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Including Assistive Technology in the Individualized Family Service Planning Process

States generally report higher rates of AT use when AT is included in the Individualized Family Service Planning Process and documented on the written plan (IFSP). IDEA outlines information to be included on the IFSP but does not specify an exact format. There are many variations in the format of an IFSP and in the ways that AT is described on the plan. Some states have created separate AT sections while others include AT questions within sections. Regardless of the design of the form there are always ways to include AT on the IFSP.

What Types of AT Should Be Considered in the IFSP?

A child's caregivers and the people who work with the child/family in developing the IFSP may have their own personal definitions of AT and may judge the extent to which a child may or may not benefit against these personal definitions. IDEA defines AT very broadly as: **Any item, piece of equipment or product system, whether acquired commercially off the shelf, modified, or customized, that is used to increase, maintain, or improve the functional capabilities of a child with a disability.** Equipment such as a highchair that is adapted with towel rolls to help the child sit up is, by IDEA definition, AT as is a special spoon with a curved handle purchased at a local discount store. Anything that helps or can potentially help a child to perform a skill or participate in an activity is AT.

Review Your State's IFSP Process and IFSP Written Plan

Reviewing your state's current IFSP document, and the process used for developing initial and annual IFSP's, can be a first step to ensure that AT is represented in both the process and document. There are 3 primary ways that AT can be described on the written IFSP document:

1. A special page is added to the IFSP to specifically address AT.
2. A special section is added to the IFSP [as is required in the Individualized Education Plan (IEP)] to specially consider the ways in which a child/family may benefit from AT.
3. Mention of AT is embedded into IDEA requirements already included on the IFSP (see chart below)

IDEA Requirement	How to embed discussions of AT into IFSP process & document
A statement of the infant's or toddler's present levels of development; initial and annual evaluation	If the child already uses AT to assist with any developmental area be sure to include descriptions here (e.g., communicates words and phrases using a picture exchange system).
A statement of the family's resources	If the child uses AT, talk to the family about how they obtained the device & any training they have received or are receiving; list these as resources.
A statement of the family's priorities and concerns	Ask about AT as it relates to the family's priorities and concerns. If the child is already using AT, ask how it plays a role in their daily routines.
A statement of the measurable results/outcomes expected to be achieved for the infant or toddler and the family	AT is not the outcome itself but is a way of helping a child/family achieve an outcome; for example, "X will participate during meal or snack preparation by using a switch to turn on the blender, toaster, or other appropriate appliances." AT is an intervention strategy.
A statement of specific EI services necessary to meet the unique needs of the infant or toddler and the family	With infants/toddlers, often PTs, OTs, SLP's or teachers are providing AT services although when children are older, an AT specialist may also be used. Be sure that the person listed on the IFSP as the service provider is linked up to the AT interventions to be provided.
The steps to be taken to support the transition of the toddler with a disability to preschool or other appropriate services	Detail how the AT service or device will be acquired or transferred from the O-3 EI to preschool system once the child reaches the age of three.

GUIDELINES FOR CONSIDERING AT ON THE IFSP

Use the following questions as a guideline for thinking about how adaptations and AT might contribute to a child's functional abilities or a family's ability to include the child in activities/routines. These questions will help you consider and decide on technology that will be helpful to the child.

- Are there any devices/materials or adaptations that may assist a child to participate in activities/routines or perform functional skills? ☐ Yes ☐ No
- List outcome(s) that will be supported by assistive technology.
- Describe how the assistive technology will help achieve the outcome(s).
- In what activities and routines will the device be used?

☐ Bath time	☐ Chore Time	☐ Errands	☐ Morning Routine	☐ Bedtime
☐ Playtime	☐ Evening Routine	☐ Mealtime	☐ Story time	☐ Travel Time
☐ Anytime				
- What types of devices are needed? Check all that apply.

☐ Assistive listening	☐ Communication	☐ Computer access	☐ Early math
☐ Early reading	☐ Early writing	☐ Environment control	☐ Mobility
☐ Play	☐ Positioning	☐ Self care	☐ Vision
☐ Other: _____			
- Does the natural environment include something that could be used or adapted to serve the same purpose? ☐ Yes ☐ No
- How will the assistive technology be acquired?

☐ It will be borrowed	☐ It will be purchased	☐ Other _____
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If purchased, what is the cost?

If borrowed — where from and for what length of time?
- Start date of services: _____ End date of services: _____

ASSISTIVE TECHNOLOGY REVIEW

- When will we know if the device is successful?
- Is the device still being used? ☐ Yes ☐ No, explain:
- Is the device still needed? ☐ Yes ☐ No, explain:
- Is the device helping to achieve the child's outcome(s)? ☐ Yes ☐ No, explain:
- List family's questions, concerns, and comments relating to the device:

**These guidelines were compiled using information from IFSPs in Maryland, Kentucky, Oklahoma, Missouri, and Louisiana, and IDEA 2004.*

GENERAL IFSP CONSIDERATIONS

A sample annotated IFSP section/page is included and illustrates how these considerations may be included. The letters correspond to the section(s) of the IFSP.

Outcomes (B, C) - Children's outcomes will reflect their ability to participate and learn within activities and routines. When creating outcomes think about how AT could help the child do these things. Once the child's outcome(s) have been determined, the team should discuss how AT might help the child achieve these goal(s). Assistive technology should support the outcomes on the IFSP, it should not be its own separate outcome.

Devices (A, D, E) - IDEA definition of AT device leaves a lot of room for the team to decide the specific device the child will use. Devices may include high tech equipment as well as low tech, homemade solutions. When providers from the team are interacting with the family in their natural environment they should make observations about items already in the home that could be adapted to serve the same purpose. Many types of adaptations or AT used with infants and toddlers with disabilities may be helpful for or useable by all children. For example, a computer-based toy may be fun for anyone and may encourage interaction among children.

Device trials (F) - The child should be allowed to try different devices (ideally, borrowed through a lending library) within their daily activities and routines. The team should observe the child during these activities/routines to see what works and what does not work. If a device does not help the child participate and learn it should be returned to the lending library and a new device should be tried. Repeat this process until an appropriate device is found.

Where/When - The team should specify where and when the device will be used (even if the answer is everywhere). Keep these answers in mind when selecting a device for the child.

Strategies - Obtaining the device should be listed as a strategy on the IFSP.

Specifics - Be as specific as possible when describing devices and how they will help achieve the child's outcome(s).

Review (G) - AT that isn't helping is no good! At each review make sure to discuss the AT presently being used. Address any concerns, problems, questions, the team might have. If it isn't being used reassess the child's need for the device and have the team brainstorm alternatives.

Maintenance/Repair - High tech devices will need routine maintenance and repair if they are damaged. The team should decide who will be responsible for making sure the device gets these needed services.

What assistive technology is needed? **A. List the AT that the child will be using, being as specific as possible. Include separate pages for each additional device needed.**

This assistive technology is related to which outcome(s)? **B. Rewrite the outcome and outcome number**

How will the assistive technology help achieve the associated outcome(s)? **C. Describe how the AT will help the child achieve their outcome and why it is necessary**

Does the needed assistive technology exist in the family's natural environment? ☐ Yes ☐ No **D. By observing the child in their natural environment the team will be able to determine if the needed AT already exists or if something can be modified.**

Is the assistive technology needed something all children use? ☐ Yes ☐ No

Is there something in the child's natural environment that could be used or adapted to serve the same purpose? ☐ Yes ☐ No

How will the assistive technology be acquired? ☐ Borrowed ☐ Purchased* ☐ Other _____

E. These types of items will be off the shelf, less expensive than specialized items, and may encourage social interaction among siblings or other children.

*If purchased, estimated Cost _____

*Is Assessment needed? ☐ No ☐ Yes Why? _____

F. An AT assessment can simply involve a team member observing the child using the device to see if it allows participation and learning opportunities within activities and routines.

Assessor: _____ Date: _____

Will the equipment permanently belong to the family? ☐ Yes ☐ No If no, when must it be returned and to whom? _____

Review G. Team members should review the child's use of the technology on a regular basis.			
AT is Being Used	AT is no longer needed	AT is helping with associated outcome(s)	Comments:

AT & the IFSP Process

There are many times during a child's/family's enrollment in Early Intervention Services where adaptations and AT may be considered. Some basic formal time points include: 1) During the initial IFSP development & the writing of the first IFSP document; 2) At the 6 month review; 3) At the Annual Review; 4) At any other time where the IFSP is reviewed and amended — But these are only the formal times. AT may also be considered when teams are meeting and reviewing a child's progress or when an individual provider is reviewing data and wants to consider additional ways of intervening with or teaching a child.

New routines or activities may be added to a child's/family's life. For example, a family may want to go camping or to the seashore for a vacation and AT may help the child to participate in and earn from this experience. When AT is provided in this context, reviewing or amending the IFSP to reflect the addition of AT is a good idea.

Expectations change rapidly during a child's first 3 years of life. The infant who communicates, for example, by crying and smiling — at 3 years old will be communicating by talking, using a lot of different words put together in different ways and combined with gesture and facial expressions — all in 3 short years. AT needs to be considered frequently throughout any child's EI participation because of the rapid changes occurring in child abilities & expectations as well as changes in family circumstances, routines, and activities.

IFSP RESOURCES

Different states have different ways of addressing AT on the IFSP. The following websites provide some examples of materials states are using to encourage use of AT. Examples of IFSP documents in use by other states are also included. In states such as Connecticut or Louisiana where explicit guidelines for how to consider and write about AT have been developed and disseminated to providers & families, the number of children with whom AT is used as increased over the past three years.

Connecticut Birth to Three

Guidelines for Assistive Technology: Assistive Technology in the IEP and IFSP

<http://www.birthe23.org/Publications/assistivetech.pdf>

An educational resource from Connecticut's Birth to Three System that explains how to include assistive technology on the IEP and IFSP. This document includes information on the requirements of the early intervention program, possible device restrictions, and using a device outside of the early intervention program.

Infant and Toddler Connection of Virginia

Instructions for Completing the Virginia IFSP Form: V. Services Needed to Achieve Early Intervention Outcomes

<http://www.infantva.org/documents/forms/IFSP-Instructions.pdf>

This document includes a section on important information about assistive technology and also includes a written example of how to include assistive technology devices and services in the early intervention services using the section of Virginia's IFSP. See pages 13 and 14.

SoonerStart Early Intervention

IFSP TA 2005

http://se.sde.state.ok.us/ses/preschool/soonerstart_presentations.aspx

Oklahoma's guidance document for IFSP completion. This document includes an extensive list of assistive technology categories and the devices within each category that may be considered for the child. See pages 20 - 25.

EarlySteps

EarlySteps Practice Manual: Chapter 11 Assistive Technology Devices and Services

<http://www.dhh.louisiana.gov/offices/page.asp?ID=334&Detail=7814>

Louisiana's guidance document for IFSP completion. This document includes IDEA's definitions for assistive devices and services, procedures for acquiring the technology, how to complete Louisiana's assistive technology section on the IFSP, responsibilities, examples of devices, equipment control, and device disposition.

EarlySteps

EarlySteps Practice Manual: Forms

<http://www.dhh.louisiana.gov/offices/page.asp?ID=334&Detail=7814>

An example of an assistive technology section on Louisiana's IFSP. See page 63 of the 'Forms' document. Also see the 'Outcomes for child' section on page 58; adaptive equipment is listed as a strategy to use in daily routines to help achieve the outcome.