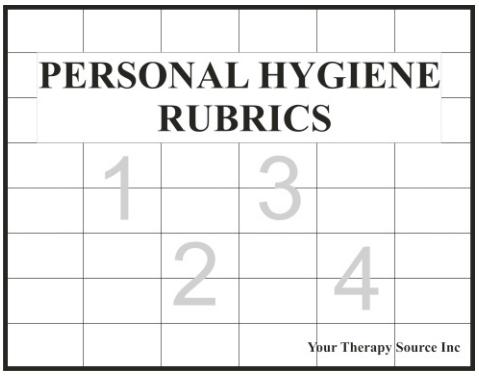
Your Therapy Source News

Digital magazine for pediatric occupational and physical therapists.

Issue 27 - June 2011

www.YourTherapySource.com

New and Popular Products



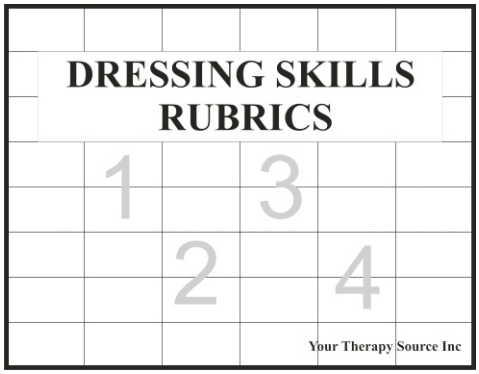
Personal Hygiene Rubrics:

Download of an electronic book of 14 rubrics to assess personal hygiene in PDF and Word format

List Price for electronic book: $5.99

SALE PRICE THROUGH JUNE 15th - $2.99

www.YourTherapySource.com/rubricshygiene

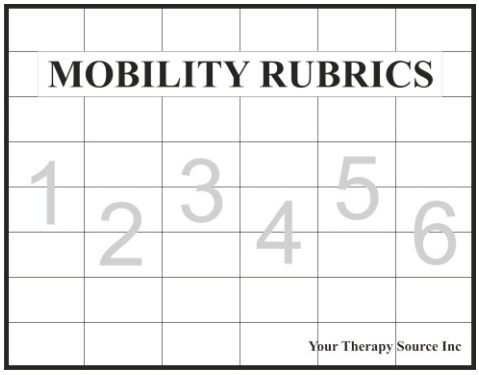


Dressing Skills Rubrics:

Download of an electronic book of 21 rubrics to assess dressing skills in PDF and Word format

List Price for electronic book: $5.99

www.YourTherapySource.com/rubricsdressing



Mobility Rubrics:

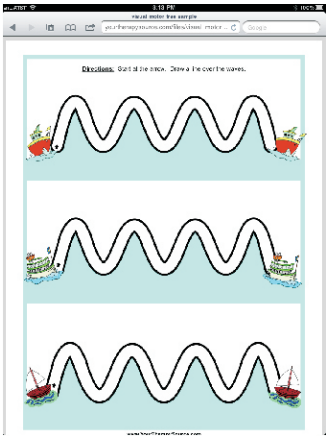
Download of an electronic book of 11 rubrics to assess mobility skills in the school environment in PDF and Word format

List Price for electronic book: $5.99

www.YourTherapySource.com/rubricsmobility

Make Your Own iPad Apps

Want to learn how you can mark up pdf's on your iPad? Basically this free app allows you to mark and draw on the iPad with pdf documents. Therefore, if any of you have ordered some of our visual motor electronic books you can now store them on your iPad and have the children practice visual motor skills using the iPad instead of paper. Here is how you do it:

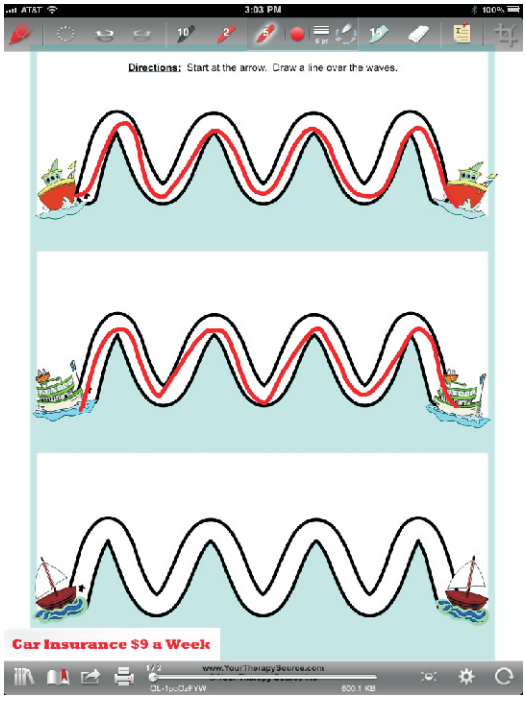


Step 1: On your iPad download the free pdf-notes app from itunes.

Step 2: Email yourself a copy of a pdf document. Try our free sample page from Visual Motor Workbook at www.YourTherapySource.com/visualmotorworkbook .

For large files, ie Visual Motor Workbook, click on the download link you originally received from us. If either of those don't work try using a free service like sendthisfile.com to email yourself the larger document.

Step 3: Open the pdf document on the iPad. In the upper right hand corner the option will come up to "Open in pdf-notes". Tap on that option.



Step 4: Wait a few seconds and your document will open. Now you can mark up the pages directly on the iPad. At the top of the page is where you can change the thickness of the mark, erase, change colors, undo, redo and more.

Step 5: Tap at the bottom of the page to email or print the document. Tap on the books to return to your bookshelf of other pdf documents.

Step 6: Try out some of our other pdf documents that you could use on the iPad like What's Missing? Patterns, Patterns, Patterns or Follow the Path.

Step 7: Think up other uses - If you have iPad2 you could take a picture of worksheet using app which converts it to pdf and let students complete the worksheet on the iPad. Text can not be written on the pdf's but it does say it is coming soon!!! Imagine that - you could scan in tests, job applications, etc and someone could create fillable forms right on the iPad. Amazing! Email us at contactus@yourtherapysource.com if you have any questions on how you can turn our ebooks to use on the iPad.

Exploring Spaces and Body Awareness

Many pediatric occupational and physical therapists work with children who exhibit decreased sensory processing such as decreased body awareness, motor planning and proprioception. These difficulties of sensing where a child is in space can interfere with motor skill development, peer interaction and safety. We are all familiar with therapy sessions that focus on proprioceptive input, following motor commands and activities that encourage the children to learn where their body is in space. One additional activity to consider is fully exploring the environment where the functional skills are to be learned.

Let's take this goal for example: Johnny will negotiate the classroom without bumping into stationary objects 100% of the time. As stated previously, therapy may consist of body awareness activities, proprioceptive input (heavy work activities) and motor planning skills. If it is pull out therapy all of this takes place outside of the true environment. If it is push in therapy perhaps skills are practiced in during recess, physical education or sometimes in the classroom. BUT do you remember to explore and practice skills in the actual environment?

Remember to not only practice activities but how about really exploring the area where "Johnny" is having difficulties. When the classroom is empty, go inside and have Johnny walk in and around the desks and chairs. Johnny can crawl under desks, kneel down and sit in different locations in the classroom. Add in games or activities to keep it novel. Provide verbal cues as Johnny walks by items ie. this desk is wide or this aisle is narrow. This exploration allows Johnny to develop a motor map of his surroundings with him in it. He can develop a better sense of how big desks are, how tall are the chairs, how wide is the carpet and how far is the bathroom.

This can apply to different areas of the school or home. How about the cafeteria? Let a child explore it to help define a motor map for in between cafeteria tables, on the cafeteria line and around garbage cans. At home, if furniture is changed around allow time to just explore the new areas and obstacles without adding in the stressors of different goals. Now when you do start to add in the actual functional tasks that needs to be accomplished, Johnny should have a much better idea of what you are expecting of him.

In summary, keep it simple sometimes and start out with just simply exploring the surroundings without adding in any other functional tasks to help build a strong foundation.

Toy Review

Occupational Therapy with Gogo's Crazy Bones - A product review of a new occupation-based toy. Thanks to Jessica Helvey, MS OTR/L for this guest article.

I've been an occupational therapist for six years and I have worked with a variety of clients. I thought my "toolkit" for engaging clients in purposeful, meaningful activities was pretty well rounded—until I became a mother myself. When it came to my own son, Nathan, I couldn't seem to engage him for any length of time on tasks that targeted component skills, such as hand dexterity, finger isolation, pincer grasp, or in-hand manipulation. Nathan, who is four-years old, frequently became bored with pencil-and-paper tasks targeting handwriting, and zipper and button activities seemed meaningless to him. I quickly realized we needed something fun and engaging that wouldn't be interpreted as work.

One day while waiting in line at Walmart, Nathan became captivated by all the toys and candies lined up near the register. He was drawn to one fun and colourful package in particular—Gogo's Crazy Bones. He asked me to buy it and at $3 each I grabbed a couple without thinking much about it. It wasn't until we got home and I watched him play with the quirky little characters that I realized what a fantastic fine motor skills toy we had found.

I immediately Googled the Gogo's and discovered that there was so much more to the toys than I would have imagined. The Gogo's come in hundreds of shapes, colours and designs and kids can play dozens of games that are not just fun, but educational, too. The web site, gogoscrazybones.com, was a great resource and I downloaded several game ideas for Nathan. Better still, now that I knew more about the Gogo's I was able to come up with my own activities that we could play together or that Nathan could play independently.

For example, to help Nathan with stereognosis, hand dexterity and in-hand manipulation, we invented a game called "In the Box." We put several Gogo's into an empty tissue box, along with some random sensory items (a small fuzzy ball, several dry beans, a ball of Play-Doh, etc.). Without looking, Nathan puts his hand into the box, feels for the Gogo and then guesses which character he is holding.

Another fun game that helps Nathan develop body awareness and pre-writing skills is "Build a Gogo." To play, Nathan selects various shapes cut from construction paper and assembles them to form his own Gogo creation. By using prepositional phrases such as "on the top," "under the circle" and "beside the square" Nathan is learning how to use and follow directions.

I've found that every component skill I want to address in our daily "OT sessions" can be included in our Gogo's playtime. Since our games are occupation-based and purposeful to him, Nathan never asks to stop playing and the range of games is limited only by our imaginations.

As an occupational therapist, I know how important the role of play is in the development of a child's cognitive, physical, social and emotional well-being. I can also relate to the frustration occupational therapists (and parents) sometimes have when it comes to finding engaging activities for young kids who need practice in component skills. After my "by chance" encounter I realized what an efficient and effective tool Gogo's Crazy Bones are. Who knew something so useful could come from an impulse buy? Visit www.gogoscrazybones.com for more info.

SIDEBAR:

Gogo's Crazy Bones have incredible practical benefits for occupational therapists who often have to travel to and from schools, clinics, homes and hospitals.

1. Size and portability. Gogo's are very small and don't take up much space in your toolkit.
2. Multi-client use. Gogo's appeal to boys and girls from a wide range of ages, which means fewer tools for you to carry.
3. Replaceable. If you lose one Gogo, you can still play and the figures are very inexpensive to replace. (I can't tell you how many games I have shipped to the game graveyard because critical pieces are missing.)
4. Reward. After a great session the child may be awarded a few Gogo's to take home and practice with for the next session.
5. Variety. Kids don't get tired of playing the Gogo's games. They use their imaginations to create new scenarios or visit the web site to learn new games.
6. Child-led. Playing with Gogo's is a child-led activity, which is so important!
7. Educational. Sorting, patterning and counting Gogo's requires problem solving as well as fine motor and other skills.
8. Low maintenance. Gogo's have no batteries or moving parts to break, which is critical when set-up and clean-up time is an issue.
9. Easy to clean. Infection control is important when the same tools are shared between many clients.

Tasks

Using Task Analysis for Documentation

Pediatric Physical Therapy published research using task analysis and a scoring code for donning coats in preschool children. The 171 preschool children were scored three times per year and the data revealed the following:

* at first scoring 22 children were able to put on coat independently and 149 required help

* at final scoring 75 of the 149 children could now put on a coat, 14 still needed help, 50 received additional services and 32 had services interrupted

The researchers concluded that task analysis and scoring codes helped to standardize documentation, show small changes and and focus the task training.

Reference: Kaplan, Sandra L. PT, PhD; O'Connell, Melanie D. MSPT Task Analyses Identify Coat-Donning Delays in Preschoolers in Special Education Pediatric Physical Therapy:Spring 2011 - Volume 23 - Issue 1 - p 62–69 doi: 10.1097/PEP.0b013e318209429c

Change the Task Not the Child

Developmental Medicine and Child Neurology published research on context therapy for children with cerebral palsy. Therapists were trained that in order to achieve parent identified functional goals for the child the therapist was to change the task and/or the environment rather than change the abilities of the child. A three step intervention process was established. The results indicated that the therapists were able to follow the therapy protocol and parents participated in goal setting and interventions. The researchers concluded that having a therapy approach that changes the task and/or environment is a viable intervention and needs further investigation. The article details the context therapy approach which can be replicated by researchers and therapists.

Reference: Darrah J, Law MC, Pollock N, Wilson B, Russell DJ, Walter SD, Rosenbaum P, Galuppi B. Context therapy: a new intervention approach for children with cerebral palsy Dev Med Child Neurol. 2011 May 13. doi: 10.1111/j.1469-8749.2011.03959.x. [Epub ahead of print]

Research Related to Physical Activity in Children

Exercise, Academics and Autism

Pediatric Physical Therapy published research on the effects of aerobic exercise on academics in young children with autism. In the experimental phase of the treatment, the children participated in 15 minutes of aerobic activity prior to academic tasks. In the control phase, the children only completed the academic tasks. The results indicated a significant difference in correct responses following the exercise. There were no differences seen in stereotypical behaviors and on-task behaviors.

Reference: Oriel, Kathryn N. PT, EdD; George, Cheryl L. PhD; Peckus, Rebecca DPT; Semon, Amanda DPT The Effects of Aerobic Exercise on Academic Engagement in Young Children With Autism Spectrum Disorder Pediatric Physical Therapy: Summer 2011 - Volume 23 - Issue 2 - p 187–193 doi: 10.1097/PEP.0b013e318218f149

Exercise and Cystic Fibrosis

A small study from John Hopkins indicates that prescribing an individualized exercise program to children with cystic fibrosis improved lung function. Fifty eight children ranging in age from 6 to 16 years old received individualized exercise programs such as taking a stroll or playing the Wii. After two months of following the exercise regimen exercise tolerance increased. The children also exhibited small changes in pulmonary function tests and improved self image.

Reference: Ekaterina Pesheva. Simple Exercise Improves Lung Function in Children with CF. Retrieved from the web on 5/9/2011 at http://www.hopkinschildrens.org/Simple-Exercise-Improves-Lung-Function-in-Children-with-CF.aspx

Motor Activity, Memory and Attention in Preschoolers

BMC Pediatrics published research that analyzed aerobic fitness, motor skills, dynamic balance, working memory and attention in 254 ethnically diverse preschoolers (mean age 5.2 years). Baseline data was collected along with data 9 months later. The results indicated the following:

1. a cross sectional analysis indicated that aerobic fitness level was associated with better attention
2. cross sectional analysis also indicated decreased time on agility test was associated with improved memory and attention
3. longitudinal analysis over the 9 months revealed that baseline aerobic fitness was independently related to improved attention
4. longitudinal analysis also revealed that baseline dynamic balance was related to improved working memory.

Read the complete study here.

Reference: Iris Niederer et al. Relationship of aerobic fitness and motor skills with memory and attention in preschoolers (Ballabeina): A cross-sectional and longitudinal study. BMC Pediatrics 2011, 11:34 doi:10.1186/1471-2431-11-34

Hot Topics

BMI and Gross Motor Skills

***P**ediatric Physical Therapy* published research on the relationship between body mass index (BMI) and gross motor skill level in children. Fifty typically developing 3-5 year old children were evaluated with the Peabody Developmental Motor Scales. Of those 50 children, 24% were overweight/obese with 54% scoring below average on the PDMS in that group. Whereas only 15% of the non overweight group scored below average on the PDMS. The researchers concluded that 3-5 year old children with a high BMI may have difficulties with gross motor skills. More research was recommended.

Reference: Nervik, Deborah PT, MHS, DPT, DHS, PCS; Martin, Kathy PT, DHS; Rundquist, Peter PT, PhD; Cleland, Joshua PT, PhD The Relationship Between Body Mass Index and Gross Motor Development in Children Aged 3 to 5 Years. Pediatric Physical Therapy: Summer 2011 - Volume 23 - Issue 2 - p 144–148 doi: 10.1097/PEP.0b013e318218d356

Standing Program and Cerebral Palsy

Pediatric Physical Therapy published research on the effect of weight-bearing in abduction and extension on hip stability in children with cerebral palsy. Three non ambulatory children with cerebral palsy post surgery participated in a standing program with hips in maximum abduction and hip and knee extension. Following one year of the standing program the three children exhibited the largest decrease in hip migration percentage compared to 20 children in the control group. Eight non ambulatory children who did not undergo surgery also participated in a preventative standing program for one year. The eight subjects also exhibited a decrease in hip migration percentage compared to the 63 controls. Only the control group had hip and knee contractures.

The authors concluded that:

* standing for one hour per day in maximum hip abduction and hip and knee extension may reduce hip migration percentage post adductor-iliopsoas-tenotomies

* standing for one hour per day in maximum hip abduction and hip and knee extension may prevent an increase in hip migration percentage and prevent muscle contractures in children who have not had surgery

* larger studies need to be performed to confirm the findings.

Reference: Martinsson, Caroline PT, MSc; Himmelmann, Kate MD, PhD Effect of Weight-Bearing in Abduction and Extension on Hip Stability in Children With Cerebral Palsy Pediatric Physical Therapy: Summer 2011 - Volume 23 - Issue 2 - p 150–157 doi: 10.1097/PEP.0b013e318218efc3

Hippotherapy and Gait

The *Archives of Physical Medicine and Rehabilitation* published research on the effects of hippotherapy on 32 children with bilateral spastic cerebral palsy. The children received 2, 30 minute sessions, of hippotherapy for 8 weeks. Walking speed, stride length, and pelvic kinematics (average pelvic anterior tilt, pelvic anterior tilt at initial contact, pelvic anterior tilt at terminal stance) improved significantly following the hippotherapy sessions. In addition, scores for dimension E (walking, running and jumping) of the Gross Motor Function Measure (GMFM), GMFM-66 and PBS (Pediatric Balance Scale) also showed improvements.

Reference: Jeong-Yi Kwon, Hyun Jung Chang, Ji Young Lee, Yumi Ha, Peter K. Lee, Yun-Hee Kim. **Effects of Hippotherapy on Gait Parameters in Children With Bilateral Spastic Cerebral Palsy. Archives of Physical Medicine and Rehabilitation - May 2011 (Vol. 92, Issue 5, Pages 774-779, DOI: 10.1016/j.apmr.2010.11.031)**

On the Web...

Sensory Research

Came across this website that has a good compilation of research on sensory processing - sensoryprocessing.info. The author lists many sensory processing research reports over the past 10 years that were published in the American Journal of Occupational Therapy. It is an informative website for parents for activity suggestions in the home as well.

Of course you can visit the Sensory Processing Foundation website for more great research articles and information. Check out their library section at http://www.spdfoundation.net/library.html

Grant for Inclusion

The Mitsubishi Electric America Foundation (MEAF) is offering grant money of up to $90,000 if you are a non profit 501(c). Here are some details:

> The Mitsubishi Electric America Foundation is dedicated to helping young Americans with disabilities maximize their potential and participation in society. The Foundation supports organizations and projects within its mission that address important needs, have broad scope and impact, and demonstrate potential for replication at other sites.
>
> MEAF's funding priority is inclusion: enabling young people with disabilities to have full access to educational, vocational and recreational opportunities and to participate alongside their non-disabled peers.

You can get more information at MEAF.

Outdoor Environments for Children with Autism and Special Needs

Here is some great information on creating and working with outdoor environments for children with autism and special needs or view below. This hand out gives an overview of autism and sensory integration followed by research on the role of nature in autism and design guidelines. The hand out was created based on a webinar that Kaboom offered which you can view here - scroll to bottom of page

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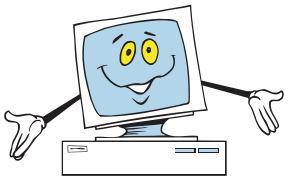

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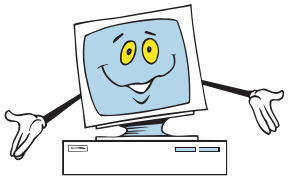


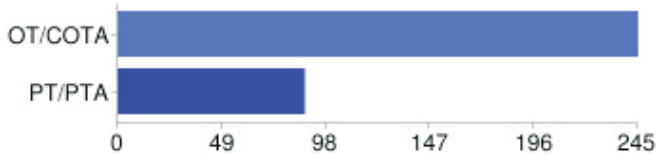
Surveys Results for Value of School Based Therapists

Question #1: Are you a pediatric OT/COTA or PT/PTA?

333 Responses:

245 OT/COTA (74%)

88 PT/PTA (28%)



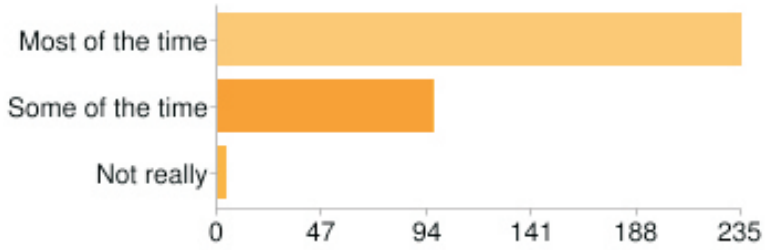
QUESTION #2:In general, do the school staff value your participation where you work as a therapist?

RESPONSES:

Most of the time 235 (71%)

Some of the time 97 (29%)

Not really 4 (1%)



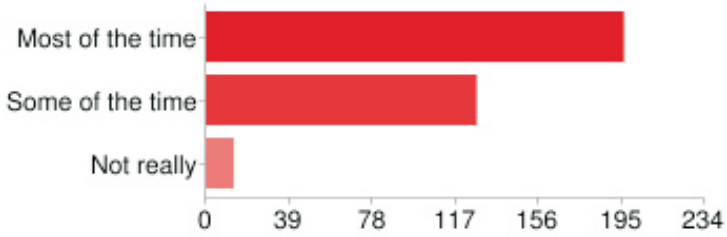
QUESTION #3:In general, do the parents of students that you work with value your participation where you work as a therapist?

RESPONSES:

Most of the time 196 (59%)

Some of the time 127 (38%)

Not really 13 (4%)



Answer our current survey on grade level and setting for school based therapy at

www.YourTherapySource.com/survey

Personal Hygiene Rubric

Sample page from Personal Hygiene Rubric
For more info go to
www.YourTherapySource.com/rubrichygiene

OVERALL PERSONAL HYGIENE RUBRIC

Client's Name: **Therapist:**
Date:
List any adaptive equipment used for personal hygiene:

Personal Hygiene	Uses the skill at all times in all environments	Completes the skill as expected	Uses the skill inconsistently	Learning the skill	Total
Toileting (urination)	4	3	2	1	
Toileting (bowel movement)	4	3	2	1	
Washing hands after bathroom use	4	3	2	1	
Washing hands before meal time	4	3	2	1	
Use of soap (dispenser or bar soap)	4	3	2	1	
Washing face	4	3	2	1	
Taking a bath	4	3	2	1	
Taking a shower	4	3	2	1	
Wiping nose	4	3	2	1	
Blowing nose	4	3	2	1	
Brushing teeth	4	3	2	1	
Brushing hair	4	3	2	1	
			TOTAL SCORE OUT OF 48 POINTS		

OUTDOOR BINGO

frog 	pile of dirt 	pine cone 	bird 
brown leaf 	acorn 	yellow flower 	two pebbles 
butterfly 	red leaf 	rock 	pine needles 
fern 	grass 	stick 	green leaf 

Directions for Outdoor Bingo: Cut out the two bingo cards. Go outdoors. Mark off each box with an 'X' when you find that object. First player to find 4 objects in a row is the winner.

Directions for Scavenger Hunt: Cut out the two bingo cards. Go outdoors on a nature walk. Every time you find an object mark an 'X' in the box. See if you can find all the objects on the card.

Directions for Outdoor Race: Cut out each small square from the bingo card. Go outdoors. Try to collect each item (except the animals) and match the card to the item. Time yourself to see how long it takes. Try playing the game another time in a different location and see if it takes you longer or shorter.

pine cone 	rock 	brown leaf 	red leaf 
pile of dirt 	bird 	green leaf 	grass 
two pebbles 	fern 	pine needles 	butterfly 
frog 	yellow flower 	acorn 	stick 

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for a full list of our products including:

- documentation forms
- sensory motor activity ideas
- sensory processing resources
- visual perceptual activities
- music downloads

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