



**A comprehensive book on  
Individualised Educational Programme (IEP)  
for Children with Deafblindness and  
Multi Sensory Impairments**



Working with deafblind people  
throughout India

**Resource and Information Unit**





# sense

## International (India)

Working with deafblind and multi-sensory  
impaired people throughout India

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## Acknowledgements

Creating and evaluating Individualised Education Programme for students with deafblindness is a major responsibility for the multidisciplinary team who work with these children. Writing a complete Individualised Education Plan is often perceived as a very challenging task by many special educators. This IEP booklet is thus a step by step guide for understanding, developing and writing effective IEP for a child with deafblindness. Sample goals in some areas have also been included for ease of understanding.

The Individual Education Plan booklet has been specifically designed considering unique educational needs of deafblind children and could be an essential resource for everyone working with individuals with deafblindness. The purpose behind developing this booklet is to support all special educators and families working with deafblind children to understand the importance of a systematically documented educational plan and its contribution to the overall development of the child with deafblindness.

We thank all deafblind children and their educators for putting forth the need for this information booklet. We would like to thank Ms. Neera Malhotra for her valuable contributions. The credit for this booklet also goes to the ungrudging efforts put in by the entire team of Sense International (India). Special mention goes to the contributions, resourcefulness and diligence of Ms. Sampada Shevde, Ms. Brahada Shankar, Ms. Hervinder Kaur, Mr. Uttam Kumar and Mr. Sachin Rizal. They have constantly reviewed the sections of chapters, by editing, adding, compiling with never ending enthusiasm. We also appreciate the efforts of Mr. Shivkumar Sharma for designing and art lay out of the booklet.

Thanks!

A handwritten signature in blue ink, appearing to read 'Akhil Paul', with a stylized flourish underneath.

Akhil Paul  
Director



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## 1. Introduction

The objective of developing this document is to help the educators to develop conceptual fact about Individual Education Programme (IEP) and enable them to document a detailed plan for children with deafblindness and MSI. There are number of causes that lead to both vision and hearing loss. This makes it mandatory for an educator to select the best educational approaches to use, or give direction to long-term educational/medical follow-up. A systematic plan would help the educator to monitor the progress of the child properly. A sample of IEP has been added for your reference at the end of the booklet.

*This booklet is a small contribution from Sense International (India) to deafblind field. For easy accessibility of information for people with sensory impairments this booklet is also available in Braille, tape and large print on request.*

***Though utmost efforts are being made to ensure that the information in this booklet is complete and accurate as possible. This text should be used only as a general guide and not as the ultimate source of writing and publishing information. The purpose of this book is to educate the reader and can in no way be taken to reflect the views of the European Union.***



## 2. Understanding and Developing an IEP



*Child expressing her happiness after completion of the activity.*

The term "IEP" refers to **Individualised Education Programme**, and is most often used in conjunction with special services or for providing instructional services for a child with special needs. An IEP is developed to provide comprehensive information that provides for suitable decisions to be made about a child's educational placement. The IEP for a deafblind child is a written plan describing the specific education and related services designed to meet the unique educational needs of a student with deafblindness. It contains objectives and goals based on the child's present level of educational performances, it specifies the educational placement, settings and describes the related services and support which is necessary for the child to benefit from the special education program. A multidisciplinary team comprising of professionals, the child's parents and the child (where appropriate) meet to develop the IEP. The team discusses and focuses on the specific information about the child's strengths, needs, concerns, as well as parent's ideas for enhancing the child's education. Results of evaluations & assessments of the child, both formal and informal, are considered to form the base for the IEP. The IEP as a document is extremely need based and considers the child as a whole, taking into account various areas of development.

## Why is an IEP needed?



*Child exploring various toys to find the one of interest to him*

A child who has difficulty in learning and functioning and one who has been identified as a special needs child, is the one for whom an IEP is planned. An Individualised Education Programme acts as a planned pathway on which the educator/the parents, the therapists and the team help the child to be self reliant and adequate enough to be self dependent.

## Who is responsible for developing the IEP?

To create an effective IEP, the team should usually include the following members:

- Parents, family members, peer group or caregivers
- Special Educator/ field /CBR staff in home based or community based setting
- Class room teacher (if child is in inclusive education)
- Specialists such as counsellors
- Therapists - speech, physio and occupational
- Other medical professionals like Ophthalmologist, Psychologists, Vision Consultants, Audiologists, etc
- Child, wherever possible



All these professionals bring in their respective skills and areas of expertise and different perspectives which help to plan a holistic document for the child. Without a doubt, writing and implementing an effective IEP requires teamwork.



*Team of professionals planning for IEP of a child*



While developing an IEP the team must keep in mind the importance of certain things which are as follows:-

**Shared information** about the child's educational needs and the available resources to meet them

**Shared decision making** about the options that will best address those educational needs

**Shared implementation** assuring timely and professional follow through with the decisions made by the team

**Following aspects should be the focus of discussion in a meeting to plan IEP of individual with special needs**

- General and relaxed discussion about individual with special needs, his/her family, community and the school.
- Outcome and evaluations of previous IEP's objectives.
- Reviewing long term goals.
- Identifying long term goals.
- Figuring out the key focus areas
- Sharing skills that have been accomplished and identify and categorise current needs.
- Identification of objective and curriculum that ensure achievement of these needs.
- Identification of indicators or learning outcomes that guarantee achievement of needs.
- Selection of priority achievement objectives.
- Allocation of roles and responsibilities for recording IEP, its planning and execution and assessment and evaluation
- Finalising review date of next meeting

### **What is the process of planning an IEP?**

The process of developing IEP is based on the very common and widely used regular teaching model based on systematic approach of

**Assessing ➡ Objective setting ➡ Teaching ➡ Monitoring ➡ Evaluating ➡ Reassessing ➡ Further planning**

When we start programming for a child with deafblindness, we start from where the child is at present and aim at where we anticipate the child to be after specified period of time. There are several components with which includes a complete IEP document.

IEP includes the details regarding the following components:

- General Information about the child/family
- Medical information – medical history, diagnosis, any medication, etc
- Brief Profile of the child highlighting strengths and concerns in various areas
- Present level of functioning of the child
- Annual goals
- Short term objectives
- Selection of Special education and related services
  - Teaching Strategies
  - Adaptations required in Teaching Learning materials
- Evaluation

### **Present level of functioning**



It is defined as how the child performs the task with his/her specific set of skills in the present situation.

This section of the IEP should have both demographic information and description of child's strengths and needs. It should also include information about what the child can do, what his or her strengths are, and what learning style he/she follows.

When preparing and planning what should be there in our IEP, we focus onto the assessment profile of the child. A detailed assessment done in all the areas like personal, social, communication, motor needs, gives a clear picture of child's individual needs and strengths. These strengths and needs of the child, is the basis for both instructional design and the IEP.



*An educator assessing the child's present level of functioning using assessment tools involving play.*

For example, for a child who is blind/low vision and has moderate hearing loss the present level of functioning that is concluded after detailed assessment is *"she, understands basic signs such as "stand up", "sit down", "more" and "eat", and responds to verbal cues (when she hears a voice she extends her hands towards the voice of a known person), makes little use of her voice, does vocalise sometimes, communicating mainly on a preverbal level, by physical responses to what happened, and sometimes, by manipulating other people.*

After a detailed observation and formal assessment schedules, it was decided that, the child should be taught to associate objects closely to the events that are scheduled in her routine. She also needs visual cues, in the form of objects; for example, presentation of plate and a spoon before the meal time activity, which will help her to anticipate the activities in her routine. Once, this has been established, we can take her to the next level.

**Child's entry level performance is the key for developing IEP and helps in working on the instructional objectives.**



### 3. Annual Goals



*On the right Meena a deafblind girl who is receiving education in the main stream school.*

All children and adults receive education in order to achieve long term aims for their life. Individual with special needs are no different. However, while teaching deafblind individuals, often much time is spent focusing on the details of the day-to-day programme and activities, planning and implementing programme helps in learning new skills and understanding the new information, step by step. It is vital, therefore, to take time to step back and look at the 'big picture' of what the child, parents and other team members want the child to be able to do in the future, appropriate to the level and strengths.

The team can do this by formulating a long term aim or annual goal. These goals provide direction for the IEP process for a number of years. It should be briefly revisited and recorded at the outset of each IEP planning meeting to direct the team as they plan. Annual goals are selected for long duration, a year for the child and these are part of aims that are taken for consideration based on the prioritisation.

*Annual goals indicates the goal for a year to accomplish needs that enable the individual to participate in activities that are otherwise restricted due to limited functional ability. It also includes the evaluation criteria that help in indicating the achievement of objectives.*

The educators and parents often come to the stage of total anxiety and get concerned as to how to go about selecting the goals as per different areas that are just right for the present stage of the child's performance level. Planned selection of goals for a year describes what an educator or a parent expects from the child to reach or accomplish the goals. It is important that each set of annual goals prepared by the educator should be measurable, that can be described in measurable objective.



**Example 1:** *Shila will identify her tooth brush and brush her teeth moving in both sideways and up and down direction in one year's time.*

Here, you would observe, the expected skill to be learnt 'identify brush' and move in up and down, sideways' is specifically mentioned and is restricted to the desired time span. Hence in developing Annual goal the following aspects must be considered : –

- Develop Annual goal that is measurable
- Develop goals that correlate directly with the child's present level of performance
- Develop goals that are not too broad and vague and should capitalise on the child's strength, past level of performance and preferences.
- Prioritise child's needs
- Develop a goal for each area as per need

### **Prioritising annual goals**

Goals must be realistic, that is it should be achievable. It is important to select and plan goals for the child which are of immediate need for the child, for example, after knowing the present level functioning of Vinod, aged 8 years, if keeping in mind the personal domain, it was noticed that he requires training in indicating toilet needs and identifying own belongings. Based on the age of the child, and taking into consideration all the team members view point, the selected annual IEP goal for Vinod could be to indicate toilet needs.

When goals are selected, it should be noted that, goals should give opportunity to the learner to enhance his/her skills and also should be achievable and relevant to the needs of the child. They should be stated in positive and measurable terms (i.e. what the student will do, not what they will not be able to do) *and should focus on what should be the learning rather than what will be taught.*

*Some examples are:*

- Koyal will communicate her needs when in discomfort spontaneously without any prompting through vocalization.
- Swarn will sit at her own place on average of 2 to 3 times each day.
- Ravi will use sign language to communicate at least three personal needs, such as: the need for toileting, drinking and eating.



## What are the criteria for prioritising annual goals?

- Priorities of the student and parent
- Current level of functioning of the child
- Effects of disability
- Child's present level of performance
- Age appropriateness
- General education curriculum for their grade level if applicable
- Child's past achievement
- Usefulness of the goal in other settings (i.e. work, home, community)
- Contribution of the skill to the independence, social and vocational rehabilitation of the student

## Writing Measurable Annual goals

Once the goals are prioritized, it is important to write down these goals into measurable terms and break the annual goals into short term achievable objectives. When writing the goals, it should be specific to what is expected out of child after a year's time, for example "*Seema will use sign for indicating toilet need when required at a public place*" like wise the written statement should be able to express what exactly is expected out of child after a certain period of training, it should be relevant to the needs of the child.

IEP goals include three components that must be stated in measurable terms:

- (a) Direction of behaviour (increase, decrease, maintain, etc.)
- (b) Area of need (i.e. communication, social skills, transition, orientation & mobility etc.)
- (c) Level of attainment (i.e., to age level, without assistance, etc.)

## Short Terms Objectives

*In addition to preparing annual goals, the IEP team must also prepare short term objectives to describe how the child will attain or reach these annual goals. These short term objectives also must be measurable and must include evaluation procedures which determine outcomes.*

The selection of the short term objectives out of selected annual goals will **depend not only on the present skills but also on their needs in relation to the different environments within which they live and learn**. For example, when considering a child having sensory impairments, an analysis of need for the child will help in identifying the annual goal of improving communication using sign language vocabulary. Short term objectives could be, to sign, about the activities and meaningful objects in her daily life. A breakdown of the skills required to meet this goal generates a number of potential short-term objectives.



At this point, you as a teacher have a guideline to assess the present level functioning of the child in terms of the communication level. This step is important as the functional assessment will give you an idea about the short term objective to be selected.

**The 2<sup>nd</sup> step in identifying short term objectives**, is to choose, those that meet the needs of the individual child. In this step, teacher along with other team members' evaluates the present level of performance against many potential short term objectives. For a child with deafblindness having additional disabilities, there are a large number of areas that require attention (each area having a large number of potential short term objectives) but, we must accept that, it is not possible to cover all the needs of the child in one academic year. Therefore, pick those short term objectives that the child needs to accomplish - called prioritising the need along with other objectives which may be necessary.

### **How Short Term Objectives are linked with annual goals?**

#### Brushing



***Educator helping child to brush teeth.***

Short term objectives are derived out of long term goals, annual goals are broken down into teachable components, to be carried out in less duration of time.

*For example in the above example:*

Shila will identify own tooth brush and brush her teeth moving in both sideways and up and down direction in one year's time.

Here, short term objective would be to identify own toothbrush when two other brushes are present, in the period of three months, three out of five times correctly.

To accomplish a part of annual goal, specific activity is selected, that is measurable (three out of five times), that can be achieved, (simpler component of the whole task to be covered in a year), realistic (the task selected is the subtask that can be taught linked with the ultimate task to be accomplished), and this is time bound (with in a period of three months).

Short term goals are the simpler subtasks from the annual goals that are taken for short time to reach to the ultimate goal.

## What is the process of translating annual goals to the short term objectives?



Short term objectives, breaks down the entire curriculum and are taught in three to four months of time. These are the specific skills that are taught with an evaluation criteria, under specific situation within a given time duration/period.

### How to write measurable short term objectives?

When talking about these objectives, there are standards that help to monitor the progress of the child. It helps the teacher to pin point her own strategy and makes it systematic and easier to know where s/ he stands.

*Each specific objective has a condition, criteria, context and duration.*

To make it easier to remember, let us use **SMART** goals, where:

**S: Specific** skill that the child will learn

**M: Measurable** and observable – the behaviour in the child you can see and assess if the child has learnt the specific skill

**A: Achievable** for the child and not too complex for the child to learn within the three to four months time frame. Or too simple that the child learns it very fast or bored of doing the same thing again and again.

**R: Relevant** to the child's immediate environment. It's a realistic skill that will help the child being independent in future and is something that the parents are keen for their child to learn.

**T: Time bound** a fixed period of time that you give yourself and the child to learn this skill. At the end of this time period you will assess if your child has learnt the skill. You will also assess if the strategies and materials you used, helped the child learn this skill.

**Example:** *When given mixed rice and dal, meena will eat using spoon with very little spilling, within a span of 30 minutes, after being trained for three months.*

Children with deafblindness require several other related services that are required to be part of the Individualised plan for them to sustain their life independently.

### **Teaching Strategies and Implementation of the program**

When considering children with deafblindness, special educator and parents need to be very creative in presenting the skill to teach. No single strategy or group of strategies will meet the needs of every child.

Teaching strategy is **different from the curriculum plan**, it consists of different methods that a teacher uses to teach a particular skill. Teaching strategy does facilitate to reach out to the need of the child; however it is not the solution if the goals selected are incorrect for the child.

**For every objective the strategy gets changed**, however the best strategy is to involve different objectives in one single activity to make most of every opportunity for learning. However remember to focus on your exact objective/s whilst carrying out the activity alongside the child. It is the responsibility of a special educator to organise and arrange all that is available in the physical environment to maximise learning and to prioritise learning goals and pursue them.



## 4. Approaches Involved while Designing and Implementing Teaching Strategies

### 1. *Creation of effective environment:*

Creation of environment that would foster maximum learning is the prime thing that a teacher needs to act upon to facilitate the teaching and learning process in a systematic manner

### 2. *Adaptations to the physical environment:*

The physical arrangement of the room, lighting, noise level, location of materials and resources, accessibility to other rooms, technology rooms etc, proximity of peers and teacher are all considerations for environmental modifications.

### 3. *Adaptations to the class programme*



Delivery and design of the programme can be adjusted by:

- Allowing more time for the task
- Pacing the lesson differently
- Ensuring a variety of ways of processing information
- Setting up structures that enable achieving smaller steps to the goal
- Checking more frequently than usual for understanding
- Giving more frequent feedback
- Simplifying questions/instructions.

Demands of the curriculum can be adjusted by:

- Lowering the performance expectations in either or both quality and quantity
- Presenting the content in a simpler way
- Presenting the content in a creative way
- Giving more opportunities for practical applications of the content.

This is not a comprehensive list of adaptive strategies. It merely indicates some of the ways that curriculum and lesson design and delivery may be adapted. Remember, deafblind children learn the best, when they do the activity themselves.

Some deafblind children or adults will require only small changes to the programme while others may need major changes or a completely different programme, depending on their needs.

#### *4. Modifications to resources and materials*

Instructional materials enable deafblind children and adults to access information and demonstrate their mastery of the key concepts. Materials have to be adapted to allow them to access the information or demonstrate their understanding.



This can be done, for example by:

- Simplifying resources and materials precisely
- Using different resources and materials
- Enlarging print
- Using Braille prints
- Provision of support personnel

Despite the adaptations and modifications in the teaching learning process, some deafblind children or adults need higher levels of assistance than can be provided by the teacher or key person.

**The decision to provide extra support should only be made after the curricular adaptations and accommodations have been established.**

The need for assistance may vary from day-to-day or be needed at predictable times, be required only from time-to-time or, for a small number of deafblind children or adults, continuously.

There is no doubt that some children or adults with deafblindness require quite intensive support for large parts of the day and the IEP should identify that support, when it is needed. However, to facilitate independence, support that can be provided by the teacher and peers should be employed to the greatest extent possible.

An implicit goal in programming for children with deafblindness should be, to increase independence and to reduce the need for support over time wherever possible.



## 5. Different Teaching Strategies

1. *Stability*: The word stability refers to the orderly approaches that would help the child to predict about the environment. Structured environment supports structured learning. It acts as a motivational security that in turn builds in confidence in the world of the child. Structured learning, builds in a sense of achievement.

2. *Routines to create stability*: If we have our routines scheduled, it helps us to creatively structure our daily plan. Similarly, routines allow the child to experiment with more confidence in a predictable situation. Teaching curriculum is embedded around such routines.

3. *Role of Motivation*: The whole concept of learning is based on the hidden motivational aspects linked with it. Here comes the teacher's role - your motivation to lead on with task will motivate the child in turn to act with you and enjoy with you. Children with complex disabilities need a constant rewarding environment, this may be in the form of material reward, to create and maintain that enthusiasm in them.



*Educator and children in a classroom setting.*

Interesting activities by the teacher will help the child to remain motivated to learn ahead. It is important for the teacher to know many different things that will motivate, encourage and engage the child to learn in a meaningful way.

4. *Small steps (Task Analysis) in implementation of the goal*: Before introducing the entire activity to the child, if it is broken into smaller steps, it not only helps him to learn faster but also helps in building up a sense of achievement. Analyzing the task and dividing it into smaller steps will help the teacher to teach in a more comprehensive manner. This process is referred as 'Task Analysis'.

5. *Pace of learning*: It refers to the time required and taken by the child in learning any task. Based on the individual needs, each child has his/her own learning pace.

6. *Repetitions of the task*: Due to restricted or limited input from the senses, children with deafblindness & MSI may need more repetitions of an activity than other children. When the task is mastered, the child is given many opportunities to put it in use.

7. *Presentation of the task*: The task is designed and implemented in such a way that it is of maximum use for the child's abilities. The Teaching Learning Materials (TLM) should be designed in such a manner that they represent exactly what they ought to, should be more easily seen, heard or explored tactually. Teacher also needs to design the material specific to the child's need, taking in consideration the strengths and limitations of the child. It is important to give consideration to the time of day, when the task is presented to the child. It should be taken care that the task is presented to the child, when s/he is most responsive towards the task, so as to get the maximum teaching learning relationship.

8. *Prompts*: Prompts are the cues/indications given to the child to perform the task given. Initially the child may need high level of prompting that is gradually reduced. This process of gradual reduction in the levels of prompting is called as fading.

9. *Working hand over hand*: An adult may place their hands slowly and gently over child's hands to show him/her to perform a task. However taking too much control of the hands of the child, who does not see well can frighten him/her and make him/her distressed, pull his hands away. His hands are the prime source of information, and taking control of them is like having a hand placed over one's eyes. Hence, teachers need to use this strategy in moderation, along with other strategies.



***Educator supporting a child with verbal prompts***



***Educators supporting child with hand over hand technique***



## 6. Evaluation and Feedback

Last but not the least, evaluation is the most important part of the entire IEP. It gives the overview of the entire programme, right from the beginning till end. It is the step that helps evaluator/special educator to pinpoint the loop holes or effectiveness of the program developed and implemented in various areas. Based on the evaluation, appropriate changes can be introduced in the IEP.

### **What if the student has mastered a goal before the end of the school year?**

Children grow and change rapidly. Their educational needs also change rapidly. If the IEP needs to be revised more often than once a year, parents and teachers should ask for a meeting to revise the IEP document. An IEP can be revised as often as necessary. But this should be done at least once a year at the annual review meeting.

### **What if the student has failed to reach a goal by the stated time?**



If it becomes apparent that a student is "off track" on an annual goal and its related short-term objectives, an IEP meeting should be called to re-examine the delivery of instruction and the techniques used for the objectives, the relatedness of the objectives to the goal, and the appropriateness of the goal.

The IEP should be revised and implemented.

### **Error Analysis and Error Correction**

Error Analysis is a kind of technique that a teacher uses as "educational detectives", analysing clues to solve the severe learning problem of the learner, what is the reason that he/she is unable to acquire the skill, whether its the strategy that needs modification; the way the task is presented; the environment; pace at which it is being taught or the teaching learning material to name a few. It allows the teachers to pinpoint the conceptual mistakes being made either by the child or by the teacher and interpret reasons for not achieving the desired goal ("what is the nature of error? what is the most likely cause of the error?") This helps the teacher to identify the area in which s/he has to work upon. When identified, different strategies can be planned out to overcome the situation. The analysis now becomes the present level of functioning of the child to reach out to the next stage in the annual goal.

Error analysis and error correction is an important form of evaluation of the success of IEP.

## 7. Sample IEP Programme

- THIS IS A SAMPLE FOR WRITING/DOCUMENTING IEP FOR AN INDIVIDUAL CHILD.
- IT INCLUDES A DETAILED ASSESSMENT REPORT.
- IT DOES NOT INCLUDE ALL THE AREAS.
- ONLY FEW SKILLS FROM ONE AREA HAS BEEN GIVEN FOR REFERENCE.

*The information collected needs to give maximum inputs in the areas such as the child's communication, social interactions, self care needs, mobility needs, vision and hearing use, position and posture, hand functions, functional academic needs, work related activities, recreation and leisure time interests and community participation needs.*

### INDIVIDUALISED EDUCATIONAL PROGRAMME

**Name of the child:** XYZ

**D.O.B.:** 08-12-1997

**Age:** 9 Years

**Sex:** Female

**Admission No.:** 000000

**Date of developing IEP:** 4th September 2006

**Period of IEP:** 1st September to 31st December 2006

**Person responsible to implement IEP:** VKS

**Diagnosis/condition of the child:** XYZ is totally blind. She has glaucomatous cornea and she has some extent of hearing loss in her ears (according to ENT specialist). Her auditory assessment (BERA test) has to be conducted with her complete cooperation. According to functional vision assessment, she has perception of light in dark room. It was retrieved that she is able to locate the candle or torchlight. Functional hearing assessment revealed that she is able to hear little louder voice and follows the basic verbal instructions also, but has difficulty in localising different sounds.

**Associated condition/s:** None

**Other services required/provided (like medical services, physiotherapy, occupational therapy, speech therapy, counselling etc.):** XYZ is getting regular clinical assessment services from child specialist, ophthalmologist, ENT specialist and speech therapist. She has a disability certificate for blindness.

**Assessment reports (Strengths of the child):** XYZ is a bright girl. She learns new activities when it is explained and demonstrated through tactile modes. She takes some time to understand the activity and execute the same. But after some repetition she understands it very well.

She follows the basic verbal instruction (little louder voice) simultaneously with sign language. She understands the basic signs of things which are used in her activities throughout the day.



## Area wise assessment (Strengths) of the Child:

### Activities of Daily Livings:

**Brushing:** She is able to move brush on front teeth independently; she can brush sideways with physical assistance at wrist. She is able to rinse mouth after brushing and requires minimum physical and verbal assistance for keeping the material back in Almirah.

**Bathing:** She can undress with minimal physical assistance, she is able to pour water on body and applies soap without assistance, except on the legs and hands, where she needs physical assistance (at wrist). She can rinse off soap independently.

**Dressing:** She is able to undress and keeps her clothes at proper place with verbal command and physical assistance to keep it in a proper manner. She needs assistance (hand over hand) in fastening the buttons of clothes.

**Grooming:** She applies hair oil on her own and combs her hair with physical assistance, and also applies talcum powder on face with physical assistance.

**Eating:** XYZ is able to eat food when served. She is able to locate rice, daal, and vegetables in plate, mix it up properly and eat without assistance.

**Toilet:** She indicates toilet needs by removing her under wear and goes out of home. She goes to toilet with the help of caregiver (with sighted guide). She washes by using her hand when caregiver pours water.

**House Hold Activity:** Able to clean the vessels with physical and verbal assistance, sweeps the floor with broomstick, needs physical and verbal prompt to execute task properly, needs help to take water from hand pump (hold the bucket and to use the cane properly), cuts vegetables like potato, brinjal, pumpkin etc.

### Communication

**Receptive:** XYZ is able to understand basic verbal instruction. She follows two words sentences like bring cane, bring matching board etc. She is able to identify person by touch, touching the object cues and voice of person.

**Expressive:** She expresses her needs by vocalization (for food and water), by touching objects and person, she signs for tea, food and water and indicates hunger by physical gestures and facial expressions.

**Social Development:** XYZ likes to play with other children. She goes to neighbourhood to play. She is able to go to shop and purchase chocolate, biscuit etc. She responds by smiling when she understands what others are talking to her.

**Orientation and mobility:** XYZ moves around her home, is able to go to Aanganwadi, hand

pump, shop and temple with physical assistance (physical prompt needed to locate right direction) and verbal prompt.

**Academic:** XYZ scribbles on copy with pen, turns over the pages of books and copies of her siblings, matches different shapes on shape board.

### **Sensory**

**Touch:** XYZ is able to identify different things by touching it, which is used in her activities. She is able to sort different vegetables, different types of things e.g. potato/onion.

**Taste:** She is able to identify food, vegetables, tea, fruits (banana, apples), sweets, salty things and snacks.

**Smell:** She is able to identify foods-rice, roti, potato vegetable by its smell.

**Leisure and recreation:** She likes to play with other children and her brother and sisters and with her parents. She likes to listen to music (songs) and to play piano.

**Any other relevant information:** She had normal vision till the age of six, at 6 years of age she lost her eyesight due to some infection and did not get proper treatment for that, she still has visual memory of some activities that is helpful in her training. Her auditory assessment has to be done.



## Goal for one year (Sample Annual Goals)

### Activities of Daily Livings:

**Brushing:** She will brush her teeth independently & will learn to apply tooth paste on brush with minimum physical assistance.

**Bathing:** She will learn to take water from hand pump before bathing and learn to apply soap properly with verbal assistance.

**Dressing:** She will wear clothes with minimum physical and verbal assistance and will fasten buttons of the shirt independently.

**Grooming:** She will locate her grooming articles and will comb with verbal assistance.

**Eating:** She will learn to take food from kitchen with minimum physical and verbal assistance.

**Toilet:** She will indicate for toileting by giving sign, and go to the toilet on her own and will clean with minimum physical assistance of care givers.

**Household activity:** She will do house hold activities – taking water from hand pump, cleaning the vessels, arranging her belongings in proper place with minimum physical assistance.

### Communication

**a) Receptive:** She will understand signs of basic instructions i.e.-Eating, bathing, brushing, toilet, grooming, cleaning the vessels, sweeping, taking water from hand pump, mother, father, brother, sister, teacher etc. Her receptive vocabulary should add new 70 words related to her daily usage in signs and understand 3-4 words sentences.

**b) Expressive:** She will express her needs for food, water, toilet, playing and bathing; also give signs of mother, father, sister and brother.

**Social Development:** She will interact to neighbours, other children, and others in neighbourhood, and greet them with 'Namaste'.

**Orientation and mobility:** XYZ will go to shop; hand pump to take water and neighbours to play with peers independently.

### Sensory

**a) Touch:** Will sort different types of textures i.e. - soft/hard, rough, smooth, things-small/big, short/long, and different shapes.

**b) Taste:** She will identify more tastes – different kinds of fruits, different taste like sweet, salty, sour, bitter etc.



**c) Smell:** She will identify different kinds of fruits - Banana, Apple, and Orange by its smell.

**Leisure and recreation:** She will participate in playing games like hide and seek with other children (with adaptation in playing articles).

**Parent's Priority for the child:** XYZ should learn to indicate/express her needs clearly or should learn to give clear sign for her needs.

XYZ should learn to execute the activity within appropriate time, should be independent in toilet activity. She should be more independent in her self-help activities.

## **SHORT TERM OBJECTIVES**

### **☞ Activities of Daily Livings:**

#### **AREA: Brushing**

**Current Level of Function:** XYZ is able to locate her brush, toothpaste and mug. She is able to move brush on front teeth independently; she can brush sideways with physical assistance at wrist. She is able to wash after brushing and to keep the material back at right place.

**Objective:** XYZ will brush her teeth sideways with minimal assistance (verbal instruction only), after being trained for one month.

**Key communication to be developed by this objective:** brush teeth, left side, right side.

#### **Strategies for achieving the specified objective (mention the steps, reinforcement, teaching strategies, materials, place used):**

XYZ will brush her teeth every morning. She will be assisted by her mother (care taker) while brushing. XYZ will reach to the place of brushing on her own. Her mother will come along with her. XYZ will identify her brush, and will take it out from the brush stand. She will give her brush to her mother to apply the toothpaste. Her mother will tell XYZ to start brushing. XYZ will brush her front teeth independently. Her mother will observe XYZ, when she is doing this activity. Now her mother will prompt physically to brush the left side and then right side of her teeth. XYZ will carry other steps independently. After completion of the activity, her mother will say "Very Good".

- Allow the child to brush on own (frontal teeth)
- Instruct her to brush the side teeth (by giving sign with verbal command).

- Demonstrate by giving physical assistance at wrist.
- Allow the child to do on own, with verbal assistance.
- Allow to brush on own with minimum verbal prompts.
- Allow to brush with no assistance.

**Reinforcement identified for the child:** She likes to bath.

As a reinforcer, the child will be given ample time while bathing right after the activity.

**Key person Involved:** Parents/Care giver; Special Educator.

## **AREA: Bathing**

**Current Level of Function:** She is able to bring water from hand pump for bath with physical assistance to hold the bucket and to use the mobility cane properly, she brings her belongings at bathing place from her Almirah. She undresses with minimal physical assistance, she is able to pour water on body and applies soap-she applies without assistance but she cannot apply well on legs and hands. She requires assistance to scrub all over her body with soap. She can rinse off soap independently.

**Objective:** She will learn to apply soap on legs and arms properly and scrub herself all over after applying soap, after being trained for three months, independently.

**Key communication to be developed by this objective:** Sign of soap, water bucket, water, almirah, mug, and action to apply soap and scrubbing movement.

**Strategies for achieving the specified objective (mention the steps, reinforcement, reaching strategies, materials, place used):**

- Allow the child to apply soap on her own.
- Demonstrate the correct way of applying soap using hand on hand technique.
- Demonstrate to apply soap on arms and legs.
- Using hand on hand demonstrate how to scrub.
- Allow the child to apply soap with reduced assistance, from hand over hand to little assistance restricted to wrist area.
- Allow the child to apply soap with no assistance.
- Repeat till learnt completely.

**Reinforcement identified for the child:** Child likes to play with water. She will be allowed to play with water while bathing, after she scrubs herself properly and applied soap all over.

**Key person Involved:** Parents/Care giver; Special Educator.

**IN A SIMILAR MANNER GOALS CAN BE DEVELOPED UNDER OTHER AREAS.**



## **Individualised Education Programme Format (Developed by Sense International (India))**

The Individualised Education Programme (IEP) is a written education plan that describes the education and related services. It is called so (Individualised), because the education /training programme is specifically designed to meet the learning needs of the individual child rather than general syllabus for a group or class full of such children. The IEP also specifies the instructional strategies to be used with the child, the interests and likes, her preferred mode of learning, her pace and speed of learning, and limitations due to other associated problems including motor difficulties. In other words it is a complete education/ rehabilitation Programme in itself for an individual child that will be implemented for a specific period of time. Thus, the main aim of the IEP is to provide appropriate education and training to the child.

The IEP is a written plan that an educator follows for the child to meet her needs to convert them into strengths, or say reach out to the maximum possible manner to create self dependency.

IEP is both a beginning and an ending. It is a beginning of new relationship with the educator's effort in terms of teaching strategies, selection of new creative material well suited for the child's needs and the child's effort to achieve new skills. It is the ending process of environmental analysis and assessment of present level of functioning of the child to be framed in the set of goals and objectives for drafting a curriculum for the child.

It is important to understand that the IEP is a management plan which covers the entire year. Its implementation lies with you as a teacher/trainer. It is the utmost ability of the teacher to translate the objectives of an IEP into much smaller workable components (instructional objectives) for the child.

This Individualised Education Programme (IEP) format includes all the areas of development to be covered under needs-based education programme with focus on deafblindness and multi-sensory impairment. It further ensures that educators cover all important areas of development of deafblind children while planning their future goals, objectives and finalising their teaching strategies

This format will help in outlining the child's goals and a suggestive timeframe in which these goals should be achieved. The IEP also enables an educator to describe the teaching strategies, resources, monitoring and support, and the evaluation required to facilitate the child to meet those goals. This programme must be developed in a meeting between parents/caregivers, the child's teacher, the child (if s/he wishes to attend) and specialists as appropriate. The aim is to identify current strengths, to set short and long term goals together with the child, and record their learning progress.

It is also to identify:

- Teaching practices that will help the child to learn
- Changes or adaptations that need to be made to the way the curriculum is taught for that child, and the resources and materials
- Any additional or specialised/assistive equipment the child needs
- The best way to provide personal care, where required
- How parents/caregivers and families can support the learning programme at home
- Time frames, responsibilities and ways to monitor and evaluate a child's progress towards reaching goals.

The IEP should be **reviewed at least twice a year** in a meeting with parents/caregivers, and the same support team that developed the plan. It must be ensured that parents/caregivers receive a copy of the revised programme along with a report on the child's progress in the previous term after each meeting.

This IEP covers 22 areas of development starting from activities of daily living to vocational as well as job skills. **Planning for all the areas of development at the same time may not be meaningful as well as useful for the child. Therefore, it is suggested that special educators must priorities and opt for the relevant areas, as per the needs, age, educational priorities and potentials of the child.** It is advisable to collate all the activities which take place in any one area of development, as has been done for the communication (which is mentioned in every area separately), so that at the end of the year, a comprehensive understanding is developed about different activities that have been covered under specific areas of development.

*Disclaimer: "This publication is a 'work in progress' document, which has been produced by Sense International (India) in collaboration with the participants of Advance training workshop on **"Individualised education programme and teaching strategies for deafblind/MSI children – a follow up"** held at Lucknow in the year 2007. Participants of the workshop were the project coordinators of deafblind programme from throughout the nation. The Present draft is under field testing and its contents are subject to change as per the needs of different regions.*

## Section-1: General Information

Name of the child:

Date of Birth:

Age:

Sex:

1. Brief profile of the child highlighting the strengths: (In 10-15 sentences)

2. Date of developing IEP:

3. Person(s) responsible to implement the IEP:

4. Language used for communicating with the child:

5. IEP Team Members:

Sr. No.	Name	Role of the member

6. Brief description about the family background (i.e. education and occupation of parents and number of siblings)

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7. Brief description about the child's behaviour, likes and dislikes, things that can be used as reinforcements and education/therapy given till now and his sensory issues (If any)?

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8. Diagnosis/Condition of the child:

**Vision**

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**Hearing**

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**Associated conditions**

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9. Other services required by the child (like medical services, physiotherapy, occupational therapy, speech therapy, counselling etc)

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**10. Briefly specify the medication history of the child. Is the child at present under medications? If yes, specify the medicines and associated medical condition(s).**

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**11. Briefly describe parent's dreams and concerns for their child.**

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**12. Briefly describe your child's strengths, needs, opportunities and concerns in the table below**

<b>Strengths (Child specific)</b>	<b>Important needs to be addressed at present</b>	<b>Opportunities</b>	<b>Concerns (present and future)</b>
		For example: Family Support, Access to Physiotherapy/Occupational therapy services Family business in which the child could play some role in the future etc.	For example: Health and medical conditions Family support Transition Planning Vocational Planning Behavioural Issues Sensory Issues etc.



## Functional Assessment Report (Current performance level of the child)

### Section-2: Goals and objectives

#### I. Personal Care

##### **1. Toileting:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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## **2. Brushing**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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### **3. Eating**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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#### **4. Drinking**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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### **5. Bathing**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**6. Dressing** (This involves activities such as wearing shirt, pants, socks and shoes, fastening buttons, zippers etc.)

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**7. Grooming** (This involves activities such as combing and oiling hair, applying cream/talc on body, wearing perfume etc.)

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**8. Personal Hygiene** *(This involves activities such as cutting nails, washing hands before eating; after toileting, shampooing hair, wearing washed clothes etc. It also includes aspects such as menstrual care, shaving, personal grooming etc.):*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**9. Safety** *(It includes areas such as protection from fire, handling electrical gadgets, crossing roads, unfamiliar people etc.*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**10. Motor skills:** *(This refers to bodily movements involving muscular activity. For example running, jumping, walking, rolling hands, cutting with scissors, writing or colouring etc.)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**11. Orientation and Mobility Skills (O&M):**

*Orientation skills allow us to know where we are, where we are going, and how to think about and plan strategies for getting to a destination. Mobility involves the actual movement from place to place.)*

**11.1 Basic O&M skills:**

(This includes developing sensory awareness, directionality, spatial concepts, searching skills, Learning Protective techniques, etc.)

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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### **11.2 Advanced O&M skills:**

(This include learning to move with sighted guide, trailing, independent movement, use of landmarks and cues, tactile maps, cane skills, etc)

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**12. Communication:**

*(The process by which information, meanings and feelings are shared by persons through the exchange of non-verbal and verbal messages such as language, written symbols, gestures, cue, object symbols and signs)*

**12.1 Receptive:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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### **12.2 Expressive:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**13. Social Interactions:**

*(This involves all skills necessary to develop and maintain social contacts such as greeting people, initiating and maintaining communication, developing friendships etc.)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**14. Sensory Abilities:**

*(By this we mean to develop abilities in children to gain maximum information from the environment by using his/her residual senses)*

**14.1 Vision:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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#### **14.2 Hearing and speech:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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### **14.3 Touch:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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#### **14.4 Taste:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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#### **14.5 Smell:**

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**15. . Leisure and recreation:**

*(This involves enjoyable play activities done with or by child during his/her free time either with other children or by himself/herself)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**16. Cognition:**

*(It is the process of knowing things, their functions, forming concepts, memory, reasoning, categorization, classification, judgment, etc)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**17. Pre- academics:**

*(It means development of concepts such as Colour, Time, Money, Shape, Size , Weight, Volume, Measurement, etc)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**18. Literacy :**

*(It means Reading, Writing ,Numbers and Arithmetic or Maths)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**19. Pre – Vocational/ Job Skills:**

*(This involves areas such as discipline, team work, adjusting to new environment, working independently to develop products or in a work area etc.)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**20. Behavioural:**

*(This involves managing socially inappropriate and non acceptable behaviour that hampers daily educational activities at school or routine activities at home such as stubbornness, biting, hitting etc)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**21. Sex Education:**

*(It includes areas such as identifying body parts, appropriate touch, privacy etc.)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**22. Independent Living area:**

*(Skills like home management , independent travel, home economics-budgeting, etc.)*

Long Term/ Annual goal:

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Objective/ Short term goal: (From Date:..... to :.....)

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Current level of performance:

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Key Communication to be developed:

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Strategies for achieving the specified goal (mention the activity, reinforcement, teaching strategies and materials used)

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Evaluation (present level of child after implementation of IEP, new strength of the child recognized, difficulty faced by teacher during implementation of IEP)

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**Kindly mention the dates on which IEP will be reviewed:**

Date of first review

Date of second review:

**Annual Evaluation**  
(Please add more sheets if required)

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Signature of IEP team members:

Date:

**Produced by Resource and Information Unit on Deafblindness,  
Sense International (India), Ahmedabad**





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