

NYC EARLY INTERVENTION PROGRAM

Appendix B: Functional Outcome and Embedded Coaching Terminology for Session and Progress Notes

Functional Outcome	<p>A functional outcome is a practical result that:</p> <ol style="list-style-type: none"> reflects the family's concerns and priorities, is developmentally and individually appropriate, and is considered critical for the child's participation in daily activities. <p>The outcome should include a measurable skill which the child can reasonably be expected to achieve in the next 6 months by receiving Early Intervention supports and services.</p> <p>The functional outcome MUST be written in parent friendly language. All clinical terms must be avoided.</p> <p>Functional outcomes can be found in the "Outcomes" section of the IFSP document in NYEIS. Each interventionist works on all the functional outcomes listed in the IFSP.</p> <p>The 6 essential components of a functional outcome are:</p> <ol style="list-style-type: none"> Who: This is usually the child but may include the parent or family. What/Will do what: This is what the child will do (that is reasonable for the next 6 months) How/Measure for success: This is how everyone on the team including the parents/caregivers will know that the outcome has been met. It should be observable. Under What Condition: This is any specific situation or adaptation that is reasonable. Routine Activity: These are events that occur typically during the child's day and are individualized by the family's culture and environment. "So that"/Why: This is what the family would like to achieve or the reason why it is important. <p style="text-align: center;">The six components that make up a Functional Outcome</p> <div style="text-align: center;"> </div> <p>Example: Functional Outcome #1: Ida will be able to pick up small objects, such as raisins or Cheerios, by using her thumb and index finger <i>Who</i> <i>Will Do What</i> <i>Criteria for Success</i></p> <p>while sitting in her high chair so that she can begin feeding herself during meal time. <i>Under What Condition</i> <i>Why it is important to the Family</i> <i>Routine Activity</i></p> <p>Note: The <i>Functional Outcome Assistant</i> tool may be used to assist in the creation of the functional outcome.</p>
Objectives	<p>Objectives are short term goals that should be achieved in order for the child to reach the functional outcome. Objectives should be specific, measurable, and written in parent friendly language.</p> <p>Examples of three objectives for the functional outcome listed above:</p> <p>Objective 1a: Ida will pick up a Cheerio with fingers/scraping movement. Objective 1b: Ida will pick up a Cheerio with side of finger and thumb. Objective 1c: Ida will pick up a Cheerio with tip of finger and thumb while her arm is on the table.</p>
Routine Activities	<p>Routine activities are events that occur within the child's day (ex: bedtime, snack time, time at the playground, reading time) and that provide opportunities to learn and practice strategies with family members. Routines activities are also known as daily or natural routines.</p> <p>Examples of routine activities*:</p>

	<table border="1"> <tr><td>Play Routines</td></tr> <tr><td>Dressing</td></tr> <tr><td>Book activities</td></tr> <tr><td>Medical/Comfort</td></tr> </table>	Play Routines	Dressing	Book activities	Medical/Comfort	<table border="1"> <tr><td>Food/M meal Routines</td></tr> <tr><td>Bath/Hygiene related</td></tr> <tr><td>Songs/Rhymes</td></tr> <tr><td>Recreation</td></tr> </table>	Food/M meal Routines	Bath/Hygiene related	Songs/Rhymes	Recreation	<table border="1"> <tr><td>Community/family errands</td></tr> <tr><td>Socialization Activities</td></tr> <tr><td>Family Chores</td></tr> <tr><td>Computer/TV/Video</td></tr> </table>	Community/family errands	Socialization Activities	Family Chores	Computer/TV/Video								
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Strategies/ Methods/ Approaches	<p>*For additional information, please see http://fgrbi.fsu.edu/model.html or Woods, J. (2005). <i>Family-guided, routines-based intervention project</i>. Tallahassee, FL: Florida State University, Dept. of Communication Disorders. More specific examples are listed in the <i>NYC EIP Policy and Procedure Manual</i> Chapter 3: Family's Concerns, Priorities, and Resources - Routine Activities Worksheet.</p> <p>Example of different routine activities for the functional outcome listed above:</p> <p>Objectives 1a, 1b, and 1c: During mealtime, Ms. Mills presents Ida with small bits of foods on a flat surface (ex: Ida's favorite flat plate); these include peas, diced cooked carrots, and Cheerios. Ms. Mills picks up one Cheerio at a time from Ida's high chair tray to show Ida what to do.</p> <p>Objectives 1b and 1c: Ms. Mills encourages Ida to turn the pages of a book that has thin paper during story time.</p> <p>Strategies/Methods/Approaches are ways that the family and interventionist support the child's learning in routine activities. The following are examples of strategies that the interventionist may show the parent/caregiver to use with the child during routine activities:</p> <table border="1"> <tr><td>Modify environment</td><td>Turn Taking</td></tr> <tr><td>Encourage child to imitate</td><td>Use hand over hand</td></tr> <tr><td>Positioning</td><td>Encourage initiation by child</td></tr> <tr><td>Use of cues</td><td>Describe or label what is being done</td></tr> <tr><td>Use of Assistive Technology (AT) device</td><td>Use of all forms of positive reinforcement</td></tr> <tr><td>Model or demonstrate for child</td><td>Increase opportunities for child to practice</td></tr> <tr><td>Discrete Trial Instruction & reinforcement</td><td>Positional, gestural, and physical prompting</td></tr> <tr><td>Teaching replacement behaviors/proactive strategies</td><td>Incidental teaching</td></tr> <tr><td>Redirection</td><td>Adaptation of the physical environment</td></tr> <tr><td>Visual Support</td><td>Adaptation of the social environment</td></tr> </table>			Modify environment	Turn Taking	Encourage child to imitate	Use hand over hand	Positioning	Encourage initiation by child	Use of cues	Describe or label what is being done	Use of Assistive Technology (AT) device	Use of all forms of positive reinforcement	Model or demonstrate for child	Increase opportunities for child to practice	Discrete Trial Instruction & reinforcement	Positional, gestural, and physical prompting	Teaching replacement behaviors/proactive strategies	Incidental teaching	Redirection	Adaptation of the physical environment	Visual Support	Adaptation of the social environment
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Coaching Techniques	<p>Coaching techniques are ways that the interventionist coaches the parent/caregiver in using the different strategies to support their children during routine activities. Coaching techniques should be individualized for the learning characteristics and preferences of the parent/caregiver in order to be effective. More than one coaching technique may be used during the session.</p> <p>Examples of coaching techniques include but are not limited to:</p> <ul style="list-style-type: none"> • Parent/caregiver tried activity, therapist assisted • Observation of parent/caregiver and child performing activities • Giving the parent a picture illustrating the way to position the child after demonstrating the method • Discussed activity with parent/caregiver • Videotaping learning activity and viewing it with parent • Demonstrated parent/caregiver activity while providing explanations and descriptions • Tried different strategies with parent/caregiver to determine best fit for child and family • Parent/Caregiver tried activity and therapist provided verbal guidance • Reviewed communication tool with parent/caregiver • Reviewed with parent/caregiver the strategies the family developed and tried and provided feedback 																						
Learning Activities	<p>Learning activities incorporate the strategies and the routine activities to create natural learning opportunities for the child and family to practice and build upon their competencies.</p> <div style="text-align: center;"> </div> <p>Since learning activities occur during the child's and family's natural daily routines and fit the family's culture</p>																						

	<p>and lifestyle, these learning activities should <u>not</u> be considered extra tasks or homework.</p> <p>For the session note, this is where the interventionist outlines the steps for the learning activities that both the parent and interventionist agreed on and that the parent/caregiver will do with the child until the next visit.</p>
<p>Embedded Coaching</p>	<p>Embedded Coaching is a family centered approach that facilitates communication and collaboration between the Early Intervention professional and the parent/caregiver. Family centered approaches help support families in providing multiple, natural learning opportunities during everyday routine activities for their children to learn and develop.</p> <p>There are three main components of Embedded Coaching (Keilty, Bonnie (2010), <i>Practice Mentor Guide</i>, NYC DOHMH EIP Learning Collaborative):</p> <ol style="list-style-type: none"> 1. <u>On-Going Authentic, Routines-Based Assessments:</u> <ol style="list-style-type: none"> a. Interventionists observe the child in his/her routine activities, and engage in conversations with family members and other important adults, to gain an understanding of each child's unique developmental profile as the child functions in his/her natural environment. b. Assessment data include the child's strengths, needs, and learning characteristics within the context of everyday life, as well as the developmental impact of the social and physical environment. c. This authentic picture provides data to identify individualized approaches that fit the child, and his/her family <u>everyday activities and routines</u>. 2. <u>Embedded Interventions (into the child's everyday activities and routines):</u> <ol style="list-style-type: none"> a. Interventions occur during home and community routines, activities, and other times of the child's day that are specifically identified by family members as activities in which they would like support. b. Interventions are scheduled at the time of day when the specific routine activity usually occurs and includes the people who are usually a part of the routine activity. c. Interventionists limit changes in the way the routine activity happens, and suggest only those changes necessary for the child to successfully participate and learn. d. Agreed-upon developmental strategies are not only tailored to the unique strengths and needs of the child, but also fit the individual family's routine activities, and the family's own cultural values, where strategies will be used in between visits. 3. <u>Collaborative Coaching Approaches:</u> <ol style="list-style-type: none"> a. Specific approaches used to ensure that adult family members and other important people in the child's life (e.g., child care providers) are confident and competent in using agreed-upon strategies in between intervention visits to promote the child's learning and development. b. The interventionist explains, models, and supports family members as they practice the strategies. c. Professionals provide feedback on strategy use and elicit feedback from the family members on their comfort and confidence in using the strategies. d. Successful collaborative coaching results in: <ol style="list-style-type: none"> (1) intervention strategies that fit the individual family context and (2) family members who are effective in, and willing to, use the agreed-upon developmental strategies in between professional visits, during their everyday routine activities. <p>*For additional information on Embedded Coaching, please review the Interventionist page on the NYC DOHMH Early Intervention website.</p>