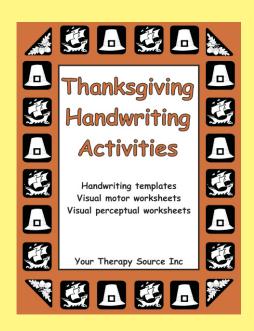


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New and Popular Products

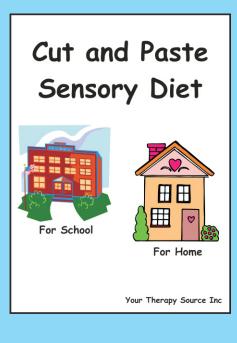


Thanksgiving Handwriting Activities -

This download includes 30 pages of Thanksgiving Handwriting templates, visual motor and visual perceptual worksheets.

SALE PRICE: \$0.99 until 11/9/09

www.YourTherapySource.com/thanksgiving



Cut and Paste Sensory Diet

Download of materials to create 2 sensory diet books, one for home and one for school with over 150 picture word cards.

LIST PRICE: \$8.99

Shipping: FREE - once payment is made you will receive an e-mail with a link to download the book.

www.YourTherapySource.com/sensorydiet

Collecting Data in the Schools, Clinic or Home

chool based occupational and physical therapists are responsible to track a student's progress with regards to the goals that pertain to their area of expertise. This is done by daily notes, monthly progress reports and annual reviews. Goals are created by the IEP team and in some cases by the therapists themselves depending upon the school district. The goals that are created are measurable. The same holds true in the clinic and home there should be goals that are measurable.

What about when it comes to modifications or interventions that a therapist recommends? These suggestions should be measured to determine whether they are effective or not. One way that this could be done is using Google Docs. You can use Google Docs to create data collection charts for free. You can then have the school staff or the therapist record the data regarding outcomes. Here is an example of a <u>form created using Google Docs</u> to measure the effectiveness of physical activity breaks during the school day for a specific student. Once the form is completed the data is organized in a spreadsheet which looks like <u>this</u>.

This form was created as an example to track whether physical activity breaks are effecting the student's academic success. This could be done with many other modifications to collect more specific data. This could be a great tool to track sensory diets that are in place for a student. Depending upon the student's that you work with, you could track the use and outcomes of weighted vests, sitting on therapy ball in class, preferential seating, compression garments and more.

Maybe determine when the best time would be for a student to use different types of adaptive equipment. For example, try using a standing frame at different times of the day or during different classes to determine the best time to utilize the equipment to effect the child's education.

Need ideas for physical activity breaks? Check out <u>Mini Movement Breaks</u>. Create your own form to track the benefits of the physical activity breaks like this <u>form</u>.



Mini Movement Breaks -

Download of 60+ quick, sensory motor activity ideas. The ideas are quick and require no equipment.

Price: \$3.99

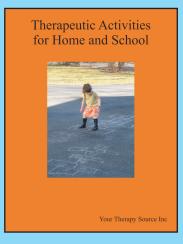
www.YourTherapySource.com/minimove

OT Home Programs Make a Difference!

ediatrics published research on children with cerebral palsy who received occupational therapy home programs. There were 36 children in the study (mean age of 7.7 years old) with gross motor classification levels I through V. Eighty-five percent of the children exhibited spasticity, 14% dyskinesia and 3% with ataxia. A double blind, randomized controlled study was done comparing groups of children who received 8 weeks of an OT home program and a control group. At the end of the 8 week session, the children who participated in the OT home program exhibited statistically significant improvements in function and parent satisfaction with function. The researchers concluded that pediatricians should recommend a collaborative, evidence based OT home program which should be carried out 17.5 times per month for 16.5 minutes per session.



Reference: Novak, Iona, Cusick, Anne, Lannin, Natasha Occupational Therapy Home Programs for Cerebral Palsy: Double-Blind, Randomized, Controlled Trial Pediatrics 2009 124: e606-e614



Therapeutic Activities for Home and School - Therapeutic Activities for Home and School provides pediatric therapists with over forty, uncomplicated, reproducible activity sheets and tips that can be given to parents and teachers. Each activity sheet is written in a simple format with no medical terminology.

LIST PRICE:

\$24.95 for print version \$16.95 for electronic book

www.YourTherapySource.com/therexbook

5 Ways to Develop a Personal Learning Network

ediatric occupational and physical therapists frequently practice independently within schools and clinics. Unless you work for a large school district or children's hospital, therapists can feel very alone when it comes to having a personal learning community around them. Sure therapists interact with children, parents and teachers but sometimes finding other therapists to bounce ideas off or get advice from, can be hard to come by. If you are a therapist who works independently or even within a large group of other pediatric therapists it is important to build a personal learning network (PLN). This can include of variety of people, resources and mentors. Here are 5 ways to develop your own PLN:

Find a mentor - Nothing is better than having a mentor to ask questions, discuss a particular client's needs and treatment strategies. When you work alone this is not always a possibility. One idea is to hire someone to consult with you. You could pay an experienced therapist an hourly wage to answer your questions and provide you with guidance. You could ask the therapist to write up a contract describing the consultation services as a ongoing continuing education course. Ask your employer if they would be willing to reimburse you for the course.

Make contacts at continuing education courses - When you attend professional development courses you are able to network with other therapists that share the same interests that you do. Get email and phone numbers from other professionals so that you can keep in touch after the course to go over different topics.

Follow blogs - There is a large amount of information in the blogosphere. You can keep track of what is posted on blogs that pertain to pediatric therapy in Google Reader. Just click on the RSS feed buttons of the blogs and that will allow you to follow the content in one location. Finding the right blogs can be a slow process. Start out here - you can see many OT blogs at <u>OTBlogs.org</u> on <u>Alltop at the occupational therapy page</u>. For physical therapy check out the <u>Alltop physical therapy page</u>.

Follow Tweets - Twitter can provide you will up to date information on many topics especially assistive technology. There are many experienced professionals on Twitter, who tweet about new technologies on the market or special deals. You can also follow @APTAtweets, @AOTAInc, <u>@YTherapySource</u> and more all on Twitter to get up to date information on research, policy, news stories and more. For more info on Twitter see my previous post entitled <u>Twitter for Therapists</u>.

Join a listserv - There are several listservs sponsored by the APTA and the AOTA. Join the pediatric listservs to see what other therapists are talking about. You can also post all your own questions on the listserv to have other therapists answer.

Fine Motor Toy Winners of the Year

Every year Family Fun magazine publishes an issue with their Toys of the Year. In the November 2009 issue, there was a large collection of toys that encourage fine motor skill development and handwriting skills. You can view the top 10 Toys of the Year at Family Fun.

Here were some of the fine motor winners for this year:

Build It Bigger - manipulate chunky nuts and bolts

Pool Sharks - use the trigger action dolphins to hit pool balls

Color Me A Song - drawing to music. The music is based on how fast or slow you draw

Scribble and Write - follow the step by step guides to create letters and shapes on the electronic board

Burger Builder - new Play Doh set that allows you to press, mold and create burgers.

Here is a fine motor winner from last year:

Rondo Vario - dress the caterpillars by lacing on the correct color and shape.

Maybe you can add these items to your wish lists to add to your therapy bags.



Rondo Vario - children match shapes and colors from a pool of wood pieces to the dice they throw in order to dress the caterpillars.

www.YourTherapySource.com/haperondovario



Dress Me Up Butterfly - layer a variety of brightly colored beads, felt shapes and wooden pieces to create different butterfly fashions on the wood lacing frame.

www.YourTherapySource.com/hapebutterfly

Recent Research on Cerebral Palsy

Upper Extremity Function and CP

Developmental Medicine & Child Neurology published research on 23 children (age range 8-18 years old) with cerebral palsy (21 hemiplegia and 2 spastic diplegia). The purpose of the study was to determine a relationship between muscle strength, tone and range of motion and functional hand skills. The results indicated that active supination range, strength and force were strongly related to limitations in hand activity. Further research was recommended to determine cause and effect in these limitations.

Reference: SIRI M BRÆNDVIK, ANN-KRISTIN G ELVRUM, BEATRIX VEREIJKEN, KARIN ROELEVELD. (2009) **Relationship between neuromuscular body functions and upper extremity activity in children with cerebral palsy** *Developmental Medicine* & *Child Neurology* Published Online: 7 Oct 2009 DOI 10.1111/j.1469-8749.2009.03490.x

AFO's and CP

The Journal of Bone and Joint Surgery published research on the use of a floor reaction ankle foot orthoses (AFO's) on children with cerebral palsy (CP). Using gait analysis, the researchers determined that the AFO's restricted sagittal plane motion (left to right motion) which results in improvements in knee extension. The best results were seen in children who had knee and hip flexion contractures of greater than or equal to 10 degrees. The efficacy of the orthotic was limited if knee and hip flexion contractures were greater than or equal to 15 degrees. The researchers concluded that this type of orthotic should not be prescribed if knee and hip flexion contractures are 15 degrees or greater.

Reference: Rogozinski, Benjamin M., Davids, Jon R., Davis, Roy B., III, Jameson, Gene G., Blackhurst, Dawn W. **The Efficacy of the Floor-Reaction Ankle-Foot Orthosis in Children with Cerebral Palsy** *J Bone Joint Surg Am* 2009 91: 2440-2447

Cold Hands and Feet

Here is something to consider when working with children who have neurological disorders. A recent thesis study revealed that children in wheelchairs with neurological disorders have different skin temperatures than in children without neurological disorders. The study showed that in children with neurological disorders the temperature of the feet was three degrees colder and the hands were two degrees colder. In addition, the children with the colder extremities also exhibited difficulties with constipation, sleeping and pain. The author comments on additional problems with balance when the feet are cold.

Reference: Eureka Alert **Brain-damaged Children Often Have Cold Feet.** Retreived from the web on 10/20/09 at http://www.eurekalert.org/pub_releases/2009-10/uog-bco101909.php#

Assistive Technology

New Option for Augmentative Communication

Came across this new tool for augmentative communication called <u>Tap2Talk</u>. Seems like a nice alternative for augmentative communication. Watch the video for how it works. The positive features are: the price point, no Internet access is required, cool age appropriate tool and you can put in your own pictures and voice. One negative is that you do need sufficient fine motor skills to utilize a Nintendo DS. Perhaps you could adapt a stylus though.

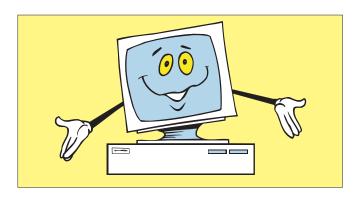
Assistive Tech Tip: Computer Timers

Here are some free count down timers on the computer to keep children aware of the amount of time left for an activity or lesson.

My favorite is the timer on <u>classtools.net</u> where you can actually see the time expiring instead of just numbers counting down. You can also add music to the timer at the top of the page.

If you want a countdown timer with an alarm that sounds at the end of the time try the <u>online stopwatch</u>.

Lastly, if you need a timer when you are not online, you can download <u>cool timer</u>



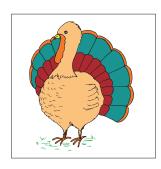
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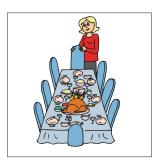
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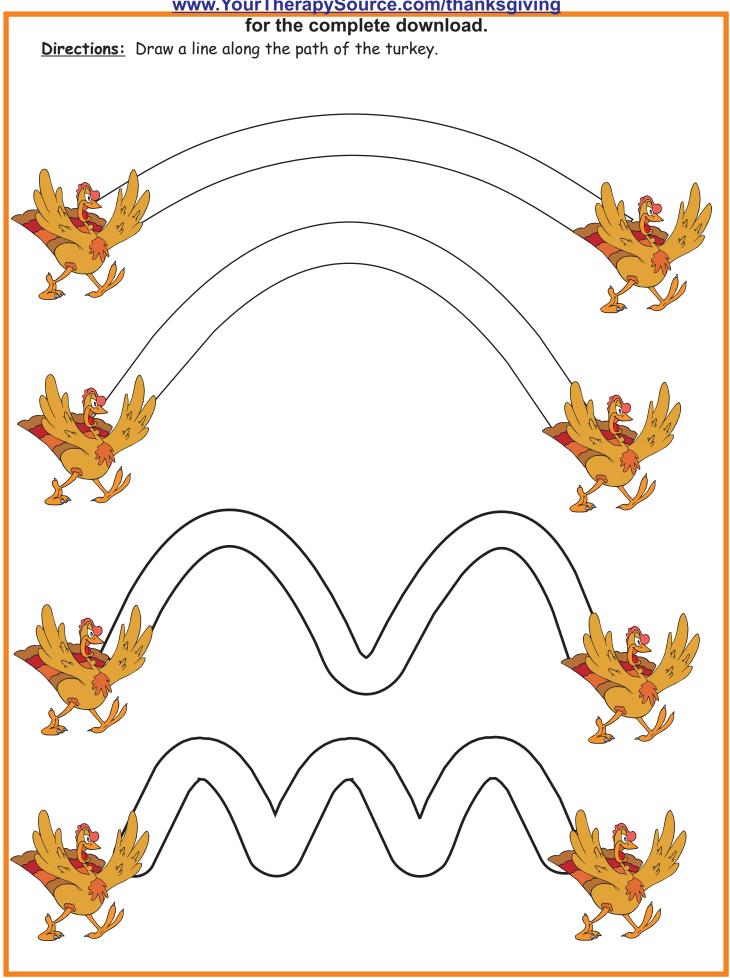
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