

***The Just Right State
Programme
Service Evaluation –
Executive Summary***



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To the children and families who participated in the programme

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Contents Page:

1.0

Executive Summary

1.1	Sensory Processing and Integration	3
1.2	Sensory Processing Difficulties	3
1.3	Autism and Sensory Processing Difficulties	3
1.4	Occupational Therapy for Children with Sensory Processing Difficulties	4
1.5	TaMHS in Devon	4
1.6	The Just Right State Programme	5
1.7	Evaluation of Just Right State Programme	6
1.8	Findings of Evaluation	6-8
1.9	Recommendations	9

‘Sensory integration is the basis for all behaviour and is the ‘glue that holds it all together’ (Kashman and Mora, 2005).

1.0

Executive Summary

1.1 Sensory Processing and Integration

Sensory integration is the organization of sensation for use (Ayres, 1972). It is a dynamic process, occurring in all of us, which enables us to use our bodies effectively in the world around us, including engaging with others. It is essential to the process of healthy development, and ‘when the functions of the brain are whole and balanced, body movements are highly adaptive, learning is easy and good behaviour is a natural outcome’ (Ayres, 1979).

1.2 Sensory Processing Difficulties

Difficulties with core central sensory processing (i.e. sensory modulation, and praxis) have a significant impact on the child’s ability to engage successfully in everyday activities. Difficulties and challenges in these core foundation skills lead to further challenges and difficulties in higher central nervous system processing such as attention, behaviour and interacting with others. Children who struggle to organize themselves due to sensory modulation and/or praxis and motor planning difficulties are unable to engage in school based learning, because of these difficulties.

These issues can have significant implications for the child’s home and school environment.

1.3 Autism and Sensory Processing Difficulties

Many children with autistic spectrum conditions have difficulties regulating responses to different sensations e.g. touch and sound, and may use self-stimulation, either to compensate for limited sensory input, or to avoid over stimulation. These atypical reactions to sensory input indicate poor integration of sensation in the central nervous system, and may explain some of the difficulties observed in attention and arousal (Tomchek and Dunn, 2007). There has been a significant focus on in the last few years on this aspect of sensory processing disorder in children with autism due to the emotional and behavioural presentation of the child, and the impact of this on their ability to engage in activities at home and school, however it is important to note that that more recently there has been more focus on the physical aspects of sensory

processing as these relate to children with autism, as these can also have a profound impact on them.

Children with autistic spectrum conditions often have significant motor planning difficulties, leading to them being unable to engage in increasingly complex activities. Children who are unable to do this have difficulty knowing where their bodies are in space, and how to use them. This impacts on their ability to engage in everyday activities such as dressing, moving around, interacting with others, engaging in increasingly complex play activities, and learning.

1.4 Occupational Therapy for Children with Sensory Processing Disorders in Devon

The assessment and treatment of children with sensory processing disorders in Devon has been an area of debate over the last few years, reflecting the efficacy of the intervention, the escalating number of referral numbers, and delay in accessing assessment, in part because of the high number of referrals being made to the Occupational Therapy Service, which is part of Integrated Children's Services in Devon. This is also reflected in the national picture.

Due to the issues outlined above, and their links with challenges in engagement in everyday activities, it was therefore appropriate to look at an intervention that uses these as a means of ameliorating these problems.

1.5 TaMHS in Devon

Targeted Mental Health in Schools (TaMHS) is a two-year pathfinder programme introduced to Devon in 2009, aimed at supporting the development of innovative models of therapeutic and holistic mental health support in schools for children and young people aged five to 13 at risk of, and/or experiencing, mental health problems; and their families.

The TAMHS programme offered the OT service an opportunity to explore new and innovative ways of looking at the needs of children with sensory processing difficulties, as there is evidence and research that indicates that children who present with emotional and behavioural difficulties may have an underlying sensory processing difficulty.

It was agreed by the TAMHS programme for the OT service to undertake a project trialling and evaluating the JRSP in May 2010. This was following a joint commissioning and provider event that took place in May 2010, where joint commissioners from NHS Devon and Devon County Council, professional leads, operational managers, and managers from interdependent work areas, i.e. Stepping Stones, were present. At the event the JRSP was presented and discussed, including whether we would test it out. There was full endorsement at the event to proceed to this stage, and to explore the JRSP in terms of quality for families, and cost-effectiveness for the service.

TaMHS, in conjunction with ICS commissioned a training programme to facilitate OT's and education acquiring the knowledge and skills needed to roll out the JRSP for an identified group of children with ASC.

By drawing on the school and education workforce it extends the reach and capacity of the JRSP, and other sensory interventions (similar to the Speech and Language Service, whereby the therapist supports the school based staff to deliver programmes to enhance children's speech and language skills).

These staff were working with children with ASC, who are some of our most challenging children to work with. The JRSP provides them with the tools to work with these children in the most effective way, which supports the children, parents, and staff. It also empowers school and education based staff with knowledge and skills which reduces stress when working with these children.

1.6 The Just Right State Programme

Following exploration of a number of programmes the Just Right State Programme (JRSP) was identified as a possible model of intervention to meet the needs outlined above.

The JRSP was developed by an occupational therapist, Eadaoin Bhreathnach, who also developed the theory and practice of sensory attachment intervention, recognising the importance of emotional and sensory processing in children who have experienced a range of challenges and difficulties throughout their life span.

The Just Right State programme looks at the use of sensory activities and foods, to help children learn how to self regulate their emotional states and behaviour. It also uses cartoon characters called 'The Scared Gang' that represent the different survival patterns of behaviour. Parents learn the principals behind the children's activities and about the patterns of survival.

Four groups ran across Devon, commencing in June 2011, and ran for 6 weeks.

There were 20 children in total, 2 groups of 6 and 2 groups of 4.

Each group had an Occupational Therapist and a professional trained in the JRSP facilitating it.

Proposed Outcomes of the Just Right State Programme Pilot in Devon

In conjunction with the TAMHS programme manager, the JRSP author, and the OT service leads the following outcomes were identified for the trial and evaluation of the JRSP.

1. That children with autistic spectrum conditions are more able self-regulate physiologically and emotionally, thus enabling them to increase their engagement in daily activities, including school, and interactions with others.
2. That parents of children with autism are more able to understand, recognise and identify their child's need for regulation, and how to use the strategies at home to meet these.
3. Increase in competence and skills in staff to be able to discriminate a child's sensory and emotional needs, and use strategies to meet these
4. To explore a model of service delivery that was viable and offered increased effectiveness and efficiency of resources.

1.7 Evaluation of the JRSP

We evaluated the impact of the programme against the above outcomes using a range of qualitative and quantitative measures, which included:

Pre-Group Measures:

Strengths and Difficulties Questionnaires for Parents (SDQ)

Strengths and Difficulties Questionnaires for Teachers

Autism Treatment Evaluation Checklist (ATEC)

Clinical observations of motor and posture skills

Post Group Measures:

All of the above and:

Parent Service Evaluation

Children's Feedback

Staff service evaluation.

Findings of Evaluation

Findings from the delivery of the JRSP pilot provide early indicators that this programme has a positive impact on children with sensory processing difficulties. There was a reduction in anti-social behaviour, an increase in their ability to engage in peer relationships, and a marked increase in their ability to self-regulate their behaviours.

The findings would also indicate that the programme had a positive impact on the children's ability to engage in more complex physical tasks e.g. playing football, and/or riding a bike. There was also a noted increase in some children's abilities to undertake bilateral functioning, which will have a positive impact on their ability to engage in physical tasks in the education setting, such as handwriting.

Children were asked if there was anything that they found easier since being in school and they told the group facilitators:

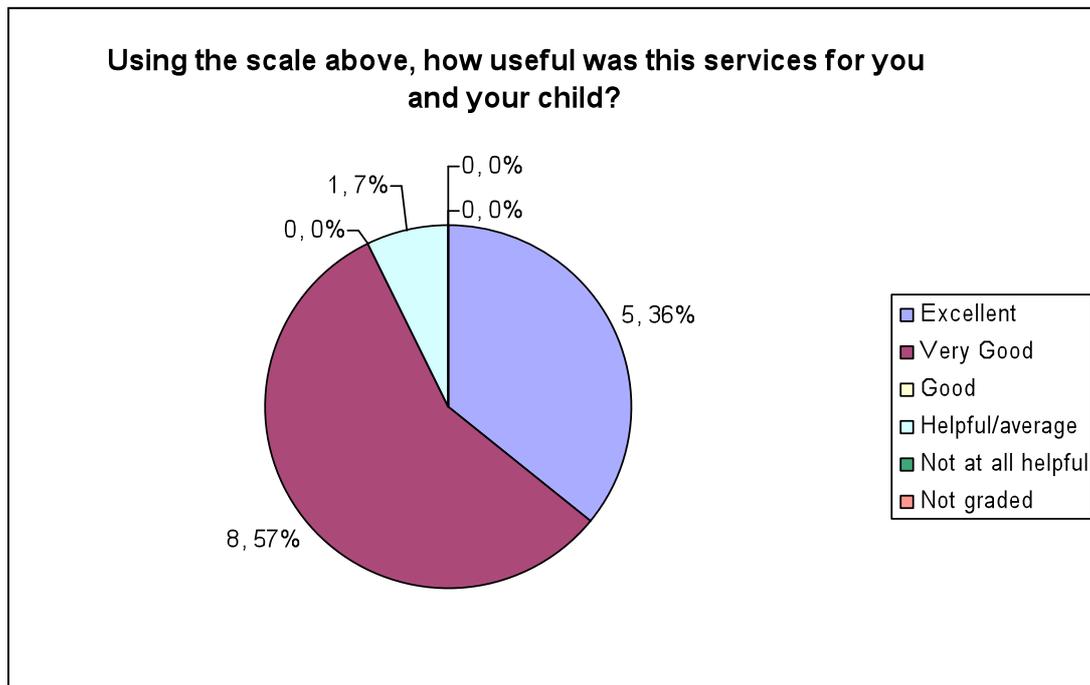
'Hugging the ball helped me concentrate', 'having crunchy foods throughout the day – helped with concentration', 'a bit calmer for lessons and for when I go home'.

The majority of parents indicated that the JRSP had a profound effect on their ability to engage and communicate with their child. The parents indicated greater self-awareness, which also had a positive impact on their ability to regulate their child in an appropriate manner.

Feedback from the parents involved in The Just Right State Programme states that they have been able to do this, and the positive influence that this has had on them, their child, and their family.

Comments from parents include:

‘One of the best programmes I have been on’, & ‘What you have done for us as a family goes above and beyond, and it has made all the difference’.



All staff who were involved in the delivery of the programme emphasized how much their engagement in it had significantly enhanced both their confidence and skills in working with children and families.

They also reported that they had used this approach, along with the strategies, with a number of other children and families that they had worked with, all with positive effect.

It is clear from all the evidence, anecdotal and standardized that there was significantly positive outcomes for children, parents, and staff was profound and far-reaching with parents stating that this has fundamentally changed the way they see their child. The only negative outcome identified was the impact on staff time, which is known to be a short-term negative impact.

The JRSP is unique in its ability to enable the parent and child to begin to make the links between sensory and emotional processing, and how the use of strategies focused on enriched environment provision, and regulating activities, can positively impact on the development of these skills and abilities. Supporting the development of these skills and abilities in children, alongside their parents, can have a profound and positive impact on the long-term outcomes for the whole family.

In order to achieve a continued roll out of the JRSP across Devon and the strategies offered within it to parents and staff will have a long term impact on the child's ability to engage in a meaningful way, both now and in their long term future, we need the following:

Recommendations

- JRSP is agreed as an integral part of the sensory processing interventions offered by the OT service.
- That Education staff engage in rolling this programme out a universal level. This would involve further training of staff.
- Devon to feedback to the programme author and request consideration of amendment to the current model to enhance it's impact over a wider age range and diagnoses.
- That the delivery of services for children with sensory processing difficulties is considered as an integral part of the development of services for children with neurodevelopmental difficulties, including ADHD.

References:

Ayres, A.J (1972). Sensory Integration and the Child. Los Angeles. Western Psychological Society.

Ayres, A. J. (1979). Sensory Integration and Learning Disorders. Los Angeles: Western Psychological Services.

Kashman, N. and Mora, J. (2005). The Sensory Connection. Future Horizons.