

**Module: Assessment of Infants and Toddlers With
Visual Impairments**

**Session 1: Legal Basis and Overview of
Recommended Practices**

**Activity B: Team Collaboration Around a Common Assessment
Question and Goal**

Instructor Guidelines

The purpose of this activity is for participants to identify how members of an early intervention team can collaborate to answer a common assessment question and to address a common goal for the child.

Time Needed. 45 minutes to complete activity and 20 minutes for class or online discussion after activity is completed

Materials. “Team Collaboration Around Common Assessment Question” and “Team Collaboration Around Common Goal” worksheets

Directions

1. Ideally participants should complete this activity in small groups or as a class. Participants who are enrolled in independent studies or distance education classes can complete the activity individually and then participate in an online discussion.
2. Provide the following background information: Angela is a 15-month-old with low vision due to optic-nerve hypoplasia. Angela presents with mildly decreased muscle tone.
3. Angela’s early intervention team includes her
 - mother and father,
 - teacher of children with visual impairments,
 - occupational therapist,
 - physical therapist,
 - early interventionist,
 - orientation and mobility specialist, and
 - speech-language pathologist.
4. Have participants consider the following question posed by Angela’s parents to her assessment team: *How can Angela play with toys independently?* Using the “Team Collaboration Around Common Assessment Question” worksheet, have participants identify in writing information that each team member might need from assessment in order to answer the question. Examples of responses are provided.

5. Participants should also consider the functional outcome: *Angela will finger-feed.* Using the “Team Collaboration Around Common Goal” worksheet, participants should identify in writing information that each team member might address during assessment in order to achieve the outcome. Examples of responses are provided.
6. Have participants turn in their written answers.
7. Lead discussion of participants’ responses in class or in an online discussion.

Team Collaboration Around a Common Assessment Question

Assessment question: How can Angela play with toys independently?	
Parents	<ul style="list-style-type: none"> • What are Angela’s favorite toys, materials, and activities? • When is she most likely to be in a relaxed, happy, alert state and thus most likely to be willing to play with toys by herself? • When does Angela require adult or sibling facilitation and when does she play independently?
Teacher of children with visual impairments	<ul style="list-style-type: none"> • A sensory functioning assessment could identify the sensory qualities of toys (e.g., auditory, visual, tactile) that appeal to Angela. • What type of prompts would help Angela locate toys next to her? • Where in Angela’s visual field should objects be presented to facilitate detection? • Does Angela need high illumination? • Does Angela benefit from increased contrast? • How does Angela play when her environment is organized and visual clutter is minimized? • Use assessment measures such as PAVII Assessment of Interaction With Objects to observe Angela as she plays independently.
Orientation and mobility specialist	<ul style="list-style-type: none"> • How can the environment be organized/set up to facilitate Angela’s finding toys by herself? • What routes could Angela take to find her toys?
Physical therapist	<ul style="list-style-type: none"> • What positioning and seating would facilitate independent play (e.g, would side-lying help facilitate bilateral coordination and object manipulation)? • Does she sit independently?
Occupational therapist	<ul style="list-style-type: none"> • Assessment of hand skills and object manipulation skills (e.g., PAVII Assessment of Interaction With Objects) • Does Angela hold objects? • Does Angela grasp toys? What size objects does she grasp? • Does Angela reach for toys (one or two hands)? • Does she explore objects using wrist rotation? Encourage wrist rotation by providing Angela with a wrist band with high contrast and bells. • Suggest toys Angela could manipulate independently (e.g., rattles with long slender handles, teething biscuits, foam hair rollers, tooth brush, spoon, bread stick)

Speech-language pathologist	<ul style="list-style-type: none">• How does Angela communicate during play? For example, how does Angela request a toy, indicate that she is finished with a toy, indicate that she wants someone to join her in play, or indicate a choice between toys?
Early interventionist	<ul style="list-style-type: none">• Assessment of sensorimotor cognitive skills in order to suggest toys that are developmentally appropriate from a cognitive standpoint• Assist family with integrating information and suggestions from the various professionals into family routines

Team Collaboration Around a Common Goal

Common goal: Angela will finger-feed.	
Parents	<ul style="list-style-type: none"> • What are Angela’s preferred foods? • What are relaxed meals and snack times for our family during which we can focus on Angela finger-feeding herself?
Teacher of children with visual impairments	<ul style="list-style-type: none"> • How does Angela’s functional vision affect her ability to finger-feed herself? Specifically, what contrast between the food and tray/dish is optimal? • Would a contrasting colored placemat or bowl help Angela visually locate the food? • What size food can she easily see? How does her visual field affect her ability to finger-feed herself? • Where should the food be optimally placed? • Does a defined space (e.g., bowl, placemat) help her to locate the food? • Does she reach for the food using a visually guided reach or a tactile search?
Orientation and mobility specialist	<ul style="list-style-type: none"> • Where does she typically eat? • Does Angela recognize that she is in the place that she eats? • Is there part of the routine that she can begin to do herself? • How does her understanding of spatial concepts affect her ability to finger-feed herself (i.e., does she understand where to look for her food)? • Is her food in a clearly defined and consistent place (e.g., bowl, placemat)?
Physical therapist	<ul style="list-style-type: none"> • What seating and positioning best supports Angela’s use of her hands, and oral motor skills, and functional vision for eating? • How is Angela currently seated/positioned during feeding? • Is Angela’s head and neck aligned? • Does she have a standard seating system, such as Tumbleform. • Is the Tumbleform seat adapted (e.g., adding lateral supports, or increasing the seat-to-back angle using foam)?

Occupational therapist	<ul style="list-style-type: none"> • Assess oral motor and fine motor skills (including reach and grasp) related to independent finger-feeding. • Is Angela able to bring her hands to her mouth? • Would Angela benefit from hand-under-hand assistance in bringing her hand to her mouth? • Does her play involve hand-to-mouth activities? • Can Angela hold foods in her hand (e.g. a piece of toast)? • Does she pick up foods herself? • What type of foods does Angela prefer? What are their textures? Angela will transition more easily from stained to textured foods, if her favorite strained food is provided with more texture (e.g., thickened baby cereals, scrambled eggs, cottage cheese, cooked carrots, mashed tuna fish, cooked pasta, etc.).
Speech-language pathologist	<ul style="list-style-type: none"> • Assess oral-motor skills related to eating, in conjunction with the occupational therapist. • Who is Angela’s primary feeder? • How is Angela seated/positioned? • Can Angela sit by herself? • Does Angela present with neutral head flexion and trunk symmetry? • What type of textures is present in Angela’s diet? • What are her food preferences? • Does she reach for food during feeding? • What is her temperament during feeding? • How does Angela move her oral structures? • Assess and offer suggestions related to communication during eating (e.g., cues before meal, indications for “More”, “All Done”, choices between foods).
Early interventionist	<ul style="list-style-type: none"> • Assist the family with integrating information and suggestions from each of the above disciplines into family routine.