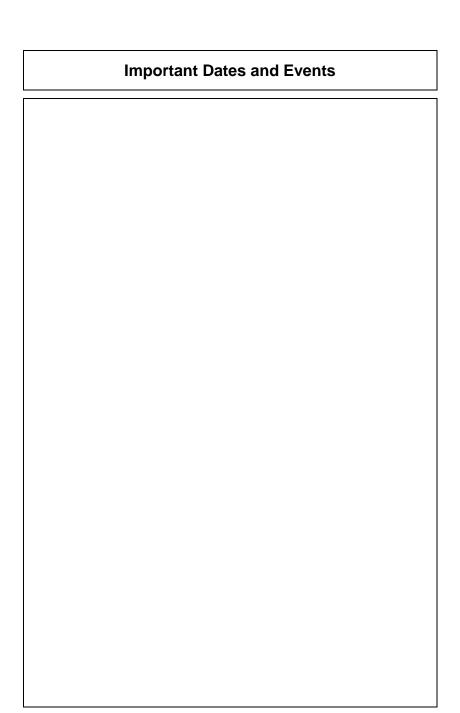
NORTH CAROLINA INFANT-TODDLER PROGRAM INDIVIDUALIZED FAMILY SERVICE PLAN





I. Individualized Family Service Plan (IFSP)

North Carolina Department of Health and Human Services Division of Child and Family Well-Being

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Child's Name:	Yahya Alzawqari	
Date of Birth	2/28/2023	Gender: ⊠ Male ☐ Female
Age at Referral:		Date of Referral: 4/30/2024
IFSP Meeting Date:	5-14-24	IFSP Start Date: 5-20-24
Interim IFSP Date:	□ N/A	
Parent's Name:	Jaillah Alammari	Parent's Name: Ali Ameen
Address:	150 Briarcliff Court	Address:
City/State/Zip:	Thomasville, NC 27360	City/State/Zip:
Phone Number(s): Email Address(es):	(336) 817-4473 Work	Phone Number(s): () -
` ,	Arabic and English	, ,
Language of parent:	Arabic and English	Language of child: Arabic and English
Resident School Dis Thomasville City	strict: Davidson	
County: Davidson		

I. IFSP Team

North Carolina Department of Health and Human Services Division of Child and Family Well-Being

		Phone	Division of Child and Fam			
Name	Relationship/Role	Number	Address	Date	End Date	
			150 Briarcliff Court			
Jaillah Alammari / Ali	Parent(s)	(336) 817-4473	Thomasville, NC 27360	5-14-24		
			3325 Silas Creek Parkway			
Lori Adams	Evaluation Team	(336)-713-7465	Winston-Salem, NC 27103	5-14-24		
			3325 Silas Creek Parkway			
Jamie Clark-Nance	EISC	(336) 713-7498	Winston-Salem, NC 27103	5-14-24		
Natalie Knauf	Special Instruction	850-766-7697	180 Thacker Rd. Rural Hall, NC 27045	8-23-24		

II. Family's Concerns, Priorities, and Resources

North Carolina Department of Health and Human Services
Division of Child and Family Well-Being

Your family's concerns and priorities related to your child's functioning and learning are the focus of your family's Individualized Family Service Plan (IFSP) including the outcomes or goals. The information you choose to provide about your family's strengths, resources and supports is very important and helpful as we all work together to achieve your desired outcomes for your child and family.

Date Family Assessment Completed:	Participants/Team Members:	Name of Family-directed Assessment Tool:		
5-6-24, 5-14-24	Parents, EISC Jamie Nance, Evaluator Lori Adams	Parent report, observation, DAYC 2, SAFER		

Family's Areas of Concern: (Describe challenges or difficulties your child and/or family encounter during everyday activities and routines.) Yahya's family is concerned about Behavior and Autism.

Priorities of the Family: (What could we start with right now that would make a difference for your family?)

Yahya's family would like to know what causes the behaviors and how to help him.

Strengths and resources that assist in meeting the needs of your child and family: (Include people that provide a support system for your family, such as relatives, family friends, co-workers as well as any agencies or services. Also include activities and outings that your child and family enjoy doing, such as playgroups, library story time, going to the park, having picnics, etc.)

Yahya's family have doctors, Insurance, and other relatives to help.

Additional Information: Is there anything else you would like for us to know that may be helpful as we plan supports and services to address what is most important to your child and family?

Routines going well: He goes to bed 9-11, He sleeping through the night, He sleeps in his bed. He can take off shoes and pants. Yahya will use fingers to feed himself. He eats what family eats. He will interact with other children if he knows them.

Routines not going well: Yahya does not like bath time and will cry. He does not dress himself. Yahya has bangs his head when he is mad.

ITP IFSP (Revised 10/13) v.3 (updated 2/20, 5/20, 4/22, 1/24)

III. Summary of Child's Present Abilities and Strengths

Eligibility Evaluation for the North Carolina Infant-Toddler Program

		T = 1	
Child's Name: Yahya Alzawqari		Date of Birth: 2/28/23	Medicaid#: 957186226Q
Date of Assessment/Evaluation: 5-6-2		Child's Age: 14 mo 16 dy	Adjusted Age: N/A
Referral Source & Reason for Referral		•	
Who Participated: Jalliah Alammari, m evaluator		•	
The evaluation team attempted multiple t AHWFB. After multiple failed attempts, th interpretation for the mother as needed a	ne team and the pare	ents opted to move forward rather th	
Evaluation / Assessment Methods:	☑ Record Review		t of Family Enjoyment within Routines
☑ Clinical Observations/Opinion	□ Caregiver Report □ Caregiver R		ssment of Young Children-2
		•	cial-Emotional Questionnaire-2
☐ Developmental Checklist	☐ Audiology Asse	• •	
Child's Health Information:			
Summary of child's current health state birth history, medical conditions or diagnor Records Reviewed: NC ITP Intake/Chill Primary Care Provider: AHWFB Downth Brief Medical History: Yahya was born infection in left ear in April. Growth Parameters: Weight: 20 lbs. 9 Immunizations: Up to date for age Medications: None currently Allergies: No known food or drug allergical Vision: No concerns noted on medical reflection: No concerns noted on medical attempted but no results obtained before What else should the team know about child and family?	oses, illnesses, hosp ld History Form; Wel town Health Plaza full term weighing 7 0.8 oz. Height: 2'd ies eport or by parent; F I report or by parent; child became upset it your child's healt	pitalizations, medications, vision and II-child visit on 4/22/24 II-child visit on 4/22/24 Ibs. without complication. He is in 6 Head circumference: 46 cm Passed instrument-based vision screen; passed newborn screen; Otoacoust	overall good health. Treated for BMI: 16.10 kg/m² eening stic emissions hearing screening was
Behavioral Observation / Functional A	ssessment:		
EISC Jamie Nance and Evaluator Lori Ac started Yahya came right in and picked u finger to put something in a container. WI pretend to eat. He then he used the spot brush to brush her hair. He did get upset want to give it back. Yahya could crawl a with toys. He gave great eye contact duri evaluation. The team heard Yahya make	dams met with Yahy up play phone. He lo hen he was handed on to feed the baby t when dad took a to nd walk to get arour ing the whole evalua	oked at a book by opening and clos a spoon, cup, and bowl he used the for a second. He picked up a bottle by but then moved on quickly. He sh and the room. Yahya also squatted a ation. Yahya did not respond to his r	sing it. Yahya was able to use his e spoon to pretend to stir and then and said "ba." Yahya also used a nook his head "no" when he did not and stood up when he was playing name being called during the

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Child's Name Yahya Alzawqari DOB 2-28-23 Medicaid # 957186226Q«Medicaid» Agency Winston-Salem CDSA

III. Summary of Child's Present Abilities and Strengths

Summary of functional assessments and observations of the child in his/her day-to-day environment. This section provides information about child's unique strengths and needs that will be helpful in determining supports and services that are most appropriate to meet his/her specific needs.

Skills & Abilities

appropriate to meet his/f	Skills & Abilities				
Developmental Domain	Things Yahya Does Well	Challenges or Next Steps for Yahya			
Cognitive (Thinking and learning, how the child solves problems)	Yahya attempts to start a toy if he has seen someone else make it work. He places small objects into a small container and demonstrates the appropriate use of some everyday items. He combines related objects during play, like a spoon and bowl and putting spoon to doll's mouth. He manages three to four toys by setting one aside when given a new toy.	Next, Yahya will imitate scribbling and look at a picture book with an adult, pointing to or naming some simple objects. He will spontaneously name five or more objects and stack six to seven blocks to build a tower. He will imitate using substitute items during play, like using a stick as a spoon.			
Communication (Understanding words and gestures (receptive language), using sounds, words and gestures (expressive language)	Yahya smiles at someone who is talking or gesturing, and he turns and looks toward noises. He sometimes stops an activity when told "no." Yahya laughs out loud and produces the following consonant sounds: /m/, /g/, /k/, /d/, /b/. He uses a word for each of his parents and his sister. He cries and sometimes bangs his head when trying to let his parents know what he needs.	Next, Yahya will more consistently stop an activity when his name is called or when told "no." He will respond with appropriate gestures to "up," "bye-bye" or other routines. He will move his body to music and follow simple commands, like "give mommy the cup." Yahya will use inflection patterns when vocalizing, like raising his pitch as if asking a question. He will spontaneously say familiar greetings and farewells and have a word, sound or sign for "drink."			
Physical Development (Using eyes and hands together with control and coordination (fine motor), strength, coordination and balance of muscles for movement (gross motor) Social/Emotional (Relating to other people, showing feelings, coping in situations throughout the day)	Yahya demonstrates controlled starts and stops in walking and squats to play. He stoops to pick up a toy and stands again without losing his balance. He crawls up steps and is starting to try to run with a hurried walk. Yahya bangs toys together and picks up small objects using his thumb and forefinger. He pokes with his index finger and makes marks on paper while holding a crayon similar to an adult. Yahya extends his arms to familiar people and shows preferences for certain toys or activities. He expresses affection with hugs or resting his head and he imitates sounds, actions, and expressions with his sister. He repeats an activity to elicits a positive response from others and brings toys to share with caregivers.	Next, Yahya will creep backwards down stairs and climb on low play equipment. He will run without falling and walk up and down stairs while holding the rail or wall, placing both feet on each step as he goes. Yahya will turn thick pages in a book and scribble spontaneously. He will develop a definite hand preference for fine motor activities and use his free hand to hold the paper in place while scribbling. Next, Yahya will play well in a group of two to three children, showing some interaction with them. He will spontaneously greet familiar people with hugs or other appropriate gestures and separate in familiar settings without crying. He will attempt to comfort others in distress and insist on doing many things by himself.			
Adaptive (Ability to help self in daily activities, including feeding, dressing, toileting, sleeping, and getting needs met)	Yahya feeds himself with his fingers and chews a variety of textured foods. He cooperates during dressing routines and can remove his shoes and pants. He sleeps through the night with one nap during the day. He fusses when his diaper needs to be changed.	Next, Yahya will drink from an open cup held by an adult and sip liquids from a straw. He will help with household tasks, like putting things away, and try to wash his hands and face. He will continue to gain independence with dressing routines, removing loose clothing and then beginning to put on simple clothing items without assistance.			

III. Summary of Child's Present Abilities and Strengths

Evaluation / Assessment Results Summary:				
Domain/Subdomain	Standard Score	Developmental Level		
Cognitive	103	Average		
Communication	74	Delayed		
Receptive Language	<70	Delayed		
Expressive Language	87	Below Average		
Physical Development	94	Average		
Gross Motor	100	Average		
Fine Motor	89	Below Average		
Social-Emotional	90	Average		
Adaptive Behavior	86	Below Average		

The Developmental Assessment of Young Children-Second Edition (DAYC-2) is a standardized measure of early childhood development in the areas of cognitive, communication (receptive and expressive language skills), physical development (gross and fine motor skills), social-emotional development, and adaptive behavior. A combination of item administration and caregiver report is used to obtain the assessment of development. The average score for each domain/subdomain is 100. Children from birth to age three are eligible for the Infant Toddler Program if determined to present with developmental delays or a diagnosed or established condition which has a high probability of resulting in developmental delays. The specific level of delay must be documented by a standard score of 70 or less in at least one developmental area or documented by standard scores of 78 or less in at least two developmental areas.

Yahya meets eligibility criteria for the North Carolina Infant-Toddler Program due to developmental delay.

Recommendations:

- 1. Enrollment in NC Infant Toddler Program to address presenting concerns discussed with caregiver.
- 2. Continue routine pediatric care already in place.
- 3. Yahya's OAE hearing screening was not able to be conducted today. Upon discussion with the IFSP team, the plan for follow-up is that EISC will attempt at future home visit.
- 4. Yahya passed instrument-based vision screening. If any concerns persist or arise, discuss with your child's physician who can assist with rescreening or referral.

ITP IFSP (Revised 10/13) v.3 (updated 2/20, 5/20, 4/22, 1/24)
Child's Name Yahya Alzawqari DOB 2-28-2

North Carolina Department of Health and Human Services Division of Child and Family Well-Being

III. Summary of Child's Present Abilities and Strengths

Child's Health Information:

Summary of child's current health status based on review of pertinent records and/or parent report. (This may include child's birth history, medical conditions or diagnoses, illnesses, hospitalizations, medications, vision and hearing status, or other information):

What else should the team know about your child's health so we can better plan and provide supports and services to your child and family?

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IV. IFSP Outcomes

Outcomes must be measurable and reflect changes the family would like to see happen for themselves and their child.

Outcome # 1 What would you and your family like to see happen for your child/family in the next six months? (The outcome must be functional and in the context of everyday routines and activities.) Yahya will use words and understand directions given to him throughout his daily routine	What's happening now related to this outcome? What is your family currently doing that supports achieving this outcome? (Describe your child and/or family's functioning related to the desired change/outcome.) Yahya can babble. But needs to understand what is being said to him and use words.		
What are the ways in which your family and team will work toward achieving this outcome? Who will help and what will they do? (Describe the methods and strategies that will be used to support your child/family to achieve your goals within your daily routines and activities. List who will do what.) The EISC will meet with Yahya's parents and SI to check on progress being made on Communication for Yahya.	How will we know we've made progress or if revisions are needed to the outcomes, strategies, or services? (What observable action or behavior will we see that will show us that progress is being made? Are there other procedures being used to measure progress? What realistic timelines will be used to determine progress?) When Yahya can use words to make request drink, eat, play, and understand the directions parents are giving him. Start Date: 5-20-24		
The EISC will be available to help locate other resources should	Target Date: <u>11-20-24</u>		
Yahya's parents and/or the other team members request assistance.	How did we do? (Review of progress statement/Criteria for success)		
	Date: Achieved. We did it!		
	Date:		
	Continue. We are part way there. Let's keep going.		
	The situation has changed:		
	Date: Discontinue. It no longer applies.		
	Date: Revise. Let's try something different.		
	Date: 8-23-24 Explanations/Comments SI was added weekly		

North Carolina Department of Health and Human Services Division of Child and Family Well-Being

V. IFSP Service Delivery Plan

Early Intervention Service	Provider	Projected Start Date	Actual Start Date	Location/Most Natural Environment	Frequency/ Length/ Intensity/ Method	Payment Arrangement & Cost to Family	Anticipated Duration	Date Ended
Service Coordination	WS CDSA	6-19-24	5-20-24	Home	15 mins monthly individual	No cost/ Medicaid	2-27-26	
Special Instruction	ED Path	9/27/2024		Home	60 mins weekly individual	No cost Medicaid	5-20-25	
Other Services:	Provider:	Start Date:	End Date:	If	needed, how El will he	elp family access	other services:	
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 DOB 2-28-23
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