

Professional Survey

Thank you for agreeing to participate in this project regarding the Individualized Family Service Plan implementation process. Please respond to each question in a way that reflects your feelings, attitudes and experiences as accurately as possible.

1. I worked with approximately families last week.

2. The caregiver working directly with their child to implement the strategies for their child's IFSP characterizes participation of an active nature. The caregiver watching the therapist demonstrating strategies with their child, while asking questions and discussing development characterizes participation of a passive nature. *Last week,*

of my clients' caregivers actively participated for more than half of the
 (#) therapy session.

 of my clients' caregivers passively participated for more than half of the
 (#) therapy session.

 of my clients' caregivers did not participate for more than half of the
 (#) therapy session.

+

————TOTAL SHOULD = (ANSWER TO QUESTION #1)

3. Last week, I offered ideas about learning opportunities in natural activity settings for practicing IFSP objectives to:
 0 1 2 3 4 5 6 7 8 9 10+
 families.

4. Last week, I used toys or items from the home during therapy sessions with:
 0 1 2 3 4 5 6 7 8 9 10+
 families.

5. Last week, I used my toys or items during therapy sessions and took these items with me after the session ended with:
 0 1 2 3 4 5 6 7 8 9 10+
 families.

6. Last week, I used my toys or items during therapy sessions and loaned these items to:
 0 1 2 3 4 5 6 7 8 9 10+
 families.

7. I have clients on my current caseload. (Put this answer into all of the boxes in questions 8-11.)

8. _____ of my clients' caregivers can identify and understand **ALL** of the goals and objectives on their child's IFSP.

9. _____ of my clients' caregivers can identify and understand **SOME** of the goals and objectives on their child's IFSP.

10. _____ of my clients' caregivers **CANNOT** identify and **DO NOT** understand **ANY** of the goals and objectives on their child's IFSP.

11. After reviewing the IFSPs of my clients, I feel that
_____ caregivers developed **ALL** of the goals on their child's IFSP.
_____ caregivers developed **MOST** of the goals on their child's IFSP.
_____ caregivers developed **SOME** of the goals on their child's IFSP.
_____ caregivers developed **NONE** of the goals on their child's IFSP.

+ _____

TOTAL (should be the same as the answer to question # 7)

12. Please think about your last **5** therapy sessions and choose the most accurate timeframe for each statement. The amounts of time in the left columns should add up to the total number of minutes in the therapy session.

During the **1st** therapy session, **I spent approximately:**

_____ minutes **discussing** issues related to the child's development with the caregiver.

_____ minutes **demonstrating** strategies to caregivers for implementing the child's IFSP goals.

_____ minutes **joining** the activities of the caregiver and child and shared information and ideas that would increase the caregivers' confidence and competence in the implementation of the strategies for the child's IFSP goals.

_____ minutes **directly** working with the child while the caregiver was out of the room or tending to household responsibilities.

+ _____ minutes **providing feedback** to the caregiver regarding his/her direct implementation of strategies for the child's IFSP goals.

= **Total time of therapy session**

During the 2nd therapy session, **I spent approximately:**

_____ minutes **discussing** issues related to the child's development with the caregiver.

_____ minutes **demonstrating** strategies to caregivers for implementing the child's IFSP goals.

_____ minutes **joining** the activities of the caregiver and child and shared information and ideas that would increase the caregivers' confidence and competence in the implementation of the strategies for the child's IFSP goals.

_____ minutes **directly** working with the child while the caregiver was out of the room or tending to household responsibilities.

+ _____ minutes **providing feedback** to the caregiver regarding his/her direct implementation of strategies for the child's IFSP goals.

= **Total time of therapy session**

During the 3rd therapy session, **I spent approximately:**

_____ minutes **discussing** issues related to the child's development with the caregiver.

_____ minutes **demonstrating** strategies to caregivers for implementing the child's IFSP goals.

_____ minutes **joining** the activities of the caregiver and child and shared information and ideas that would increase the caregivers' confidence and competence in the implementation of the strategies for the child's IFSP goals.

_____ minutes **directly** working with the child while the caregiver was out of the room or tending to household responsibilities.

+ _____ minutes **providing feedback** to the caregiver regarding his/her direct implementation of strategies for the child's IFSP goals.

= **Total time of therapy session**

During the 4th therapy session, **I spent approximately:**

_____ minutes **discussing** issues related to the child's development with the caregiver.

_____ minutes **demonstrating** strategies to caregivers for implementing the child's IFSP goals.

_____ minutes **joining** the activities of the caregiver and child and shared information and ideas that would increase the caregivers' confidence and competence in the implementation of the strategies for the child's IFSP goals.

_____ minutes **directly** working with the child while the caregiver was out of the room or tending to household responsibilities.

+ _____ minutes **providing feedback** to the caregiver regarding his/her direct implementation of strategies for the child's IFSP goals.

= **Total time of therapy session**

During the 5th therapy session, **I spent approximately:**

_____ minutes **discussing** issues related to the child's development with the caregiver.

_____ minutes **demonstrating** strategies to caregivers for implementing the child's IFSP goals.

_____ minutes **joining** the activities of the caregiver and child and shared information and ideas that would increase the caregivers' confidence and competence in the implementation of the strategies for the child's IFSP goals.

_____ minutes **directly** working with the child while the caregiver was out of the room or tending to household responsibilities.

+ _____ minutes **providing feedback** to the caregiver regarding his/her direct implementation of strategies for the child's IFSP goals.

= **Total time of therapy session**

13(e). I have used the:

Family-guided Approaches to Collaborative Early Intervention Training and Services (FACETS): **yes** **no**

- If you circled **yes**, how helpful was the resource? (Please circle one.)

Very Somewhat Somewhat Very
Helpful Helpful Unhelpful Unhelpful

- If you circled **no**, indicate why not. (Check all that apply.)

- The resource was not available to me.
- The resource was difficult to access or use.
- I do not have a need for the resource.
- I plan to use the resource, but have not done so yet.
- I do not know about this resource.
- Other: _____

13(f). I have used an:

Intervention Planning Worksheet: **yes** **no**

- If you circled **yes**, how helpful was the resource? (Please circle one.)

Very Somewhat Somewhat Very
Helpful Helpful Unhelpful Unhelpful

- If you circled **no**, indicate why not. (Check all that apply.)

- The resource was not available to me.
- The resource was difficult to access or use.
- I do not have a need for the resource.
- I plan to use the resource, but have not done so yet.
- I do not know about this resource.
- Other: _____

Caregiver Survey

Thank you for agreeing to participate in this project regarding the Individualized Family Service Plan implementation process. Please respond to each question in a way that reflects your true feelings, attitudes and experiences as accurately as possible. If any question seems unclear, please feel free to ask for clarification or explanation.

1. My family has received early intervention services for ____ months.
2. Please rate how helpful your child's early intervention program was in preparing you ahead of time to develop goals and objectives for your child's most recent Individualized Family Service Plan (IFSP) meeting.

1 2 3 4 5 6 7

Extremely Unhelpful ←-----→ **Extremely Helpful**

3. My child's early intervention program prepared me for developing my child's IFSP by (Check all that apply.)
 providing a verbal explanation.
 providing written information.
 providing resources (internet sites, support networks, etc.)
 Not applicable.
 Other: _____

4. Please rate your preparedness in developing goals and objectives during your child's most recent IFSP meeting.

1 2 3 4 5 6 7

Extremely Unprepared ←-----→ **Extremely Prepared**

5. Please check one:
 I developed **NONE** of the goals, but the therapists chose the goals for my child's plan.
 I developed **SOME** of the goals, but the therapists chose most of the goals on my child's plan.
 I developed **MOST** of the goals, but the therapists chose some of the goals on my child's plan.
 I developed **ALL** of the goals on my child's plan.

6. My child's early intervention professional(s) shared information with me on my role in early intervention by (Check all that apply.)

providing a verbal explanation.

providing written information.

providing resources.

Not applicable.

Other: _____

7. My role in the Individualized Family Service Plan development involves: (Please read carefully and check the most appropriate answer.)

allowing the therapists to assess my child and use their professional knowledge and experience to develop a plan appropriate for my child.

providing accurate information to the therapists so they may develop a plan appropriate for my child's needs.

actively participating with the therapists to develop a plan appropriate for my child's needs.

8. I can identify and describe (Please circle one):

NONE **SOME** **MOST** **ALL**

of the goals and objectives on my child's current IFSP.

9. My last therapy session was minutes long.

10. Please think about your last therapy session and choose the most accurate timeframe for each statement. The amounts of time in the left columns should add up to the total number of minutes in the therapy session. **I spent approximately:**

_____ minutes **discussing** issues related to my child's development with the therapist.

_____ minutes **observing** the therapist implementing strategies for my child's IFSP goals.

_____ minutes **directly** working with my child to implement the strategies for my child's IFSP goals.

_____ minutes **tending to other household responsibilities**, while the therapist worked with my child on his/her IFSP goals.

+ _____ minutes **out of the room** during the therapy session.

= **Total time of therapy session** (same as the answer to question # 9)

11. Please read carefully and check the most appropriate answer. My role during therapy sessions involves:

___ allowing the therapist time to work independently with my child on his/her goals.

___ observing the therapist implement strategies for my child's plan and discussing family and child issues.

___ actively participating with the therapist to implement strategies for my child's plan and discussing family and child issues.

12. During therapy sessions,:

	Never	Rarely	Sometimes	Often	Always
items/toys from the home/community setting are used.	1	2	3	4	5
items/toys brought by the therapist are used, and the taken when the therapist leaves.	1	2	3	4	5
items/toys brought by the therapist are used, and loaned to my family.	1	2	3	4	5

13. Please rate your awareness of the early intervention professional's expectations of you as the primary caregiver of your child.

1 2 3 4 5 6 7

Extremely Unaware ←————→ **Extremely Aware**

14. Please rate how prepared you are to implement strategies to accomplish your child's IFSP objectives during your family's regular routines and activities after a typical therapy session.

1 2 3 4 5 6 7

Extremely Unprepared ←————→ **Extremely Prepared**

15. Please identify which intervention style your child's therapist uses most often during therapy sessions. (Please check one.)

- She mainly provides direct instruction to my child.
- She focuses on the family and coaches me on strategies for implementing my child's IFSP goals.

16. Please identify which intervention style your child's therapist uses most often during therapy sessions. (Please check one.)

- She lets my child initiate most of the activities.
- She directs most of the activities.
- She lets my child initiate some of the activities and she initiates some of the activities.

17. Please identify which intervention style your child's therapist uses most often during therapy sessions. (Please check one.)

- Her instruction is based mainly on my child's everyday activities, so the strategies are easy to implement during our regular routines.
- Her instruction is based mainly on special strategies that must be practiced in spare time and not necessarily during regular routine activities.

18. Please rate how compatible your learning style is with the early intervention professional's instructional style.

1 2 3 4 5 6 7

Extremely Incompatible ←————→ **Extremely Compatible**