"At School"

Proprioception (Body Awareness) and Vestibular (Balance)

Name:			School Setting:	
А	Activity	What do I feel?		What would help me?
Walkir	ng around school			
Writ	ting with a pencil			
Holdiı	ng a knife or fork			
Running are	ound at playtime			
Doing up z	zips or shoe laces			
	Doing P.E.			

Tactile

Name:	School Setting:	

Where am I?	What do I feel?	What would help me?
Dressing for P.E.		
Sitting close to others in assembly/ class		
Walking along the corridor		
Using paint or glue in class		
Carrying my book bag		
Touching or bumping into others at play		

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Name:	School Setting:	

Where am I?	What do I feel?		What would help me?
Lining up outside class			
Sitting in assembly/ classroom			
In the toilets			
Walking along the corridor			
Eating lunch in the hall			
Playtime			
Packing up to go home		_	

Hearing					
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Name:	School Setting:	

Where am I?	What do I feel?	What would help me?
Lining up outside class		
Sitting in assembly/ classroom		
In the toilets		
Walking along the corridor		
Eating lunch in the hall		
Playtime		
Packing up to go home		

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Name:	School Setting:	

Where am I?	What do I feel?			What would help me?
Eating snack at Playtime				
Eating lunch in the hall				

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Name:	School Setting:	

Where am I?	What do I feel? *			What would help me?
Lining up outside class				
Sitting in assembly/ classroom				
In the toilets				
Walking along the corridor				
Eating lunch in the hall				
Playtime				
Packing up to go home				

Step 1: Sensory Smart Environment	My Views: 'My Day'	Cabaa	I Catting.		
Name:		Schoo	l Setting:		
Activity		What do I feel? *		What would help me?	

Step 1: Sensory smart environments

My Views: 'At Home' Exemplar

Name: School Setting:

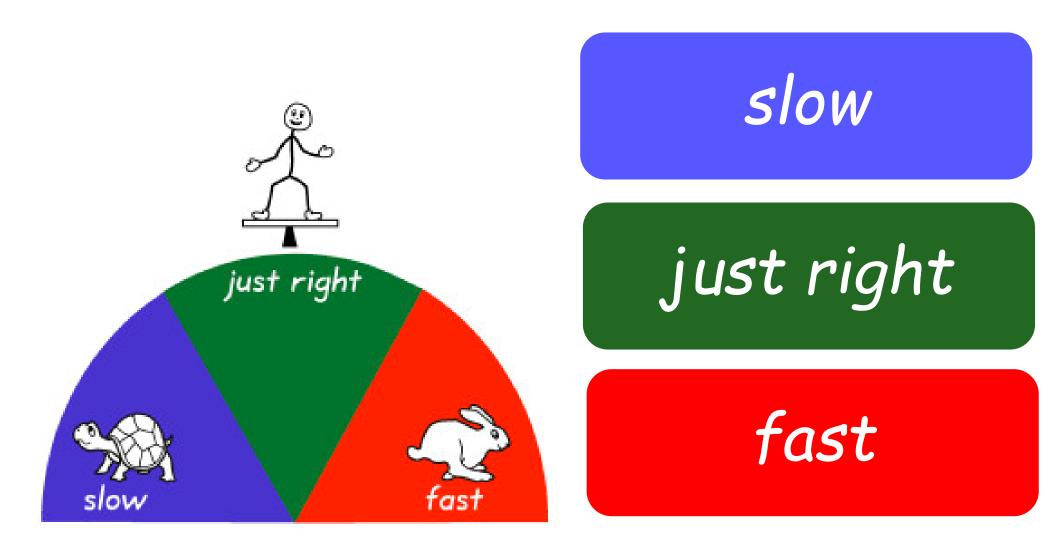
Activity	What do I feel? *			What would help me?
Wake Up				
Get dressed				
Brush teeth				
Have breakfast				
Play				
Watching television				
Have a snack				
Have lunch				
Before dinner				
Dinner time				
Bath time				
Story time				
Go to bed				

Step 1: Sensory Smart Environment: My Views: 'My Day' School Setting: Name: Activity What do I feel? * What would help me? Wake Up Get dressed Brush teeth Have breakfast Walk to school Walk from school Have a snack at home Doing homework Watching television Before dinner Dinner time Bath time Story time

Go to bed

My Views Documents: How do you feel?

Visual prompt (fan or colour cards taken from the *Alert program*) below to be used by Child/Young Person; to inform 'What do I feel?' This could be laminated and presented to Child/ Young Person alongside table/activities. Adult to then complete tables

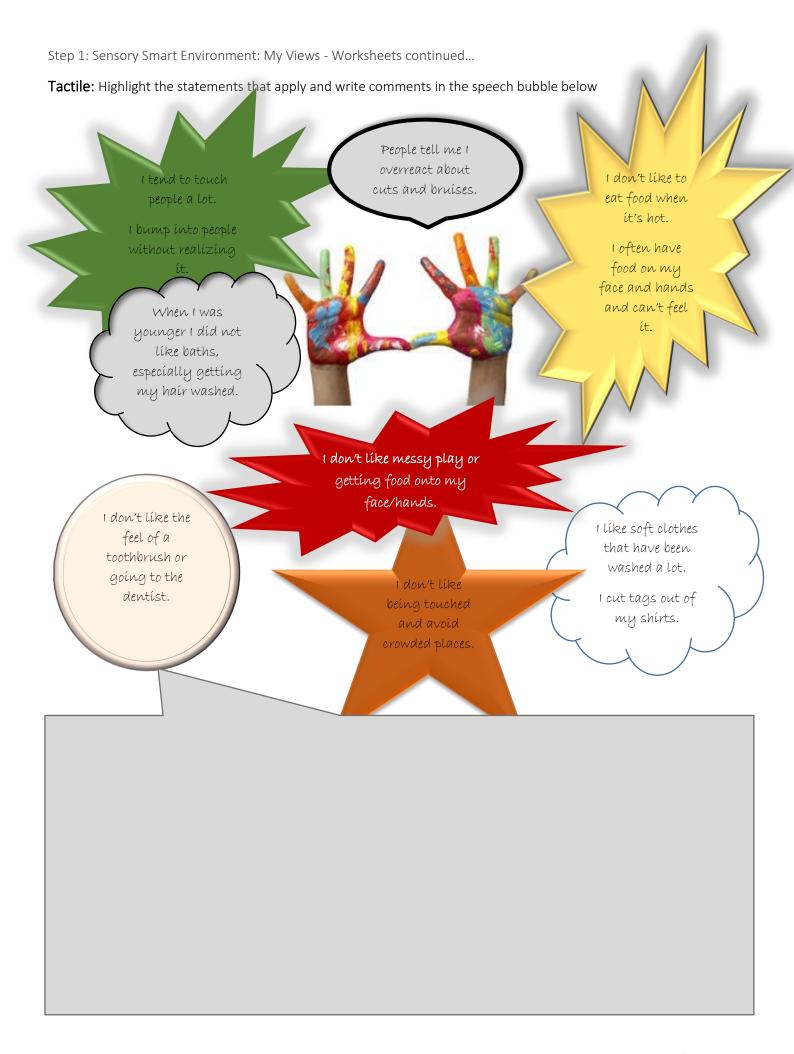


Step 1: Sensory Smart Environment:

Worksheets (Adapted from 'The Sensory Team Handbook – A hands-on tool to help young people make sense of their senses and take charge of their sensory processing' by Nancy Mucklow, 2009).

Proprioception: Highlight the statements that apply and write comments in the speech bubble below







Vision: Highlight the statements that apply and write comments in the speech bubble below







Step 1: Sensory Smart Environment: My Views - Worksheets continued...

Smell: Highlight the statements that apply and write comments in the speech bubble below

