

Young Person Case Study – Occupational Therapy

Young person: 'N'

Age: 13

Case Study Focus:

The facilitation of Occupational Therapy sessions with an Ayres Sensory Integration approach, aimed at working on N's arousal levels and her planning/organisational skills.

Background:

N is a 52-week residential student who attends Holly Trees, at Underley Garden School. N has difficulties with regulating her arousal levels throughout her day. This is exacerbated by her high anxiety levels. As a result, N can frequently present with verbally/physically challenging behaviours, as her apprehension and anxieties increase in response to situations she finds difficult. N will repetitively say 'I can't do this' or 'this is too difficult' to many novel tasks in her life. From an OT perspective, N's arousal levels have a significant impact on her ability to learn and engage in many activities of daily living.

Intervention:

Ayre's Sensory Integration was chosen as N presents with many behaviours that are due to her sensory integration difficulties. ASI includes ways of evaluating, understanding and making links between how a person integrates sensory information and uses this sensory information to participate in activities of daily life. ASI involves the therapist adjusting the sensory qualities of the environment, promoting self-direction and play whilst facilitating successful responses in motor, social, language, and cognitive areas (Schaaf & Smith Roley, 2006); to enable more positive participation in everyday life. ASI at Underley takes place in the newly opened Sensory Integration Space at Holly Trees. N's occupational therapist (OT) is currently training to become an ASI practitioner so is being supervised and mentored by Jen Heath to carry out the sessions with N.

Every Friday morning the OT carries out a 45-minute session with N in the Sensory Integration Space at Holly Trees. N has difficulties with planning and sequencing many activities in her day-to-day life, and as a result experiences significant anxiety when she feels unable to complete a task without full adult support. N expresses a great sense of

achievement when she is able to complete tasks with more independence, and has great motivation to learn and try new tasks, with the correct level of support. ASI is child-led and in keeping with this, one of N's OT goals was for her to create her own 'sensory plan' for the next session (using visuals); encouraging her to use and develop her planning skills in a supportive environment. Once N has selected the equipment she'd like to engage with in her next session, the OT will then use these activities to work on her goals. N kept her plan in her classroom, and was required to remember and use the plan effectively to support her engagement during her OT sessions. Throughout the weeks, N's skill at remembering her own plan (without my support to bring it) developed, along with a noticeable reduced level of anxiety when she was in the sessions. At the end of the session, once N is in a 'just right' state of arousal and can focus; OT will ask N to create her plan for next week, requiring her to make choices from familiar and novel activities. At the beginning of the session block, N gravitated towards activities she was familiar with; however, overtime this developed into N being able to make new or 'novel' choices for activities, which demonstrated a positive progress in N's ideation (ability to consider new ideas/activities). The intervention's success and N's OT goal achievement, can be seen through positive engagement in sessions and reports of her positive behaviour through the rest of her day on a Friday and her receiving both her class 'ticks' for positive behaviour, on 4 out of 5 days.

Example Session:

On a Friday morning, OT will meet N in her classroom, where she would be prompted to bring her sensory plan out of her tray. N looks forward to her sessions each week. N's sensory plan suggests what pieces of equipment/types of activity she will complete in her session and this provides her with structure. This visual structure helps N to not become anxious about what will happen during her session. OT will ask N to find the visual cards that are on this week's plan. N will need support to be able to look through the visuals to identify the correct visuals. She will often say 'I need that one!' when she sees a visual that she recognises. N will then go and put her visuals up on the visual board, in the correct order with minimal prompt. N will be prompted to find the piece of equipment she needs first and she can usually do this independently. Due to her difficulties with planning of motor skill, she will require assistance to formulate a plan as to what she can do with the piece of equipment (e.g. N picked 'therabands' and she required support to know what to do with them – stretching

the bands under her feet etc). Whilst exploring the pieces of equipment, OT will prompt N to suggest 'what gear are you in N?' and ask her to comment on whether she likes the piece of equipment or not. The Alert Programme simplifies complex neurobiological theory to help young people understand the importance of their own self-regulation in daily life. This is used throughout the sessions, to help N recognise her arousal levels after completing certain activities.

Throughout this particular session, the OT recognised that N was in a high gear (indicated by her flush face and heavy breathing) and adapted N's activity choices and the environment towards types of sensory activities that are known to calm N, for example getting her to climb into the purple swing (enclosed dark space) which was part of her plan. Getting N to climb into the swing provided her with proprioceptive input, known to offer her calming and organising input, in order to regulate her nervous system. Following OT sensory assessment, the OT is aware that weighted therapy and linear vestibular movement is calming for N, so the OT also offers N a weighted blanket whilst she is sat in the swing. The OT turns off the lights – also strategies identified following OT sensory assessment. Within 5-10 minutes N's breathing starts to return to normal and within 15 minutes, N begins positive conversation with the OT. N suggests 'I like this swing, it's nice'. The OT recognised that N's arousal levels had lowered, and asks 'what gear is N in now?'. N replies 'just right', therefore allowing N to listen with more effect and carry on with the rest of her OT session.

N's attention is drawn back to her plan. Next is 'target games' which N demonstrates great enthusiasm for. As N has picked this activity before she goes and gets the pieces of equipment required for completing the task (platform swing, target net and soft balls). N sits herself on to the swing and asks for the ball to be thrown to her to catch – N's coordination to complete this with success has greatly developed over her time at Underley. The OT pushes N back and forth, providing linear vestibular input, whilst she engages in a game of throwing the ball in the target. The OT changes the activity slightly (spinning N around instead on the swing and getting her to throw the ball in the target once she has stopped spinning) in order to encourage N to engage her planning/organisation skills to complete the task under different sensory environments. Once all the activities are completed the OT asks N, 'what do we do next in our session?'. N replies 'we need to make a plan', to which she now does with

minimal verbal support. N returns back to class in a positive frame of mind, and sits back down in her class to engage positively in her school work.

Conclusion:

The ASI sessions prove beneficial to N whilst in session, but also throughout the whole of her day. The sessions have allowed the OT to explore strategies that school and care staff can adopt and use with N at other times in the day. The OT has provided a weighted blanket, deep pressure techniques and advise around using a swing in linear movement to provide N with calming sensory input.

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