Overview of Sensory Intergration and Processing and Occupational Therapy's Role (Part 2)

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Disclosures

Today's speaker has no financial relationships with an ineligible company relevant to this presentation to disclose.

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Objectives

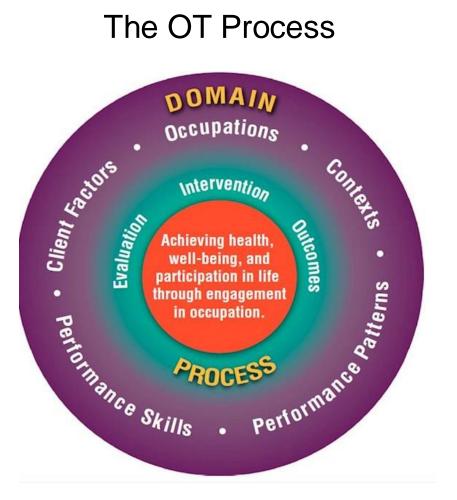
1) Understand the ways in which common OT sensory interventions are applied.

2) Identify the "four patterns" of sensory processing dysfunction and related OT interventions.

3) Recognize the difference between assessments and sensory screening tools.



OT's Role



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UNIVERSITY of WASHINGTON Washington State Health Care Authority 1) Evaluate how sensory differences affect performance and participation

2) Implement interventions and provide education

3) Record and analysis outcomes

OT's Role: Main Intervention Types

1) Sensory diet

2) Environmental modifications

3) Improve adaptive responses





Sensory Diet?

- Created by Patricia Wilbarger in 2002
- "Prescribed" activities to assist in regulation
 - $\circ~$ Based on sensory needs and preference
 - Systematic
- Daily routine modifications
- "the aim of producing a short-term effect on self-regulation, attention, or behavioral organization" (Watling, R., & Hauer, S. 2015)
- Always reflect and re-assess



Sensory Diet?

Xavier is 9 years old. He has a diagnosis of Autism. He wakes up and is immediately "off the walls"- seeking input. He might benefit from deep proprioceptive input right away and every 1-2 hours after that to keep him modulated throughout the day.

8am he jumps on his trampoline.

10am he crashes into the couch pillows.

12pm he blows up 4 balloons.

2pm he has a thick smoothie through a straw.

4pm he reads a book under a weighted blanket.

6pm he has some crunchy carrots with dinner.

8pm he listens to calming music while watching a lava lamp in a room with calming essential oil.

(McSwiggan, 2020)



Environmental Modification

- This refers to structure and demand
- Creating and advocating for "sensory friendly environment"
- Making room for sensory differences
- Examples:
 - Sensory corner or room
 - Allowing frequent breaks
 - $\circ~$ Manage lights, temperature, noise and smells in rooms
 - o Sensory Friendly in Seattle

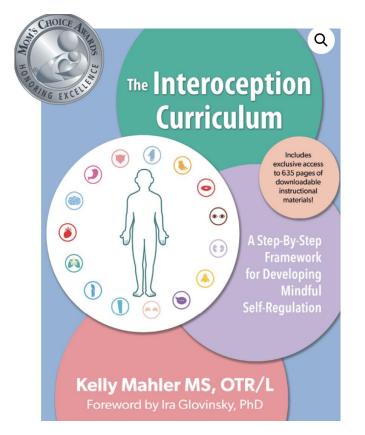
Improve Adaptive Responses

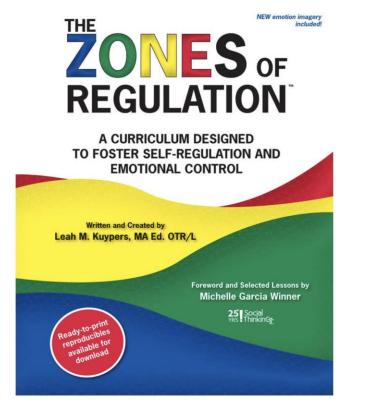
- Mind-Body connection
 - Understanding the connection between triggers and symptoms

- Increase interoceptive awareness
- Strategizing self-regulation



Improve Adaptive Responses





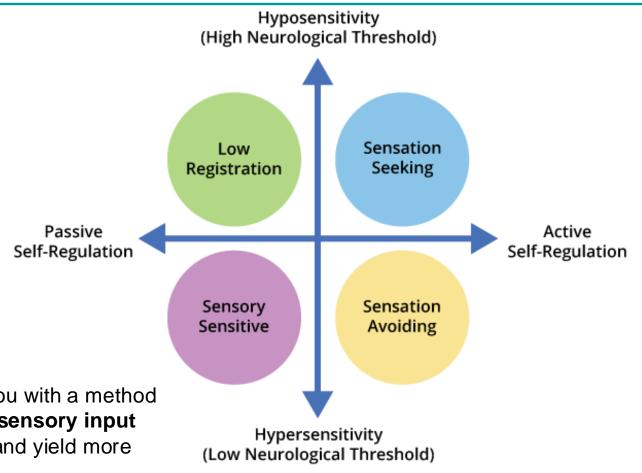




Dunn's Sensory Processing Framework

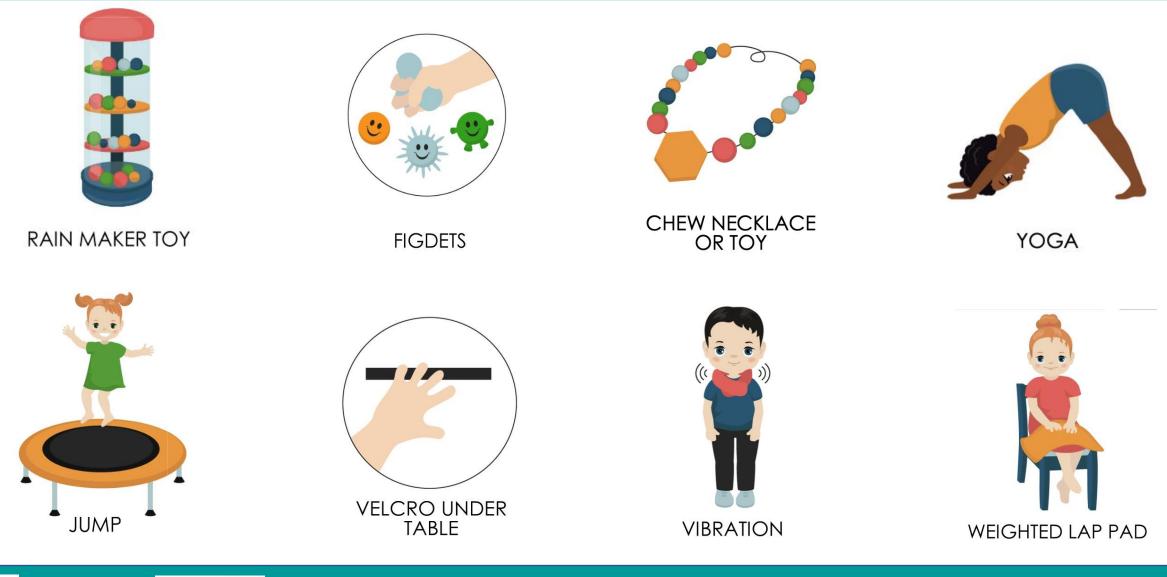
- "Sensory processing patterns are reflections of who we are: These patterns are not a pathology that needs fixing" (Dunn, 2001)
- Sensory processing patterns can be characterized in four quadrants:
 - 1) low registration
 - 2) sensory seeking
 - 3) sensory sensitivity
 - 4) sensory avoiding

"Knowing about your own sensory processing patterns provides you with a method for managing daily life; knowing about **your needs and limits on sensory input** enables you to increase or decrease input to support your needs and yield more successful outcomes" (Dunn, 2001)





Sensory Seeking/ Low Registration Strategies



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(ECHO)

Sensory Sensitivity/ Sensory Avoiding Strategies



Screening for Sensory

- DO NOT provide sensory-based interventions WITHOUT completing an assessment to fully understand difficulties processing or integrating sensory information.
- Screening is not an assessment and cannot produce a diagnosis

https://sensationalbrain.com/sensory-symptoms-checklist/

https://www.sensorysmarts.com/sensory-checklist.pdf



Available resources

Access recorded brief recorded presentations at this site: https://wainclude.org/echo/echo-idd-wraparound/presentations/



References

American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). American Journal of Occupational Therapy, 74(Suppl. 2), 7412410010. <u>https://doi</u>. org/10.5014/ajot.2020.74S2001

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Watling R, Hauer S. Effectiveness of Ayres Sensory Integration® and Sensory-Based Interventions for People With Autism Spectrum Disorder: A Systematic Review. Am J Occup Ther. 2015 Sep-Oct;69(5):6905180030p1-12. doi: 10.5014/ajot.2015.018051. PMID: 26356655.



Questions

THANK YOU!

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