**Therakids Guidelines for Issuing Sensory/Adaptive Equipment**

***\*Note some items are labeled disposable meaning you don’t have to collect them at the end of the year, and others are reusable meaning collect them at the end of the year. Keep inventory of the equipment and note the condition before issuing and upon receipt.***

1. **Chewrly or chewy pencil toppers: Disposable** Issue these to students who may need added oral input throughout their day to remain focused and on task or to decrease chewing of other items and materials. Try to observe the student or talk to the teacher prior to issuing.
2. **Pencil Grips: Disposable.** Issue these to kids who have difficulty gripping their pencil affecting their handwriting. It is best practice to observe the student or see the student in a small setting. Have the student try a variety of grips before choosing to issue one. What might be the best grip for one may not be right for another.
3. **Slantboards: Reusable.** It would be best practice to have a request for Assistance to address the need for a slantboard.
4. **Wiggle seats: Reusable.** It is best practice to observe the student who needs a wiggle seat. A request for Assistance would be appropriate or at least a written explanation explaining the purpose for the wiggle seat. A note home to non-IEP kids as to why they are using a wiggle seat and its benefits is indicated.
5. **Fidgets: Disposable or Reusable.** For IEP kids it’s ok to issue these as needed. For non-IEP kids it is best practice to observe the student and follow up for proper use.
6. **Theraband for desk: Disposable.**  Theraband can be issued for almost any student. Demonstrate to the teacher and student proper use and benefit.
7. **Weighted lap pad or shoulder weight: Reusable.** This requires a request for Assistance with an observation. This does not necessarily need a signed note home to the parent since the child can remove this item.
8. **Weighted vests , compression vests, and weighted belt: Reusable.** This ABSOLUTELY requires a request for Assistance and a note home to the parents with many follow up visits with staff to ensure it’s correct use and the weight distribution.
9. **Weighted Blanket: Reusable.** This ABSOLUTELY needs a request for Assistance. Even though this can be removed by a student there are many cases where a child was left in a corner with it on and suffocated because it was on too long. This would also require a note home for the parent.

***\*Please remember that any note home requires the parent’s signature and date to ensure that they okayed the equipment and the purpose.***

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**Wiggle Seat**

Dear Parent,

 I am an occupational therapist in the school setting and recently received a Request for Assistance on your child\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. An observation was performed in his/her classroom setting. It was noticed that your child would benefit from a Wiggle Seat to help increase his/her attention in class during sitting/circle time activities. This item provides deep pressure to their body as if they were sitting on an exercise ball. The purpose is to give them the feedback they need while keeping them seated and focused. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you,

Therapist Signature Date

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**Pencil Grip**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from a pencil grip to assist with utilizing an efficient grasp during writing. An inefficient pencil grasp can affect a child as handwriting becomes more demanding in the upper grades. If a child has an inefficient pencil grasp then they may find it difficult to keep up with the demands of the classroom. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you,

Therapist Signature Date

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**Chewlry/Chewy Tube**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from chewlry or a chewy device. Some children seek oral motor input more than others and may appear to chew on non-food items such as pencils, crayons, clothing, and etc. If your child is ingesting non-food items consult your physician as this may be a medical matter. The item that was issued will allow your child to use it in class at their discretion. By allowing your child to chew on one specific item their oral motor need will be met more appropriately. You can also use gum, chewy candy, or buy your own chewy, if interested. This will help increase a child’s attention and focus in the classroom. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you,

Therapist Signature Date

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**Slantboard**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from a slantboard to assist with proper positioning during writing activities in the classroom. A slantboard can improve a child’s handwriting by placing the paper at a 45 degree angle placing their wrist at a comfortable angle while writing. Slantboards are used for children who may have difficulty with pencil pressure, copying from the board, proper positioning at desk, or other handwriting difficulties. You can use a 2 ½-3 inch ring binder as a homemade slantboard at home. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you,

Therapist Signature Date

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**Fidgets**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from some fidgets in class to help with focus. Fidgets are items that children can play with and manipulate in their hands while still paying attention without disrupting the class. This will help increase his/her attention to the material during sitting/circle time. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

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Thank you,

Therapist Signature Date

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**Theraband on Chair or Desk**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from theraband on the legs of their chair/desk to help increase his/her attention to the material in class during sitting/circle time activities. This allows for your child to place their feet on the theraband and bounce their legs up and down in order to give them movement during class while staying seated and focused. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

Thank you,

Therapist Signature Date

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**Weighted Lap Pad**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from a weighted lap pad to help increase his/her attention to the material in class during sitting/circle time activities. This item provides deep pressure to their body increasing focus. A weighted lap pad is about the size of a small pillow and filled with beans/rice to add weight. This can be removed by the student. Weighted items provide deep pressure to the body providing a calming technique. This helps increase a child’s attention and focus in the classroom. The teacher and classroom staff are trained and will be monitored on the use of this item. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

In order to use this equipment with your student I need your signature and date. Please return to school.

\_\_ I agree for the following item to be used.

\_\_I do not agree for the following item to be used.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Thank you,

Therapist Signature Date

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**Weighted Blanket**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from a Weighted Blanket to help increase his/her attention to the material in class during sitting/circle time activities. This item provides deep pressure to their body providing a calm technique, as well during times they may become overwhelmed or over stimulated by their environment. This helps increase a child’s attention and focus in the classroom. Weighted items are used for a short period of time and then removed so that the child does not become “used” to the extra weight. These weighted items are usually no more than 10-15% of a child’s weight. The classroom teacher and staff are trained on how to use a weighted blanket and will be monitored by the Occupational Therapist. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

In order to use this equipment with your student I need your signature and date. Please return to school.

\_\_ I agree for the following item to be used.

\_\_I do not agree for the following item to be used.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Thank you,

Therapist Signature Date

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**Weighted Vest**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from a weighted vest to help increase his/her attention to the material in class during sitting/circle time activities. This item provides deep pressure to their body as a calming technique, as well during times when they may become overwhelmed or over stimulated by their environment. This helps increase a child’s attention and focus in the classroom. Weighted items are used for a short period of time and then removed so that the child does not become “used” to the extra weight. These weighted items are usually no more than 10-15% of a child’s weight. The classroom teacher and staff are trained on how to use a weighted vest and will be monitored by the Occupational Therapist. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

In order to use this equipment with your student I need your signature and date. Please return to school.

\_\_ I agree for the following item to be used.

\_\_I do not agree for the following item to be used.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Signature Date

Thank you,

Therapist Signature Date

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**Compression Vest**

Dear Parent,

 I received a Request for Assistance for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_. I am an Occupational Therapist and I observed your child in his/her classroom setting. It was noticed that your child would benefit from a Compression Vest to help increase his/her attention to the material in class during sitting/circle time activities. This item provides deep pressure to their body (like a hug) and will calm them, as well, during times they may become overwhelmed or over stimulated by their environment. This helps increase a child’s attention and focus in the classroom. This is an item that will be wore for 20-30 minutes and then removed for 1 1/2 -2 hours before being worn again. The classroom teacher and staff are trained on how to use a compression vest, and will be monitored by the Occupational Therapist. If you have any questions, please contact me at the school via email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

In order to use this equipment with your student I need your signature and date. Please return to school.

\_\_ I agree for the following item to be used.

\_\_I do not agree for the following item to be used.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date

Thank you,

Therapist Signature Date