

III. Summary of Child's Present Abilities and Strengths

Instructions:

In this section, the results of all evaluations are summarized and discussed by the team for the initial IFSP. Each domain must be addressed for the initial IFSP. It includes the family's observations of the child in his day-to-day environments, medical information, formal evaluations, and other sources of information. The team includes the parent(s), as well as other professionals representing several disciplines, and the EI Service Coordinator. The summary information should be written in simple jargon-free language so that it is clear and understandable to all.

Emphasis should be given to a child's present abilities and strengths within day-to-day routines rather than on developmental levels. This is particularly important since many evaluations compare a child's development to the development of children without disabilities. This section includes information on what the child can do and what he needs to learn. The child's learning style is also described so that natural abilities can be strengthened and built upon. New information about the child's abilities, strengths, and needs should be added as evaluations, assessments, and observations are conducted.

Date: Enter the date the evaluation(s), assessment(s), or observation(s) took place. Date format is mm/dd/yy.

Description: The summary of the team evaluation must include names of evaluators/their titles, assessments used, and statements that describe the child's present status and levels of development in all of the following domains for the initial IFSP:

1. Adaptive/self-help skills (bathing, feeding, dressing, toileting, etc.)
2. Cognitive skills (thinking, reasoning, learning)
3. Communication skills (responding, understanding, and using language)
4. Physical development (vision, hearing, motor, and current health status)
5. Social/emotional skills (feelings, playing, interacting)

Child's Name: Enter the first, middle, and last name of the child.

Medicaid Number: Enter child's Medicaid number. If child does not have a Medicaid number, check the box indicating N/A.

Agency: Identify which Children's Developmental Services Agency is involved.

Section Number: Identify page using the roman numerals corresponding with the Section. If inserting additional pages, indicate with letter of alphabet after numeral (e.g. if adding a page to Section III, identify that page as IIIa).