

\*This TelAbility handout provides an overview of the Individualized Family Service Plan (IFSP) and the process involved in its development and implementation.

### What is the Individualized Family Service Plan?

The IFSP is a legally binding written document, which is based on a child and family's strengths. It guides early intervention service delivery for infants and toddlers with disabilities, *and their families*. Currently in North Carolina, children who have, or are *at risk* for developmental delay are eligible for early intervention services, and an IFSP. The IFSP is required under Part C of the Individuals with Disabilities Education Act (IDEA), a federal law which requires each state to develop a comprehensive, coordinated, and multidisciplinary method of delivering supportive services aimed at fostering the development of all eligible children under age three. **The distinctive principle of the IFSP is its focus on the needs of the family as a whole.** This is based on the belief that *a young child's needs are directly related to the needs of his/her family.* **A good IFSP supports the family in helping their infant or toddler reach their optimal development.** It is a dynamic document, which under current law should be reviewed *at least* once a year, with best practice recommending review and amendment every six months. For more information on IDEA and early intervention, go to <http://www.ideapractices.org> and use the "Law and Regulations" link.

### Who are the Key Participants?

An IFSP is developed by a **team**, with **parents considered as full partners in its creation**. This is due to the important belief that the *parent is the constant in an infant/toddler's life*, as well as *the child's best resource*. The child's **service coordinator** (case manager) is also included on the team. Current law requires that the child service coordinator initiate the IFSP within forty-five days of receiving a child's referral for early intervention services. Other team members may include **day care providers/teachers** (if the child is in a child care setting), **therapists, physicians, other family members, someone who is able to interpret evaluation(s)** (if applicable), and **anyone else designated by the parents with important insight into their child**. Parents may also bring along **someone to help advocate** for them and their child. You can go to <http://www.aap.org/policy/re9823.html> to read the American Academy of Pediatrics' policy statement on "The Pediatrician's Role in Development and Implementation of an Individualized Education Plan (IEP) and/or Individualized Family Service Plan (IFSP) (RE9823)."

### Key Participants, continued...

The IFSP meeting should always take place at a time and place specified by the parents. The meeting should be based on their schedules and comfort level, and the family should receive prior written notice of the meeting (in their native language). If English is not the family's primary language, then the IFSP meeting should be conducted in the family's native language, with the support of interpreters/translators. The focus of the IFSP and the meeting to develop it should be determination of the family's resources, priorities, and concerns as they relate to their infant/toddler's development. To read "A Parent's Guide: Accessing Programs for Infants, Toddlers, and Preschoolers with Disabilities" and download additional resources and worksheets, go to <http://www.nichcy.org/pubs/parent/pa2.pdf> (Spanish version also available). You can also find information regarding specific state resources on this site, which is maintained by the National Information Center for Children and Youth with Disabilities.

### What Should it Look Like?

The IFSP *must be written in a family's native language*, and it **should always be responsive to and supportive of the family's routines, values, and culture**. It *should include the child's current level of development in the following five areas: physical, cognitive, communication, social-emotional, and adaptive* (also referred to as self-help). The IFSP should also include a description of the **family's resources**, their **priorities**, and their **concerns** regarding their child and his/her development. These components should then **guide the establishment of desired outcomes** (goals). To access a detailed description of the IFSP produced by the Educational Resource Information Center (ERIC), go to <http://ericec.org/digests/e605.html>.

Any evaluation or testing results should be considered and attached. Annual goals should be established, with short term (typically either three or six month), objectives agreed upon by the team. A specific timeline must be agreed upon and stated regarding when services for the infant/toddler will begin and end, what those services will be, who will provide them, how often, for how long, and where. Goals specific to the transition to school age services (which start at age three) should be formulated and included in the IFSP at least three months prior to the child's third birthday. Assistive technology, physical therapy, and occupational therapy are just few of the services that might be included in early intervention. To view a list of services typically included in early intervention, you can go to [http://kidstogether.org/ei\\_servs.htm](http://kidstogether.org/ei_servs.htm).

### What Should it Look Like? , continued...

Stress should be on **functional goals** that are **useful in many settings** and support an **overall goal of independence**. *Goals can include measures that support the family*, such as securing stable housing and/or employment, because these relate directly to the family's ability to facilitate and enhance their child's development. It is critical that all **direct services occur in the child's natural environment**, so that *interventions* can be placed within the infant/toddler's typical routine. This will vary depending on each individual child's and family's situation, but can include home, daycare, or community settings, such as a favorite park or playground. Go to <http://www.ncei.org/ei/pdf/IFSP200102.doc> to view North Carolina's blank IFSP form.

### How Do You Prepare and Get What Your Child Needs?

You want to know ahead of time who will be attending your child's IFSP meeting. You also want to make sure you will have enough time to meet without feeling rushed. It is helpful to gather copies of all written reports/evaluations and/or medical and developmental information prior to the meeting, so you can familiarize yourself with them and get any questions answered before discussing and sharing them with the full team. You may want to talk to other parents whose children have IFSP's, talk with your child's caregivers/therapists, and create a list of questions and concerns that you want to present at the meeting. It is also helpful to prepare a list of your child's and family's strengths and needs, as you see them, your priorities, and your overall vision for your infant/toddler's development. You can then bring this list with you to the meeting. Some parents even draft their own version of what they think their child's IFSP should look like and bring it with them to the meeting, perhaps with a photo of their child. For additional tips on how to prepare, go to <http://nncf.unl.edu/nncf.go.ifsp.html>.

### How do You Follow Up and Keep the Lines of Communication Open?

Even after developing the best possible IFSP, what really matters is if it is functioning for your family and child. Communication with the rest of the team is crucial for making sure that the IFSP is being fully implemented and functioning well. Your *child's service coordinator* will be a key link in this effort, and *should facilitate feedback and communication within the team*. Maintaining a list of the team members and their **contact information** is always a good idea; bring it with you to the IFSP meeting and make sure everyone's information is current before you leave. This will help you keep the lines of communication open and efficient as the IFSP is implemented and you and the other team members monitor your family's and child's progress, as well as your ever-evolving and changing needs.

### **Lines of Communication, continued...**

Always remember, **you** are the **expert** on your child! In the best of cases, the service providers and professionals will have valuable insights and information about your child. **You know your child best**, though, so if you disagree with a perception, speak up and share your reasons. **Communication is key** to making this process work and feel good to everyone on the team. Meeting your family and child's needs is the common goal here! If things don't seem to be working for you or your child, try to figure out what is at the root of the problem. It might be that an approach that you thought would work for your family or child just isn't the right approach, or it might be that the specified approach isn't being followed through on. Don't be afraid to ask questions, try not to make assumptions, and keep the dialogue going.

### **What if it just isn't Working, and You Need More Help?**

There are various resources and options to help guide you through the IFSP process and its aftermath. In some cases mediation or alternative dispute regulation is necessary to meet everyone's needs. If that doesn't work, parents have the right to request a due process hearing with their home school district. If things still aren't satisfactory, a parent may file a complaint with their state educational agency. Parents and professionals in North Carolina can utilize the Exceptional Children's Assistance Center (ECAC) for guidance and supports. They have an "Ages 0 to 2 Information Packet" available, free to parents of children with disabilities, and they conduct "Informed Effective Parents" workshops across the state. Go to <http://www.telability.org> and click on the "calendar" at the top of the web page, to find a date this workshop is being offered near you. The ECAC has an extensive lending library, among other things. To check them out, go to <http://www.ecacparentcenter.org>.

You can also search the TelAbility website using the keywords: IFSP, Effective Parents, *and/or* IDEA

Author: Thea K. Wilson, M.Ed.

For more information contact: [wils5224@bellsouth.net](mailto:wils5224@bellsouth.net)

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