



IFSP Evaluations and Assessments

Physical—Gross Motor	The ability to demonstrate strength and coordination of large muscles such as arm, leg, or foot muscles or the entire body (e.g. rolling over, sitting, crawling, walking, running).
By: [REDACTED]	Discipline: Physical Therapist
Date: 02/17/2014	Location: mall
Method O: Observe T: Test • DAYC-2 Assessment of Young Children, Second Edition	
Present level of development (include current age, adjusted age, developmental age, percent delay, strengths, unique needs, etc.): Current Information: [REDACTED] is a 25-month old female who has been receiving physical therapy services through the Early Access program to address her gross motor delays. At this time, [REDACTED] is using bilateral AFOs (ankle foot orthoses) and well as shoes with a slight heel lift of approximately 1 inch to help align her feet and ankles in a neutral alignment. [REDACTED] is no longer using the HEKO braces as she has outgrown them and is walking more efficiently when not wearing them. [REDACTED] gross motor development was assessed using the Developmental Assessment of Young Children (DAYC). Her gross motor skills were scored at the 13 month level with a standard score of 75. A standard score in the range between 90-110 is considered to be normal. Currently she is performing her gross motor skills below her age level peers. Typically her peers are able to walk, stand and get into a standing position in the middle of the floor independently. Please, refer to the file for additional medical information and history. Assessment: Currently, [REDACTED] is able to come to a standing position at a support surface independently. She is able to cruise to the right and left along furniture quickly. A reverse Kaye walker was introduced a few months ago and within the past three weeks, she has become proficient in walking long distances with her walker. She is walking at least 1000 feet before needing a rest. She is also walking independently for up to 20 steps with just her clothing being held. [REDACTED] has met the first three outcomes. She is able to squat during play and move from standing to a squat and return to a standing position independently. [REDACTED] is standing independently of a support for 10-15 seconds when distracted. She is walking independently with a reverse walker and is able to turn directions independently. [REDACTED] is able to walk up to 20 steps with just her clothing held. Goals will continue to focus on developing independent walking skills. Upon this evaluation, [REDACTED] would continue to benefit from physical therapy services through Early Access programming to address her gross motor delays. The Early Childhood Special Educator (teacher) will also continue follow [REDACTED] for issues related to all areas of development.	
Recommendations: Summary/Recommendations: Provide [REDACTED] with opportunities to play in positions of weight bearing/standing that will promote strengthening of her muscles and develop age appropriate gross motor skills, specifically those related to mobility. 1. Encourage [REDACTED] to walk for desired objects/interactions. 2. Encourage [REDACTED] to play in standing positions and reach and grab toys to facilitate cruising	

Physical—Fine Motor	The ability to demonstrate strength and coordination of small muscles (e.g. picking up small objects, transfer small objects from hand to hand).
By: [REDACTED]	Discipline: Parent Child Educator
Date: 01/23/2014	Location: home
Method I: Interview O: Observe T: Test • Assessment Evaluation Programming System	
Present level of development (include current age, adjusted age, developmental age, percent delay, strengths, unique needs, etc.): [REDACTED] was 24 months old at the time of the evaluation. She is currently bringing two objects together at or near midline and turning the pages of a book. She is beginning to release objects onto or into a larger target with either	

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hand. She is not yet grasping hand-size objects using either hand using ends of thumb, index, and second fingers or rotating either wrist on a horizontal plane.

Recommendations: [redacted] would benefit from being provided with activities that encourage her to pick up hand size objects and place them in defined areas as well as opportunities to interact with books and have correct book orientation modeled for her.

Cognitive The ability to solve problems, play, understand, remember, perceive, and make sense out of experiences and information.

By: [redacted] Discipline: Parent Child Educator

Date: 01/23/2014 Location: home

Method I : Interview
O : Observe
T : Test
• Assessment Evaluation Programming System

Present level of development (include current age, adjusted age, developmental age, percent delay, strengths, unique needs, etc.):
[redacted] was 24 months old at the time of the evaluation. She is currently indicating a desire to continue a familiar game and locating objects in the latter of two successive hiding places. She is beginning to imitate motor actions that are commonly used. She is not yet imitating words that are not frequently used.

Recommendations: [redacted] would benefit from activities that encourage her to problem solve like large piece puzzles or that facilitate repetition or modeled motions or sounds such as finger plays.

Communication The ability to express wants, ideas, and opinions through gestures, vocalization, signs, and/or words. The ability to understand language and emotions and the ability to follow directions.

By: [redacted] Discipline: Speech-Language Pathologist

Date: 02/12/2014 Location: home

Method O : Observe
T : Test
• Assessment Evaluation Programming System

Present level of development (include current age, adjusted age, developmental age, percent delay, strengths, unique needs, etc.):
At twenty six months of age, the Receptive Expressive Emergent Language Test 3 was used to assess [redacted] language skills. On the receptive portion of this test, [redacted] was observed to follow simple direction. She 'gives five' when asked. [redacted] family reported that she appears to be understanding more each week. She was also reported to understand two part related directions. [redacted] understands routines at home. She was also observed to jabber and wait for others to reply. [redacted] does not yet point to pictures. She does not know body parts on herself. [redacted] is just starting to understand when items in another room are talked about. [redacted] family also reported that she does not understand action words or pronouns. [redacted]s receptive language skills were found to be at the thirteen month level.

Expressively, [redacted] was observed to use lots of jabber. She took verbal turns spontaneously. [redacted] is able to indicate 'no'. [redacted] plays pat-a-cake. She uses her voice to get attention. [redacted] was reported to sound as though she asks questions. She also dances when she hears music. [redacted] is not using words other than 'yah'. She is not yet repeating words she hears. Expressively, [redacted] was found to have expressive skills at the eleven month level.

[redacted] was found to have receptive and expressive language delays. The delays she exhibited qualify her for direct speech and language therapy.

Recommendations: It is recommended that [redacted] receive direct speech and language therapy to improve her receptive and expressive language skills.

Social/Emotional The ability to relate to others, participate in routine activities, and demonstrate self-control.

By: [redacted]

Date: 01/23/2014 Location: home Discipline: Parent Child Educator

Method I : Interview
O : Observe

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T: Test

• Assessment Evaluation Programming System

Present level of development (include current age, adjusted age, developmental age, percent delay, strengths, unique needs, etc.):
 [redacted] was 24 months old at the time of the evaluation. She is currently engaging in vocal exchanges by babbling, following one-step direction with contextual clues, and responding appropriately to familiar adult affect. She is beginning to respond to established social routines, use some word approximations, and play near one or two peers. She is not yet pointing to an object, person, or event or following a person's gaze to establish joint attention.

Recommendations: Continue to provide [redacted] with nurturing environment that meets all of her needs and that encourages her to interact with her environment.

Adaptive

The ability to develop and exhibit age appropriate self-help skills, including but not limited to feeding, toileting, personal hygiene, dressing, and play skills.

Discipline: Parent Child Educator

By:

Date: 01/23/2014 Location: home

Method I: Interview
 O: Observe
 T: Test

• Assessment Evaluation Programming System

Present level of development (include current age, adjusted age, developmental age, percent delay, strengths, unique needs, etc.):
 [redacted] was 24 months old at the time of the evaluation. She is currently biting and chewing hard and chewy foods and eating using her fingers. She is beginning to drink from a cup or glass held by an adult and use her tongue and lips to take in and swallow solid foods and liquids. She is not yet bringing food to her mouth using utensils or undressing herself.

Recommendations: Continue to provide [redacted] with opportunities to try new foods and self-help skills.

Current Health Status

Date: 02/17/2014 Sources of information: Parent Interview

Diagnoses: Down Syndrome

Medications: None

Allergies: No known allergies

Medical/Safety Alert: None

Immunizations: Up to date Needed (list):

Vision: [redacted]'s mother reports that she is planning on checking on her vision screening.

Hearing: [redacted]'s hearing is followed by Iowa Hospital's hearing clinic.

Nutrition: [redacted] mother reports she eats a variety of foods and is willing to try new foods. There are no concerns about her nutrition at this time.

PEACH score:

Overall current health status: [redacted]'s mother reports that she has been healthy and there are no concerns about her health at this time.

Additional Information/Evaluations:

Evaluations and Assessments July 1, 2013