# Implementation Checklist for Making Support Decisions

**Family:** ____________________________  **IFSP Meeting Date:** ____________________________

**Team Members Present:** ____________________________________________________________

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## Before the Decision Making Process Begins

1. Were relevant team members present for the decision-making process?
2. Did the team review the integrated assessment information before starting the decision-making process?

## Incremental Decision Making for Each Outcome

3. Did the team review each outcome and the goals and strategies associated with each outcome?
4. For each outcome reviewed, did the team determine the logical provider for the outcome based on the current goals and strategies?
5. For each outcome reviewed, did the team determine the supports this provider might need?
6. For each outcome reviewed, did the team confirm all team members agreed with the decision?

## Identify the “Primary” Service Provider(s) and Plan for Integrated, Team-based Supports

7. To determine the “primary” provider, did the team review the overall needs of the family and child and the family’s preferences for supports?
8. To plan for integrated, team-based supports, did the team clearly identify the team members who will work with/support the “primary” provider and how they will work together?
9. Did the team confirm the support plan was acceptable and feasible to the family?
10. Were the roles and responsibilities of all team members clearly specified on the IFSP?

## Revisiting the Systematic Decision-Making Approach

11. Did the team revisit the support plan as part of monitoring progress on the IFSP?
12. If changes were made, were these changes reflected on the IFSP?

**IFSP Revisit Meeting Date (if applicable):** ____________________________

**Team Members Present:** ____________________________________________________________