

Progress Report Documentation

The Progress Report page on TOTS is designed so that all Individualized Family Service Plan (IFSP) team members can quickly enter the required progress reports and ensure that they are properly documenting the evidence-based practices (EBPs) used with the child and family. All early intervention service providers must continually assess children and families' progress during the IFSP period. No IFSP team decision can be made without data to support it.

Federal regulations emphasize this continual assessment. The regulations define one (1) of the roles of an early intervention service provider as "...participating in the multidisciplinary IFSP team's ongoing assessment of the infant or toddler with a disability and the family-directed assessment of the resources, priorities, and concerns of the family, as related to the needs of the infant or toddler, in the development of integrated goals and outcomes for the IFSP" (34 CFR 303.12 (b) (1). Further, the regulations require that a "statement of the measurable results or measurable outcomes expected to be achieved for the child and family..." (34 CFR 303.344 (c)) be included in each IFSP. Measurable implies data collection- how can the team determine if progress is adequate without knowing the data?

Checklists, frequency counts, curriculum probes, and re-administration of sections of the five-area assessment (5AA) sections are a few ways progress data can be collected. Each IFSP team member should have a plan for data collection based on the frequency of sessions implemented during the IFSP planned service period. Data must be collected regularly based on whatever best fits the intervention, provider, and frequency of visits. All providers on the IFSP team must complete progress reports and discharge summaries.

The Primary Service Provider/Primary Coach (PSP) on the plan is responsible for completing the annual and exit 5AA and a progress report. The annual assessment gives the IFSP team insight into the child's level of development across five (5) developmental domains. The progress report documents the progress made on the specific IFSP outcomes they have worked on during the planned period.

Timelines

- Every six (6) months, each IFSP team provider must complete a progress report on TOTS.
- Progress reports must be provided to the family five (5) working days before the IFSP meeting/discharge. The provider must document on TOTS that the report was given to the family.

Entering the Progress Report on TOTS

Ensure that the correct IFSP is selected from the dropdown menu based on the planned period.

Select the type of progress report: "Progress Report" for ongoing monitoring every six (6) months or "Discharge Report" at KEIS's exit.



The screenshot shows the 'Progress Report' form in TOTS. At the top, there is a dropdown menu for selecting an IFSP, currently set to 'ANNUAL - 05/06/2024'. Below this is a section for 'Add Progress Report:' with radio buttons for 'Progress Report' (selected) and 'Discharge Report'. The form is divided into several sections: '*Service' with a dropdown menu, 'Planned Setting', 'Provider', 'Planned Period', 'Frequency', and 'Attendance/Sessions Provided'. At the bottom left, there is a section for 'Choose Associated IFSP Outcome(s)' with a 'Show Outcome Choices' button. Blue callout boxes with arrows point to these specific fields, providing instructions on how to use them.

Click "Show Outcome Choices" and select the IFSP outcomes that the provider is directly responsible for addressing on the plan. Then select "Add to IFSP Outcome Textbox" and the selected outcomes will populate to the progress report.

Enter the "Service" from the dropdown menu, "Progress Report Date," and the early intervention service delivery details, including the number of sessions provided over the planned period.

Entering the Progress Report on TOTS

The “intervention(s) Used (Choose all that apply):” section documents EBPs used during early intervention sessions. Many providers use a variety of strategies, so more than one (1) EBP can be selected in the data system. The EBPs are grouped into categories due to their specificity and to make it easier for providers to find and select the ones used.

***Intervention(s) Used:** (Choose all that apply)

General Interventions: Adaptation to routine / environment Caregiver coaching Embedded activities Model / demonstration Physical prompts
 Reinforcements Repetition Reward system Sign language or cued language Verbal prompts
 Visual cues

Communication Interventions: Auditory bombardment Communication system: Augmentative Device (assistive technology) Communication system: other (describe in below)
 Communication system: PECS Communicative temptation Imitation / expansion
 Labeling Open-ended questions Parent-implemented interventions
 Sign language or cued language

Cognitive Interventions: Antecedent-Based Interventions (ABI) Choice/consequence Dialogic reading/lap reading Open-ended questions
 Pivotal response training Time delay

Motor Interventions: Active movement activities Balance activities Grasp activities/challenges Positioning
 Reaching activities/challenges Strengthening Weight bearing Weight shifting

Behavioral Interventions: Chaining Fading support Natural/structured consequence Positive directions Prompts / cues Redirection

If Other, please specify:

(1000 chars left)

Select all EBPs that were used during the progress report period.

If an EBP is used that is not included in the list, it can be entered in the “If Other, please specify” text box.

***Data Collection Method(s):**

Checklist Curriculum probes Event/time sampling Frequency counts
 Observations Parent interview Verbal anecdotal notes

Developmental Level: (Note: Please complete Levels of Functioning only for domains for which you provide intervention.)

Level of Functioning	Communication	Motor	Self-help	Cognitive	Social-Emotional
Beginning of period	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Current Level	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Response to Intervention: Text box for narrative

(10000 chars left)

Select all “Data Collection Method(s)” that were used to collect the child and family’s ongoing progress.

In the “Developmental Level” section of the Progress Report screen on TOTS, the provider should enter the child’s level of functioning (age in months) in the “Beginning of period” and in the “Current Level” text fields. The 5AA tools or discipline-specific assessments may be used to determine the child’s developmental levels.

The “Response to Intervention” section of the progress report should include specific ongoing progress monitoring data for the IFSP outcomes. This section should be strength-based and include complete sentences and proper grammar describing the child and family’s progress.

Once the progress report has been entered completely, providers should review their work for spelling and grammar errors. The progress report cannot be opened to make corrections once it has been saved. Once the review is complete, select the blue “Save” arrow at the bottom of the page. Once saved, the report will be archived at the bottom of the Progress Report page on TOTS in the “Progress Report Log” section. Select the “Report” button and TOTS will generate the progress report. Before printing the document, select the “Export to Word”. The report includes a section for the provider’s signature and date. Be sure to sign this document and provide a signed copy to the family. Document in the communication log that the progress report was provided to the family five (5) working days prior to the IFSP meeting/discharge.