

# Children's Occupational Therapy Sensory Toolkit for Schools



Northamptonshire Healthcare   
NHS Foundation Trust

[www.nht.nhs.uk](http://www.nht.nhs.uk)

## **Children's Occupational Therapy Northamptonshire**

Occupational Therapists help children and young people achieve or maintain the skills they need to participate and achieve their full potential for home and school independence. The service is for children and young people from birth to school leaving age and their families/ carers who are registered with a GP in Northamptonshire. Support is provided in the home, community and educational settings. Therapists work with children/young people who have difficulties carrying out activities that they would be expected to be able to do based on their age or developmental stage. This may be related physical disability, developmental delay, sensory processing disorders and co-ordination difficulties.

### **Purpose of the pack**

As part of our work within Northamptonshire, Children's Occupational Therapy (Northamptonshire Healthcare Foundation Trust) has developed a resource pack for school. The aim is to help identify why a child is having difficulty with a particular activity and to provide some ideas on how to support and develop their skills.

The pack is set out so that you can look for an area of difficulty that you may be observing and then identify potential actions/ activities and support. The suggested activity ideas are intended as a guide. You may wish to adapt or use other activities that require the same skill set but are more motivating for the particular child you are working with. It is hoped that this information will enable you to support a particular child or children that you are working with to improve their skills.

However, if after 18 weeks of using the guidelines/activities difficulties are still present please refer to Children's Occupational Therapy, with the activities log completed as evidence. You may be offered a parent workshop at this stage in order to support you implementing sensory strategies, incorporating sensory strategies takes time to embed into a routine and for results to emerge- keep practicing the activities and have fun.

This pack has been created by Lisa Dunkley - Occupational Therapist with Sensory Integration Training and experience of working with children in mainstream schools and clients with a learning disability.

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**What is Sensory Processing** this refers to how we use the information provided by all of the sensations from within our body and from our environments. All of the information is integrated to give us an understanding of who we are, where we are and what is happening around us. When our senses are integrated correctly we are able to respond appropriately to the sensation. For example we will take off the itchy woollen jumper or a deep breath to smell the flowers.

- The brain must process all sensations if a person is to learn.
- You must be able to regulate the sensation you receive in order to function to the best of your ability and not be overwhelmed by the sensation

**What is Sensory Processing Disorder** the normal learning process requires interpretation of sensory stimulus in order to act and react accordingly. People with possible sensory processing disorders may have difficulty figuring out what is happening inside and outside of their bodies. The sensory information their body is registering may not be accurate. Children may demonstrate an overreaction to a sensory stimulus or not respond at all. These children need support from those around them to learn strategies to support their learning and development; children need to be in the "calm and alert space" for effective learning

**What is Sensory Modulation** this is the ability of our central nervous system to adapt to incoming sensory information and respond, it helps us to:-

- Take in relevant information
- Filter out irrelevant information
- Prioritise our focus
- Adapt and change to our environment
- Regulate our arousals levels

Poor sensory modulation is when our sensory responses are out of balance and can be as a result of low or high sensory arousal levels.

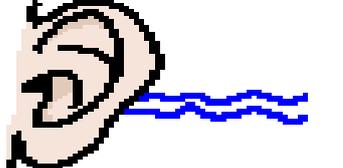
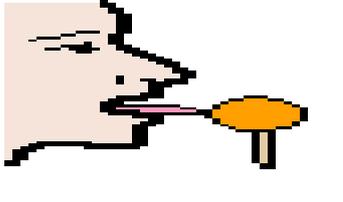
### **High Arousal Child - A LITTLE feels like a LOT**

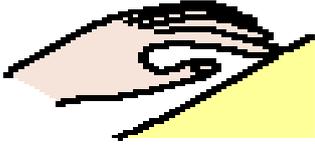
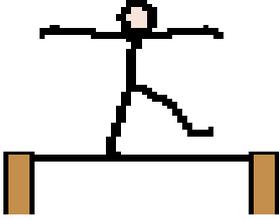
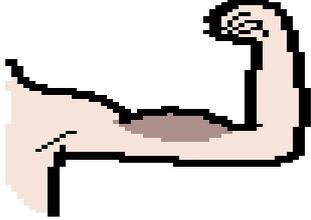
- Sensitive child who overreacts to stimuli and is easily upset, insecure and anxious
- Difficulty in crowds or at transition times
- Frequent tantrums and avoids/escapes activities

### **Low Arousal Child - A LOT feels like a LITTLE**

- Passive child who tires easily and is difficult to engage
- Does not respond when names called, misses cues in the classroom
- Difficulty in non-stimulating tasks like handwriting

## Sensory Systems Explained- 5 typical and 2 hidden senses

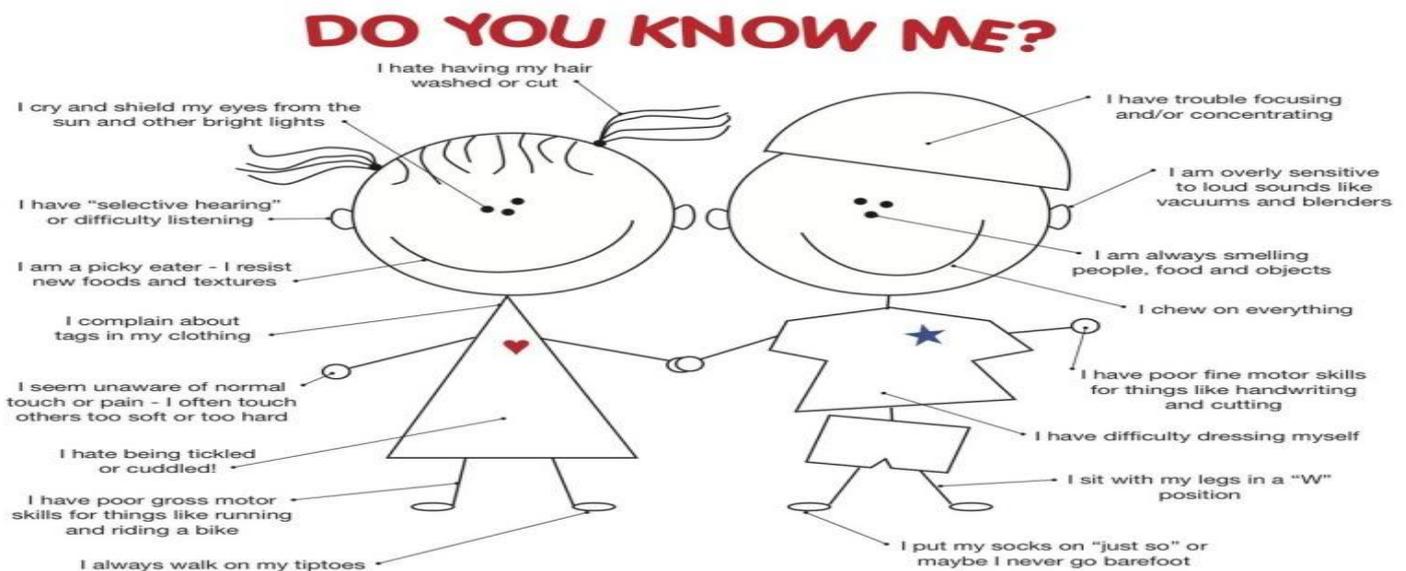
1		<b>Vision= <u>visual</u>=seeing light, brightness &amp; movement</b>
<p>Vision is our dominant sense; the ultimate purpose of vision is to arrive at an appropriate motor, and/or cognitive response. The purpose of vision can be broken down into three general categories; 1) visual acuity (quality) 2) visual field (quantity) 3) visual motor ability (control).</p>		
2		<b>Hearing= <u>auditory</u> =perceiving sounds and vibrations</b>
<p>Often considered the most important sense for humans, hearing allows us to communicate with each other by receiving sounds and interpreting speech. Hearing also gives information vital to survival; for instance, by alerting us to an approaching car, it enables us to get out of harm's way. Like the visual system, our hearing system picks up several qualities in the signals it detects (for example, a sound's location, its loudness, and its pitch).</p>		
3		<b>Smell= <u>olfactory</u>=perceiving odours or scents</b>
<p>Food tastes bland without your sense of smell. Smell is linked to memories: The nerves involved in smelling are linked to the emotional centre of your brain. Smell is also a warning mechanism. Your sense of smell warns you of dangers such as smoke and poisonous gases. It also helps you appreciate the full flavours of food and drink. Your sense of smell is 10,000 times more sensitive than your sense of taste.</p>		
4		<b>Taste= <u>gustatory</u>=the sensation of substance in the mouth</b>
<p>The function of taste is to protect your body from unsafe foods. If you ate poisonous/ rotten foods, you would spit them out stopping them from entering your stomach. Most of your taste buds are on your tongue. Your sense of taste also helps you maintain a consistent chemical balance in your body. Liking sugar/salt satisfies your body's need for carbohydrates/minerals. Sour foods have essential vitamins.</p>		

5		<p><b>Touch= tactile=</b> pressure, pain &amp; temperature</p>
<p>Tactile sensation makes it possible for us to do a range of activities including finding and recognising an object in the dark, recognising different textures and protecting us from pain. For example it helps us differentiate between hot and cold temperatures. Infants receive tactile input during a range of different activities including bathing (the feel of water/temperatures), dressing (the feel of different fabrics soft and rough), playing (toys with different textures) and feeding (feeling of different textured foods on the hands and in the mouth).</p>		
6		<p><b>Vestibular=</b> system of the inner ear connected to balance and head movement, speed/direction of movement</p>
<p>The sense of movement is controlled by our vestibular system. The vestibular system responds to body movement through space and changes in head position. In children this system is used when they engage in play activities such as swings and trampolines. It gives them information about how their body is moving through space. In Infants the vestibular system is active every time they move their head, change position, are picked up and moved through the air or they are engaged in rough and tumble play.</p>		
7		<p><b>Proprioception=</b> system activated by muscle activity, tells us where our body parts are and how they are moving.</p>
<p>This is closely related to the vestibular sense. This sense gives us awareness of our body position. In adults it allows us to skilfully move our arms and legs without looking at every movement as in touch-typing and playing piano. It also allows us to adjust our body position quickly and automatically when we lose our balance. Infants use proprioception to tell them where their hand is when reaching for a toy when playing.</p>		

## Sensory Processing Disorders - What can happen if something goes wrong?

People with possible sensory processing disorders may have difficulty in figuring out what is happening inside and outside of their bodies and the sensory information their body is registering may not be accurate. Imagine how a classroom may feel....the pictures on the wall repeatedly grab their attention as their brain doesn't register that this has been seen before. The noise of the school bell is like someone screaming in their ear. When lining up to move classes they are on 'high alert' just in case someone brushes past them as this is painful to them. Their bodies aren't providing adequate information as to where their arms and legs are so they need to move in their seats to get that extra feedback.

There seems to be some faulty wiring somewhere, most people get used to their own sensory preferences and make choices about their daily activities appropriate to them. However, children tend to go with their instincts and may struggle to communicate how they feel, they may be disorganised in a world they can't quite make sense of. These children need support from those around them to learn strategies and consider their needs to make life just a little bit easier.



### **I'm a Sensational Kid!**

I have **Sensory Processing Disorder** - SPD, for short. That means my brain can't process sensations the way other people's brains do. When my brain gets information through any of my senses - sight, smell, hearing, taste, touch, movement - it doesn't always know what to do with the information. I can become very disorganized and confused! Sometimes I over-react to all this sensory input or maybe I don't react enough. Depending on what senses are involved, I may have trouble with jobs that come naturally to other kids, even feeding myself or putting on clothes. This makes it really hard for me to function at school, in public, and even at home. I might have trouble learning or making friends, and I may have a lot of tantrums and meltdowns. I can be really shy and withdrawn from everyone, even my own mom and dad! Because I never know what's going to set off my sensory alarms, I'm often afraid of activities all the other kids enjoy. It's tough being sensational.

So do you know me? Or someone like me? Scientists say as many as 1 in 20 kids has symptoms like mine. You can do lots of things to make stuff easier. Please, be patient and understanding with kids like me. If you're my teacher or my doctor or anyone in my life, learn all you can about Sensory Processing Disorder. The Sensory Processing Disorder Foundation makes that super easy by running the biggest SPD website in the whole wide world and by putting on all sorts of cool educational events. If you're my parent, please remember there is hope and help for me in occupational therapy with a sensory integration approach.

[www.SPDFoundation.net](http://www.SPDFoundation.net)



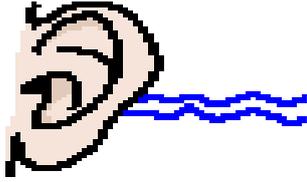
Bringing hope and help to sensational families everywhere

Original artwork ©2004 Melissa Zacherl

## Sensory Systems what happens if something isn't quite right?

1		<p>Vision= <u>visual</u>=seeing light, brightness &amp; movement</p>
<p>There are two types of visual difficulties <b>eye movements</b> and <b>visual processing</b>.</p> <p>Please ensure that children have their vision checked by an optician.</p> <p>If difficulties with <b>eye movements</b> exist you may see the following:</p> <ul style="list-style-type: none"> <li>• Eye contact is limited as they struggle to maintain focus</li> <li>• They use their fingers when reading to keep their place even when not age appropriate</li> <li>• They repeatedly lose their place when copying from the board</li> <li>• They may struggle to judge distances so bump in to the furniture</li> </ul> <p>If difficulties exist with <b>visual processing</b> you may see the following:</p> <ul style="list-style-type: none"> <li>• They struggle to cease noticing the pictures or the people in the room</li> <li>• They may cover their eyes when the fluorescent lights are switched on</li> <li>• Complaints of headaches, rubbing eyes or squinting.</li> </ul> <p><b>How to help - eye movements.....</b></p> <ul style="list-style-type: none"> <li>• Child sits at the front of the class.</li> <li>• Provide a written sheet to copy from rather than copying from the board</li> <li>• Use large print books/work sheets</li> <li>• Use a finger or ruler to mark where reading</li> <li>• Use a typoscope when reading (cut out a window in a piece of card)</li> <li>• Use an angled writing surface to reduce the distance the eyes have to travel from the board to the paper</li> </ul> <p><b>How to help - visual processing.....</b></p> <ul style="list-style-type: none"> <li>• Build up the sides of a desk with cardboard to block out distracting stimuli.</li> <li>• Keep visual and auditory distractions to a minimum to help facilitate the child's attention to classroom instructions. Have the child sit near the classroom teacher to facilitate the child's ability to attend to directions and tasks.</li> <li>• Use different colours for different lines on the whiteboard.</li> </ul>		

2



**Hearing= auditory** =perceiving sounds and vibrations

There are potentially two types of auditory processing difficulties the first is an **over sensitivity** to sounds and the second is an **under responsiveness** to sounds.

If difficulties exist with **over sensitivities** you may see the following behaviours:

- Puts hands over ears when the noise levels rise in the class or the bell rings.
- Overly react to sounds that others barely notice
- Can't stop noticing the noise of the fan in the back of the classroom, so can't attend to another task for example.

If difficulties exist with **under sensitivity** to sounds you may see the following:

- The child speaks in a loud voice
- May hum to themselves
- Seem to ignore you when you call their name even though you know they have heard.

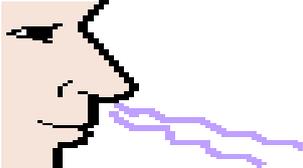
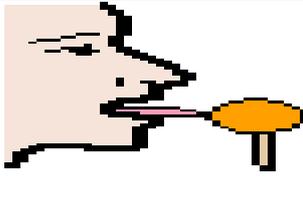
\*Please note that these behaviours may also be seen in children who are over sensitive to sounds as they are struggling to screen out surplus noise in order to attend to your voice or they may hum as a way to block out unexpected sounds.

**How to help over sensitivities.....**

- Respect their sensitivities it does really hurt!!
- Try to forewarn the child of any loud noises before - bells/fire alarms.
- To minimize auditory distractions, a classroom with a rug or carpet would help decrease extraneous noises.
- Allow them to wear headphones or ear plugs when there is expected to excess noise in the room.

**Under sensitive - how to help**

- Only speak to the child when they are facing you and looking at you.
- Give simple instructions. Don't use too many words.
- Speak loudly and clearly to these children at all times.
- Start with one instruction and increase as the child is able to retain more
- Ask the child to repeat the instruction to you.
- Reduce extraneous noise OR wait until it has gone before giving instructions.

3		<b>Smell= <u>olfactory</u>=perceiving odours or scents</b>
<b>AND</b>		
4		<b>Taste= <u>gustatory</u>=the sensation of substance in the mouth</b>
<p>There are two different kinds of difficulties that may occur, the first being an <b>over sensitivity</b> to smells and tastes and the second an <b>under sensitivity</b> to taste and smell. The later of the two is less common.</p> <p><b>Overly sensitive</b>, these children may show the following behaviours in school:</p> <ul style="list-style-type: none"> <li>• Avoids food most children their age enjoy</li> <li>• Crave or get upset by certain tastes and/or smells and don't appear to get used to the smell</li> <li>• Is distracted by a smell in the room and can't refocus on the lesson.</li> <li>• Becomes nauseated or gags at smells others are only mildly affected by.</li> </ul> <p><b>How to help overly sensitive</b></p> <ul style="list-style-type: none"> <li>• Try redirecting the child to carry out some of the heavy work activities to distract them and also calm their overly alerts sensory systems down.</li> <li>• Allow them to have their favourite scent or an object that they like the smell of to block out the 'offensive' smell.</li> </ul>		

5

Touch= tactile= pressure, pain & temperature

With smoothly operating protective and discriminative touch a child will be comfortable and willing to interact with objects and people and will be in a perfectly alert, yet calm state to learn.

One of the most common sensory difficulties is being **overly sensitive to touch**, these children may show the following behaviours in school:

- Avoidance of messy play and becomes distressed if pushed to do it
- Getting upset when others brush past them
- Get upset when their hands or face are messy
- Avoid feeding with their fingers
- They sometimes look like a 'Deer in headlights' as they are in a run away or fight mode as their protective mechanisms kick in.
- Avoid being touched un-expectedly.
- However the child may seek out touch in order to control the environment.

#### **When overly sensitive - how to help**

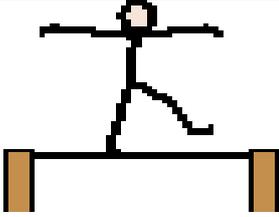
- For the student who experiences sensitivity to touch (tactile defensiveness), allow them to stand at the end of the line.
- Arrange the classroom seating to minimize the risk of being jostled and bumped by classmates (child's desk near teacher or at the back of the room).
- When planning an art activity; modifications to the activity may need to be made to accommodate the child who is sensitive to touch. Be aware that materials such as glue, finger paints, clay, paper maché, etc, may cause the child to have an aversive response. Using tools (i.e. hammer, paint brush, etc) may help the child participate more fully.
- Prior to activities which may lead to any anxiety for the child such as messy play, or assembly time use some CLASS ROOM WARM UPS Any task that provides active pushing/pulling or deep touch/pressure is calming to the nervous system so they are less likely to react in an inappropriate way
- Avoid light touch, use firm pressure when touching the child and always approach for the front.
- Allow them to use 'fidget' toys, permit them using one object. Set boundaries ensure that this is not negatively impacting on their attention to task.

On the other hand a child may be more **under sensitive to touch** than usual., in the classroom you may see the following:

- Has messy face and hands and doesn't seem to notice
- Doesn't know where they are being touched.
- Leaves clothing twisted on their bodies and don't seem to notice
- Difficulties manipulating pencils, scissors etc.

**When under sensitive - how to help**

- Encourage the child to experience as many **tactile experiences** as possible, try integrating the following types of activities into their day
- **Messy Play** - eg. Sand, water, finger paint, lentils, rice, shaving foam, play dough, powder, jelly, slime. Try pouring seeds or beans over hands.
- **Feely Box** - a box with a sleeve attached to one end over a hole. (You can use a pillowcase). Child feels for objects inside the box without looking. Start with familiar objects with different shapes/textures, and then try objects with similar shapes/textures.
- **Hide & Seek** - Find objects of different shapes and sizes hidden in bowls of:
  - rice/lentils/dried beans, dried pasta shapes etc
  - polystyrene packing pieces of different shapes
  - sand/fish tank or pot plant gravel
- **Finger painting**
- **Play dough** incorporating small hidden objects to pick out.

6		<b>Vestibular</b> = system of the inner ear connected to balance and head movement, speed/direction of movement
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How the body handles movement is down to our vestibular systems. This is located in our inner ears. This sense helps to keep us upright against gravity it is stimulated when we move or change our head position it enables us to keep orientated when we bending over to pick up a school bag, ride in the car, walk around the classroom and do PE. More subtle vestibular activities include maintaining a seated posture and paying attention. The vestibular sense is possibly the most fundamental of all our senses it gives us physical and emotional security when moving in space as our bodies automatically adjust to stop us from falling. Our vestibular system reduces confusion about conflicting visual information, such as when a child hangs upside down the vestibular sense confirms for the child that they their worlds haven't just turned upside down. This sense also enables us to stabilise our visual field so when for example we play Basketball we can run whilst looking at the net. The information from the vestibular senses also passes through an area of the brain that impact on our attention and arousal levels (sleep/wake cycles). Consider how you handle a baby; to wake them up and get them excited you bounce them on your knee to get them to sleep you rock them back and forth.

When vestibular information reaches the brain, the brain then decides what to do with it, initially our protective reactions are stimulated do we 'not do it', 'go for it' or do we 'proceed with caution'. The situation will be assessed to establish if there is any threat or danger and will then act accordingly. However, a child with a poorly functioning vestibular system will often not act in accordance with what the activity would provoke. A child may have an overly sensitive vestibular system which leads them to having exaggerated emotional responses to movements against gravity way out of proportion to the actual potential threat. Some children conversely may experience an under responsiveness to movement and indeed seek out as much movement as they can.

If difficulties exist with **over sensitivity** you may see the following behaviours:

- Avoids apparatus or fast moving playground equipment
- Hesitates of avoid walking downstairs
- Gets dizzy very easily
- Gets car sick on trips

If difficulties exist with **under sensitivities** you may see the following behaviours:

- Moving in their seats or getting out of their seats no organisation
- May have poor sitting posture so appearing to slump over their desk
- Some children may have low muscle tone so doing PE activities is challenging with poor balance skills.

### **Over sensitive - how to help**

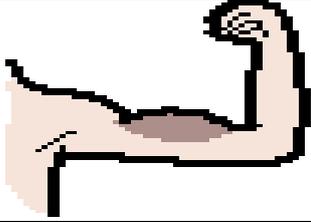
When working with a child with gravitational insecurity, it is essential that they are in control of the amount of challenging movement experiences they will engage in. The child should never be pushed past his or her limit.

### **Classroom Strategies:**

- Use a firm, supportive seat that will not tip, to help the child feel stable and secure whilst at their desk. Make sure their feet can stay flat on the ground.
- Use your hands to help the child develop his awareness of his body position. Always use firm 'grounding' touch and concentrate on the joints of the body. This will also help to focus the child's attention on an activity.
- The child may become distressed or anxious with changing positions in the classroom e.g. getting down onto the floor, onto a chair etc. Use visual markers so the child has a clear aim of where to go e.g. put their favourite cushion on the floor so they can aim to be sitting on top of it.
- Break down activities into their most basic parts. For example, it might be more successful to practise sitting on a chair than getting right down to the ground at first. If the child is able to model your behaviour, show them what to do.
- Think about what position the child likes to be in during different activities in the classroom. Let the child maintain the position they are happy and secure in (e.g. cross-legged on the floor). As their confidence develops, support the child in different, more challenging

**PE Strategies:**

- Limit the number of children and space to increase sense of security. Allow the child to increase their ability to work on moveable or suspended equipment at their own pace. The idea is to grade your approach very gently and allow the child to lead exploration of the activities.
- Consider starting off by using mats, soft play wedges and textured materials (bubble wrap, fur, car mats etc) to create uneven surfaces for the child to negotiate around.
- When the child is ready, move onto equipment such as smaller therapy balls, rolls, large wedges etc.
- Eventually the child may be able to access more challenging equipment such as climbing frames, swings, benches etc.
- Ask the child to make an obstacle course from all of the PE equipment

<p>7</p>		<p><b>Proprioception</b>= system activated by muscle activity, tells us where our body parts are and how they are moving.</p>
<p><b>Proprioception</b> this is our subconscious sense that tells us where our arms and legs are in space without us having to look at them. This information is being passed on from our muscle and joints to our spinal cord and to our brains even when we are still. This ensures that we can be upright and not slipping off our chair, it also provides us with an internal map of our bodies. It is also the sense that helps us to grade the force we place through objects and impacts on the resting tone of our muscles. The common difficulties with the processing of proprioceptive information appear to be a lack of sufficient information</p> <p>If difficulties exist you may see the following behaviours in the classroom:</p> <ul style="list-style-type: none"> <li>• Fidgeting in their seat in an attempt to gain more information from the muscles and joints as to the position of their body parts.</li> <li>• Heavy handed, struggling to grade the force they place through a pencil, or when playing with toys.</li> <li>• Struggles with PE in particular apparatus and ball games.</li> <li>• Looking at their hands when writing or when using a mouse on a computer.</li> <li>• Weak arms/legs with sustained position not just a short blast of power.</li> <li>• Looking at their feet when trying to ride a bike or climb up the apparatus.</li> <li>• Chews hard on their pen or sleeve</li> <li>• Bangs into other children but isn't an aggressively natured child.</li> </ul> <p><b>How to help- CLASS ROOM WARM UPS</b></p> <ul style="list-style-type: none"> <li>• Allow the child to wear a back pack with a few books in during times of transition or when sitting may help to keep them calm.</li> <li>• Prior to handwriting have the child do some warm ups including....pressing palms together, pulling each finger tip, press the palms on to the desk, chair push ups with hands flat on the seat pushing their body up.</li> <li>• The child uses a lap weight (such as a wheat pack)</li> <li>• Use a 'sit fit' cushion to sit on to give them additional feedback</li> </ul>		

## Sensory Arousal Levels

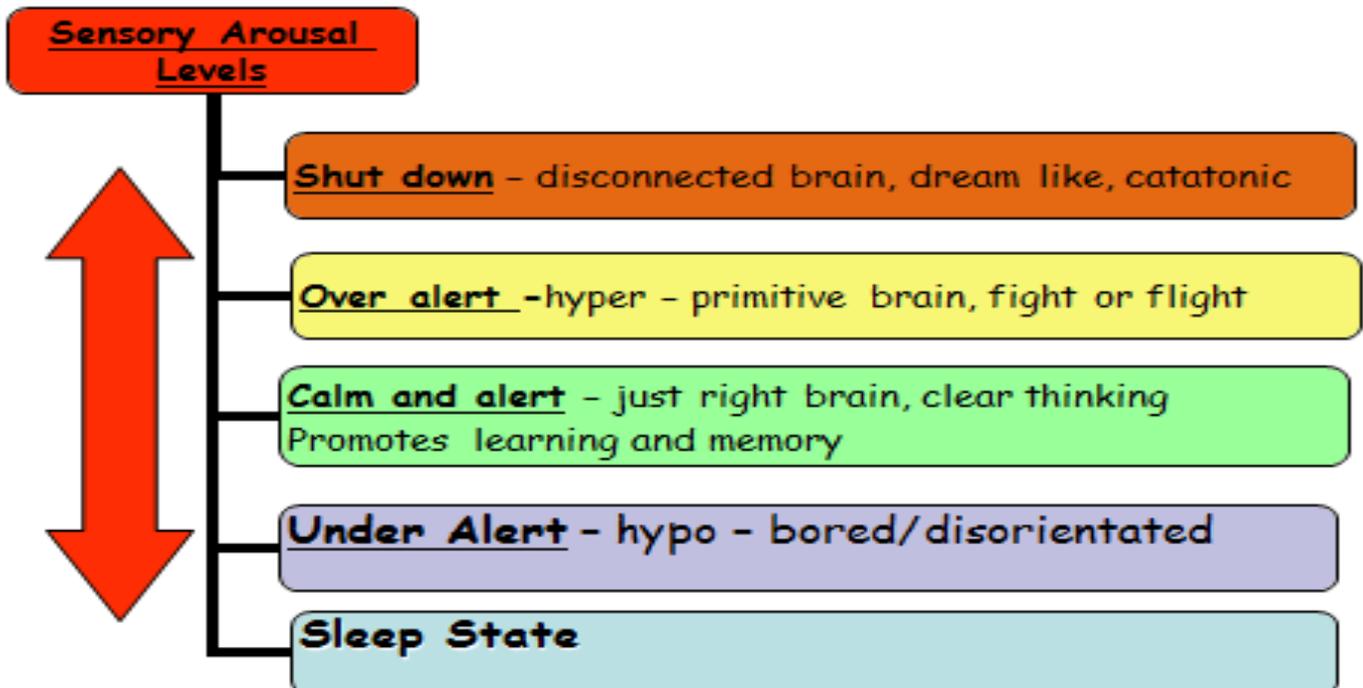
In order to learn we need to be in the GREEN - calm and alert space. Children can quickly fluctuate into either under or over alert with very little warning. This is because they have difficulty recognising the sensation in their body and responding appropriately.

As adults we have developed techniques, hobbies, lifestyle choice and carers to regulate and manage our sensory arousal levels. We go to the gym, relax in the bath, have a drink, go for a walk, cup of tea, these things we are able to do throughout the day to maintain our focus and concentration levels.

Think about your own sensitivities do you have sensitivity to:

- Light/vision (brightness & movement)
- Sound/Noise (vibration)
- Touch/texture/temperature
- Taste/Smell
- Heights (balance/orientation)

How do others see this, what makes the experience easier, do you adapt, compensate or avoid and do you have awareness and support of others



## Classroom Warm Ups

These are designed to provide a modulating effect whether alerting or calming and are based on proprioceptive activities. Paying attention requires the use of our ENTIRE body (not just the brain). So to rev your kids up for a great day of attentiveness, here is a list of ways to prepare their bodies to think, write, read, listen and create.

They are to be used throughout the school day at the following times:-

### Getting hands ready times

- Prior to a table top activity requiring concentration and hand control
- Prior to PE which involve dressing skills - zips and buttons

### Transition times

- Coming in from play time
- Change of topic/subject
- Lining up for assembly

### Concentration times

- When the children are finding it difficult to settle (calming)
- When Children are finding it difficult to get going (alerting)
- **Stretch**- stand up, reach up high and then bend over and touch your toes.
- **Arm circles**- circle your arms forward or backward.
- **Chair push-ups**- push up on the chair lifting bottoms off the chair
- **Wall push-ups**- facing a wall and completing pushups x 10
- **Lean over...head down** for 30 seconds bend over while sitting touch your toes
- **Hip circles**- sitting in chairs, make circles with their hips both directions
- **Jumping Jacks**...You know this one. Does the trick every time x 10
- **Stack the chairs** - put the chairs on top of their desks and then take them off
- **Jog or march** in place- you can sing when the saints go marching in
- **Row your boat**- pair up and sing and do the actions for the song
- **Rock**- rock side-to-side and front to back in their chairs.
- **Bounce** - in circle time on the carpet ask the kids to take it in turn to bounce on their bottoms- Mexican wave
- **Give yourself a HUG**- ask the kids to give themselves a big hug
- **Fish face** - ask the kids to suck in their cheeks, put their hands on the heads and push down- try not to laugh

### **Relaxation for children**

Relaxation is important as it helps children control their emotions and maintain an internal equilibrium of senses. By using a fun and imaginative guided relaxation script children are able to relax their body and mind through simple actions and story telling

**Instructions:** Ensure you are somewhere quiet, without distraction and the room is at a suitable temperature. Get your child to either lie or sit down in a comfortable position. Follow the relaxation script and don't rush allowing your child time to register the actions.

Try to imagine you are a cat and you are going about your day in a calm and relaxed way. First of all you need to pretend its morning the sun is coming up and you are still asleep. So close your eyes and pretend you are asleep, breathing deeply and dreaming about catching mice. So take a big long breath out your nose and in through your mouth (repeat x 8). With each breath you feel more and more relaxed so let's think about your body. Now you are having a lovely dream about catching mice but you need to get your claws out to catch them. Pretend your hands are claws and make them as tense as you can and then let your hands relax; the mouse has got away (repeat). Now the warm sun has risen in the blue sky and it is shining on your face, and you ever so slowly start to awake from your dream. You yawn and stretch up with both your arms raised high above you head. Stretch as high as you can, feeling the tightness in your muscles, then let your arms flop to your side (repeat).

Now a big person wants to give your head a stroke. You don't really liked being stroked by the big person as their stroke is quite hard and it makes your head wobble. But you let them as they will give you some breakfast in a minute or two. So pretend a big person is stroking your head a bit too hard. Raise your shoulders up and sink your head down into your neck to stop your from head wobbling around. Tense your shoulders and make them tight, after ten seconds the big person stops (count to ten) phew! Now you can relax your shoulders. The big person has returned and strokes you again, so you hunch your shoulders and sinks your head into your neck, and then at last she has gone to get your breakfast so you can relax your shoulders and neck properly.

Now you have breakfast, it's a big bowl of crunchy cat biscuits. Pretend you are biting and crunching the hard cat biscuits. Clench your jaw as tight as you can and crunch the biscuits up. Fell the muscles in your neck get tighter and tighter the harder you clench your jaw. Then relax and have a rest. Now have another go eating up some more biscuits and then finally relax letting your muscles go soft and floppy.



**TEACHER'S QUESTIONNAIRE**

Name:

Childs Name:

DOB:

School:

Date:

**For the following questions please indicate any difficulties the child is experiencing and comment on any improvement made with advice from pack**

**1. ACADEMIC PERFORMANCE**

Comparatively, what are the child's strengths and weaknesses ?

**Please supply the following (this can be an estimate if you do not have a recent assessment level):**

Reading age: .....

Spelling age: .....

English level: .....

Maths level: .....

Science level: .....

**2. CLASSROOM PERFORMANCE**

- Is there any behaviour that limits this child's ability to learn?
- Describe the child's ability to concentrate on school work.
- How does this child follow instructions?
- Does this child require special assistance from the class teacher ?

- Is this child involved in any programme which takes them out of the classroom?
- Is this child on the Special Needs register?
- If this child has an IEP what, briefly, are the current targets?
- Is there a CAF in place?

### **3. SUMMARY**

Please list any particular problem area you would like investigated

Would you like suggestions for activities to improve particular problem areas?

Signed:..... Date:.....

Designation:.....

*Thank you for taking the time to read and respond to this questionnaire*

ACTIVITY LOG

Please list below the activities tried from the pack and changes if any

Date	Activity	Comments (including support required) Please attach work sample if appropriate.	Teacher

### REFERRAL PROCESS

Referrals can be made by health professionals and/or educational via the Children and Young People's Referral Management Centre - Castle Unit, Isebrook Hospital, Wellingborough, Northants, NN8 1LP. Please download a referral form at

[www.nhft.ngs.uk/cyprmc](http://www.nhft.ngs.uk/cyprmc) or telephone 03001111022

