

New and Sale Products



Title: Fantastic Fingers® Fine Motor Program

By: Ingrid C. King OT

Summary: The fine motor program includes ebook, music and

instructional videos

which are user-friendly, economical and research based. It

helps to improve the

development of children's fine motor skills, pencil grip and

posture.

Product Details:

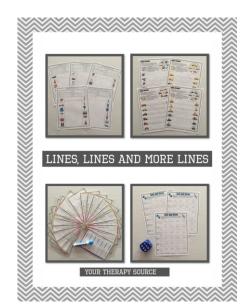
USB Flash Drive includes E-book - 197 pages for one user, 16 MP3 song tracks and links to all the videos (2 hours) with a password which are watched online.

Language: English

LIST PRICE: \$35.00

Shipping: FREE shipment Worldwide is included. USB Flash Drive is shipped from Australia. Allow 1-3 weeks for delivery

Find out more at http://yourtherapysource.com/fantasticfingers.html



Title: Lines, Lines and More Lines By: Your Therapy Source, Inc

Summary: Download of 24 task cards (12 full pages) to trace lines of varying difficulty, 5 letter matching lines, 4 line racing games and 3 roll and draw games.

Product Details: E-Book: 27 pages

Language: English

LIST PRICE: \$3.99

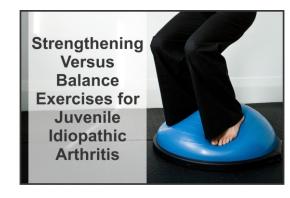
SALE PRICE until 4/30/15: \$1.99

Find out more at http://www.YourTherapySource.com/lines

Strengthening Versus Balance Exercises for Juvenile Idiopathic Arthritis

The American Journal of Physical Medicine and Rehabilitation published research on 30 children with juvenile idiopathic arthritis (JIA) comparing the effects of muscle strengthening exercises versus proprioceptive-balance exercises on lower extremity function.

Each child was evaluated for pain, passive range of motion, muscle strength, balance, and functional abilities using the Numeric Rating Scale, goniometer, handheld dynamometer, Flamingo Balance Test, Functional Reach



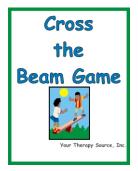
Test, 10-meter walking test, 10-stair climbing test, and Childhood Health Assessment Questionnaire. The participants were randomly assigned to the strengthening exercise group or the proprioceptive-balance exercise group.

The results indicated the following:

- 1. statistically significant improvements in all outcome measures were recorded except muscle strength in the hip and ankle after strengthening exercises.
- 2. statistically significant improvements were found in all outcome measures after the proprioceptive-balance exercises.
- 3. Intergroup analysis showed statistically significant improvement in all outcome measures in the proprioceptive-balance exercise group except for the Numeric Rating Scale, Childhood Health Assessment Questionnaire, and passive range of motion scores and hip extension and knee flexion muscle strengths.

The researchers concluded that exercise treatment significantly improves musculoskeletal symptoms in children with juvenile idiopathic arthritis. Balance-proprioceptive exercises were shown to be more effective than strengthening exercises for improving lower extremity function such as walking, climbing stairs, and balance in children with juvenile idiopathic arthritis.

Reference: Baydogan, Saime Nilay MSc, PT; Tarakci, Ela PhD, PT; Kasapcopur, Ozgur MD. Effect of Strengthening Versus Balance-Proprioceptive Exercises on Lower Extremity Function in Patients with Juvenile Idiopathic Arthritis: A Randomized, Single-Blind Clinical Trial. American Journal of Physical Medicine & Rehabilitation. Published ahead on print on 3/24/15. doi: 10.1097/PHM.0000000000000279



Cross the Beam Game

By: Your Therapy Source

Summary: Download of game that encourages balance skills and visual perceptual skills.

Find out more at http://yourtherapysource.com/beam.html

Bilateral Integration Skills



Taking time out to perform specific home exercise programs can be very difficult during the busy lives of today's children and parents. Try to make it easier for parents by suggesting activities that can be carried out throughout the normal routine of the day. Bilateral integration skills (the ability to use both sides of the body together) are a necessity for educational skills, leisure activities and organized events for children.

Here are 10 every day activities to practice bilateral integration:

- 1. Carry heavy objects ie books, boxes, etc.
- 2. Play sports such as basketball, soccer or baseball
- 3. Go swimming
- 4. Play musical instruments
- 5. Ride a bicycle
- 6. Cut out shapes with scissors
- 7. Tie your shoes
- 8. Play clapping games.
- 9. Prepare meals. opening containers, stirring while you also hold the bowl, carrying heavy containers, carrying a tray, etc
- 10. Jumping activities ie jumping rope, hopscotch, trampoline, etc.

What are your favorite bilateral integration activities?

Need more therapeutic activities to do during the regular routine at home or school? Check out **Therapeutic Activities for Home and School**. This book provides pediatric therapists with over forty, uncomplicated, reproducible activity sheets and tips that can be given to parents and teachers. Find out more at http://yourtherapysource.com/therexbook.html

AFO's and Gait in Children with Cerebral Palsy



The Journal of Physical Medicine and Rehabilitation published a retrospective analysis on the effects of ankle-foot orthoses (AFO) on the gait of children with diplegic cerebral palsy. Data was analyzed from 601 visits of 378 children with a diagnosis of diplegic cerebral palsy. The children either wore a solid AFO, hinged AFO or posterior leaf spring AFO design. Each child had a three dimensional gait analysis when walking barefoot and with AFOs. Data was recorded for Gait Deviation Index (GDI), ankle Gait Variable Score (GVS), knee GVS, nondimensional (ND) speed, and ND step length.

The results indicated the following:

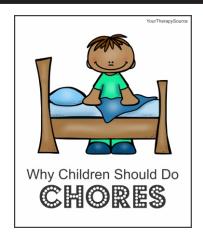
- 1. Only step length exhibited clinically meaningful improvements for the average AFO user.
- 2. Changes in step length, speed, and GDI all were statistically significant
- 3. Barefoot outcome levels were the most consistent influence on outcome changes.
- 4. AFO design was shown to effect changes in speed and ankle function while ambulation type was shown to affect GDI change.

The researchers concluded that current AFO prescription methodologies for children with CP result in consistent gait improvements for step length only.

Reference: Ries AJ, Novacheck TF, Schwartz MH. The efficacy of ankle-foot orthoses on improving the gait of children with diplegic cerebral palsy: a multiple outcome analysis. PM R. 2015 Mar 11. pii: S1934-1482(15)00127-6. doi: 10.1016/j.pmrj.2015.03.005. [Epub ahead of print]

Teaching Motor Skills to Children with Cerebral Palsy and Similar Movement Disorders – A Guide for Parents and Professionals – find out more at http://yourtherapysource.com/CPmotorskills.html

3 Reasons Why Children Should Do Chores



Performing chores teaches children important life skills. Here are 3 reasons of why children should do chores:

- 1. Some research indicated that children who started chores at a young age, grow up to form good relationships with family and friends, to achieve academic and early career success and to be self-sufficient.
- 2. Children learn empathy when performing chores especially when the chores focus on helping the family not themselves. They learn that helping others can be rewarding.
- 3. Children learn to understand and accept responsibility.

Here are a few tips to help children be motivated to do their chores:

Provide positive reinforcement – praise for a job well done especially if the chores are completed without a reminder

Provide incentives – It may be helpful to provide an allowance or sticker chart to earn a reward after completing chores. There are some fun apps out there that can help motivate children to complete their chores.

Set a good example – remember to do your own chores

Ask children to be "helpers" versus "to help". Read more about this from a previous blog post entitled "Help" or "Helper" for Life Skills at http://yourtherapysource.com/blog1/2014/05/07/help-or-helper-for-life-skills/

Reference: Wallace, J. Why Children Need Chores. Retrieved from the Wall Street Journal on 3/18/15 at http://www.wsj.com/articles/why-children-need-chores-1426262655

Why not try focusing on one life skill per month? Life Skills of the Month at http://yourtherapysource.com/lifeskills.html includes 12 hand outs and posters to encourage practicing life skills throughout the year provided in Word and pdf format.

Research Review: Physically Active Lessons and Academics



Preventive Medicine published a systemic review on physically active (PA) lessons to increase physical activity during academic time.

For a study to be included in the review is must have included the following criteria: 1. classroom lessons containing both PA and educational elements; 2. intervention studies featuring a control group or within-subjects baseline measurement period; 3. any age-group; and 4. English language.

Eleven studies met the inclusion criteria. The results indicated the following:

- 1. All studies found improved physical activity following physically active lessons: either in the whole intervention group or in specific demographics.
- 2. Educational outcomes either significantly improved or were no different compared to inactive teaching.
- 3. Studies ranged from low to high risk of bias.

The researchers concluded that there are improvements noted with physical activity and educational outcomes following physically active lessons. Although they recommend Future high-quality studies with longer intervention periods are needed.

Reference:

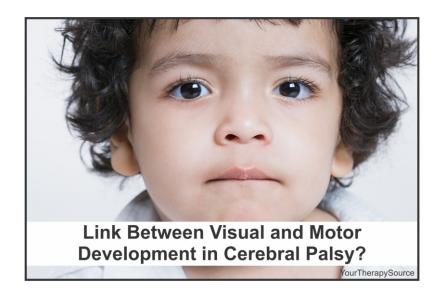
Norris, E., et al. "Physically active lessons as physical activity and educational interventions: A systematic review of methods and results." Preventive medicine March 2015, Vol.72:116–125, doi:10.1016/j.ypmed.2014.12.027

Get Up and Learn – How to Integrate Movement with Learning

This is an electronic book of 48 pages with over 35 activities that incorporate movement and learning. Find out more at http://yourtherapysource.com/getuplearn.html

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Link Between Visual and Motor Development in Cerebral Palsy?



Pediatric Neurology published research on 47 children diagnosed with cerebral palsy for ophthalmic disorders and their association with neurological disorders. All children were recommended to have comprehensive ophthalmic exams. The following assessments were completed: Gross Motor Function Classification System, Gross Motor Function Measure the Bayley Scales of Infant Development-II.

The results indicated the following:

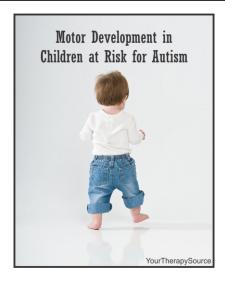
- 1. ametropia (abnormal refractive eye condition) was seen in 78.7% of the children
- 2. strabismus (eyes are not aligned properly) was seen in 44.7% of the children.
- 3. ametropia was more prevalent in the severely impaired than the mildly impaired based on Gross Motor Function Classification System level.
- 4. the severity of gross motor impairment correlated with the degree of refractive error in the subjects older than 36 months.

The researchers concluded that "children with cerebral palsy with poor gross motor function have a high possibility of severe refractive disorder that becomes evident from 36 months after birth. These results suggest that brain injury and impaired motor development negatively affect ophthalmic development".

The researchers recommend an ophthalmic examination for young children with cerebral palsy for early detection and management.

Reference: Lew, Helen, et al. "Possible Linkage between Visual and Motor Development in Children with Cerebral Palsy." Pediatric Neurology (2014). Mar;52(3):338-343.e1. doi: 10.1016/j.pediatrneurol.2014.11.009. Epub 2014 Dec 3

Motor Development in Children at Risk for Autism



Longitudinal research was published evaluating the development of 20 children at risk for developing autism (older sibling diagnosed with autism). Each child was completed motor, face processing, IQ and diagnostic assessments at 9 months and 40 months of age and an additional follow up assessments at ages 5-7 years old.

The results indicated the following:

- 1. a higher proportion of children than expected demonstrated motor difficulties at the followup visit
- 2. the children with parental report of poor motor skills as infants and toddlers were also more likely to have lower face processing scores and elevated autism-related social symptoms at 5–7 years, despite having similar IQ levels.

The researchers concluded that the data supports the idea that early motor difficulties may be a risk factor for later motor impairment as well as differences in social communication and cognition, traits that are related to autism spectrum disorder.

Reference: Leonard, Hayley C., et al. "Motor development in children at risk of autism: a follow-up study of infant siblings." Autism 18.3 (2014): 281-291.

Title: 25+ Bilateral Coordination Exercises

By: Your Therapy Source

Summary: Download of 28 bilateral coordination exercise sheets including QR codes with links to video demonstration of exercises. Also includes hand out explaining bilateral coordination.

Find out more at http://yourtherapysource.com/bilateralcoordination.html



Why You Should Talk During Therapy Sessions



Here is a question to ask yourself today... do you talk to your clients during therapy sessions? Not about the weather or the latest cartoon but about what the children are actually doing? As therapists we offer an excellent opportunity to incorporate language acquisition, understanding and memory skills along with movement skills. The kinesthetic sense is being activated during movement activities which allows children to take in information via an additional pathway instead of just auditory or visual. Here are some examples of how you can help young children across several domains instead of just the motor domain:

Talk about the actions the children are doing to help them to understand spatial location and body awareness – ie "You are standing in between two chairs"; "The walker is behind you."; "You are jumping to the right."

Verbalize directional cues regarding their own bodies to help with body awareness – i.e. "I am moving your arm up and down".; "I am bending your knee."

Use action words to describe what the children are doing – i.e. "You are all jumping."; "Let's climb the ladder."

Use descriptive words regarding speed and direction to assist again with body awareness and motor planning – i.e. "You are running fast." "You are walking backwards."

Ask open ended questions to see if they understand movement concepts and the relation to other people or animals – i.e. "How would you move if you were a basketball player?" "Can you move like your favorite animal?"

Reinforce memory skills by asking questions about movement – i.e. "Do you remember what movements we did when we started the therapy session?"

Discuss and ask questions about movements that are similar and opposite – i.e. "You are moving so fast now. How can you move the opposite of fast?" "You are throwing the ball at the target. Can you think of another way to throw a ball?"

Locomotor Games:

This download is a collection 20 locomotor cards, 10 non locomotor cards, 10 body part cards, 10 directional cards, 6 speed/path cards, 10 number cards, 30 object cards, 2 Roll and Move games and one relaxation poem. The locomotor games are quick to set up and require none or minimal equipment. It does not get any easier than this to encourage sensory motor activities in the classroom or home. Only \$1.99. Find out more at http://yourtherapysource.com/locomotor.html

10 Things to Do for OT Month

I created some more signs for OT month. I am not sure what happened but I started a few and then kept going. There are a few more on the website from previous years as well so take a look. You can download the signs for free at http://www.yourtherapysource.com/otmonth4 Need ideas to celebrate OT month? See below from a previous year. No time to prepare anything just print out a few signs and hang them up in your school or practice.

1. Host the Occupational Therapy Olympics – invite school staff, parents and students to participate in the OT Olympics. Try relay races to get dressed, get down objects using reachers, wheelchair obstacle courses, scooterboard races, sculpt objects with clay and more.

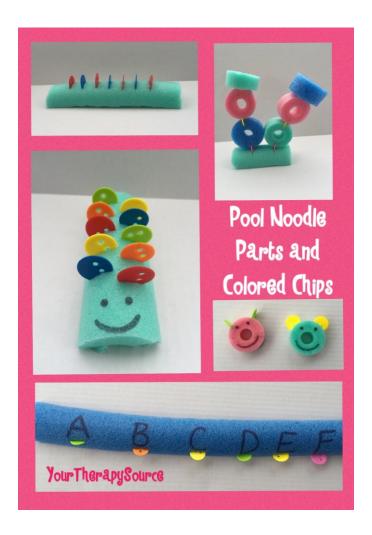


Your Therapy Source

- 2. Have an OT Art Exhibit showcase OT projects that the children have made. Hang up signs next to each projects describing what skills the child worked on to complete the project.
- 3. Create an OT Contest For example Put a bunch of beads in a jar. Guess how many beads are in the jar. The closest to the number of beads wins an OT t-shirt.
- 4. Create an OT Quiz Distribute an OT quiz with many questions regarding what OT is and how it helps children. Every person who fills out the quiz gets a small prize.
- 5. Do an in-service on the benefits of OT to the school staff and parents.
- 6. Plan an OT Month Party! Allow the kids to vote on a party theme such as fine motor, sensory or activities of daily living. Create games around that theme.
- 7. Volunteer for the Career Fair at the school. Educate prospective college students on what OT is.
- 8. Have an Adaptive Equipment and Assistive Technology Fair demonstrate different types of equipment that OT's recommend for students to school staff and parents.
- 9. Hang up a large poster in the hallway about occupational therapy.
- 10. If you do not have time for any of the above ideas here is the easiest just ask to make an announcement over the loudspeaker of the school about OT month. Inform the school in a few sentences about occupational therapy.

Check out our motivational section at http://www.yourtherapysource.com/motivationaldownloads on our website for certificates, awards and signs for occupational therapy.

Pool Noodle Parts and Colored Chips



Check out these activities to encourage fine motor skills, eye hand coordination and finger strengthening. There is slight resistance when putting the chips into slots in the pool noodles and a little resistance when pulling the chips out of the pool noodle parts.

See all the details at http://yourtherapysource.com/freepoolnoodleparts.html

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New Fantastic Fingers® Fine Motor Program – Free Video Activity Idea and Sample Pages



If you are looking for a comprehensive fine motor program to help your students, you will want to check out the Fantastic Fingers® Fine Motor Program. It includes an activity book, music and video demonstrations all on a convenient flash drive. OTs have special permission to also reproduce the all activity pages and program sheets for the parents/caregivers of the children they are treating as part of a home therapy program.

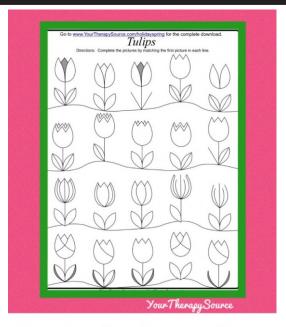
You can view a sample video from Track 3 – Wrist Rhymes. It includes a fun song to strengthen the muscles in the wrist followed by several activity ideas! Definitely worth watching. You can view it at http://yourtherapysource.com/fantasticfingersfree. In addition, you can download 6 FREE sample pages from the Fantastic Fingers® Fine Motor Program

Fantastic Fingers® Fine Motor Program By: Ingrid C. King OT

Summary: The fine motor program includes ebook, music and instructional videos which are user-friendly, economical and research based. It helps to improve the development of children's fine motor skills, pencil grip and posture.

FIND OUT MORE AT http://yourtherapysource.com/fantasticfingers.html

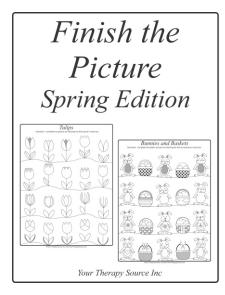
Finish the Tulips



Finish the Tulips

Here is a Spring time freebie to practice visual motor skills and attention to detail with this tulip picture. Download it at http://yourtherapysource.com/holidayspringfreebie.html

Finish the Picture Spring Edition - http://yourtherapysource.com/holidayspring.htmlDownload the complete packet of Finish the Picture – Spring Edition here http://yourtherapysource.com/holidayspring.html



Pool Noodle Stick for Reaction Time, Coordination and Balance



Create this simple pool noodle stick to encourage reaction time, eye hand coordination, balance skills and muscle strengthening. Read all the details and watch the video at http://yourtherapysource.com/videopoolnoodlestick.html

Need more sensory motor activities? Check out <u>Sensory Motor Game Boards</u> at http://yourtherapysource.com/sensoryboards.html. Just print and play these games that encourage coordination, motor planning, gross motor and balance skills

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Free Handwriting Rubric

Client's Name: Date: List any adaptive	equipment used (inc	Overall	Handwriting Therapis	t:		
	o right across the pa		□ Left Handed			
Overall Handwriting	5	4	3	2	1	SCOF
Letter Formation	All of the letters are formed correctly	Most of the letters are formed correctly (more than 75%)	Some of the letters are formed correctly (50-75%)	Few of the letters are formed correctly (25-50%)	Less than 25% of the letters are formed correctly	
Placement	All letters are oriented correctly on the lines	Most of the writing sample is oriented correctly on the lines	Some of the writing sample is oriented correctly on the lines	Little of the writing sample is oriented correctly on the lines	Less than 25% of the writing sample is oriented correctly on	
Letter Sizing	All letters are sized correctly	(more than 75%) Most of the letters are sized correctly (more	(50-75%) Some of the letters are sized correctly	(25-50%) Few of the letters are sized correctly	the lines Less than 25% of the letters are sized	
Spacing of Letters	All letters are spaced correctly	than 75%) Most of the letters are spaced correctly (more than 75%)	(50-75%) Some of the letters are spaced correctly (50-75%)	(25-50%) Few of the letters are spaced correctly (25-50%)	Less than 25% of the letters are spaced correctly	
Legibility	All letters in the writing sample are legible	Most of the writing sample is legible (more than 75%)	Some of the writing sample is legible (50-75%)	Little of the writing sample is legible (25- 50%)	Less than 25% of the writing sample is legible	
Speed	Keeps up with peers when completing handwritten	Takes 25% longer than peers to complete handwritten	Takes 50% longer than peers to complete handwritten	Takes 75% longer than peers to complete handwritten	Takes more than 75% longer than peers to complete handwritten	
Neatness	assignments Writing assignments are always neat without erasures, torn paper or cross outs	assignment Most (>75%) of the writing assignment is neat without erasures, torn paper or cross outs	assignment Some (50-75%) of the writing assignment is neat without erasures, torn paper or cross outs	assignment Little (25-50%) of the writing assignment is neat without erasures, torn paper or cross outs	assignment Less than 25% of writing assignment is neat without erasures, torn paper or cross outs	
Spacing of Words	All words are spaced correctly	Most (>75%) of the words are spaced correctly	Some (50-75%) of the words are spaced correctly	Little (25-50%) of the words are spaced correctly	Less than 25% of the words are spaced correctly	
					AL SCORE OUT OF 40:	

A rubric is a scoring guide to judge performance on a specific task. Have you ever wanted to quantify handwriting skills such as letter formation, speed or copying? Here is a FREE Overall Handwriting Rubric to use as an assessment tool to quantify an individual's written productivity. By using the rubric, each individual can be scored based on the same criteria. It is available in PDF or Word format.

Download the free handwriting rubric at http://yourtherapysource.com/rubricshandwritingfreebie.html

Get all 26 Handwriting Rubrics here http://yourtherapysource.com/rubricshandwriting.html

Clothes Pin Silly Faces

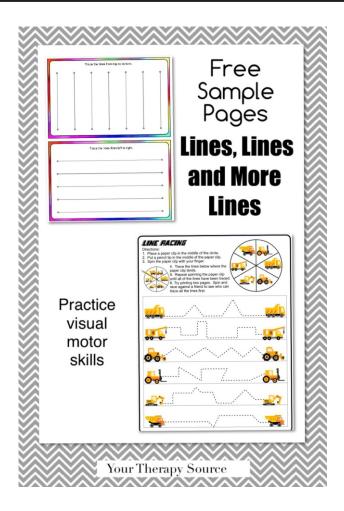


Here are some FREE printables to make these fun clothes pin silly faces. Print the download from http://yourtherapysource.com/freeclothespinfaces.html . Add some clothes pins and let the children create their own silly hair. It would be even more fun if you had some hair extension clips that you could add. They encourage strengthening of the fingers and hands and eye hand coordination. Plus, they are just plain cute!

Get the freebie here http://yourtherapysource.com/freeclothespinfaces.html

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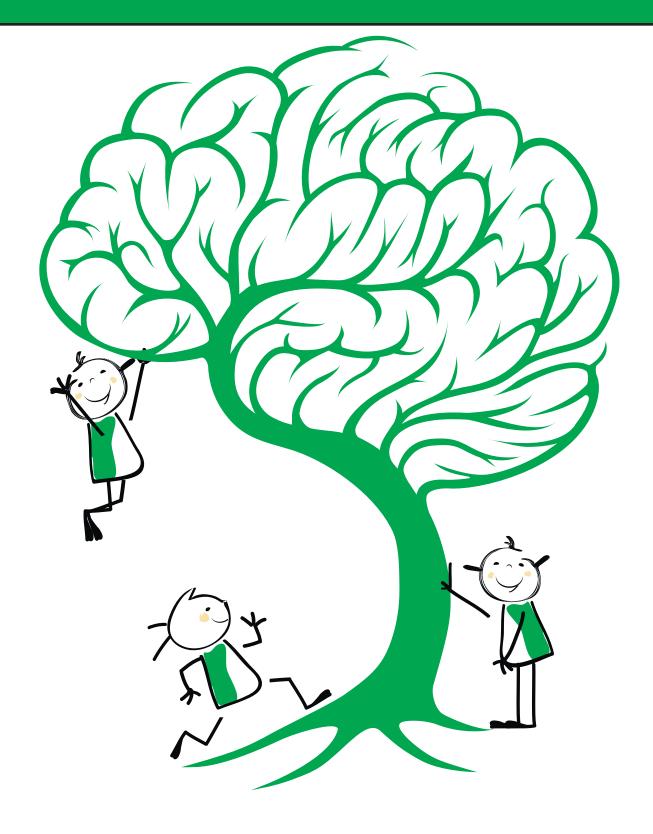
Free Sample Pages from Lines, Lines and More Lines



Get two free sample pages from Lines, Lines and More Lines to practice prewriting strokes and pencil control. Download them at http://yourtherapysource.com/linesfreebie.html

Find out more information about Lines, Lines and More Lines at http://yourtherapysource.com/lines.html

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