

Iep Goals and Objectives

Example Goals

Rett Syndrome

Physical and Occupational Therapy

*Occupational therapy and Physical therapy are supportive services that may be required to assist a child with a disability to benefit from their education. The Individualized Education Program (IEP) team is responsible for deciding if the student needs OT/PT services to benefit from their educational program. These services are to provide a child with equal opportunity that would not exist without therapy service and not merely maximization of a child's potential. Occupational therapists and physical therapists are trained to provide many types of developmental and rehabilitative services. Legal mandates require the school-based therapist to deliver only those services that are necessary to assist students to benefit from their educational programs. The focus of school based therapy depends on which IEP goals therapy will be supporting. The need for therapy is based the choice of educational goals and whether the expertise of OT or PT is needed to help the student achieve those goals. Some goals may be academic while other goals will focus on student function or the students participation and success in the school environment. Therapists cannot independently determine who does or does not need services. The decision for OT/PT services is determined by the IEP team and it is a team decision.

**It is imperative that your child's team write out what your child needs in therapy and put that in her IEP or she will receive next to nothing especially in reference to PT
Many schools have the child's OT assist during Speech and reading times in reference to hand use. Especially with girls who are lacking in that area. Girls with hand use must have separate OT therapy minimum of 20 minutes a day x2 per week.

Occupational Therapy

Uses both upper extremities to reach out in a gross motor pattern to grasp object held in front of student

Reaches with both arms 4/5 times

Utilize adaptive equipment and assistive technology to facilitate ability to increase independence in the school setting

Uses acc with little or no prompting from teacher/aide

Using eye gaze or ACC device when appropriate student will make cause and effect choice with facilitation implemented when needed

Makes proper choice 4/5 times

Using eye gaze or ACC device when appropriate student will communicate basic needs with facilitation implemented when needed.
Makes request, communicates basic need 4/5 times

Physical Therapy

Child will maintain her functional transfer skills by attempting to transfer 90/90 chair or bench sitting to/from standing with assistance of one hand held as observed on 2 trials on 2 data days.

Child will maintain her functional gait skills by walking 150 steps on 3 data days. 3 out of 4 trials with standby assistance

Child will build arm, balance and core strength by sit balancing on therapy ball and hand/arm strength by holding self up hands with use of therapy ball and crawl all 4 posture holds.

Will walk throughout the setting with decreasing assistance by demonstrating the following.

Walk from classroom to bathroom or PT room with facilitation at shoulders, without stopping being necessary to correct upright position. 1x/school day

Walk from P.T. room to classroom with peers (assistance as necessary) at speed necessary to keep up with class. 1x/wk

Will initiate 3 steps independently to reach desired reinforcer

Student will transition into a variety of positions with facilitation each school day 5x/day.

When transitioned from stand to floor student will reach forward with arms and initiate hip and knee flexion (assistance to go to floor as needed) 1x/school day

Once assisted into high kneel and weight shifted C. will bring both legs up to stand, 50% of trials, verbal cues but no help to bring up 1 foot.

Transition into criss-cross sit with verbal cues and prompts starting in supine or another sitting position on floor.

Student will actively participate in going up and down stairs by the following.

With full assistance to help with balance and weight shift student will actively initiate bringing first and second foot up on step. 2/4 steps

Down stairs – Student will actively reach forward with 1 foot toward step below while initiating hip and knee flexion of opposite leg 2/4 steps.
Full assistance to support body

Student will pull to stand holding on to someone or something.

Student will pull self to standing using a person or other stable object and no more than 25% assistance 3/5 trials

Student will take steps using assistive device or full assistance of adult

Student will walk with full assistance for 50 feet 3/5 trials

Student will stand supported by equipment or adult

Student will utilize stander up to 50 minutes per day

Transition from supine to sit

Student will independently transition to sitting in 3/5 trials