

Assistive Technology Framework

Child's Name _____ DOB: _____

Name of person completing form: _____ Date: _____

Assistive Technology (AT) needs are related to Outcome(s) # 1 & #2 sensory processing and regulation

AT Planning Questions	Responses to Planning Questions	Action Plan
<p><u>The Child</u></p> <ul style="list-style-type: none"> ▪ What functional activity or activities does the child need or want to do? ▪ What successes and/or challenges is the child currently having in regard to this activity? 	<p>Participating in age appropriate activities without becoming overstimulated. Used as a regulating technique to prevent overstimulation.</p> <p>Child easily becomes overstimulated, often seeks sensory input and is sometimes unsafe when seeking input, frequently crashing and climbing on things.</p>	<p>OT will coach family on proper use of weighted vest and beneficial times to utilize vest.</p>
<p><u>The Environment</u></p> <ul style="list-style-type: none"> ▪ In what setting(s) will the functional activity take place? ▪ What resources (people or materials) are currently available to the child and family in this setting? 	<p>The weighted vest can be used in prep for regulation, to prevent overstimulation, and as a calming technique.</p>	<p>Family will try using weighted vest to help regulate child. Family will consult with OT to determine next steps for purchasing best or other weighted equipment.</p>
<p><u>The Tasks</u></p> <ul style="list-style-type: none"> ▪ What are the components of the identified outcome(s) that the child needs assistance with achieving? ▪ How will AT help the child? 	<p>The weighted vest can provide regulating proprioceptive input to promote calm/alert state.</p>	<p>OT will monitor family's use and child's response to weighted vest.</p>
<p><u>The Tools</u></p> <ul style="list-style-type: none"> ▪ What AT options should be considered? ▪ What options are most appealing to the family? ▪ How will the AT options be explored and evaluated? 	<p>Weighted materials, weighted vest, compression vest.</p>	<p>Family will utilize vest and determine if it's the best option for child.</p>
<p><u>Device(s) Selected</u> weighted vest</p> <ul style="list-style-type: none"> ▪ How will this device be available? <p><input checked="" type="checkbox"/> Loan <input type="checkbox"/> Purchase <i>(See Exceptions to Loaning, ITP Policy Bulletin #27-Assistive Technology)</i></p>	<p>Monitored and assessed with a wear schedule and the amount of weight distributed.</p>	<p>EISC will monitor family use and success. Team will determine if a vest or other devices should be purchased.</p>
<p><u>Training / Support / Follow-Up</u></p> <ul style="list-style-type: none"> ▪ What is the plan for delivery of the device? ▪ How will the parents and caregivers will be trained on how to use the AT device and incorporate in the daily routines? ▪ What is the plan for maintenance and repair? 	<p>The plan for delivery is introduced during an OT session, providing family with wear schedule, and then assessing how the child responds to wearing it.</p>	<p>EISC will arrange for device to be delivered to OT and family during OT session.</p>