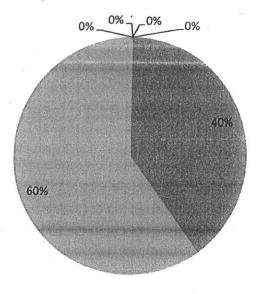
### Final Update Jan 2016

- We are proud to report that all iPads survived the entire year! Each and every iPad
  continues to function properly with little to no cosmetic issues. This is a huge success being
  as our population consists of children 0 to 21 years old, many of who suffer from traumatic
  brain injuries, decreased cognitive functioning and decreased musculoskeletal skills.
- The residents continue to utilize iPads to facetime (engage in virtual visits) their families.
   Four of our residents have weekly FaceTime visits with his or her families who live in different counties and/or out of state.
- Included iPads handling and utilization policy and procedure under jurisdiction of the Wheelchair Operation and Assistive Technology (WODAT) Committee. The WODAT Committee created policies regarding the sign-in/sign out procedure of the iPads, cleaning, safe handling, and the guidelines for which the iPads are to be used.
- Voice Output Device the iPad has been utilized as an augmentative and alternative communication (AAC) device for one of the residents. It is now required that the resident bring an iPad with him on all appointments and at times when he has to undergo a procedure so that he is able to communicate with his caretakers and doctors the following:
  - -If he is in pain, the location of the pain and the level of pain he is experiencing
  - -His needs, wants, and desires
  - -He can answer yes vs. no and other simple questions
  - By being able to use the iPad as an AAC device, this particular resident does not have to rely on a CompCare employee to communicate for him. Additionally, this resident does not need to worry about whether or not the receiving individual understands sign language, which is his other preferred means of communication.
- Please refer to attached charts (Charts A-D). The attached charts reflects the residents'
  progress towards respective Individualized Educational Plan (IEP) goals. These residents
  utilize the iPads during his or her school sessions as their educational program takes place
  at Children's Comprehensive Care Center.
- The iPads are utilized during Children's Comprehensive Care Center's newly initiated
   Developmental Baby Group. Baby Group takes place 3 times per week and focuses on providing stimulation to the residents who are 0-3 years old and unable to attend school

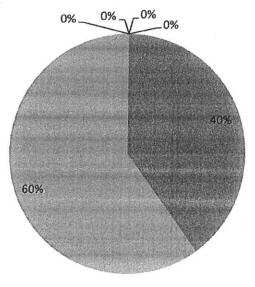
- secondary to age. The iPads are used to provide auditory stimulation, visual stimulation and promote visual motor integration and visual perceptual skills. There are 10 residents who currently participate in Baby Group.
- Of the residents who are able to use the iPads independently, the following is list of his or her favorite iPad activities:
  - LD shopping; listening to music
  - MF uses different AT switches to play games
  - MG the iPad is this resident's favorite pastime. He plays games on it, watches videos and the iPad has become a comfort tool for this resident.
  - BG plays games, where his favorite game is Family Feud
  - JK loves to FaceTime and will often FaceTime family and friend independently. This resident also enjoys taking pictures of his friends and CompCare staff.
  - JR peruses the internet looking at cars and frequently watches music videos
  - DS uses a mouth stick to play games
- Included iPads in national educational sessions at the 2015 Pediatric Complex Care
   Conference (New Brunswick, NJ) and the 2015 Florida Parks and Recreation Conference.
   The presentations were assistive technology based and presented by Laura A. Reyes,
   Occupational Therapist at Children's Comprehensive Care Center and Katie Stoneback,
   Recreational Therapist at Children's Comprehensive Care Center. The educational sessions
   demonstrated how medically complex children can utilize an iPad despite limiting
   impairments.

### CHART A: IEP Progress Toward Goals Pertaining to Augmentative and Alternative Communication Device



- **1= Mastered**
- 2= Progress Made: Anticipate Meeting Goal by IEP/EP End.
- 3= Some Progress Made: Anticipate Meeting Goal by IEP/EP End.
- ## 4= Some Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- 5= No Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- # 6= Not Applicable During This Term.

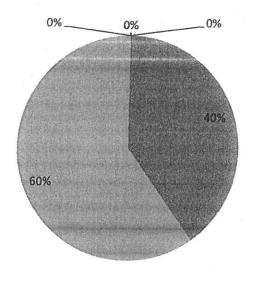
# CHART B: IEP Progress Toward Goals Pertaining to Assistive Technology



#### ■ 1= Mastered

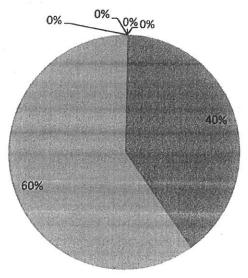
- # 2= Progress Made: Anticipate Meeting Goal by IEP/EP End.
- 3= Some Progress Made: Anticipate Meeting Goal by IEP/EP End.
- ## 4= Some Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- 5= No Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- ₩ 6= Not Applicable During This Term.

## CHART C: IEP Progress Toward Goals Pertaining to Attention to Task



- # 1= Mastered
- 2= Progress Made: Anticipate Meeting Goal by IEP/EP End.
- # 3= Some Progress Made: Anticipate Meeting Goal by IEP/EP End.
- ## 4= Some Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- 5= No Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- 6= Not Applicable During This Term.

# CHART D: IEP Progress Toward Goals Pertaining to Vocalizations & Social Participation



- 1= Mastered
- 2= Progress Made: Anticipate Meeting Goal by IEP/EP End.
- 3= Some Progress Made: Anticipate Meeting Goal by IEP/EP End.
- # 4= Some Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- 5= No Progress Made: Do NOT Anticipate Meeting Goal by IEP/EP End.
- 6= Not Applicable During This Term.