|  |  |  |  |
| --- | --- | --- | --- |
| Child Name | Click or tap here to enter text. | Child ID | Click or tap here to enter text. |
|  |  |  |  |
| Completion Date | Click or tap to enter a date. | Date of Birth | Click or tap to enter a date. |
|  |  |  |  |
| Location/LES | Click or tap here to enter text. | Age | Click or tap here to enter text. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Entry Summary |  | Periodic/Annual Summary |  | Exit Summary |

|  |  |
| --- | --- |
| If **Entry** Summary, list date of initial IFSP: | Click or tap to enter a date. |
|  |  |
| If **Exit** Summary, list date of last service: | Click or tap to enter a date. |

|  |  |
| --- | --- |
| **Persons involved in deciding the summary ratings:** | |
| **Name & Organization** | **Role** |
| Click or tap here to enter text. | Choose an item. |
| Click or tap here to enter text. | Choose an item. |
| Click or tap here to enter text. | Choose an item. |
| Click or tap here to enter text. | Choose an item. |
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| Click or tap here to enter text. | Choose an item. |

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| **Sources of Evidence:** *Check all that apply* | | | | |
| Family information on child functioning |  | Received in a team meeting |  | Incorporated into assessment(s) |
|  | Collected separately through family report |  | Not included |
|  |  |  |
| Evidence collected in a variety of settings and situations |  | Child engaged in caregiver-directed and self-initiated activities |  |  |
|  |  | Child engaged in activities across different routines |
|  | Child engaged in preferred and non-preferred activities |  |
|  |  | Play/Learning |
|  | Child engaged in activities across different social settings (e.g., home with family, playground with multiple children; please specify) |  | Caregiving |
|  |  | Chores/Community |
|  |  | Transition |
|  |  | Child engaged in easy to difficult activities |
|  | Click or tap here to enter text. |  |
|  |  |  |
| Evidence collected using variety of  methods | *Formal sources & methods* | | *Informal assessment methods* | |
|  | Monthly progress notes |  |  |
|  | Screening instruments (e.g., ASQ-SE) |  | Live observations of the child |
|  | Curriculum-based (e.g., AEPS-2, DPIYC) |  | Video observations of the child |
|  | Standardized, norm-referenced (e.g., BDI) |  | Interview with caregivers and service providers |
|  | IFSP progress determination |  | 5Q Visual Model |
|  | Other source |  |  |
|  | Click or tap here to enter text. |  |  |

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| **1. POSITIVE SOCIAL-EMOTIONAL SKILLS (INCLUDING SOCIAL RELATIONSHIPS)** | | | | |
| **1a. To what extent does this child show age-appropriate functioning, across a variety of settings and**  **situations, on this outcome?** *(Select rating with descriptor)* | | | | |
| Choose an item. | | | | |
| **Provide a written explanation for the selection of the above rating.** | | | | |
| Click or tap here to enter text. | | | | |
| **1b. (Do not complete at entry): Has the child shown any new skills or behaviors related to positive social-emotional skills (including positive social relationships) since the last outcomes summary?** *(Check one box)* | | | | |
| Progress measured from what point in time (Provide month/year): | | | | Click or tap to enter a date. |
| Yes | 1 🡪 Describe progress: | | Click or tap here to enter text. | |
| No | 2 |  |
|  | | |

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| **2. ACQUIRING AND USING KNOWLEDGE AND SKILLS** | | | | |
| **2a. To what extent does this child show age-appropriate functioning, across a variety of settings and**  **situations, on this outcome?** *(Select rating with descriptor)* | | | | |
| Choose an item. | | | | |
| **Provide a written explanation for the selection of the above rating.** | | | | |
| Click or tap here to enter text. | | | | |
| **2b. (Do not complete at entry): Has the child shown any new skills or behaviors related to acquiring and using**  **knowledge and skills since the last outcomes summary?***(Check one box)* | | | | |
| Progress measured from what point in time (Provide month/year): | | | | Click or tap to enter a date. |
| Yes | 1 🡪 Describe progress: | | Click or tap here to enter text. | |
| No | 2 |  |
|  | | |

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| --- | --- | --- | --- | --- |
| **3. TAKING APPROPRIATE ACTION TO MEET NEEDS** | | | | |
| **3a. To what extent does this child show age-appropriate functioning, across a variety of settings and**  **situations, on this outcome?** *(Select rating with descriptor)* | | | | |
| Choose an item. | | | | |
| **Provide a written explanation for the selection of the above rating.** | | | | |
| Click or tap here to enter text. | | | | |
| **3b. (Do not complete at entry): Has the child shown any new skills or behaviors related to taking action to meet**  **needs since the last outcomes summary?** *(Check one box)* | | | | |
| Progress measured from what point in time (Provide month/year): | | | | Click or tap to enter a date. |
| Yes | 1 🡪 Describe progress: | | Click or tap here to enter text. | |
| No | 2 |  |
|  | | |