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AEROBIC FITNESS IN MIDDLE SCHOOL AND CHANGES IN ACADEMIC ACHIEVEMENT

AEROBIC FITNESS IN MIDDLE SCHOOL AND



Pediatric Exercise Science published research examining the changes in 52 adolescents (6th – 8th grade) in aerobic fitness and academic achievement in reading and mathematics during middle school. Each student completed PACER tests measuring aerobic fitness and ISAT academic achievement tests in reading and mathematics.

The results indicated the following:

• changes in aerobic fitness between sixth and eighth grade were positively related to changes in academic achievement in both reading and mathematics between sixth and eighth grade.

The researchers concluded that changes in aerobic fitness may modulate changes in academic achievement.

Reference: Raine, L. B., Biggan, J. R., Baym, C. L., Saliba, B. J., Cohen, N. J., & Hillman, C. H. (2017). Adolescent Changes in Aerobic Fitness are Related to Changes in Academic Achievement. *Pediatric Exercise Science*, 1-21.



<u>25+ Bilateral Coordination Exercises</u> digital download is a collection of bilateral coordination exercise sheets including QR codes with links to video demonstration of exercises. These activities encourage: bilateral coordination, aerobic fitness, motor timing, motor planning, muscle strengthening and balance skills. FIND OUT MORE.

STRENGTH AND FITNESS IN HOMESCHOOL CHILDREN



Strength and Fitness in Homeschool Children

Pediatric Exercise Science published research on 75 homeschooled children ages 8-11 years old comparing them to public school children with regards to muscular strength and cardiorespiratory fitness. Each participant completed the curl-up, 90° push-up, and Progressive Aerobic Capacity Endurance Run (PACER) portions of the FitnessGram® to assess abdominal and upper body strength and endurance as well as cardiorespiratory fitness. Data analysis revealed the following:

- homeschool children showed significantly lower abdominal and upper body strength and endurance.
- there was no significant differences between the homeschool and public school children in cardiorespiratory fitness by total PACER laps or estimated VO2max.

The researchers concluded that homeschool children showed significantly lower levels of both abdominal and upper body muscular fitness compared to their age and gender matched public school peers but no difference in cardiorespiratory fitness.

Reference: Kabiri, L. S., Mitchell, K., Brewer, W., & Ortiz, A. (2017). Muscular and Cardiorespiratory Fitness in Homeschool versus Public School Children. *Pediatric Exercise Science*, 1-19.

If you need more core strengthening activities for children check out: <u>The</u> <u>Core Strengthening Handbook</u>: This download includes 50+ activities. <u>FIND OUT MORE.</u>



CIMT, BIMANUAL THERAPY AND OT HOME PROGRAMS



CIMT, Bimanual Therapy and OT Home Programs

The British Journal of Occupational Therapy published a research review to determine how bimanual therapy and modified constraint induced movement therapy or constraint induced movement therapy (CIMT) methods are used for occupational therapy home programs.

A literature search was completed and 5 studies met the inclusion criteria. The research review revealed the following:

- family collaboration, strategic use of outcome measures, construction of the program within the home environment and occupation-focused goals and activities were commonly used methods.
- enhanced descriptions of intervention context, getting the child's input for goal development and challenges in occupational balance were considered gaps in the programs.

The researchers concluded that using bimanual therapy and CIMT in an OT home program requires the combination of motor and non-motor approaches, core OT skills and respect of family preferences. They recommended that the child help in goal setting to improve participation.

Here are 5 suggestions when providing CIMT, bimanual therapy and OT home programs:

- 1. Encourage the child to participate in goal setting.
- 2. Suggest activities that match the child and family's goals.
- 3. Demonstrate ways to grade the activity so that it is the just right challenge.

4. Create the home program in the child's natural environment in the home i.e. use the child's own toys or materials from around the house.

5. Use a variety of outcome measures to determine progress.

Reference: Milton, Y., & Roe, S. (2016). Occupational therapy home programmes for children with unilateral cerebral palsy using bimanual and modified constraint induced movement therapies: A critical review. British Journal of Occupational Therapy, 0308022616664738.



Therapeutic PLAY Activities for Children

Available for immediate download at YourTherapySource.com

Do you work with young children with cerebral palsy, autism spectrum disorders, developmental disabilities or delays? Are you in search of new, creative ideas for your therapy sessions? Do you need home exercise program sheets to encourage carry over of therapeutic activities? Do you need simple ideas that use materials that you have around your house, therapy room or classroom already? Do you work with children who receive constraint or bimanual therapy? *Therapeutic Play Activities for Children* includes 100 play activity sheets with a photo of the activity, purpose of each activity and materials list. The 12 tip sheets include topics such as modifications, peer interaction, guided play, prompts and several specifically for children with cerebral palsy. The play activities encourage the development of fine motor skills, bimanual skills, rolling, crawling, tall kneeling, standing balance and cruising with a strong focus on children with cerebral palsy. Find out more information.

USING TOYS TO SUPPORT DEVELOPMENT IN INFANTS AND TODDLERS



Children develop physically, socially, emotionally and cognitively through play. And of course, children of all ages enjoy playing with toys. Providing the proper toy selection to support development in infants and toddlers can be a difficult and overwhelming task especially for new parents, therapists or teachers. Here are suggestions to make the right choices when it comes to using toys to support development in infants and toddlers:

The main goal is to select toys that are safe and suited to the child's age, abilities, and interests. Here are several questions to answer to determine if a toy is appropriate for a specific child:

1. Is the child interested in the toy? The child must be motivated to actually use the toy.

2. Can the child physically use the toy (adapted if necessary)? If the child can not independently or with minimal assistance use the toy the child may not be motivated to explore the toy.

- 3. Is the toy appropriate for the child's cognitive level?
- 4. Is the play space at home or school appropriate for the toy?

Select toys that encourage development within and across the domains of childhood development such as language, fine motor, gross motor, social, emotional and cognitive skills.

Creativity using basic, household materials can stimulate play and encourage infant and toddler development across all domains. In order to facilitate childhood development, toys selection should be intentional. For example, select simple play materials for infants and toddlers to

encourage cause and effect skills, tactile input, vocabulary development, motor skills and more. Try the following ideas to start:

• Construction type toys – i.e shoe boxes, cereal boxes, fabric blocks, plastic blocks, wooden blocks, etc.

• Open ended toys - i.e. large cardboard boxes to explore, scraps of fabric to pull and touch, fabric for peek a boo games, pots and pans, plastic "tupperware" type containers, etc.

• Books – Board books are wonderful for little hands to explore. Read to children starting at birth at least 20 minutes per day.

• Puzzles – For young children, a puzzle can be trying to fit an object into a muffin tin, a ball into a basket or stuffed animals into shoeboxes. For older children, you can increase the difficulty but decreasing the size of opening.

When parents, day care providers, teachers and therapists are informed about proper toy selection, play and developmental skills are stimulated across all domains.

Reference: Guyton, G. (2011). Using toys to support infant-toddler learning and development. YC Young Children, 66(5), 50.

If you need more information about infant and toddler development check out these great resources:

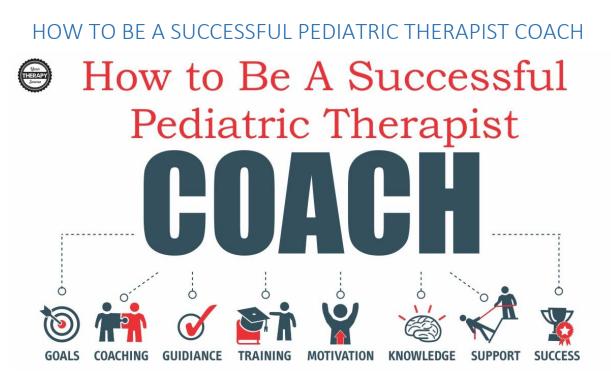


The Infant and Toddler Handbook, written by Lauren Drobnjak PT and Claire Heffron MS, OTR/L, is a 30-page downloadable ebook packed with reader-friendly information about the developmental motor milestones you can expect in kids ages 0 through 5.

The second half of the book is full of development-boosting fine motor, gross motor, and sensory activities divided by age range so you can find exactly what you're looking for depending on the ages of the kids in your therapy practice, classroom, or home. <u>Find out</u> <u>more.</u>

Developmental Milestones Handout Pack, written by Lauren Drobnjak PT and Claire Heffron MS, OTR/L, is the ideal resource for sharing information about baby, toddler, and preschool development with parents and caregivers. <u>Find out more</u>.





Are you confused by the question, how to be a successful pediatric therapist coach? Maybe you don't coach basketball, baseball, tennis, etc so you are baffled. Think of coaching as another word for educate. If you are a pediatric therapist, you are involved with families, teachers and school support staff. Whether you work in the home as an early intervention provider, in a clinic or in the schools, a major part of your job is to educate parents or teachers on how to help children. Instead of a onetime discussion or phone call with a parent or teacher to educate them on something regarding a child, coaching is an ongoing process. Most likely you are doing some form of coaching already you probably just didn't call it that, you just called it your job!

Here are additional details about coaching. The basics of coaching include:

1. modeling of the desired behavior or outcome – therapist shows the parents, teacher or staff how to teach a certain skill.

2. opportunities for practice by the learner – the parent, teacher or school staff practices the same skill you modeled while you are watching.

3. providing feedback – you offer suggestions, tips and more demonstration if necessary to help scaffold learning.

To put these three basics into practice is not as easy as it seems as you probably know already. Time constraints is probably the biggest hurdle. Schedules are overpacked and sessions run overtime so the day is frequently spent running or playing catch up. Here are a few suggestions to become the best pediatric therapist coach you can be.

To begin with **establish the learning goals that have been identified as a priority by the parents, teachers or children** based on your setting. To work on a goal that you think is super important as the therapist but the children, families and teachers see as no issue is a waste of time. The top goal is to ensure you are all on the same page about the goal. Try **providing the coaching and practice within relevant contexts**. This is the hardest part as a pediatric therapist due to our time and location constraints. This is easiest in an early intervention setting. Get creative here and try changing IEP requirements to minutes over a certain amount of days versus 30 minutes/3 times per week. Push into the classroom inviting school staff to model your behavior. Invite parents into the school so they can observe you directly. If these are still not an option, video yourself and the child (with permission) and provide a copy to the parent.

Provide handouts and directions to the parents and teachers.

Make sure there is **time for evaluative feedback and self-reflection.** After you model teaching the desired skill, take the time to observe and provide feedback. Ask questions to the parents, teachers and children such as: what helped the most? did the <u>handouts</u> help? what can we improve? what are suggestions for the future?

A huge benefit to coaching is providing parents and teachers the skills to support their child's learning throughout <u>daily routines</u>, which can lead to an increase in the caregiver's involvement and follow through.

Reference: Branson, D. PhD. A Case for Family Coaching in Early Intervention. *Young Exceptional Children*. Vol 18, Issue 1, pp. 44 – 47. First published date: January-27-2015. doi 10.1177/1096250615569903

If you need <u>hand outs</u> and <u>resources</u> to provide to parents and teachers to provide a review of the skill set or additional information, check out <u>all of our resources here</u>. Some specific hand out titles include:



What? Why? How? Series 1-4 Collection

TRUNK CONTROL MEASUREMENT SCALE FOR CHILDREN

The Trunk Control Measurement Scale is a clinical tool to measure trunk control in children with cerebral palsy. *Developmental Medicine and Child Neurology* recently published research examining the reliability of the Trunk Control Measurement Scale (TCMS) with its subscores, in children with neuromotor disorders. In addition, the discriminative validity of the TCMS was assessed by comparing the TCMS scores with the Functional Independence Measure for children.



The participants in the reliability study included 90 children, ranging in age from 5 years to almost 19 years old and 50 participated for the discriminative validity study. The results indicated the following:

- reliability was excellent.
- change in the TCMS total score of six points (10%) can be considered a true change.
- TCMS subscores appeared to be clinically relevant because children with less than around 80% of the static balance score, less than 55% of the dynamic reaching score, or less than around 35% of the selective movement control score needed support for daily life activities.

The researchers concluded that the TCMS is a reliable and clinically relevant assessment for children aged 5 years and older with different neurological impairments.

Click here to view the full Trunk Control Measurement Scale.

Reference: Marsico, P., Mitteregger, E., Balzer, J., & Hedel, H. J. (2017). The Trunk Control Measurement Scale: reliability and discriminative validity in children and young people with neuromotor disorders. Developmental Medicine & Child Neurology, 59(7), 706-712.



If you need core strengthening activities for children check out: <u>The Core</u> <u>Strengthening Exercise Program</u>: This digital download includes exercises to help make core strengthening fun and entertaining for kids while promoting carryover in the classroom and at home! <u>FIND OUT MORE</u>.

BEHAVIORS OF CHILDREN ON PLAYGROUND EQUIPMENT



Behaviors of Children on Playground Equipment

The behaviors of children on playground equipment was examined using 32 hours of videotape collected from 140 children who were typically developing and 41 children with a variety of developmental disabilities including autism, ADHD, sensory and regulatory disorders ages 3 to 15 years. The research was published in a recent issue of the *Journal of Occupational Therapy, Schools, & Early Intervention*. The videotaping focused on six pieces of playground equipment and was analyzed using a behavioral coding system for sensory features, social interaction, self-regulation, motor skills, and play levels.

The results of the videotape analysis revealed the following:

- proprioception was enhanced through active use of the playground equipment.
- increased verbalizations and positive affect were observed across all pieces of equipment.
- symbolic play, novel use and motor planning were enhanced.
- regaining regulation and expressions of self-esteem were observed.

This research supports correlations between:

• proprioception and social interaction

- positive affect and social interaction
- motor planning and self-esteem
- play levels with positive affect and social interaction.

In addition, improvements in regaining regulation, self-esteem, and positive affect were demonstrated through the case study analyses.

The researchers concluded that playground behaviors could be described using behavioral coding that includes sensory aspects, social interaction, self-regulation, motor skills, and play levels.

Reference: Miller, L. J., Schoen, S. A., Camarata, S. M., McConkey, J., Kanics, I. M., Valdez, A., & Hampton, S. (2017). Play in natural environments: A pilot study quantifying the behavior of children on playground equipment. Journal of Occupational Therapy, Schools, & Early Intervention, 1-19.



If you need to organize what you see when working with a child on the playground to make your sessions together efficient, effective and FUN check out the <u>Clinical</u> <u>Observations at the Park Tool.</u>

10 CLASSROOM JOBS THAT REQUIRE PHYSICAL ACTIVITY



All children benefit from movement throughout the school day. Whether it be <u>brain</u> <u>breaks</u>, <u>multisensory lessons</u> or recess, physical activity helps students get the brain ready for optimal learning. Another option to squeeze in physical activity time during the school day is to assign classroom jobs or chores that require physical activity and proprioceptive input (heavy work). Here is a list of 10 classroom jobs that require physical activity.

- 1. Classroom messenger student can walk throughout the school to deliver messages from the teacher to the office, other teachers, etc.
- 2. Board Eraser student is responsible to wash the whiteboards or chalkboards at the end of the day.
- 3. Sweeper sweep the dust up off of the classroom floor.

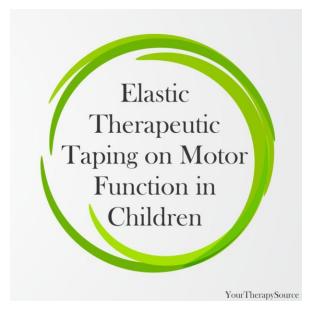
4. Picker Upper – Bend over, squat or crawl to pick up all the larger items that the broom can not get.

- 5. Recycle Duty check all recycle bins and bring to proper location to empty bins.
- 6. Paper Duty pass out and/or collect papers for the teacher.
- 7. Book Duty pass out and/or collect books for the teacher.
- 8. Chair Stacker stacks all the chairs at the end of the day.
- 9. Mail Duty picks up mail from the teacher's mailbox in the office.
- 10. Desk Washer wipes down the desks.



<u>Mini Movement Breaks</u>: This download is a collection of 60+ quick sensory motor activity cards. The mini movement breaks are quick and require no equipment. The movement breaks can be done indoors. Most of the movement breaks can be done with one child or a group of children. It does not get any easier than this to encourage sensory motor activities in the classroom or home. <u>FIND OUT MORE</u>.

ELASTIC THERAPEUTIC TAPING ON MOTOR FUNCTION IN CHILDREN



Disability and Rehabilitation published a research review on the effects of elastic therapeutic taping on motor function in children. Twelve clinical studies published in the last 10 years involving elastic therapeutic taping and children aged 0-12 years with motor impairments were included. The motor impairments included studies on cerebral palsy (7), congenital muscular torticollis (2) and brachial plexus palsy (2).

The researchers determined that positive results were associated with taping application with regards to:

- improvement in the <u>upper limb function</u>
- gross motor skills
- <u>postural control</u>
- muscular balance
- performance in the dynamics functional and daily activities

The elastic therapeutic taping has been shown to be a promising adjunct resource to the conventional rehabilitation in children with motor impairments although randomized control trials and well-established protocols are needed for elastic therapeutic taping for specific clinical conditions.

Reference: Cunha, A. B., Lima-Alvarez, C. D. D., Rocha, A. C. P., & Tudella, E. (2017). Effects of elastic therapeutic taping on motor function in children with motor impairments: a systematic review. Disability and Rehabilitation, 1-9.

5 MINDFULNESS ACTIVITIES FOR YOUNG CHILDREN

<section-header><image>

Mindfulness can be defined as paying attention in a particular way: on purpose, in the present moment, and nonjudgmentally. Research indicates that mindfulness techniques in school aged children can help to improve: sense of wellbeing, ability to focus, relaxation and self regulation. Although mindfulness practices have not been studied in younger children (i.e. preschoolers) extensively, young children do experience a fast paced, hurried, high pressure, high technology lifestyle and mindfulness techniques may help young children's well being in school and at home.

Here are 5 mindfulness activities for young children:

1. yoga poses for children

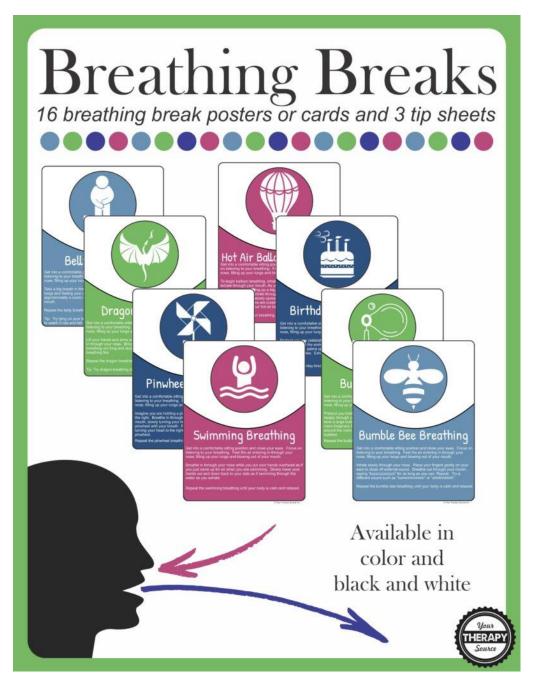
2. guided meditation and visualization – try this <u>Triathlon imagination action journey</u> that combines visualization with movement.

3. reflective breathing – try <u>bumble bee breathing</u>

4. specific games designed to support children's deeper awareness of their own <u>feelings</u> and thoughts.

5. specific games designed to support children's deeper awareness of their own behaviors and reactions. Read about <u>10 games that help to develop self regulation skills.</u>

Read more on <u>Mindfulness and Yoga for School Children</u>. Read more on <u>Sensory Processing Styles and Mindfulness</u>. Read more on <u>Self Regulation and Yoga in Preschoolers</u>. Read more about <u>self regulation skills</u> or check out the <u>Self Regulation Skills Curriculum –</u> <u>Work, Move, Breathe</u>. Reference: Erwin, E. J., Robinson, K. A., McGrath, G. S., & Harney, C. J. (2017). "It's Like Breathing In Blue Skies and Breathing Out Stormy Clouds" Mindfulness Practices in Early Childhood. Young Exceptional Children, 20(2), 69-85.



Breathing Breaks: This digital download is a collection of 16 deep breathing exercises and 3 tip sheets. Deep breathing exercises can help to decrease stress, reduce anxiety, remain calm, strengthen sustained attention, sharpen the ability to learn and more! This packet includes 16 full page breathing exercises and 3 tips sheets in color or black and white. In addition, the breathing exercises are provided 4 to a page to make smaller cards or booklets. <u>FIND OUT MORE INFORMATION</u>.

AUDITORY AND VISUAL ATTENTION IN CHILDREN WITH ADHD



The *Journal of Attention Disorders* published research examining auditory and visual attention in 50 children (ages 6-12) with ADHD compared to 50 typically developing peers.

There are many differences between processing auditory information versus visual information. For example, information in the auditory channel is temporally sequenced and shorter when compared to visual information, which is richer in spatial organization and longer. Another more obvious difference is that auditory processing transforms sound properties while visual processing transforms light reflecting properties. Auditory stimulation is picked up by both ears normally requiring sorting, prioritizing and selecting what auditory information will be further processed. The eyes can close if necessary and pick up stimulation only from the field of view whereas ears have to process information from all around the body.

Each participant completed two versions of the Test of Various Attention (TOVA) – one measures auditory information processing and the other measured visual information processing.

The results indicated the following:

- deficiency of visual attention is more serious than that of auditory attention in children with ADHD.
- only the deficit of attentional inconsistency is sufficient to explain most cases of ADHD
- most of the children with ADHD suffered from deficits of sustained attention, response inhibition, and attentional inconsistency on the visual modality.
- the deficit of attentional inconsistency is the most important indicator in diagnosing and intervening in ADHD when both auditory and visual modalities are considered.
- for children without ADHD attentional performance was lower in the auditory modality (higher percentage of error, higher reaction time, and higher variability) than in the visual modality.

The researchers concluded that the deficits of auditory attention are different from those of visual attention in children with ADHD.

Reference: Lin, H. Y., Hsieh, H. C., Lee, P., Hong, F. Y., Chang, W. D., & Liu, K. C. (2014). Auditory and visual attention performance in children with ADHD: The attentional deficiency of ADHD is modality specific. Journal of attention disorders, 1087054714542004.

Read about 10 Sensory Quick Fixes to Improve Attention Span.



Check out Ready, Set, Scan for a visual scanning and discrimination activity.

10 WAYS TO PLAY CATCH WITH A FRIEND

Playing catch with a friend is always fun but do you ever stop and think about all the skills that are required to play catch? Tossing a ball back and forth requires eye hand coordination, visual motor skills, visual tracking, focus, timing, bilateral coordination, visual spatial skills, balance, body awareness and motor planning. If just one of those skills is hard for a child, catching a ball can be a challenge. If all of



those skills are in working order, playing catch with a friend can also create opportunities to improve those skills further. Here are 10 ways to play catch with a friend starting out at least 10 feet apart (besides the obvious – stand a few feet apart and play catch):

1. Bounce and Catch: Partner 1 bounce passes the ball to partner 2.

2. Hoop Bounce and Catch: Put a hula hoop in the middle between the partners. Partner 1 bounces the ball inside the hoop to send it to partner 2.

3. Double Bounce and Catch: Partner 1 bounce passes the ball to partner 2. The ball must bounce twice before partner 2 catches it.

4. Wall Catch: Partner 1 hits the ball against the wall and partner 2 has to catch it.

5. Dribble, Dribble Throw: Partner 1 dribbles the ball two times then throws it to partner

2. Partner 2 dribbles to ball two times and throws it back to partner 1. Change the numbers of dribbles required and try again.

6. Double Toss (same size balls): Partner 1 has a ball and partner 2 has a ball. On the count of three, both partners throw the balls to each other and catch it.

7. Opposite Toss: Partner 1 rolls the ball to partner 2, while partner 2 throws a ball to partner 1. All at the same time!

8. Backward Ball: Partner 1 stands a few feet behind partner 2. Partner 2 is facing away from partner 1. Partner 1 tosses the ball over partner 2's head, the ball bounces one time and partner 2 catches it.

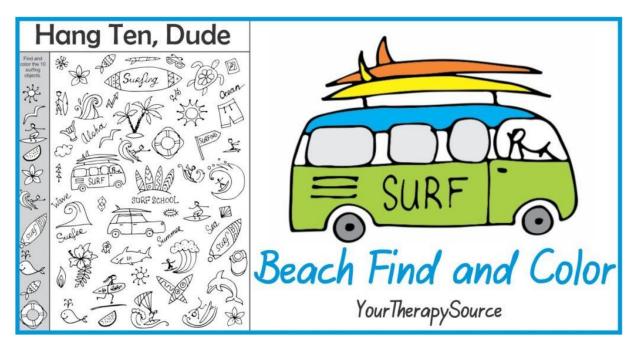
9. Double Backward Ball: Partner 1 and 2 stand back to back at least 10 feet apart. Play catch tossing the ball backwards. The ball can bounce one time before you catch it.

10. Double Toss (small and large ball): Partner 1 has a tennis ball. Partner 2 has a larger, playground type ball. On the count of three, both partners throw the balls to each and catch it.

When you play catch with a friend, try each challenge at least 10 times to learn and practice the skills. As you improve, see how many times you can do the challenge before dropping the ball.

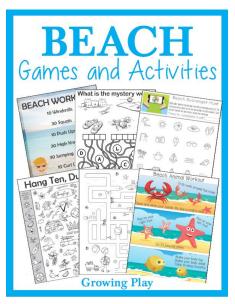
Do you need help teaching children to catch, throw and kick? <u>Teaching Catching, Throwing and Kicking Skills</u>: Help children learn how to catch, throw and kick with this packet full of information of age progression of skills, visual picture cards, tips, letter to parents and more! <u>FIND OUT MORE INFORMATION</u>.

BEACH FIND AND COLOR - HANG TEN DUDE



Beach Find and Color Hang Ten Dude is the latest freebie from a new Beach Sensory Motor Packet. Practice visual discrimination and visual motor skills searching for these fun, cute surfer pictures.

DOWNLOAD BEACH FIND AND COLOR.



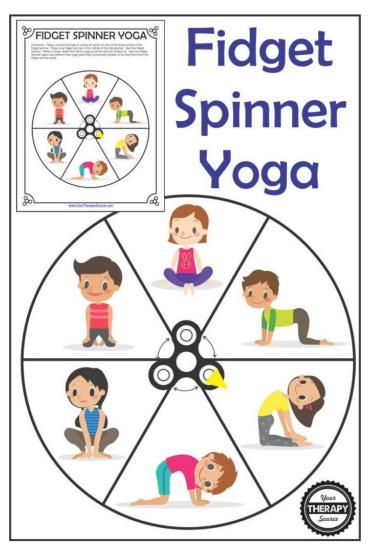
This freebie is from the <u>Beach Sensory Motor Packet</u> of 20+ games and activities to encourage fine motor, gross motor and visual perceptual skills. <u>Find out more</u>.

FIDGET SPINNER YOGA - FREE PRINTABLE

The <u>Fidget Spinner Workout</u> has been a huge success with hundreds of people downloading it to get kids moving while using their fidget spinners. I decided to create another printable to incorporate yoga poses into the fidget spinner workout. You can download your FREE Fidget Spinner Yoga at the end of the post.

After you sign up for the newsletter you can download your free Fidget Spinner Yoga (if you already subscribe it is still free for you – just enter your email and you will be redirected to the link).

Print the fidget spinner yoga page on cardstock and laminate for durability. Tape a colored triangle to create an arrow on one of the three circles of the fidget spinner. Place your fidget spinner in the middle of the big spinner. Spin the fidget spinner. When it stops, determine which yoga pose the spinner landed on. Spin the fidget spinner again and perform that yoga pose that it previously landed on for the entire time the fidget spinner spins. It's that simple! Spin and pose... spin and pose...



Have you seen all of our other yoga products for kids? Check out the following titles:

- 1. Yoga Cards and Game Ideas
- 2. Yoga Moves Visual Cue Cards
- 3. <u>Scooter and Me Bundle</u> includes 9 Videos & 16 Self-Regulation Flash Cards Mp4 download of three videos combining stories + creative movement + Yoga + Brain Gym®
- 4. Yoga for Every Season
- 5. All of our yoga titles are listed <u>HERE</u>

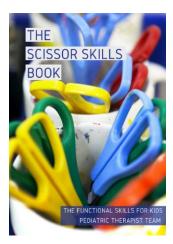
COLOR CUT GLUE SCISSOR SUMMER PRACTICE



Here is another fun freebie for summer time – Color, Cut, Glue Summer Scissor Practice. Everyone loved the Spring time scissor activity so why not create a Summer time scissor activity. <u>You can download your FREE copy at the bottom of the blog post.</u>

All you have to do it print the three pages or choose either sailboat, fish or flower pot to print. Color the black and white pages. Cut out the different shapes. Assemble and glue the shapes onto another piece of paper to create your Summer picture.

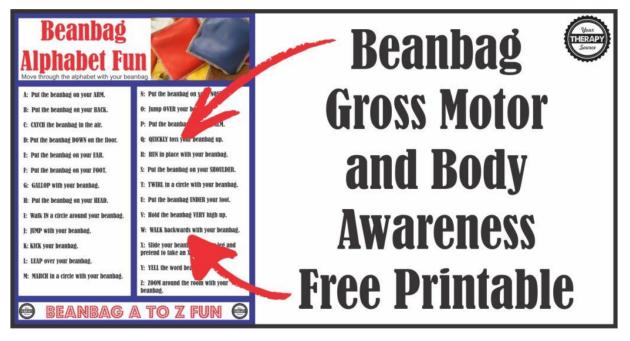
This is an excellent activity to practice scissor skills, coloring and visual spatial skills when you assemble the picture.



If you need more information on the development of scissor skills, check out <u>The Scissor Skills Book</u>. This digital download is a huge resource for anyone who works on scissor skills with children. Written by the Functional Skills for Kids (FSFK) team of 10 pediatric physical and occupational therapists with years of experience in the field, The Scissor Skills Book is the ultimate resource for tips, strategies, suggestions, and information to support scissor skill development in children.

Find out more information on the Scissor Skills Book.

BEANBAG ALPHABET FUN – GROSS MOTOR AND BODY AWARENESS ACTIVITY



Beanbag Alphabet Fun: Beanbags are a wonderful tool to encourage physical activity, body awareness, motor planning and coordination skills in children. They are inexpensive or you can even make them yourself with <u>socks and some rice</u>. So grab a beanbag for each child and try moving through the alphabet with your beanbag. You can download this as a one page handout below.

- A: Put the beanbag on your ARM.
- B: Put the beanbag on your BACK.
- C: CATCH the beanbag in the air.
- D: Put the beanbag DOWN on the floor.
- E: Put the beanbag on your EAR.
- F: Put the beanbag on your FOOT.
- G: GALLOP with your beanbag.
- H: Put the beanbag on your HEAD.
- I: Walk IN a circle around your beanbag.
- J: JUMP with your beanbag.
- K: KICK your beanbag.

- L: LEAP over your beanbag.
- M: MARCH in a circle with your beanbag.
- N: Put the beanbag on your NOSE.
- O: Jump OVER your beanbag.
- P: Put the beanbag on your PALM.
- Q: QUICKLY toss your beanbag up.
- R: RUN in place with your beanbag.
- S: Put the beanbag on your SHOULDER.
- T: TWIRL in a circle with your beanbag.
- U: Put the beanbag UNDER your foot.
- V: Hold the beanbag VERY high up.
- W: WALK backwards with your beanbag.
- X: Slide your beanbag up your leg and pretend to take an X-RAY.
- Y: YELL the word beanbag.
- Z: ZOOM around the room with your beanbag.

Looking for more beanbag activities?

Check out <u>50 Sensory Motor Activities for Kids!</u> This ebook includes a whole section on games to play with beanbags.

Need more alphabet movement and learning activities?

Check out <u>Sensory Motor Group Activities A to Z</u> and <u>The ABC's of Movement®- Combine</u> <u>Movement with Literacy.</u>

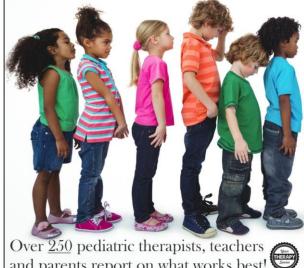
INTERVENTIONS TO HELP STUDENTS MAINTAIN PERSONAL SPACE

The personal space and body awareness survey results are complete. Two hundred sixty pediatric therapists, teachers and parents weighed in on the best modifications and interventions to help students maintain personal space. Each participant in the online survey answered the two questions: 1.) Job title or role? and 2.) When a child has difficulty with personal space, what modification/intervention do you find to be the most successful? (listed in alphabetical order) -

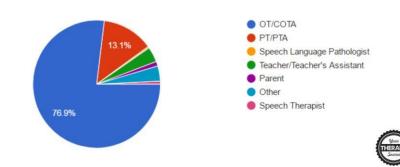
Alternative seating Body awareness exercises and activities Movement breaks throughout the day Physical cues ie holding hula hoop, adaptive seating, etc. Proprioceptive input and activities Recess Sensory diet Social stories Video modeling Visual cues ie picture symbols, circles, etc. Other

260 responses

Interventions to Help Students Maintain Personal Space



and parents report on what works best!



The 260 participants who completed the survey reported that when a child has difficulty with personal space, the following modifications/interventions are the most successful:

- 25% indicated body awareness exercises and activities.
- 20.4% indicated physical cues ie holding hula hoop, adaptive seating, etc.

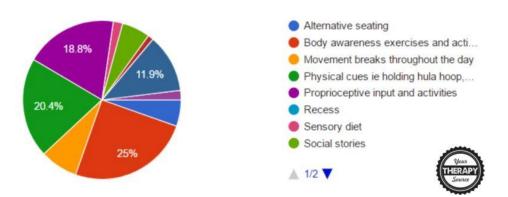
Are you an OT, COTA, PT, PTA, Speech Therapist, Teacher, Parent or Other?

- 18.8% indicated proprioceptive input and activities.
- 11.9% indicated visual cues ie picture symbols, circles, etc.
- 7.7% indicated movement breaks throughout the day.
- 5.8% indicated social stories.
- 5.4% indicated alternative seating.
- 1.9% indicated sensory diet.
- 1.9% indicated other.
- 1.2% indicated video modeling

Overall, the 260 pediatric therapists, teachers and parents reported that body awareness exercises and activities were the most successful interventions to help children who have difficulty with personal space.

When a child has difficulty with personal space, what modification/intervention do you find to be the most successful? (listed in alphabetical order)

260 responses



Please take a moment to answer our current survey. Thank you in advance.

Here are the comments that were posted:

Movement breaks that typically include proprioceptive input. If it is not a true sensory processing issue, social stories are most helpful and practice or reminders.

I think a combination of many of these works best.

I usually begin with a presentation to the entire classroom using a hula hoop to illustrate the concept of what "personal space" looks like in our culture. And then have each of the children step inside while a partner is outside the hoop to give them a concrete example of what it looks/feels like to give someone else their "space". I'll ask the student who may have difficulties be one of the first to step inside the hoop and then have him pick a peer to be on the outside, and continue with the whole group until everyone has had a chance to be on the inside and outside. I'll often leave the hula hoop in the classroom for the students to play with and experiment with

for a week before retrieving. It allows the teacher to use it to demonstrate further in the week as necessary.

Short term, visual cues such as arm's length or tape on the floor. Longer term body and environment awareness issues need to be addressed.

all of the above

This depends on the child; as more than one approach is often needed

We are new to this and just getting started. Our OT is Awesome and has helped so much. Thank you to all the warriors fighting for our kids.

If you are looking for personal space and body awareness activities check out <u>Personal</u> <u>Space Journey</u>.



<u>Personal Space Journey</u> is a digital collection of activities to teach children about personal space. You can choose how to utilize the materials. Some children may benefit from reading the story first with follow up. Others may need to work on body awareness activities in order to maintain personal space.

FIND OUT MORE.

<figure>

KEYBOARDING WORDS PER MINUTE GOAL TRACKER

Most students in grades 3 and up are working on keyboarding with a focus on words per minute. This keyboarding words per minute goal tracker is super easy to collect data on how a student is progressing. Even better, have the students monitor their own progress recording how they are improving each day.

This FREE words per minute goal tracker is available in Word format and PDF (at the end of the post to download). You can print it out and write in the words per minute during the week or enter the data directly into the Word document to create a graph.

If you want to enter the data directly into the Word document follow these steps:

Step 1 – Open the Word document

Step 2 – Click on the chart.

Step 3 – Click Design. (right side of top tabs)

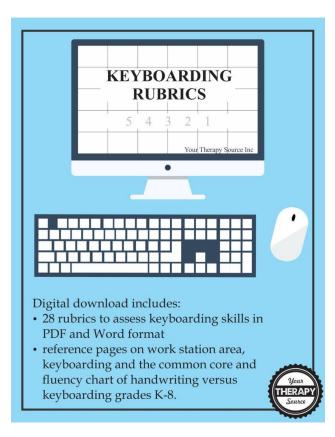
Step 4 – Click on Edit Data (upper right hand corner of document)

Step 5 – Enter your words per minute in column B for the correct days of the week and your chart will be created.

If you like to record data with pen and paper that is fine too! Just print the document in PDF format and bring it along. Or print two to a page so you are all set to go for two weeks at a time.

To get your FREE copy of the Keyboarding Words Per Minute Goal Tracker enter your email at the bottom of the blog post and sign up for our newsletter. The downloads will open up in new tabs once you enter your email.

If you need to collect data on additional keyboarding skills check out Keyboarding Rubrics.



This is an electronic book of 28 rubrics to assess keyboarding skills. A rubric is a scoring guide to judge performance on a specific task. Have you ever wanted to quantify general keyboarding skills, operating the mouse, word processing or keyboarding skills by grade level? Keyboarding Rubrics can be used 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.

The rubrics will be delivered electronically in PDF format and in Word format so that you can edit the document if necessary. This allows you to customize the rubric to your individual caseload if necessary. If you do not have Microsoft Word you can download Open Office (www.openoffice.org) for free which is compatible with all most Office suites.

Some suggested uses of Keyboarding Rubrics are:

- assessment at initial evaluation and annual reviews
- pre and post therapy session
- progress reports
- establish entrance or exit criteria for therapy
- creating measurable goals

FIND OUT MORE