

EXAMPLES OF FUNCTIONAL OUTCOMES FOR EARLY INTERVENTION SERVICES FOR CHILDREN WITH HEARING LOSS



This is a **TEACHING TOOL** that provides a library of examples of outcomes and strategies so that the IFSP team for a child with hearing loss can appreciate the diversity of appropriate strategies and can use their own creativity to match customized strategies to the priorities of the family and in doing so, provide appropriate services to meet the developmental needs of the child with hearing loss.

This document is **NOT** intended to be used as a pick list or menu to choose from when writing an IFSP. There is an infinite variety of outcomes and strategies appropriate to match a family's concerns and priorities. This is a developmental process that the team experiences with the parents and should **NOT** ever become a matter of selecting strategies from a list. Recognizing that priority, it remains valuable to offer examples of how creative teams have developed strategies to meet the needs of a variety of families and children in order to stimulate creativity and confidence in strategy development for children with hearing loss.

General Guidelines for Developing Functional Outcomes and Strategies

The outcome SHOULD:

- Enhance the family's ability to care for or to engage in activity with their child.
- Enhance the child's ability to participate in functional activities (feeding, dressing, moving, communicating, playing, etc)
- Should expand on activity settings in which the child already participates successfully.

Intervention Strategies SHOULD:

- Introduce a resource or adapt materials
- Modify the environment
- Adapt the routine or schedule
- Reframe the adult perspective/interaction
- Change the child's skill level

Functional, measurable, long-term, and short-term goals include the following:

- Performance
 - Who
 - Will do what
- Criteria
- Conditions
- Time frame for goal achievement (target dates on the IFSP)
 - "Who" is always the child or the family
 - "What" is the activity that the child or family will be able to do.
 - It should be observable and repeatable having a definite beginning and ending

Functional Activities are identified by the family and support the child's physical, social, and psychological well-being.

Examples included the ability to:

- Feed oneself
- Play with toys and people
- Communicate with others

In early intervention we do not treat the primary diagnosis but the functional disability.

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Outcome	Strategy
We want to learn about hearing loss so we can communicate with Sam.	The EI hearing provider will share information from the Family Resource Guide and other materials about hearing loss and the materials will be discussed.
	The EI hearing provider and the family will discuss basic audiology information about the audiogram & different degrees of hearing loss.
	The parents will participate in play dates with other families of children with hearing loss.
	The family will keep their audiology appointments.
	The EI hearing provider the family will work together to complete the ELF as a means to better understand Sam's hearing loss.
	The EI hearing provider and the family will discuss amplification options and how much a hearing aid can help Sam.
	The EI hearing provider and the family will discuss different approaches to communicating to a child with hearing loss and will provide materials for self-study.
	The EI hearing provider and the family will discuss how Sam's hearing loss relates to how Sam can access speech, with and without hearing aids.
	The EI hearing provider will discuss information with the family related to: hearing loss and its impact on a family, grief process, sibling experience.
	The parents will learn more about Sam's hearing loss and ways to communicate with him that will lead to completion of the Communication Plan.
We want to have hearing aids on Sam as soon as possible.	The family will speak to their pediatrician about follow up by an Ear Nose and Throat doctor to obtain medical clearance for amplification.
	The family will be assisted by the Service Coordinator to find funding options for audiology and related expenses.
We want Sam to develop a basic vocabulary so he can express his wants during meals.	The family will learn how to assist Sam in choosing between milk and juice during mealtime.
We want to know how to communicate with Sam so that we can bond.	The family will learn basic strategies for early communication with Sam.
I want Sam to vocalize normally and continue to use more words in his vocabulary.	Parents will imitate the sounds, words, and short phrases that Sam makes.
	The parents will learn when incidental learning opportunities are present and how to directly engage Sam in communication.
	The parent will learn how to emphasize vocabulary related to different situations, such as eating, playing outside, dressing, etc.

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	The parents will gain Sam's attention before communicating verbally (make noise, tap, get in Sam's visual field, etc).
We want Sam to listen	Sam will wear his hearing aids during all hours he is not sleeping or bathing.
	Parents will call Sam's attention when new sounds occur (dog bark, phone ring, soda can opening, toy makes a sound), smile, point to their ear, and say "I hear that! I hear the _____".
	Parents will consistently associate sounds to certain toys, objects, or actions (i.e. Quack for rubber duck, vroom for toy car)
	Parents will use common games consistently with Sam and encourage him to respond (raise arms to "So big!" cover and uncover eyes to "Peekaboo!" Pull a small cloth off his head when someone says "Where's Sam?" raise hands palm up to "Allgone!" play Pattycake)
	Parents and the EI hearing provider will work together to determine the size of Sam's listening bubble when mom and grandma talk and to everyday noises in quiet and when competing noise is present
	Sam will turn to sounds in his environment from above, below, right, left
	Sam will react to mom's voice by pausing or turning when she says his name
	Parents will repeat sounds that Sam makes, introducing new sounds so that he can use his hearing to notice the new sound and change his sound to match the new one
	When presented with a sound associated with one of two toys in front of him that have sounds, Sam will turn towards or indicate the correct toy (rubber duck and toy car; parent will say 'quack' or 'vroom')
	Parents will encourage Sam to respond (clap, touch ear, stack block) when the sounds oo, ah, ee, sh, s, m are presented, being careful to be silent sometimes so he doesn't respond without really having detected the sound (Sam can't see mom's face, it is quiet)
	Parents will encourage Sam to identify sounds in his environment with events – "I hear Daddy's car! Daddy's home!" "I hear the phone! Time to talk on the phone now!"
	Parents will ask Sam to choose or give them objects in increasing sizes of sets of 2, 3, 4 items while dressing ("Give me your shoe Sam" when pants, T-shirt, and socks are also present), eating ("Time to clean up. Give me your cup" when spoon and dish are also present)
	Sam will respond to simple commands or phrases (Get your shoe. Where's mommy?) in quiet and in varying levels of competing noise and/or increasing distances
Sam will keep his hearing aids on	Parents will learn how to insert hearing aids
	Parents will make hearing aids part of the morning and bed time routines
	Parents will use clips or other retention accessories to attach the hearing aids to the back of the child's clothing
	Parents will use toupee tape or other retention strategies to keep the his hearing aids on as much as possible
	Sam will play with other children with hearing aids
	Sam will select his own earmold colors

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	Parents will read books about children wearing hearing aids (Patrick Gets Hearing Aids, Friends, Like You)
	Sam will play with a teddy bear with hearing aids (Harris Communications)
	Sam will be trained to approach adult whenever the hearing is flopping or other problems
	Parents will refer to www.listen-up.org website for information on how to keep hearing aids on Sam
	Parents will use behavior rewards (i.e., stickers) when Sam puts on hearing aids
	Parents will react in a matter of fact manner when Sam removes the hearing aids and calmly replace them
	The parent will anticipate situations when Sam cannot tolerate the hearing aids (parent is in control of when the hearing aids removed)
	Parents will learn to use strategies when Sam's hearing aids whistle (make earmold appointment, use water-soluble lubrication, Comply ear tubes)
We want Sam to learn to sign	Parents use resources (videos, books, sign language class, etc) to assist them in learning sign vocabulary
	Parents will access signed videos from the Public Library
	Parents will learn to use signing in natural routines
	The parents will interact with Deaf individuals (deaf role model; social at Deaf Service Center; etc.)
	Other people who come into contact with the child will be instructed in sign so that they can communicate effectively with Sam (siblings, caregivers, etc)
	The family will develop a routine of signing with Sam for ½ - 1 hour each day ("signing hour")
	The family will develop a book of photos/pictures and signs so that they can use the sign book as one means of interacting with Sam (early reading opportunities)
	The family will use a list of basic sign vocabulary to identify important signs to learn on their own from a sign vocabulary dictionary.
	Family will learn situational vocabulary in sign.
	Family will learn to access sign language resources on the internet.
We want to explore if a cochlear implant will help Sam	The EI hearing provider or service coordinator will assist the family to access one or more cochlear implant teams
	The family will view videos about cochlear implants.
	The family will be assisted to meet other parents of children who have received a cochlear implant
We want Sam to use his cochlear implant effectively	The parents will develop a routine for using the cochlear implant in everyday situations
	Parents will follow through with techniques learned at Auditory Verbal Therapy in home environment
	The family or other caregivers will follow through with techniques learned during Auditory Verbal Therapy as a part of Sam's everyday routines and activities