Routines are an appropriate context for teaching and learning because they offer a familiar framework in which to build more sophisticated skills for the child. Routines based intervention is a systematic approach that is individualized to accommodate the child’s skills and preferences with the careprovider’s sequence and steps of daily routines. To ensure the intervention embedded within the routines is effective, it is critical for the careprovider and interventionist(s) to consider key variables when planning the intervention process.

Planning is completed by the team through observation of and conversations about the careprovider’s typical implementation of the identified routine. The most efficient plans are guided by the careproviders with suggestions from the team.

The IFSP outcomes targeted within the routine must be:

- relevant to the needs of the child;
- developmentally appropriate;
- easily integrated within the routine;
- organized to increase the child’s functional use of the skill; and,
- observable and measurable.

The opportunities for teaching and learning on each target should be:

- embedded logically not to interfere with the routine;
- provided by the careprovider with appropriate instruction or support;
- sufficient for acquisition of the skill to occur but dispersed naturally throughout the routine, as appropriate;
- repeated in a predictable framework; and,
- varied for generalization to occur.
Any and all appropriate careproviders for the child should be involved in the intervention routines as they choose. When planning:

- identify participants interested and available (e.g. parents, brothers and sisters, extended family, friends);
- reach consensus on purpose of intervention with participants;
- identify sequence, methods, cues and contingencies for all facilitators;
- identify when each careprovider will be involved; and,
- develop a system for communication across facilitators and for monitoring progress.

Many different intervention strategies can be effective within the routine. Methods used should:

- match the careprovider and child’s preference;
- be appropriate to identified outcome(s);
- be consistent across facilitators;
- provide as much, but no more support than the child needs;
- encourage initiation;
- not interfere with the sequence and outcome of the routine; and,
- systematically decrease supports for independent use of skill.

The routine itself offers many cues for the child’s participation. When planning cues for specific targets, be sure to:

- incorporate the naturally occurring cues of the routine;
- use gestural and facial cues as well as verbal cues;
- provide no more cues than the child needs for success; and,
- decrease support of cues as the child acquires skill.

“I enjoy working with my child. I know him better than anyone. I know when he’s the most tired and when he’s at his best. I can do more with him at home than anyone else because he is the most comfortable with me, and I know him well enough to know how to make his learning fun.”
Natural consequences or contingencies should be used within the routines. When discussing consequences, be sure to:

- accept the child’s responses and then increase expectations;
- encourage responses appropriate to the routine and the natural environment;
- encourage contingent responding related to child’s initiation;
- focus on increasing the child’s frequency and independence of responding; and,
- use "encouragers" rather than rewards.

Teaching and learning within routines should occur across the child’s natural environments. Be sure to include:

- all the physical settings in which the child is likely to use the skills;
  (e.g. walking with two hand support at home, child care, Grandma’s, church, park);
- variations of the typical location as they occur;
  (e.g. asking for more during meals at home, on a picnic at McDonald’s, and during snack at child care);
- variations of the physical setting;
  (e.g. walking on carpet, hardwood floors, grass);
and,
- the social settings in which the child could use the skills;
  (e.g., greeting people during family outings, shopping trips, visits to the doctor).

References:
Intervention
Considerations for Planning Routine Based

1. Routine:
   - Define Routine
   - Identify where Routine will occur

2. Facilitators:
   - Delineate care providers who will participate
   - Observe Routine or discuss sequence

3. Locations:
   - Based upon care providers identified
   - Discuss locations where Routine will occur

4. Tar:gets:
   - Match outcomes from IFSP with

5. Opportunities:
   - Use the typical sequence of Routine
   - Identify opportunities for each outcome to be embedded without interfering

6. Methods:
   - Begin with strategies the care provider already uses
   - Add only additional strategies the care provider currently uses

7. Cues:
   - Use natural cues within the Routine
   - Include gestural, verbal, or physical cues specifically used by care providers

8. Contingencies:
   - Encourage responses appropriate to the Routine
   - Include error correction

Based upon care providers identified, discuss locations where the Routine will occur.
Using the typical sequence of Routine, identify opportunities for each outcome to be embedded without interfering.

Using error correction, include gestural, verbal, or physical cues specifically used by care providers.

Intervention
Considerations for Planning Routine Based