



3.2 Individualized Family Partnership Agreement (IFPA) **Instruction Sheet**



PURPOSE STATEMENT:

The purpose of the Individualized Family Partnership Agreement (IFPA) is to document the family partnership process of identifying a goal(s) and developing strategies and timelines to reach the goal(s). The IFPA also documents the family's progress towards meeting their goal.

TIMELINE:

- The IFPA is completed within 90 days of a child's first day of attendance.
- The IFPA is completed each year, even for returning families.
- The first follow-up occurs within 90 days of developing the IFPA. The second follow-up occurs within 90 days of the first follow-up. Additional follow ups may be completed as needed.
- If a family is enrolled in the Services to Pregnant Women (SPW) program option, then the IFPA is completed within the first 60 days of attendance.

STAFF RESPONSIBLE:

- The IFPA is completed by the Family Service Advocate, Home Visitor, or Early Head Start Teacher with input from the family.
- If a family has more than one child enrolled in Early Head Start/Head Start (EHS/HS), only one IFPA is completed.
 - If children are enrolled at different sites or programs, staff shall contact the other staff person assigned to the family and decide who will complete the IFPA.
 - A photocopy of the original IFPA is placed in the sibling(s)' Child File(s) and staff document on the copy where the original IFPA is filed. All staff must complete follow-ups.

INSTRUCTIONS:

Prior to meeting with the family, review the Strengths and Needs Screening. Any General Categories which were identified as an Interest and/or Need should be considered for possible goals.

Complete the following:

- **Child(ren) Name(s):** Write the name of child or children enrolled in EHS/HS.
- **Parent/Guardian Name(s):** Write the name of the parent/guardian(s).
- **Father/father figure participated:** Check a 'Yes' or 'No' box if the father or an involved male (father-figure) participated in completion of the Strength and Needs Screening.



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Pre-Existing Goals

Ask the family if they have created goals with another agency.

- **If No:** Check “No.” Continue to develop a goal with the family.
- **If Yes:** Check “Yes.” Ask the family if they would like staff to include their existing goals into the IFPA.
 - **If Yes:** Check “Yes” and ask if staff can contact the agency to get a copy of their goals. Incorporate their existing goals into the IFPA.
 - **If No:** Check “No.” Continue to develop a goal with the family.

Goal

- **Date:** Write the date the goal was developed.
- **General Category:** Choose a General Category from the Strengths and Needs Screening (for example, “*Adult Education*”).
- **Goal:** Describe the goal in detail (for example, “*Father will complete his nursing degree*”).
- **Expected Completion Date:** Write the date by which the family wants to complete the goal.

Family Engagement Outcome

- **Check** the box of the Family Engagement Outcome category that best represents this goal.

Steps to Reach Goal

- **Family Steps:** Write the steps the family will take to reach their goal.
- **Expected Completion Date:** Write the date by which the family wants to complete the step; this date is usually earlier than the date for the expected completion of the goal.
- **Agency Steps:** Write the steps the staff will take to support the family in reaching their goal.
- **Expected Completion Date:** Write the date by which the staff will complete the step; this date is usually earlier than the date for the expected completion of the goal.

Staff and parent/guardian sign and date the form. Staff gives the family a copy of the IFPA. Document the IFPA in PROMIS (See Record Keeping Standard Operating Policy and Procedure (SOP) for data entry directions).

1st and 2nd Follow-Up

- Complete the 1st Follow-Up within 90 days of developing the goal and Family/Agency steps.
- Within 90 days of completing the 1st Follow-Up, follow up with the family again and document in the “2nd Follow-Up” section.



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Complete the following:

- **Staff Name:** Write the name of staff completing progress/follow-up.
- **Date:** Write the date of the 1st follow-up.
- **Progress:** Mark “Yes”, “No,” or “Goal Achieved” to indicate the progress made towards completion of the goal. Check only one box.
- **Comments:** Write comments about progress or lack of progress.
- **Family Steps:** Write the steps the family will take to reach their goal.
- **Expected Completion Date:** Write the date by which the family wants to complete the step; this date is usually earlier than the date for the expected completion of the goal.
- **Agency Steps:** Write the steps the staff will take to support the family in reaching their goal.
- **Expected Completion Date:** Write the date by which the staff will complete the step; this date is usually earlier than the date for the expected completion of the goal.

Document the IFPA progress in PROMIS (See Record Keeping SOP for data entry directions).

If a family achieves their goal during the program year, work with the family to develop a new goal and steps. Document the new goal and steps on a new IFPA form.