

## Capturing Family Information in IFSP Section II: A, B, & C



## **PURPOSE OF ACTIVITY**

The purpose of this activity is allow learners to practice writing a complete, informative description of a family's daily activities and routines and priorities, resources, and concerns in Section II: B and C of the IFSP.



## **RESOURCES NEEDED**

- <u>Infant & Toddler Connection of Virginia Practice Manual</u> Ch. 7 Instructions for Completing the Virginia IFSP Form
  - Flip chart/whiteboard and markers (optional)
- Handouts Information about Dashawn
  - IFSP Section II Example A
  - IFSP Section II Example B (from the sample IFSP for Dashawn)
  - Blank IFSP Section II (print a copy for each participant)
  - Great Questions to Help You Learn About Families.



## **SPECIFIC STEPS**

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- 1. Discuss the requirements for what information should be included on IFSP Section II as indicated in the *Instructions for Completing the Virginia IFSP Form*, Infant & Toddler Connection of Virginia Practice Manual, Ch. 7.
- 2. Have learners read the case study then briefly summarize information we know about Dashawn.
- 3. Ask learners to review the *IFSP Section II Example A* handout.
- 4. Instruct learners to work in small groups (2-3 learners) to identify what information is missing on *IFSP Section II Example A*.
- 5. Have each small group <u>rewrite</u> *IFSP Section II* of Dashawn's IFSP (using the blank IFSP Section II copy) so that it captures more information from the case study.
- 6. Once each group has revised *IFSP Section II*, instruct groups to trade papers, so that each group is reviewing another group's work. Instruct the groups to provide constructive feedback in writing on the page they are reviewing.
- 7. After 5 minutes, have each group return their reviewed IFSP Section II to the group who wrote it.
- 8. Discuss with the large group how everyone did with revising *IFSP Section II*. Invite learners to share what went well and any challenges with completing *IFSP Section II* for Dashawn's family.
- 9. Hand out *IFSP Section II Example B* and ask the groups to review it and compare it to the page they wrote.









#### **Consider the following:**

- Would the IFSP Section II that your group wrote provide the IFSP team with enough information to help individualize Dashawn's outcomes and goals?
- Is there any additional information that you would like to have about Dashawn and his family? If yes, what questions would you ask Ms. Smith?
- What do you do when you ask families for information about their activities, routines, priorities, resources, and concerns and they give you very little information?

10. Debrief by reviewing the handout, Great Questions to Help You Learn About Families.



### **ADDITIONAL RESOURCES**

#### Free Article:

• Woods, J. J., & Lindeman, D. P. (2008). <u>Gathering and giving information with families</u>. Infants & Young Children, 21(4), 272-284.

#### Handout for Parents:

<u>Tell Us About Your Child</u>

#### Self-Assessment Tool:

<u>Checklist of Family-Centered Practices and the IFSP</u>



## Dashawn

Dashawn is a 25 month old boy who lives with his mother and big sister in Wonderland, VA. Dashawn's mother works outside of the home so Dashawn spends time each day at a babysitter's home where he enjoys playing with other children. His father lives out-of-state and visits Dashawn about twice per year when he is in town. Dashawn's grandparents live nearby and are an important part of Dashawn's life.

#### Dashawn likes to:

- Go for rides in his wagon
- Swing and play in the sandbox at the park
- Look at his Clifford books
- Play with his red Clifford ball and his trains
- Splash in the bathtub
- Run around with his family members and his dog
- Play with other children at daycare

#### Dashawn doesn't like to:

- Wait for anything he wants
- Chew and swallow meats (because he chokes sometimes)
- Go down the slide at the park
- Be dropped off at daycare (he cries when his mother leaves him in the mornings)

#### Dashawn's medical and developmental history:

- Born full-term (weight 8lbs, 3oz)
- Experienced jaundice after delivery
- Passed newborn hearing screening
- History of three ear infections
- No concerns noted by parents or physician for vision
- Immunizations are up-to-date
- Family history of developmental delays with communication
- Mother concerned for expressive language development

#### Parts of the day/Activities that go well:

- Plays well with his sister at home
- Enjoys playing with other children at daycare
- Bath time
- Visits to the park

#### Parts of the day/Activities that do not go well:

- Mealtimes (because Dashawn will stuff his cheeks and sometimes chokes on his food)
- Running errands and going to the mall (because of Dashawn's frequent tantrums)
- Anytime Dashawn has to wait for something because he gets frustrated and tantrums. His sister often knows what he wants and will "talk" for him and this sometimes helps with his frustration.

#### Mother's priorities for Dashawn:

- For Dashawn to be able to talk like other children his age
- Decrease his frustration and number of tantrums
- Find out if Dashawn has autism (she's having him tested at the local children's hospital)
- Be able to go to the mall or on other errands without Dashawn having so many tantrums

# EXAMPLE A

### Section II: Team Assessment

#### A. Referral Information, Medical History, Health Status:

Dashawn was born full-term. No concerns noted for vision. History of ear infections.

#### **B.** Daily Activities and Routines

Early intervention supports and services are designed to fit into your family's life and take place as part of the daily activities of your child.

- Things your child does every day (or every week)
- Activities your child enjoys
- Activities or times of the day that are difficult or frustrating for you or your child (if any)
- Places you and your child go (or would like to go)
- Things you would like to do as a family, but cannot do because of your child's needs (if any)

Dashawn gets up early and goes to daycare. After his mom picks him up, he comes home and plays with his sister and his dog. He likes bath time and going to the park.

#### C. Family Concerns, Priorities, and Resources:

To best support your child and family, it is helpful to understand what is important to your family. Your family's concerns, priorities, and resources will be used as the basis for developing outcomes and identifying strategies and activities to address the needs of your child and family. You may share as much or as little information as you choose.

### **Voluntary!**

Your child can still receive services if this section is not completed.

\_\_\_\_\_ Parent initial if choosing not to include this information in the IFSP.

#### **MY FAMILY'S CONCERNS**

Concerns I have (if any) about my child's health and/or development. Information, resources, and/or supports I need or want for my child and/or family.

Dashawn's mother is worried that he's not talking enough and wonders if he has autism.

#### **MY FAMILY'S PRIORITIES**

The most important things for my child and/or family.

Talk like other kids his age so that he won't be so frustrated and have so many tantrums.

#### **MY FAMILY'S RESOURCES**

Resources that my child/family has for support, including people, activities, programs/organizations

#### Grandparents in the area, babysitter

## EXAMPLE B

### Section II: Team Assessment

#### A. Referral Information, Medical History, Health Status:

Dashawn was born full-term, weighing 8lbs, 3 oz. After delivery, he experienced jaundice which resolved with treatment. He passed his newborn hearing screening. No concerns noted for vision by Dashawn's parents or his physician. His immunizations are up-to-date. Dashawn has a history of three ear infections and is being monitored by his doctor. His mother reported that there is a family history of developmental delays with communication.

#### **B.** Daily Activities and Routines

Early intervention supports and services are designed to fit into your family's life and take place as part of the daily activities of your child.

- Things your child does every day (or every week)
- · Activities your child enjoys
- Activities or times of the day that are difficult or frustrating for you or your child (if any)
- Places you and your child go (or would like to go)
- Things you would like to do as a family, but cannot do because of your child's needs (if any)

Dashawn loves to go for rides in his wagon in the afternoon after he and his mother get home. He loves swinging in the bucket swing at the park and playing in the sandbox. His favorite things to do at home are looking at his Clifford books, playing with his red Clifford ball and his trains, splashing in the bathtub, and running after the family dog and his big sister. During the day when his mother is at work, Dashawn stays with a babysitter, where he likes to play with the other children. On the weekends, his family runs errands, visits family, and spends time at the mall.

#### C. Family Concerns, Priorities, and Resources:

To best support your child and family, it is helpful to understand what is important to your family. Your family's concerns, priorities, and resources will be used as the basis for developing outcomes and identifying strategies and activities to address the needs of your child and family. You may share as much or as little information as you choose.

### Voluntary!

Your child can still receive services if this section is not completed.

\_\_\_\_\_ Parent initial if choosing not to include this information in the IFSP.

#### **MY FAMILY'S CONCERNS**

Concerns I have (if any) about my child's health and/or development. Information, resources, and/or supports I need or want for my child and/or family.

Dashawn's mother is concerned about his communication and feels that he is not talking enough. She is also concerned that Dashawn might have autism like their neighbor's child and has scheduled to have him tested at the local children's hospital in May. Dashawn's mother also shared that it is hard to go to the mall and on other errands with Dashawn because of his tantrums.

#### **MY FAMILY'S PRIORITIES**

The most important things for my child and/or family.

Dashawn's mother would like for Dashawn to be able to talk like other children his age. Dashawn gets frustrated a lot during the day when he doesn't get what he wants fast enough and when his mother can't understand him. His sister usually knows what he wants and will talk for him. Dashawn's mother would also like to decrease the number of tantrums Dashawn has and hopefully decrease how frustrated he seems to feel.

#### **MY FAMILY'S RESOURCES**

Resources that my child/family has for support, including people, activities, programs/organizations

Dashawn's grandparents live nearby and Dashawn and his family see them every weekend. Dashawn's babysitter is a close friend of Dashawn's mother and is a great support to the family. Dashawn's father lives in another state and sees Dashawn about twice a year when he is in town.

## Great Questions to Help You Learn About Families

During the first contacts with families, much information can be gathered that helps with developing an individualized, meaningful IFSP. The information that is gathered at the beginning of the early intervention process informs how the team proceeds with eligibility determination, assessment for service planning, and IFSP development, specifically with regards to outcome development and recommendations about supports and services.

Page 2 of the IFSP form is where some of this information is recorded. The information that is captured on this page should be specific to the child and family, descriptive of child and family activities and interests, and include input directly from the family about what is important to them. The following questions can help you explore with the family their priorities and activities so that the information you collect can be used to individualize the early intervention process.



- 1. Can you tell me about your child?
- 2. How does your child spend a typical day?
- 3. What are your child's/ family's favorite things to do?
- 4. What parts of the day go well for you and your child?
- 5. Are there parts of the day or things you and your child do that are difficult? Tell me about these.
- 6. Are there places you and your child like to go?
- 7. Are there places you and your child would like to be able to go?
- 8. Do you have family and/or friends in the area with whom you and your child like to spend time?
- 9. What would make your life easier with your child?
- 10. What would you like to see your child be able to do?