Children’s Occupational Therapy
Sensory Toolkit for Home

Northamptonshire Healthcare NHS
NHS Foundation Trust

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 home. 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 to improve their skills.

However, if after 3 months 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

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<th>1</th>
<th>Vision= visual=seeing light, brightness &amp; movement</th>
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<td>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).</td>
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<tr>
<th>2</th>
<th>Hearing= auditory =perceiving sounds and vibrations</th>
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<td>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).</td>
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<th>3</th>
<th>Smell= olfactory=perceiving odours or scents</th>
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<td>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.</td>
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<th>4</th>
<th>Taste= gustatory=the sensation of substance in the mouth</th>
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<td>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.</td>
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### Touch: tactile & pressure, pain & temperature

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).

### Vestibular: system of the inner ear connected to balance and head movement, speed/direction of movement

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.

### Proprioception: system activated by muscle activity, tells us where our body parts are and how they are moving.

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

**Vision** = visual = seeing light, brightness & movement

There are two types of visual difficulties **eye movements** and **visual processing**.

Please ensure that children have their vision checked by an optition.

If difficulties with **eye movements** exist you may see the following:

- Eye contact is limited as they struggle to maintain focus
- They use their fingers when reading to keep their place even when not age appropriate
- They repeatedly lose their place when copying from the board
- They may struggle to judge distances so bump in to the furniture

If difficulties exist with **visual processing** you may see the following:

- They struggle to cease noticing the pictures or the people in the room
- They may cover their eyes when the fluorescent lights are switched on
- Complains of headaches, rubbing eyes or squinting.

**Evaluate lighting in your home** - How much natural light is there, is there direct sunlight, have you got fluorescent lights or dark areas with poor light?

- Dim lights and plain walls tend to be calming
- Bright lights and lots of colours tend to be alerting

Notice how your child reacts to bright lights or dim lights.

- Some children find it calming to look at water toys or a fish tank.
- Minimise glare, use of trendy sunglasses indoors and outdoors.
- Can a floor or desk lamp be provided to replace fluorescent light?
- Use of anti-glare screen on the computer.
- Consider strength of contrast: Try different coloured paper. Black print on a white page is a strong contrast and for some children it can appear as if the print is moving on the page.
Under-reactive to visual input
- These children tend to have visual perception difficulties. For example if a sock is hiding under another piece of clothing we can visualise the rest of the sock and know it is a sock! This may cause problems with their self-care skills at home and school especially in relation to finding their belongings.

Have you tried:
- Pairs memory game
- Jigsaws
- Kim’s memory game, remove one item, see if your child can guess which one, increase number of items removed and / or ask your child to write down all the items they have seen
- Hide objects/pictures around the room and get your child to find them
- Lotto
- Solitaire
- Using an old children’s magazine, choose a letter of the alphabet e.g. ‘O’ and using a pen have your child mark all the chosen letters on the page.
- Children’s Word search
- Rolling a ball into a goal
- Where’s Wally type books
- The IPAD apps can be a fantastic resource. The IPAD can be very over-stimulating however and it is recommended to time limit these activities to no more than 15/20 minutes
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 other unexpected sounds.*

**How to help over sensitivities**

- Quiet spaces for homework
- Avoid background noise during an activity needing concentration
- Soft background music, with no words can help children to concentrate
- Try to forewarn the child of any loud noises before, ear plugs can help
- To minimize auditory distractions, 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.
How to help under sensitivities ....

- 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 children at all times.
- Start with one instruction and increase as the child is able to retain more information.
- Ask the child to repeat the instruction to you.
- Wait for the child to process the information and respond, which may take them longer.
- Reduce extraneous noise OR wait until it has gone before giving instructions. (Do not expect a child with these difficulties to concentrate when there is a lot of noise going on outside)
There are two different kinds of difficulties that may occur, the first being an **over sensitivity** to smells and tastes and the second an **under sensitivity** to taste and smell. The later of the two is less common.

Putting objects in our mouths can help us to stay alert in order to concentrate and focus on a task. The foods people choose to eat can be influenced by their calming or alerting qualities. We can self-regulate with our mouths using foods and non-food items. In general, foods that are alerting tend to be cold, sour, minty or crunchy. Calming foods tend to be warm smooth or sweet. Some foods fall under the 'heavy work' category giving heavy work to the jaws and cheek muscles and can therefore either alert or clam. What your child chooses to eat may be an indicator that their body is craving a certain kind of sensory input for self-regulation reasons.

**Overly sensitive**, these children may show the following behaviours:

- Avoids food most children their age enjoy
- Crave or get upset by certain tastes and/or smells and don't appear to get used to the smell
- Is distracted by a smell in the room and can't refocus on the task.
- Becomes nauseated or gags at smells others are only mildly affected by.

**How to help overly sensitive**

- Try redirecting the child to carry out some of the WARM UP activities to distract them and also calm their overly alerts sensory systems down.
- Allow them to have their favourite scent or an object that they like the smell of to block out the 'offensive' smell.
Oral Sensitivity/Defensiveness - Children who are sensitive to certain tastes/smells/textures may be very picky eaters and is often a cause of great stress at home. Have you tried?

- Mild flavours tend to be calming while spicy, sour or salty flavours tend to be more alerting.
- Before widening what your child eats, make a list of all the food and drink that your child already eats. Think of new foods that are similar in terms of taste, texture, colour etc.
- When trying to introduce new foods focus on foods that either have a new flavour or a new texture rather then foods that have both.
- Introduce new foods in small amounts and outside meal times so that if the child finds it difficult to eat the food it won't interfere with a whole meal.
- Encourage and praise a child if they even manage to smell a new type of food. On the next occasion you introduce the new food encourage and praise them if they manage to taste the food even if they don't manage to actually eat it.
- Allowing them to chew on a non-food item such as a straw before a meal may help some children to prepare their mouths for the sensation of eating.
- For other children sucking yoghurt or a fruit smoothie through a straw might help to prepare them to eat more solid food.

Under sensitivity to oral stimuli - People who are under-responsive to oral stimuli tend to seek out strong tastes and smells. They may also overstuff their mouth with food in order to get more sensory information. They may be very messy eaters and not realise they have food on their face or hands.

Eating Out

- Take along the child's cutlery or even the child's own meal if the restaurant will allow this.
- It may help to avoid food smells and not sit near the kitchen.
- Places with carpet rather than wooden flooring will be quieter and this may make it easier for the child to focus on eating.
- Prepare the child by doing something calming beforehand.
ORAL PROCESSING Activities

- Using a narrow straw to suck thick liquids or food such as yoghurt can provide heavy work to the jaws and mouth can be calming and organising for some children.
- Sucking and blowing activities use some of the muscles that we use to sit upright at a desk, examples: blowing bubbles (younger children) blowing games with a straw and a cotton ball, teaching a child to whistle, making a musical instrument from a comb and waxed paper.
- Including things in the family diet that require sucking, licking, chewing, biting and crunching can provide heavy work for the mouth and jaw.
- Sucking and blowing activities with a straw, the longer the straw the more work it takes to suck or blow and the thicker the liquid the more work it takes to suck
  - Party blowers.
  - Picking up cards by sucking through a straw.
  - Picking up 'Maltesers' by sucking through a straw
The primary function of the tactile system is a protective mechanism. It allows us to develop body scheme and fine motor co-ordination. We can have over or under responsive tactile systems- some children are defensive to tactile stimulus while others crave it. For children who are tactile defensive deep pressure touch can prepare the body to modulate tactile stimulus more easily.

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-expectantly.

However the child may seek out touch in order to control the environment.

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 overly and under sensitive to touch - how to help

Build up your child's tolerance of tactile stimuli through play

Encourage the child to experience as many tactile experiences as possible, try integrating the following types of activities into their day

Do not force you child to touch objects but demonstrate to them and make the activity fun and a game.

Use some of the **WARM UP ACTIVITIES** prior to the tactile stimulus.

- **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.
- **If your child needs to touch everything give them fidget toys**
- **Pressure clothing such as lycra vests give deep pressure that is calming**
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 'precede 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.

- Use a firm, supportive seat that will not tip, to help the child feel stable and secure, 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. 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.
- 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
- Create uneven surfaces for the child to negotiate around, bubble wrap, mats
- When the child is ready, move onto equipment such as smaller therapy balls, rolls, large wedges
- Eventually the child may be able to access more challenging equipment such as climbing frames, swings
- Ask the child to make an obstacle course at home with objects in the house
**Proprioception**

*Proprioception* 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.

If difficulties exist you may see the following behaviours:

- Fidgeting in their seat in an attempt to gain more information from the muscles and joints as to the position of their body parts.
- Heavy handed, struggling to grade the force they place through a pencil, or when playing with toys.
- Struggles with PE in particular apparatus and ball games.
- Looking at their hands when writing or when using a mouse on a computer.
- Weak arms/legs with sustained position not just a short blast of power.
- Looking at their feet when trying to ride a bike or climb up the apparatus.
- Chews hard on their pen or sleeve
- Bangs into other children but isn’t an aggressively natured child.

**How to help - WARM UP ACTIVITIES**

- 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.
- Prior to handwriting have the child do some warm ups including….pressing palms together, pulling each fingertip, press the palms on to the desk, chair push ups with hands flat on the seat pushing their body up.
- The child uses a lap weight (such as a wheat pack)
- Use a ‘sit fit’ cushion to sit on to give them additional feedback
- Disco Sit Cushion - Junior - Sensory Direct- [www.sensorydirect](http://www.sensorydirect)
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
WARM UP ACTIVITIES
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 day at the following times:

**Getting hands ready times**
- Prior to a table top activity requiring concentration and hand control
- Prior to dressing skills - zips and buttons

**Transition times**
- Coming in from school
- Change of topic/subject

**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.

**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 and try the following relaxation ideas at home.

---

**Count 1 to 7**
First, count from one to seven on each “in” breath . . .

1. Sit on a chair.

2. Scrunch your face.
   Count to 3.
   1,2,3...
   Take a deep breath.
   Relax.

3. Tense your arms
   Count to 3
   1,2,3...
   Take a deep breath and relax.

4. Tense your arms and shoulders.
   Count to 3.
   1,2,3...
   Take a deep breath.
   Relax.

5. Tense your legs.
   Count to 3.
   1,2,3...
   Take a deep breath.
   Relax.

6. Breathe in relaxation
   breathe out tension.

**Count 1 to 11**
... then, counting at the same rate, count from one to eleven on each “out” breath
Sensory Strategies for Personal Care—
please use this information in conjunction with the warm up activities

Dressing:
- If your child cannot tolerate labels cut them out leaving a smooth seam
- Try washing clothes in unscented products
- Allow your child to pick certain fabrics they like the feel of in their clothing

Toileting
- Try using wet wipes as the child may be sensitive to the texture of toilet roll
- Do the child's feet touch the floor? They may need a foot step or seat insert to feel more secure
- Consider visual and auditory stimulation around and try to keep to a minimum

Hair Care
- Be aware of the smell of shampoo, noise of the clippers/scissors
- Place your hands on your child's head and exert gentle pressure down prior to hair washing/cutting
- Use firm pressure as you brush/comb their hair
- Allow your child to brush their own hair with your support
- Familiarise your child with the salon environment before taking them
- Ensure your child is seated securely on a chair or your lap prior to hair cutting
- Try to approach from in front so they see you rather than from behind

General information
- Try cutting nails after having a bath when nails are softer
- Use clippers rather than scissors
- If your child is having difficulties getting to sleep try a relaxing warm bath and provide a firm massage
- Try relaxing music or gentle lighting.
- If they are fussy eaters and dislike certain textures/tastes try introducing these gradually by encouraging the child to look at it first, then touch it, hold it to their mouth, lick it, taste in their mouth and spit it out and eventually eat it. Do not force the child if they are not ready and reward them for trying it. Encourage them to be involved in preparing foods.
**ACTIVITY LOG**

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

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<th>Activity</th>
<th>Comments (including support required)</th>
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REFERAL 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 or telephone 03001111022