IFSP Planning Goals:

IFSP-Brandi, DOB 9/16/11

3/10/13

Brandi's IFSP team is working to develop communication goals, considering powered wheel chair use, a safety helmet, and seeking a special travel chair. The team recommends some services for the family: Home health care, respite care and transportation assistance.

OUTCOMES: Family

Family will be able to identify community resources in addition to those offered by the treatment team.

Family will pursue/secure a range of health services and seek additional respite care available through the local church and community center.

Family will work with Brandi on developing communication skills and gain increased understanding of appropriate communication milestones and a range of strategies to encourage communication.

Family will investigate funding for safety helmets, bath positioning seats and bus service for Brandi's appointments.

OUTCOMES: Child

Brandi will use gestures and simple words to communicate needs and wants.

Brandi will be able to sit with little support, move around more independently.

Brandi will play and eat by herself with safety and security.

In addition to her special day program, Brandi will continue to attend the daycare program so she can play and interact with typically developing children.

Brandi's daily therapies and communication support will occur at her daycare program as possible.

Journal Notes by Brandi's Teacher:

Brandi has been in my program for three months. Children are curious about all of my children who have adaptive equipment in our room and ask Brandi to tell them about her walker and leg braces. The aide has not helped Brandi communicate to make connections with other children. She communicates solely with Brandi at this point. I am wondering how much her play and movement are restricted by this aide. (The aide has not yet made it to any of our staff meetings so we can develop a relationship- that could really help our communication.)

I wonder how a powered chair will function in our space and with our other children. Toddlers will be able to reach the controls. I will want a conversation about managing the chair and safety issues while she's here. But I think it might help with independence and access play.

This family has been pushed beyond their limits. Respite care is really important for them. That bus is not reliable enough to get them places on time. But I can talk to another family to share some ideas with them. The family has not previously shown an ability to follow through on making calls for resources. They are overwhelmed and under-resourced in many ways. Seeking funding is often a complex process requiring the help of an advocate. Maybe I can help identify some assistance. Maybe we can practice talking about Brandi and find words they will use for her disabilities. Words about her specific condition, about mobility and communication.

Speaking of communication. I am confused by this. I have never heard Brandi vocalize beyond a squeal. I doubt that the stories about Brandi talking at home are true. Clearly Mom really wants to hear her little one speak. For now, I will focus on this child's noticing what other children are doing and report any small movements indicating her interest. And maybe I will observe her use listening behaviors. Yes. That will be my focus.

Brandi could eat on her own if her hands were free from braces and walkers. Maybe a special chair for the low table would be good so she can join us. Or I might be able *to adapt one. This might work for eating and table activities.*

I am not sure if having the therapists interact in the room is the best use of Brandi's program time. What happens to her right to uninterrupted play?