**Early Intervention Activity Note**

**Child’s Name: Danny Dans DOB: 3/2/2015 ITOTS#: 123456**

**Date of Service: 7/5/2017 Location: home Length of Session in Minutes: 45**

**Participants: Danny, Mom, Speech Therapist**

**Service:\_\_Speech\_\_\_\_\_\_\_\_\_\_\_\_** **Individual Early Intervention Activity:**  **Group Early Intervention Activity**

**IFSP Outcomes/Short Term Goals Addressed Today: Danny will use two word phrases during meal time, snack time and play time to request desired items three times a day for one week.**

|  |  |
| --- | --- |
| **Narrative Summary of the Early Intervention Session** | |
| * Information from family/caregiver about what has happened since last session including progress on joint plan developed at previous session. * Details of how the provider supported the family/caregiver in a routine or activity related to goals and outcomes; strategies practiced and child’s response. * Specific examples of how the family/caregiver participated in the session including strategies practiced with the child and the child’s response. * Ongoing Assessment: documentation of child’s skills observed and/or reported by family/caregiver including:   + Child’s progress in relation to the IFSP outcomes/ short-term goals.   + New functional skills (if any) in any of the three global outcome areas. * Documentation of joint planning for implementation of strategies and supports between visits during the family/caregiver daily routines and activities. | Danny has begun to imitate more 2-word phrases when requesting food/ drink such as “drink please” after mom gives a model. He is able to independently request for “more” using sign language and words. He will use “dog” and “music” ASL/words independently when requesting as well. He will need multiple prompts and gestures to retrieve familiar items such as shoes and ear aids. Mom will continue working on increasing communication skills.   * What is an update from the previous session and what was observed today?   + What was the joint plan from the previous session? * What did the provider do during the session? * What did the parent do during the session? * Joint plan for next session – what strategies and supports will mom use during which daily routines and activities? |

**Provider(s) Printed Name(s), Signature(s) & Credentials: Mary Speech, CCC-SLP**

**Date: 7/5/2017 Next Visit Scheduled (Date & Time): 7/12/2017 10:00a.m.**