



# Your Therapy Source News

Digital magazine for pediatric occupational and physical therapists.

# Issue 58 - January 2014









## **New Products**



Title: Winter Multisensory Handwriting Activities

**Summary:** Download of Winter multisensory handwriting worksheets that include movement, scissor skills, gluing, "rainbow" writing and handwriting practice. Also includes a scoring rubric to track progress.

List Price: \$4.50 Sale Price until 1/31/13: \$2.99

www.YourTherapySource.com/mswinter



Title: Winter Olympic Brain Breaks

**Summary:** Download includes 16 Winter Olympic Brain Breaks, ideas for use and calm down poem

List Price: \$2.99

www.YourTherapySource.com/winterolympics



Title: Dot Phonics Mazes A to Z

**Summary:** Complete the path from the letter to the correct word using fine motor and visual motor skills.

List Price: \$2.99 Sale Price until 1/31/13: \$1.99

www.YourTherapySource.com/dotphonics

#### Motor Control Variables to Check On When Teaching New Motor Skills



As pediatric therapists, we learn a significant amount of information on motor control theory. Do you always put it into practice? When teaching new motor skills, do you stop and think about the theories and research you have studied? Here are three motor control variables to check when teaching new motor skills:

1. What is the child's experience with this new motor skill? Is it brand new to them or are they learning this skill with a set of experiences behind it all. Did Johnny fall off his bicycle many times before he came to physical therapy? Does Jane get yelled at for taking too long to get dressed?

2. Is the motor skill feasible to achieve? Sometimes children, teachers or parents come to us wanting to learn a new skill but that skill may be very difficult to achieve. Can the skill be broken down or re-evaluated to make it feasible to achieve? Personally, I never say a skill can never be learned but you may need to modify the environment or the skill to make it an achievable goal.

3. In what context is the skill being taught? Does it make sense to the child to work on the skill or is it being practiced in isolation? Is the skill being taught in an overstimulated environment or a quiet room?

Sometimes, it is necessary to tweak how we are teaching motor skills based on all the motor control theories in order for a child to learn the skill.

## **5 Tips for School Children with Tactile Sensitivity**



Difficulties processing tactile information can result in some individuals being very sensitive to touch and over-reaction to objects or people in the environment. Conversely, some individuals may have decreased sensation of touch which can result in people using too much force or placing themselves in dangerous situations.

Here are some suggestions to help children with tactile sensitivities:

1. Encourage proprioceptive input prior to activities that require tactile input. Examples of proprioceptive input are chair push ups, wall push ups, jumping, carrying heavy objects and push/pulling objects.

2. Never force a child to touch objects that he/she dislikes. The child can observe the activity, participate with modifications or touch the objects briefly and wash hands immediately.

3. Always approach the child from the front or seat the child in an area where he/she has a good view of who is approaching him/her.

4. Use a firm, gentle touch instead of light touch when you have contact with the child.

5. If the child exhibits difficulties with personal space (touching people or objects excessively) or over reacts to light touch, provide modifications to the environment to help the child such as providing visual cues where the child needs to sit, provide fidgets for the hands and have the student stand first or last in the classroom line.

### **Documentation Terms for Pediatric Therapists**



After seeing a pin on <u>Pinterest</u> from <u>Creative Clinical Social Worker</u>, I thought it would be helpful to post about terminology to use for pediatric therapy. If you follow my blog or website, you know I love the words "facilitate", "promote" and "encourage". When documenting therapy sessions I tend to overuse the words "completed" and "accomplished". So in order to expand my vocabulary I looked over the list and added some of my own. Some of the terms are more suitable for evaluations and some are more suitable for on going documentation of therapy sessions. Try adding some measurable outcomes to these verbs for goal setting.

If you would like a printable of this page to toss in your therapy bag, wallet or purse to increase your vocabulary next time you write up an evaluation or session note visit <u>YourTherapySource.com</u> at http://yourtherapysource.com/freeterms.

What is your favorite documentation terminology?

### **Messy Children Make Better Learners**



Researchers at the University of Iowa studied 16 month old children's exposure to 14 non solid objects such as applesauce, pudding and juice. The researchers presented the items and created fictional names. One minute later the children were asked to identify the same non-solid objects in different sizes or shapes. The toddlers willingly interacted with the non solid objects.

The researchers found the following results:

- the toddlers who interacted the most with the non-solid objects were the most likely to correctly identify the objects by texture and name them
- children in a high chair were more likely to identify and name the objects versus than those in other seated positions (ie at a table).

This is extremely interesting to me. From a developmental perspective, I would guess the stability of the high chair assists the child with postural control therefore freeing up the hands, shoulders and brain to learn about textures, shapes and sizes. Would love to see this study repeated analyzing the child's postural control throughout the experiment. In addition, I would love to see this study explored further with children who play outdoors in the dirt, mud or sand.

Regardless, this research supports all the therapeutic sensory, tactile play we recommend to parents and teachers. Your thoughts?

Reference: Lewis, R. Messy Children Make Better Learners. University of Iowa. Retrieved from the web on 12/3/13 at http://now.uiowa.edu/2013/10/messy-children-make-better-learners.

## Is Learning to Type Like Learning to Ride a Bicycle?

*Attention, Perception & Psychophysics* has published research on skilled typists and the QWERTY keyboard. The 100 participants (young adults and adults) in the study were asked to complete a short typing test. Following the typing test, the participants were given a blank QWERTY keyboard on a piece of paper where they had 80 seconds to write the correct letters on the blank keyboard.



The results showed the following:

- they averaged typing 72 words per minute, moving their fingers to the correct keys six times per second with 94 percent accuracy.
- they could accurately place an average of only 15 letters on a blank keyboard.

The researchers had expected that the participants would be able to type without conscious thought (like riding a bicycle and driving a car). Although the researchers were surprised that typists never appear to memorize the key positions, not even when they are first learning to type.

A second study was completed using the Dvorak keyboard. The 24 skilled QWERTY typists had to learn how to type on the Dvorak keyboard. After a reasonable accuracy rate was established, the typists were asked to fill out a blank Dvorak keyboard. On average, the typists were able to identify 17 letters on the blank keyboard. The researchers concluded that the "lack of explicit knowledge of the keyboard may be due to the fact that computers and keyboards have become so ubiquitous that students learn how to use them in an informal, trial-and-error fashion when they are very young".

Interesting research to take into account when teaching keyboarding. Have you ever tested to see what letters a student could actually identify on a blank keyboard? This is a skill that we attempt to break down when teaching and we include memorizing where the keys are located. When neurotypical individuals are learning to type is it purely through practice and use? In your opinion, does learning to type require a conscious effort at first and become automatic over time?

Reference: Salisbury, D. Study gives new meaning to 'let your fingers do the walking'. Medical Express. Retrieved from the web on 12/9/13 at http://medicalxpress.com/news/2013-12-fingers.html#nwlt.

## Top 10 Blogposts of all Time from Your Therapy Source



Here are the top 10 blogposts of all time from Your Therapy Source:

#### **10. Ten Tips for New Pediatric Occupational and Physical Therapists**

http://yourtherapysource.blogspot.com/2013/08/10-tips-for-new-pediatric-occupational.html

#### 9. Letter School App Review

http://yourtherapysource.blogspot.com/2011/12/letter-school-app.html

#### 8. Five Make and Take Therapy Ideas for Summer

http://yourtherapysource.blogspot.com/2013/05/5-make-and-take-ideas-for-summer.html

#### 7. Motor Planning and Graded Movement

http://yourtherapysource.blogspot.com/2009/04/motor-planning-and-graded-movement.html

#### 6. Scissor Skills - Not So Cut and Dry

http://yourtherapysource.blogspot.com/2009/07/scissors-not-so-cut-and-dry.htmls

#### 5. Perceptions on Pediatric Group Therapy Sessions

http://yourtherapysource.blogspot.com/2012/06/recent-study-examined-administrators.html

#### 4. Ten Tips for Transitions

http://yourtherapysource.blogspot.com/2013/06/10-tips-for-transitions.html

#### 3. Ten Bilateral Coordination Activities for the Body

http://yourtherapysource.blogspot.com/2012/12/10-bilateral-coordination-activities.html

#### 2. Brain Breaks Game

http://yourtherapysource.blogspot.com/2012/04/new-freebie-brain-breaks-game.html

#### 1. Ten Tips to Help Develop Self Control

http://yourtherapysource.blogspot.com/2013/09/10-tips-to-help-develop-self-control-in.html

## **Hot Topics**

#### **Gum Chewing and Headaches**

Gum chewing is occasionally recommended for children as part of a sensory diet therefore I thought this research regarding gum chewing and headaches was important to mention. *Pediatric Neurology* will be publishing research on 30 patients between 6-19 years old who had chronic or migraine headaches and chewed gum daily. The medical doctor, Dr. Watemburg, requested that the patients stop chewing gum for one month.

The following results were recorded:

- 19 of the 30 patients reported that the headaches went away entirely
- 7 of the 30 patients reported a decrease in frequency and intensity of headaches.

To further test the results, 26 of the 30 patients resumed gum chewing for two weeks and all of them reported a return of their symptoms within days.

The researcher concluded that gum chewing causes an overuse of the temporomandibular joint (TMJ) resulting in headaches.

Reference: American Friends of Tel Aviv University (2013, December 19). Chewing gum is often culprit for migraine headaches in teens. ScienceDaily. Retrieved December 20, 2013, from http://www.sciencedaily.com/releases/2013/12/131219130937.htm

#### **Balance in Girls with Visual Impairment**

*Pediatric Physical Therapy* published research on functional balance abilities in girls with visual impairment. The participants included 26 girls, 10-15 years old, with visual impairment who were assessed with the Pediatric Balance Scale (PBS) and stabilography.

The following results were recorded:

- balance difficulties appeared in single-leg stance, tandem stance, and reaching forward
- PBS scores ranged from 47 to 56
- PBS scores correlated with all but 2 sway parameters

The researchers concluded that girls with visual impairment may have difficulties in upright stance when the size of the base of support is narrowed and when the center of gravity approaches the edge of the base of support. Treatment interventions should focus on improving the balance of girls with visual impairment.

Reference: Żyłka, Justyna MS, PT; Lach, Urszula MS, PT; Rutkowska, Izabela PhD, PT. Functional Balance Assessment With Pediatric Balance Scale in Girls With Visual Impairment. Pediatric Physical Therapy: Winter 2013 - Volume 25 - Issue 4 - p 460-466 doi: 10.1097/PEP.0b013e31829ddbc8

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### **10 Ideas to Use Clothes Pin with Craft Sticks**



Here are 10 ideas to use clothes pins with craft sticks. These are inexpensive activities to create to use in the classroom setting while encouraging strengthening of the hand muscles. Use them for academics, sensory diets, emotions and coordination.

Head over to <u>www.YourTherapySource.com/freeclothespin</u> for all the details.

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## **Entry and Exit Slips for Pediatric Therapy Sessions**



Did you know that checking on what a student learned can help to keep them on track and to head toward reaching their goals? How about trying entry and exit slips during therapy sessions?

Entry or admit slips are used at the start of the session to review skills from previous sessions or to check if the student has any concerns. Exit slips are used at the end of the session to determine if the student understood the materials or mastered the skills. These questions can be oral, written or demonstration.

Go to <u>www.YourTherapySource.com/freeexitslips</u> to download some sample entry and exits slips in editable Word format or PDF format.

## **Crack the Code Game**



Here is a free printable game to encourage visual perceptual skills, handwriting and fine motor skills. You can choose to practice coloring, shapes or handwriting letters/numbers. This is easy game to print and toss in your bag for a last minute idea (or play while waiting at a restaurant, doctor's office, etc).

If you want to facilitate fine motor skill practice try using manipulatives to create the code such as bingo chips. You can download the free game at Your Therapy Source here <u>http://www.yourtherapysource.com/freecrackcode.html</u>

## **Dot Phonics Mazes**



Go to www.YourTherapySource.com/dotphonics for the complete download.

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Download a free sample page for the letters Y and Z to challenge phonemic awareness, fine motor and visual motor skills. When you download the free sample page there are also 8 different suggestions of how to differentiate the lesson based on the child's abilities.

You can download the sample pages and ideas at <a href="http://www.yourtherapysource.com/dotphonicsfreebie.html">http://www.yourtherapysource.com/dotphonicsfreebie.html</a>

## **Speed Match Visual Discrimination Freebie**



Here is another freebie from Your Therapy Source. Test your visual discrimination skills. Practice scissors skills by cutting out the cards. Start your timer. How quickly can you match up the exact stars? Record your time and try again.

You can download the free Speed Match puzzle at <u>www.YourTherapySource.com/speedmatch</u>.

For the complete download g	o to www.YourTherapySource.com/mswinter
Name:	snowman
<u>Trace</u> the word using three different colors.	<u>Move</u> with the words. 1. Air write the word "snowman" using your arms. 2. Rub your hands together to warm them up.
<u>Write</u> the word: Example: SNOWMAN 1.	3. Pretend to pack a large snowball in your hands. Cup your hands and squeeze them together. Pretend to make 3 snowballs. <u>Find</u> and circle the word "snowman". snowball snowman
2.	snowman snowshoes snowsled snowman snowman snowman
<u>Cut</u> the words out below. <u>Create</u> the sente	nce. <u>Glue</u> the sentence.
<u>Cut</u> the words out. SNOWMON	was a There
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