help him achieve these outcomes. The service providers will teach her about the recommended strategies and support her as she practices them with Thomas.

Another Example - Entity

Child's name: Kay Everdeen	Client ID: 123548
If services will not be provided in the presence of the parent, list the name(s) of individual(s) and/or entities who will participate: Capitol Preschool	
Justification of how the child will benefit from delivering the specified services with the routine caregiver: Kay attends preschool Monday - Friday from breakfast through early evening. Kay will make faster progress if the teachers at Capitol Preschool have direct instruction and support for helping integrate strategies into her daily classroom and "daily living" (eating, toileting, teeth brushing, handwashing, etc.) routines.	

Authorization Language

<ul style="list-style-type: none"> I participated in the development of this IFSP, and I give informed consent for the DARS Early Childhood Intervention program and service providers to carry out the activities listed on this IFSP with the individuals and entities listed above. I understand that my consent is voluntary and may be withdrawn at any time. I understand that my consent may be given for some services and not for others. I understand that the consequence of refusing services is that my child or family will not receive the services. I understand that my signature grants permission for my child to receive services. I understand that services subject to the Family Cost Share will begin once I have signed my Family Cost Share Agreement. 	
Family comments:	
Parent signature: X	Date:

Frequent Finding: Co-visit Justification

- Co-visits should NOT occur at every visit
- Justification must be individualized
- Continuity of care is not a justification. This is the job of the service coordinator.
- Justification must show benefit to parent and child

Example

If the IFSP team determined co-visits are needed, document the justification of how the child and family will receive greater benefit from services being provided at the same time. The family will benefit from having SST and OT delivered together one time every two months. The providers will demonstrate how to integrate the positioning and sensory strategies with the activities the EIS is using with the family during their daily routines to work on improving Connor's behavior and cognitive skills. The team feels co-visits will help the family integrate all of the recommended strategies into a variety of routines. This should allow Connor to make faster progress.

Co-Visit Justification

- What are other examples that you could include in the justification?
- Please type your example in the question box.



Services Page – LPHA Signature Line

LPHA Signature:	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The signature of the LPHA indicates he/she recommends the services on the IFSP (including OT, PT, Speech and Language Therapy, and SST) as reasonable and necessary.					

21. Complete the signature table with the following information:
- ECI Team Member Signature**—(Refer to 40 TAC Sections 108.1009, 108.1011, and 108.1013.) Each interdisciplinary team member signs the document, including team members who participated in the meeting and any who review the document at a later time. The signatures of the ECI Team members indicate agreement with the plan and, if applicable, commitment for providing the services as planned on the IFSP Services Page. **An LPHA for the team recommends the services on the IFSP services page by signing in the box with LPHA Signature above this statement. "The signature of the LPHA indicates he/she recommends the services on the IFSP (including OT, PT, Speech and Language Therapy, and SST) as reasonable and necessary."**
 - Other Team Member Signatures** (e.g., grandparent, child care teacher)—Each person will sign and indicate that he or she was present at the meeting.
 - Discipline**—Enter the discipline of each interdisciplinary team member.
 - Date**—Enter the date the individual signs the IFSP.
 - Present**—Select the box if the person was present at the IFSP meeting.
 - Reviewed**—Select the box if the person reviewed the IFSP but was not present at the meeting.

Poll

- How do you change a Service Coordinator?

Service Coordinator Change

- Rule 108.1015 k (1-3)
- No longer have Partial IFSP review



11/5/13

Alice Cutten will be the assigned Service Coordinator for Bradley Page. This will take place as of 11/11/13.

The family was notified by telephone call (I talked P them - no message) on 11/5/13.

Bella Star, S.C.

Assigned Service Coordinator until 11/10/13.

Service Coordinator Change

What Happens if another Team Member Leaves?

- Can't have a team of 1 person
- Rule 108.1103 (c)

The contractor must provide a service coordinator and an interdisciplinary team for the child and family throughout the child's enrollment.



What is the intent of a periodic review?

In your own words, describe the intent or purpose of a periodic review.

Submit your answer to the question box

Periodic Reviews

- Partial reviews are no longer an option
- Complete periodic review when add, change or delete services
- Periodic review required at least once every six months



Periodic Review Form Changes

- Removed "Partial Review" from the form

3. Review IFSP outcomes and describe the child's current functional abilities and progress toward meeting each outcome

↑ ↑

4. Describe current needs of the child and family – include new and continuing developmental, case management, transition, etc.

- Developed new outcomes or modified existing outcomes – date and attach outcomes to the IFSP
- Developed Transition Steps and Services – attach to the IFSP

5. Describe reasons for any modification to the plan and/or describe rationale for no changes

Frequent Findings

- Why did services/outcomes change?
- Why did services/outcomes remain the same?

5. Describe reasons for any modification to the plan and/or describe rationale for no changes

- Changes

Thomas is not making as much progress as expected toward his outcome of "Thomas will walk from the house to the car every morning." Team feels Thomas will make more progress if PT is increased from once a month to three times a month. Gina (mom) feels that she will benefit from the increased support and feedback about activities to try and what to do if a strategy isn't working.

- No Changes

Team and family are happy with Annabel's progress toward her outcomes. Annabel's outcomes and services are still appropriate. No new needs were identified during the review. Services are still meeting the needs of Annabel and her family.

Team Members Required to Participate in the Periodic Review

- Service Coordinator
- Child's Parent
- LPHA
- Other staff providing early intervention services
- AI or VI teacher if applicable



How Can Team Members participate?

- **Face to Face**
 - Service Coordinator and Parent must be face to face unless the parent requests an alternate method
- **Telephone**
- **Providing input and information in advance of the meeting**

*Must provide recent observations of child to Service Coordinator if not participating face to face

LPHA Role and Requirements

If not attending the periodic review face to face, the LPHA must have assessed the child within the last 30 days



Questions?

Next up...

Annual Meeting to Evaluate the IFSP