



# NJEIS CHILD OUTCOME

<b>Child's Last Name</b>	<b>Child's First Name</b>	<b>MI</b>	<b>DOB</b>	<b>IFSP Start Date</b>
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<b>A Child Measurable/Functional Outcome must identify the skill or behavior we want a child to demonstrate; during routines in their day; and include how it will be known when the child has successfully developed the skill or behavior.</b>	<b>Outcome #</b>	<b>Date</b>
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**Child Outcome Statement:** (What skill or behavior do we want your child to demonstrate; during what routine(s) in their day; and how will we know when your child has successfully developed this skill or behavior?)

**What is happening now?**

**How will NJEIS and your family measure and document ongoing progress toward this child outcome?**  
 Session Notes  Developmental Instrument  Curriculum  Parent Report  Other

**During what typically occurring routines are there opportunities for NJEIS & your family to work on this new skill or behavior?**

During What Routines	Strategies (Result in progress toward the outcome)

**During what typically occurring routines are there opportunities for your family to work together on this new skill or behavior?**

During What Routines	Strategies (Result in progress toward the outcome)

**How will others in your child's life assist in your child's development of this new skill or behavior?**

During What Routines	Strategies (Result in progress toward the outcome)

**Are there supports that are needed for the child to achieve this skill or behavior that are solely within the scope of practice of a licensed therapist (OT, PT, SLP)?**  Yes  No **If yes, explain below.**

(1) What supports or strategies are solely within the scope of practice of a licensed therapist (OT, PT, SLP).

(2) How the therapist will incorporate their work into the child's routines with the family/other caregivers.