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10 End of School Year Questions to Ask Yourself

What was your biggest accomplishment at work this year as a therapist?

What do you wish you did more of at work?

Name one thing that would have made the school year more satisfying?

What was your biggest failure at work this year?

What was your favorite goal that a child achieved in therapy this year?

What was the hardest goal for a child to achieve this year?

Name one thing you would like to change next year at work.

Name one piece of equipment, book, etc. you would like to have next year at work.

Name one way that you can help your colleagues more next year.

Name one way how you can become a better therapist next year.
The *Journal of Occupational Therapy, Schools and Early Intervention* published research on haptic and kinesthetic perceptions relationships to handwriting legibility and speed in 177 first and second grade children in Taiwan. Haptic perception is the ability to recognize objects through touch. Kinesthetic perception is the ability to recognize how the body moves in space. The children participated in 5 assessments which revealed the following:

- haptic perception had a greater influence on handwriting speed than kinesthetic perception for the children in first and second grade
- kinesthetic perception accounted for a greater variance than haptic perception on handwriting legibility for the children in the first grade but not in the second grade

The researchers recommend that evaluators examine haptic and kinesthetic perception when evaluating handwriting skills. In addition, when teaching young children to write one may need to develop the kinesthetic perception.


A recent study was done comparing 8 first grade classrooms who participated in either a teacher designed handwriting program or the Handwriting Without Tears handwriting program. The Minnesota Handwriting Assessment was used for pre test and post test scores. The results indicated that the first grade students who participated in the teacher designed handwriting program had higher average post test scores on each of the subtests. The handwriting skills of both groups did improve though. When it came to special education students, there was no significant difference between the average post test scores for the students in the teacher designed program versus the handwriting without tears group.


Do you ever feel like a student you are working with is in a rut or having trouble reaching their goals? Maybe you just want to give them an extra push to accomplish a task. Here are 5 simple tips to help encourage students:

1. **Change up the tools, toys or activities that you are doing.** It may be just as simple as approaching the skill using a different tool or material.

2. **Change the environment.** Perhaps trying accomplishing the skill outdoors, in a quiet room or with a peer.

3. **Be positive.** If you assure the student that they have the ability to accomplish the goal you will provide them with the ability to believe in themselves. The power of positive feelings can go a long way. Check out Positive Affirmation Posters and Cards to provide your students with a visual reminder.

4. **Change your teaching style.** If you are only providing verbal directions, perhaps offer a demonstration or a visual picture of what the student needs to accomplish. If you are always offering verbal feedback, perhaps try diminishing how often you provide feedback to see if that makes a difference.

5. **Offer rewards.** Some students respond very well to a reward system.

www.YourTherapySource.com
Here is a website where you can create your own font for free and then install it on your computer to use in a Word document or any publishing software. It is very simple. Print out the template that the website provides. Write letters and numbers in the boxes on the templates. Scan the template and upload it on the website. Your font is ready right away. Don't forget to install it on your computer. Once installed, start typing with your own handwriting or fun font.

Here are some other ideas:

1. Children can practice handwriting while they write in each of the letters. Once scanned in they will be impressed at what they created.

2. Create the font to preserve handwriting. Do you work with any children or adults that have a progressive disease? If yes, perhaps they would like to have a font of their handwriting if there comes a time they will no longer be able to write themselves. Once you save this font, when assistive technology is used they will be able to have their original personalized handwriting.

3. Get creative. Make your own creative font just for fun to use on different documents.

4. Show a child's handwriting through the years. Perhaps have a child fill out the template each year. Then as time goes by it would be a wonderful keepsake to show how a child's handwriting has progressed through the years.

You can access the free handwriting font at MyScriptFont.com - http://www.myscriptfont.com/
**Recent Wii and Kinect Research**

*Gait and Posture* recently published two articles on the use of the Wii and the Kinect. The research indicated the following:

When compared to multiple camera 3D motion analysis, the Microsoft Kinect was able to validly assess kinematic strategies of postural control. The forward reach, lateral reach and single limb stance eye closed were used for postural control tests.

Postural control was evaluated when using the WiiFit Soccer Heading game and the Ski Slalom game. The results indicated that participants primarily used a trunk strategy to play Soccer Heading and a great contribution of lower extremity control to play Ski Slalom.

**References:**

Ross A. Clark | Yong-Hao Pua | Karine Fortin | Callan Ritchie | Kate E. Webster | Linda Denely | Adam L. Bryant **Validity of the Microsoft Kinect for assessment of postural control** Gait & Posture, Available online 23 May 2012


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**Tablet Computers and Shunts**

A recent study indicates that tablet computers may interfere with programmable shunts. The researchers discovered the following when exposing programmable shunts to the iPad2:

- at distances between 0 and 1 cm, the settings had changed in 58 percent of the valves.
- after exposure at distances between 1 and 2.5 cm the settings had changed in 5 percent of valves.
- after exposure at distances between 2.5 and 5 cm the settings had changed in only 1 percent of valves.
- no changes in valve settings were identified after exposures at higher distances.
- after exposure of programmable valves to the iPad 2 without a cover, which was only tested at distances between 0 and 1 cm, the researchers found that the settings had changed in 67 percent of the valves.

The researchers concluded that the iPad2 can be used safely in individuals with programmable shunts but follow the same cautions as you would around other household objects with magnets.

Perceptions on Pediatric Group Therapy Sessions

A recent study examined administrators, therapists and parents perceptions on the use of pediatric group therapy. Interviews and focus groups were conducted with 13 administrators, 19 therapists and 5 parents of children with special needs. The results indicated the following:

- administrators perceived groups to help with accessibility to services
- increased effort on the part of the therapist to conduct groups
- therapists expressed doubts about service quality in groups
- therapists reported benefits of social participation
- in general parents were supportive of group sessions

If you need ideas for group therapy sessions check out 25 Instant Sensory Motor Group Activities and Sensory Motor Group Activities A to Z at http://yourtherapysource.com/sensormotordownloads.html


Visual Dysfunction and Cerebral Palsy

A study in Developmental Medicine and Child Neurology reports on visual dysfunction in children with cerebral palsy. Since 60-70% of children with cerebral palsy have cerebral visual impairment, this study wanted to explore the visual dysfunction further. One hundred twenty nine patients with cerebral palsy ranging in age from 3 months to 15 years old underwent many neuro-ophthalmological assessments. The results indicated the following:

"Visual dysfunction in diplegia was characterized mainly by refractive errors (75% of patients), strabismus (90%), abnormal saccadic movements (86%), and reduced visual acuity (82%).

The participants with hemiplegia showed strabismus (71%) and refractive errors (88%); oculomotor involvement was less frequent (59%). This group had the largest percentage of patients with altered visual field (64%).

Children with tetraplegia showed a severe neuro-ophthalmological profile, characterized by ocular abnormalities (98%), oculomotor dysfunction (100%), and reduced visual acuity (98%)".

Therapists, teachers and parents need to be aware that neuro-ophthalmological disorders are one of the main symptoms in CP. Therefore, this needs to be assessed early in children and determined how it will effect treatment plans and modifications.

Grant Funding for Art Programs
The P. Buckley Moss Foundation is offering grant money for art programs that support children with learning differences. The application process is open from May 2012 through September 30, 2012 for 2013 programs.

"Applications may be made for a grant up to $1,000 to support a new or evolving program that integrates the arts into educational programming. The purpose is to aid and support teachers who wish to establish an effective learning tool using the arts in teaching children who learn differently"

Occupational therapists could team up with a teacher and fill out the grant this summer and start a new art program next year! Get more info here http://www.mossfoundation.org/national-educators-awards-and-grants

American Legion Grant
The American Legion Child Welfare Foundation offers grants for non profit organization that:

"contribute to the physical, mental, emotional and spiritual welfare of children through the 1.) dissemination of knowledge about new and innovative organizations and/or their programs designed to benefit youth or 2.) the dissemination of knowledge already possessed by well-established organizations, to the end that such information can be more adequately used by society".

Grants must have the potential to help American children in a large area (more than one state). You can get more information at the American Legion website - http://www.cwf-inc.org/grantseekers/overview

Adapted Gardening Tools
If you need ideas for adapting gardening tools for children check out this You Tube video for some creative suggestions. You can view it at http://yourtherapysource.blogspot.com/2012/06/adapted-gardening-tools.html
Activity Ideas

http://yourtherapysource.blogspot.com/2012/06/shredded-paper-ball.html

http://yourtherapysource.com/freeclayfaces
Activity Ideas

HOLE PUNCH PLAY DOUGH

http://yourtherapysource.com/freeholepunchclay
Here is a simple adaptation to create a ball that makes some noise. This is a great tool to work on catching or hitting a ball for children who are visually impaired or who are just learning how to catch. By adding the noise to the ball, it provides additional sensory input for the child to locate where the ball is traveling.

I had an old tennis ball and ping pong ball that I used for this project. Cut a large slit in the tennis ball using an exacto knife. Cut a small 'X' in the ping pong ball again using an exacto knife. Push some metal beads or BB's inside the ping pong ball. Now push the ping pong into the tennis ball.

You can glue the tennis ball shut or use duct tape to close it back up but this does quiet the noise. If you leave the slit in the tennis ball alone the ping pong ball will not fall out and it makes a louder noise. You can still bounce the ball as well.

The additional noise will help the children to focus their attention on the ball coming towards them.
Sample Communication Form

Free Sample Page

http://yourtherapysource.com/freecommchecklist.html

School and Home Communication Forms for Therapists

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