

## Assistive Technology Framework

Child's Name \_\_\_\_\_ DOB: \_\_\_\_\_

Name of person completing form: \_\_\_\_\_ Date: \_\_\_\_\_

**Assistive Technology (AT) Outcome(s) #  
and Description(s)**

AT Planning Questions	Responses to Planning Questions	Action Plan
<p><b><u>The Child</u></b></p> <ul style="list-style-type: none"> <li>▪ What functional activity or activities does the child need or want to do?</li> <li>▪ What successes and/or challenges is the child currently having in regard to this activity?</li> </ul>	<p>Play with toys; be fed safely; work on self-feeding; sit with family in play or eating at the table; be upright for working on head control, visual tracking</p>	<p>Child currently has difficulty sitting upright in a commercially available high chair and leans over even with straps; risk for aspiration if not able to be upright; needs head supports, five point harness, tray, foot support; Child measurements include the following: height 32.5"; seat depth 7"; seat width 10.5"; chest width 9.5"; seat height to top of head 21"; seat height to top of shoulders 16".</p> <p>Child needs adaptive seating to be safe for sitting to eat, play and interact with her family and peers. Would benefit from a high/low seating option with tray and full supports for safe feeding and interaction with others.</p>
<p><b><u>The Environment</u></b></p> <ul style="list-style-type: none"> <li>▪ In what setting(s) will the functional activity take place?</li> <li>▪ What resources (people or materials) are currently available to the child and family in this setting?</li> </ul>	<p>Home-the child has service coordination, physical therapy and occupational therapy services in the home.</p>	<p>Parents have commercially available seating which are not able to provide the supports child needs for safely sitting upright.</p>
<p><b><u>The Tasks</u></b></p> <ul style="list-style-type: none"> <li>▪ What are the components of the identified outcome(s) that the child needs assistance with achieving?</li> <li>▪ How will AT help the child?</li> </ul>	<p>Needs full support at head, chest, trunk and feet to sit upright to safely play, interact and eat.</p>	<p>She smiles with interaction with her family and noises from toys; has difficulty using what vision she has when not in an upright position. She needs to be in a safe position for feeding.</p>
<p><b><u>The Tools</u></b></p> <ul style="list-style-type: none"> <li>▪ What AT options should be considered?</li> <li>▪ What options are most appealing to the family?</li> <li>▪ How will the AT options be explored and evaluated?</li> </ul>	<p>High/low activity seats with a tray with head, trunk, foot supports and a five point harness</p>	<p>Needs supportive seating to sit upright for play with toys, eating, and interaction with her family and others. A Rifton high/low activity chair with supports and a tray, or Lecky high/low chair with supports and a tray or other comparable chair.</p>
<p><b><u>Device(s) Selected</u></b></p> <ul style="list-style-type: none"> <li>▪ How will this device be available?</li> </ul> <p><input type="checkbox"/> Loan</p> <p><input type="checkbox"/> Purchase</p> <p><i>(See Exceptions to Loaning, AT Policy)</i></p>	<p>Family would benefit from a high/low activity chair with supports on loan from the CDSA for immediate use to participate in her daily routines, play, and social interaction</p>	<p>Implement use of chair in daily routines and play</p>

<p><b>Training / Support / Follow-Up</b></p> <ul style="list-style-type: none"><li>▪ What is the plan for delivery of the device?</li><li>▪ How will the parents and caregivers will be trained on how to use the AT device and incorporate in the daily routines?</li><li>▪ What is the plan for maintenance and repair?</li></ul>	<p>CDSA service coordinator or other staff to deliver to the home for immediate use</p> <p>PT to assess child in the seating system, and adjust as needed; PT to instruct family on appropriate positioning, care and use of chair; ongoing assessment of positional needs; PT to consult with CDSA staff as needed</p>	<p>PT, OT, EISC to monitor effectiveness and care and use of chair</p>
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