



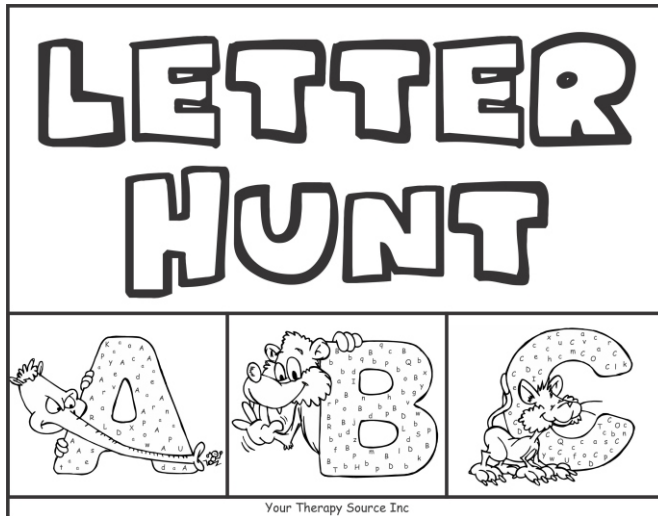
Your Therapy Source News

**Digital magazine for pediatric
occupational and physical therapists.**

Issue 55 - October 2013

www.YourTherapySource.com

New and Popular Products



Letter Hunt

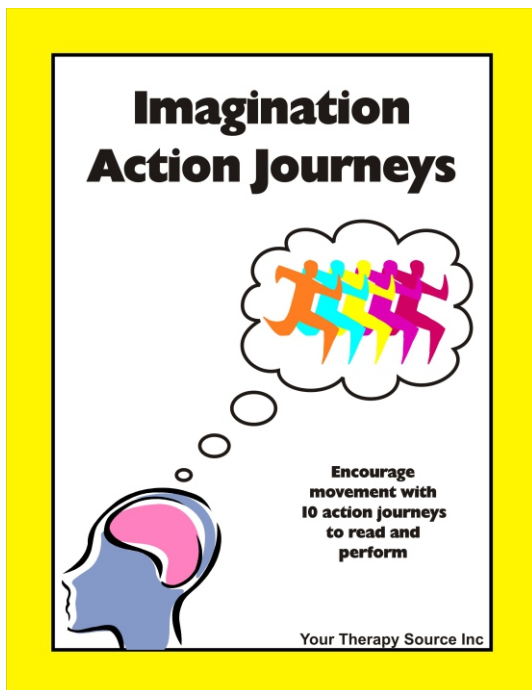
By: Your Therapy Source

Summary: The Letter Hunt ebook includes 26 hunt and find puzzles. For each letter of the alphabet you find and circle 13 upper case letters and 13 lower case letters.

Retail price: \$3.99

SALE PRICE through
10/31/13: \$0.99

www.YourTherapySource.com/letterhunt



Imagination Action Journeys

By: Your Therapy Source

Summary: Imagination Action Journeys are 10 fun filled stories that encourage literacy, physical activity, imagination and creativity. Children will enjoy reading and acting out the stories.

Retail price: \$4.99

SALE PRICE through 10/31/13: \$1.99

www.YourTherapySource.com/imagine

10 Tips to Develop Self Control



1. Do activities that require you and the child to follow step by step directions such as playing a board game or following a recipe.
2. Let children wait. If you are busy doing something and a child requests your attention, it is beneficial for the child to learn to wait patiently for you to finish.
3. Provide verbal or visual cues for how long a child may have to wait. Explain to the child that when you are done writing this note, you can play the game. Set a timer and tell the child that when the timer goes off he/she can play with a certain toy.
4. Partner up together to solve a problem. If the child is having trouble completing a difficult task, offer to help to assist but do not take over. Encourage the child to remain in control even though frustrated. Teach the child self control skills when frustrations are on the rise. Try using some self calming strategies - <http://yourtherapysource.com/calm.html>.
5. Work on something that takes a long time to finish. Try completing a large puzzle together over a weeks time, baking bread from scratch (waiting for it to rise), growing a plant or making rock candy.
6. Model self control. Adults get frustrated and can lose self control too. Show the child that even though you are losing your patience or annoyed you remain calm and in control.
7. Provide suggestions to the child if they are not displaying good self control. For example, suggest that he/she plays with a different toy while waiting for a toy a friend is playing with. Exercise can be an excellent outlet to reduce frustration and anger.
8. Don't set expectations too high. Remember the age of the child. For example, a young child may easily lose self control waiting in a long line next to a large selection of candy. Older children may have less self control following a bad day at school. Children who are expected to sit for hours without burning off any energy will be at risk for losing self control. Overwhelming, crowded or loud places may put children at risk for melting down. Some children may benefit from a sensory diet to help improve self control. Check out Cut and Paste Sensory Diet - <http://yourtherapysource.com/sensorydiet.html> or the Sensational Brain Membership - <http://yourtherapysource.com/brainworks.html> to get started.
9. Provide down time. Children are expected to go all the time - school, after school activities and sometimes evening activities. Children who are over-scheduled will most likely melt down easier. Allow plenty of time for children to explore their own environments at home and with friends. This creates realistic life situations where self control is required and they will learn through practice.
10. Know when to back off. Children need to develop self control skills for themselves. Once you observe that a child is gaining control, let him/her proceed without your help.

Cerebral Palsy Research

Modified Constraint-Induced Movement Therapy Versus Intensive Bimanual Training

Clinical Rehabilitation published research on 47 children with unilateral cerebral palsy or other non-progressive hemiplegia (aged 3.3–11.4 years) who were randomly assigned to either a modified constraint-induced movement program (kid-CIMT - 60 hours of unilateral constraint-induced and 20 hours of bimanual training over four weeks) or intensive bimanual training (80 hours of bimanual training over four weeks). The following results were recorded:

- modified constraint-induced therapy provided a significantly better outcome for isolated motor functions of the paretic arm than bimanual training
- for spontaneous use of the paretic arm and hand in everyday life activities both methods led to similar improvement
- more-disabled children showed greater improvement than less-disabled ones
- age did not affect treatment outcome

Reference: Wolfgang Deppe, Kerstin Thuemmler, Judith Fleischer, Claudia Berger, Susanne Meyer, and Baerbel Wiedemann. Modified constraint-induced movement therapy versus intensive bimanual training for children with hemiplegia – a randomized controlled trial Clin Rehabil October 2013 27: 909-920, first published on July 1, 2013 doi:10.1177/0269215513483764

Developmental Trajectories of Daily Activities in Children and Adolescents With Cerebral Palsy

Pediatrics has published research on the developmental trajectories of mobility performance and daily activities in 420 Dutch children (ages 1-16 years) and young adults with cerebral palsy (CP) and investigating the influence of gross motor function and intellectual disability on these trajectories. The children were followed yearly over a period of 2 to 4 years. Developmental trajectories were described for mobility performance and performance of daily activities, using the Vineland Adaptive Behavior Scale, the Gross Motor Function Classification System and IQ scores or school type of intellectual disability. The following results were recorded:

- developmental trajectories of mobility performance differed according to levels of gross motor function but not levels of intellectual disability
- performance of daily activities was affected by intellectual disability with lower overall trajectory levels for participants with intellectual disabilities
- the children without intellectual disability exhibited high-level developmental trajectories with values similar to those of typically developing children even though differences in gross motor function level were present.

Reference: Rimke C. Vos et al. Developmental Trajectories of Daily Activities in Children and Adolescents With Cerebral Palsy. *Pediatrics* peds.2013-0499; published ahead of print September 9, 2013, doi:10.1542/peds.2013-0499

Build Upon A Child's Strengths



Parents, teachers and therapists need to find each child's strengths and build upon those strengths. Every child is a star at something. Need some ideas to determine what a child's strengths may be? See below for a list of positive character traits and talents.

Keep all these attributes in mind as you work with a child. Also, refer to the list to spark descriptive words for a child when it comes to IEP time.

Want to encourage positive thinking?

Check out **Positive Affirmations** -

<http://yourtherapysource.com/positiveaffirmation.html> to empower children to realize their full potential.

adventurous
active
agile
artistic
attentive
aware
articulate
amusing
big-hearted
blissful
brave
bright
calm
carefree
caring
cautious
cheerful
clever

courageous
courteous
creative
competent
coordinated
charming
cooperative
cool
dependable
determined
eager
easy going
friendly
generous
happy
helpful
honest
imaginative

kind
loyal
magnificent
nimble
open
out going
passionate
physical
practical
quick
responsible
realistic
self-reliant
simplistic
superb
thoughtful
terrific
watchful
zany

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Muscle Strengthening and Body Awareness Activity

Looking for a fun, novel activity that encourages muscle strengthening, body awareness, motor control, timing and more? You have to check out the Stretchy Band™ from www.BearPawCreek.com. I was given a free medium size Stretchy Band™ and a Connect-A-Band to use for this article. Each Stretchy Band™ comes in a drawstring bag making it easy to pack it up. This is a wonderful tool to add to your pediatric OT or PT bag.



Fun with the Stretchy Band™

The Stretchy Band™ is essentially some resistive tubing encased in colorful fabric. The wonderful thing about it is that kids can pull and pull on it but if you let go it does not hurt. You can use it with one child or a group of children. For a group of children work on various exercises and motor commands - lift the band up, down, move in and out, pull and walk in a circle, walk backwards, etc. All of these actions are met with some resistance to the muscles. You could think up many games incorporating the colors of the band i.e. everyone hold the band up overhead. If you are holding a red part of the band squat down but don't let go of the band. You do need a significant amount of space to use the band with a group such as a gym or outdoors. With the Connect-A-Band you can connect the stretchy bands together to make a very large stretchy band.

Try it with one person for some resistive exercises. Here the child is stepping on the band and pulling up in different directions working the upper and lower extremities along with the postural muscles. This can be completed in smaller spaces.



Solo with the Stretchy Band™



Strengthening with the Stretchy Band™

Here an adult is holding one end of the Stretchy Band™ while the child walks to retrieve an item on the ground. The child has to concentrically contract the muscles against the resistance to walk to the object and eccentrically contract the muscles to control the body when returning to the starting position. Another option, is to have the child walk backwards against the resistance (excellent to work the extensor musculature) and then control the motion to return to start. This is loads of fun for the child - they called it "bungee jumping standing up".

Try some partner work with the Stretchy Band™. The kids can play some tug of war. Try running together with one child as the leader and one child as the caboose. The kids loved this activity. Try matching up some coordination movements. Jump sideways together holding the band matching up the timing of the motor movements.

Although I was compensated to write this post, I give this product a big thumbs up! All is all, this is a wonderful, fun product for pediatric therapy sessions.

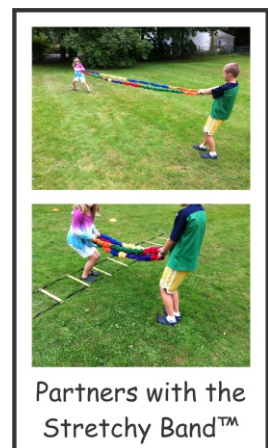
Here are the positives:

- nice tool for working on muscle strengthening in children
- the colors add to the fun and creativity of the games
- works with one child or a group of children
- encourages motor planning and body awareness
- encourages motor control of your body motions i.e. slowing down your body if it is moving too fast
- excellent proprioceptive input to the joints and muscles

Here is the negative:

- for group use you really need a large, empty room, gym or outside space. If you are like most therapists this kind of space can be hard to find in a school setting. For solo or partner use though, you can use in smaller spaces.

These are just a few suggestions of what you can do with the Stretchy Band™. Head on over to www.BearPawCreek.com to see their products all made in the USA.



Partners with the Stretchy Band™

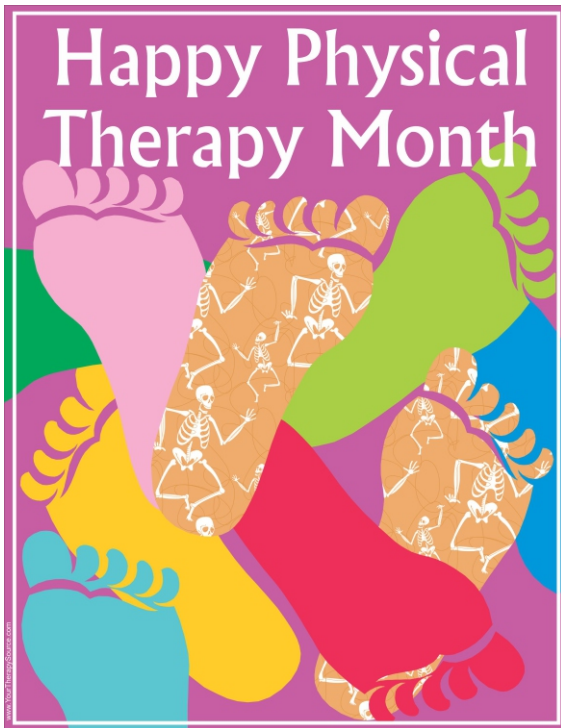
3 Tips to Improve Motor Memory



Do you ever find that a child may learn a new motor skill (i.e. skipping) only to forget it rather quickly? Or perhaps you teach a child a new skill and he/she remembers how to execute it for a long time (i.e. bike riding)? There are many reasons why the body has better muscle memory for certain motor plans. Here are 3 tips to help children retain motor skills over time:

1. Practice, practice, practice. The key factor in remembering a motor plan is to practice. When a child learns to ride a bicycle, he/she practices hundreds perhaps thousands of revolutions in one bike riding session. When a child practices a skill like skipping, he/she may only try it for 10-20 steps. Therefore, the main ingredient to motor memory is practice!
2. Vary the environment. It may be easy to skip in an isolated room with no distractions, but add in a crowded, loud gym and skipping may not be so easy anymore. It is crucial to practice the skill in the real environment where you need to use the skill. When you are able to complete a motor skill or carry out a motor plan in all environments you are more likely to retain that skill over time.
3. Space out practicing different but similar skills. Perhaps you are working on galloping and the child is just mastering it. Don't switch immediately to practicing skipping. Space out the practice sessions between these two skills to allow the first skill to be retained. Maybe a child is practicing proper spacing between each letter as he/she writes. Don't immediately move to teaching a child proper spacing between words. Since the spacing is a little different the child may have difficulty retaining the first skill of proper spacing between letters.

10 Ideas to Celebrate PT Month



National Physical Therapy Month is celebrated in October each year. I have posted in the past about simple ways to promote physical therapy (especially in the schools) but it has been awhile so here is a recap:

1. Think of an activity club that you could start at the school to promote quality of life... maybe an early morning or lunch time walking club? Another way to encourage long term quality of life is to improve posture. Perhaps plan a postural screening day with hand outs on proper posture available.
2. Host the Physical Therapy Olympics - invite school staff, parents and students to participate in the PT Olympics. Try relay races in wheelchairs, with walkers and therapy balls.
3. Create an PT Contest - For example - Who can take the most steps in a week (use pedometers)? The largest number of steps wins a PT t-shirt.
4. Create an PT Quiz - Distribute an PT quiz with many questions regarding what PT 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 PT to the school staff and parents.
6. Plan an PT Month Party! - Allow the kids to vote on a party theme such as gross motor, sensory or playground. Create games around that theme.
7. Volunteer for the Career Fair at the school. Educate prospective college students on what PT is.
8. Have an Adaptive Equipment and Assistive Technology Fair - demonstrate different types of equipment that PT's recommend for students to school staff and parents.
9. Hang up a large poster in the hallway about physical therapy. Or print a copy of the picture above in the blog post to hang on the PT room. You can download a copy of the picture at <http://www.YourTherapySource.com/ptmonth>.
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 PT month. Inform the school in a few sentences about physical therapy.

Check out our motivational section on our website for certificates, awards and signs for physical therapy.

www.yourtherapysource.com/motivationaldownloads

Motor Skills, Social Skills and Autism



Motor Skills, Social Skills and Autism

Adaptive Behavior and Motor Skills in Children with Autism

Research in Autism Spectrum Disorders published research on 233 children ages 14 to 49 months diagnosed with autism. The researchers examined the relationship of motor skills on the adaptive behavior composite, daily living, adaptive social and adaptive communicative skills while holding constant the age, non-verbal problem solving, and the severity of autism. The following results were recorded:

- Fine motor skills significantly predicted all adaptive behavior skills
- Gross motor skills were predictive of daily living skills
- Children with weaker motor skills displayed greater deficits in adaptive behavior skills

The researchers concluded that there is a need to implement early intervention and rehabilitation for young children with autism and motor skills.

Reference: MacDonald, M et al. The relationship of motor skills and adaptive behavior skills in young children with autism spectrum disorders. *Research in Autism Spectrum Disorders*. Volume 7, Issue 11, November 2013, Pages 1383–1390

Motor Skills, Social Skills and Autism

Adapted Physical Activity Quarterly recently published research on the link between motor skill deficits and autism. The participants in the study included 35, 6-15 year olds, with high functioning autism spectrum disorder (ASD). The researchers looked at object control skills i.e. catching and throwing and locomotor skills i.e. walking, running and jumping. Holding constant for age, IQ, ethnicity, gender, and clinical ASD diagnosis, the researchers tested the relationship of motor skills on social communicative skills. The following results were recorded:

- the students who had difficulties with object-control motor skills were more likely to have more severe social and communication skills than those who tested higher on the motor skills test.

The researchers concluded that the children with weaker motor skills had greater social communicative skill deficits.

Reference: Oregon State University. Children with delayed motor skills struggle more socially. Retrieved from the web on 9/23/13 at <http://oregonstate.edu/ua/ncs/archives/2013/jul/children-delayed-motor-skills-struggle-more-socially>

Hot Topics

Vocational Interventions for Young Adults with Autism

Pediatrics published a systemic review on vocational interventions for young adults (ages 13-30 years of age) with autism spectrum disorder (ASD). Only 5 studies were included and all were of poor quality. The main focus of the research articles utilized on-the-job supports as the vocational/employment intervention. The results of the short term studies indicated the following:

- supported employment was associated with improvements in quality of life (1 study), ASD symptoms (1 study), and cognitive functioning (1 study).
- three studies reported that interventions increased rates of employment for young adults with ASD.

The researchers concluded that there is very little evidence available for specific vocational treatment approaches as individuals transition to adulthood. You can read the full text article at *Pediatrics*.

Reference: Julie Lounds Taylor et al. A Systematic Review of Vocational Interventions for Young Adults With Autism Spectrum Disorders. *Pediatrics* 2012; 130:3 531-538; published ahead of print August 27, 2012, doi:10.1542/peds.2012-0682

Feedback and Reaction Time in Preschoolers with ADHD and ODD

The *Journal of Attention Disorders* published research on the reaction time in preschoolers with ADHD with and without oppositional defiant disorder (ODD). Preschoolers who had ADHD with and without ODD and neurotypical preschoolers participated in a computerized reaction time study consisting of two conditions - simple reaction time and reinforced simple reaction. The following results were recorded:

- overall reaction times were significantly less and shorter during the reinforced simple reaction time task
- during the simple reaction time task the reaction times of the ADHD + ODD group were significantly more variable than the neurotypical group although the reaction times for the ADHD + ODD during the reinforced simple reaction were statistically the same as the other groups

The researchers concluded that preschoolers who are oppositional/defiant and hyperactive are the most responsive to feedback/reward.

Reference: Chaya B. Gopin et al. ADHD Preschoolers With and Without ODD: Do They Act Differently Depending On Degree of Task Engagement/Reward? *Journal of Attention Disorders* October 2013 17: 608-619, first published on February 8, 2012 doi:10.1177/1087054711432140



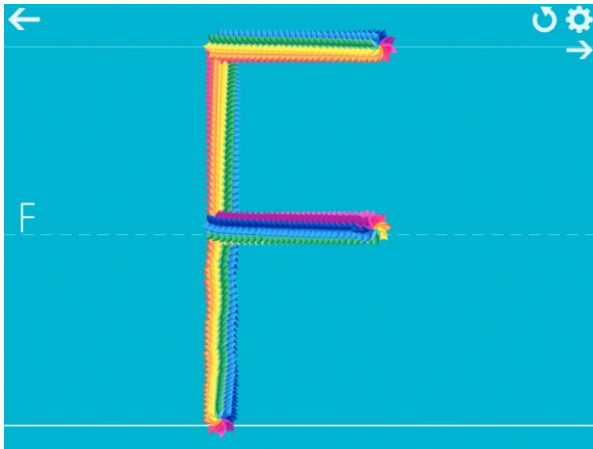
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More Hot Topics



Writing Wizard:

Check out the latest handwriting app review of the Writing Wizard at www.yourtherapysource.blogspot.com/2013/09/handwriting-app-review-writing-wizard

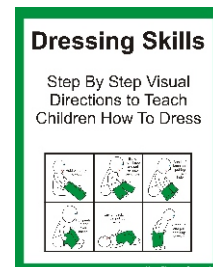
3 Smartboard or Computer Activities to Teach Children How to Get Dressed

Learning to get dressed independently can be a difficult skill. There are many ways to learn and practice this skill in real life situations obviously but sometimes a little novelty can add some motivation for a child. These are obviously not the only games available but I like these because there are no advertisements that run before you need to use the game. You do need Adobe Shockwave player to use the games so they will not work on the iPad. Here are 3 free games on the computer that help to teach appropriate choice of clothing based on the weather or the activity:

1. Caillou Dress Up Game: <http://pbskids.org/caillou/games/dresscaillou/index.html> Caillou will let you know what the weather is and the child needs to select the proper clothing based on the temperature outside.
2. Sid the Science Kid Weather Wheel: <http://pbskids.org/sid/weatherwheel.html> Click on the weather wheel to determine the conditions and then dress the character to match up with the weather.
3. Muffy's Wardrobe: <http://pbskids.org/arthur/games/wardrobe/wardrobe.html> Instead of the weather, you can choose an activity for Muffy to participate in and then you must choose the right outfit for that activity.

Need other visuals to teach children how to get dressed. Check out Dressing Skills: Step by Step Visual Directions to Teach Children How to Dress. Get more information at:

www.yourtherapysource.com/dressing



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Rhythmic Timing and Motor Planning



Here is a video of some examples to practice rhythmic timing to improve higher level motor skills, motor planning and smooth movements.

You can view the video at [YourTherapySource.com](http://www.yourtherapysource.com) -

<http://www.yourtherapysource.com/video/rhythmicfree.html>

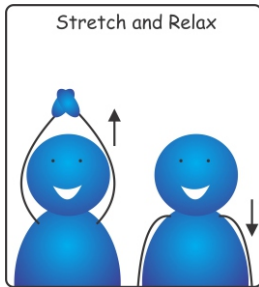
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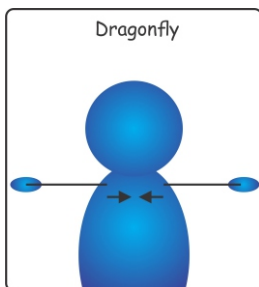
5 Postural Exercises Using a Classroom Chair



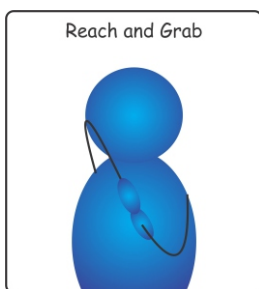
1. **Stretch and Relax:** Sit up tall in the chair with your feet on the floor. Raise both arms overhead, clasp hands and gently look up at your hands. Hold for 5 seconds. Slowly lower arms back to side, relax shoulders down and elongate neck holding for 5 seconds. Repeat 3 times.



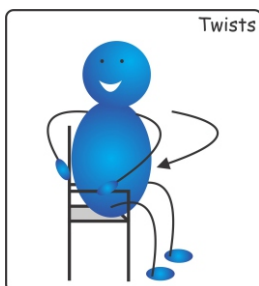
2. **Overhead Stretch:** Sit up tall in the chair with your feet on the floor. Raise your left arm overhead. Reach up with your right hand and grab your left wrist. Gently pull your left arm and bend your trunk slightly to your right. Hold for 10 seconds. Lower your hands and repeat with the right arm overhead, grabbing with the left hand, bending to the left and holding for 10 seconds.



3. **Dragonfly:** Sit up straight in the chair with your feet on the floor. Lift your arms up to shoulder height palms facing to the rear. Pinch your shoulder blades together pushing your arms backwards with elbows straight. Hold for 3 seconds. Return your arms to starting position at shoulders. Push back again holding for 3 seconds. Repeat 10 times.



4. **Reach and Grab:** Sit up tall in the chair with your feet flat on the floor. Reach left hand up and behind the back (palm facing your back). Reach the right arm down and around to the back (palm facing out). Try to clasp your fingers together and hold for 5 seconds. Relax arms and switch lifting right arm up and back and left arm down and back. Repeat 2 times. If you can not clasp the fingers together just reach the hands together.



5. **Twists:** Sit in the chair with your feet flat on the floor. Look over your right shoulder, reach your right hand behind the chair and your left hand to the right side of the chair. Hold this position for 10 seconds. Repeat to the left side and hold for 10 seconds.

Free Handwriting Hunt for Autumn



Go on an Autumn handwriting hunt. Cut out the cards and hide. The children have to find the cards, write the word down and unscramble the mystery word. Download a free Autumn Handwriting Hunt at Your Therapy Source.

www.yourtherapysource.com/hwhuntsfallfree

A black and white line drawing of a cartoon rabbit with long ears, holding a large, rounded letter 'B'. The letter 'B' is filled with various lowercase and uppercase letters of the alphabet, including 'a', 'b', 'c', 'd', 'e', 'f', 'g', 'h', 'i', 'j', 'k', 'l', 'm', 'n', 'o', 'p', 'q', 'r', 's', 't', 'u', 'v', 'w', 'x', 'y', 'z', 'A', 'B', 'C', 'D', 'E', 'F', 'G', 'H', 'I', 'J', 'K', 'L', 'M', 'N', 'O', 'P', 'Q', 'R', 'S', 'T', 'U', 'V', 'W', 'X', 'Y', 'Z'. The rabbit is looking at the letter with a slight smile.

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