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| Post Box No.001, SulochanaGardens, 10-4-104B Tenkasi Road, Ayikudy - 627 852. Tirunelveli District, Tamil Nadu, India. Phone: 04633 - 249170, 249180. Email: mail@amarseva.org Website: www.amarseva.org | Amar Seva Sangam (A registered Charitable Society for Rural Poor and Disabled) Child Progress Report Half Yearly June - 2016 | Name of Child: Selvapushpam Name of Sponsor: Meena and B. Srinivasan Endowment |
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| Date of Entry to ASSA | Date of sponsorship | Sex | Age | Date of Birth | Standard | Nature of Disability | Service provided |
|-----------------------|---------------------|--------|-----|---------------|----------|----------------------|--------------------------------|
| 15-7-2014 | Nov 2014 | Female | 7 | 06-07-2009 | | Cerebral palsy | EI - Home based rehabilitation |

Sponsorship remark :

Discharge remark: -

Family Details:

| | |
|------------------------------|--|
| Name of the Child | Selvapushpam |
| Date of Birth | 06-07-2009 |
| Date of Joining | 15-7-2014 |
| Nature of Disability | Cerebral palsy |
| Father's Name | Murugan |
| Mother's Name | Muneeshwari |
| No of Children in the Family | Selvapushpam +Sister |
| Father's Profession | Coolie |
| Economic Condition | Poor |
| Address Residence | 25B, North pillaiyar kovil street, Idaikal |

Period of Report :

| | | | |
|-----------------------|----------------|-----------------|----------------------|
| Height/ Weight | Current Report | Previous Report | Initial stage report |
| | 120cms/18kgs | 110cms/16kgs | 75cms/10kgs |

Therapy given:

- Physiotherapy
- ADLs

Description of child condition at the time of initial assessment: (Dec 14).

- She was not able to walk
- Able to stand with support.

| Nature of rehabilitation services given | Specific Activities given during the period | Progress made in the current reporting period | Plan of action for next 6 months |
|--|--|--|---|
| Physiotherapy | Stretching exercise NDT | Able to walk with support | Gait training |
| Special education | N/A | N/A | N/A |
| ADLS | Toileting Activities Eating Activities | Partially independent | Toileting Activities Eating Activities |
| Speech therapy | N/A | N/A | N/A |
| Occupational therapy | N/A | N/A | N/A |
| Assistive Aids & Medical support | N/A | N/A | N/A |
| Other services given if any | N/A | N/A | N/A |

Graphical report (100% represents child's normal development)

| Nature of rehabilitation services given | Dec 14 | Jun 15 | Jun 16 |
|---|--------|--------|--------|
| Gross motor functionality | 15% | 20% | 40% |
| Basic MR | N/A | N/A | N/A |
| ADLS | 10% | 20% | 30% |
| Speech therapy | N/A | N/A | N/A |
| Fine motor functionality | N/A | N/A | N/A |

