

## Strategies

- Check the child-seat-desk proportions. The child's feet should rest comfortably on the floor and the child's elbows should rest comfortably on the table. A foot block or box under the child's feet is a good solution if the chair is too high.
- Place a beanbag or weighted lap cushion on the child's lap to add resistance and increase body awareness.
- The child does not always need to be seated for table top tasks. Try activities whilst lying on tummy, in high or half kneeling and standing at a table.
- Present pre-writing activities on a vertical surface using a chalk board, easel, white board or paper taped to the wall. This promotes shoulder, elbow and wrist strength as well as the correct grasp.

## Frequency of activities

Complete at least a 10 – 15 minute session 3 times a week. Always monitor the motivation and interest levels of the child and adjust accordingly.

Complete activities from this sheet regularly for at least 3 months

## Improving our service

We continue to review our service to make sure that it meets the needs of those who are using it. We would appreciate any suggestions on how we may improve and also comments on what was good about the service.

If you have any compliments, suggestions or complaints, please write to or contact any member of staff in the first instance, or to the Occupational Therapy Service Lead if necessary.

**Contact details: see part 1 of pack**



# READY TO MOVE POSTURAL CONTROL

Early Years Activity Sheet

PAEDIATRIC OCCUPATIONAL  
THERAPY SERVICES

## Information

### Postural control requires:

- Adequate muscle tone
- Postural stability (pelvis and shoulder)
- Equilibrium (balance) reactions
- Ability to assume and hold body positions against gravity

The joints of the body need to be stable before the hands and legs can be free to achieve specific skilled fine and gross motor tasks. To begin more complex table top tasks such as scissor skills, the child must be able to maintain a seated position with feet placed firmly on the floor or footrest to aid stability. The arms must be free to do the activity – not to hold up the trunk. The child must be comfortable and have no fear of tipping over. The child's attention will then be free to focus on the fine motor tasks (this includes speech production for children with speech disorders).

Children with poor postural control may present with:

- Clumsy or delayed gross motor skills
- Poor fine motor skills
- Difficulty maintaining an upright posture when seated on the floor or on a chair or when standing still.
- Poor attention and distractibility

## Activities

### High kneeling

Complete activities such as drawing and playing whilst maintaining high kneeling (at a low table or at an activity stuck to the wall). Move to half kneeling to increased the complexity of the task.

### Knee walking

Play games where the child has to knee walk to get a toy from one side of the room and bring it back to complete the activity. Make this harder by getting the child to knee walk over obstacles like soft play equipment.

### Play statue games

Get the child to maintain sitting, kneeling or standing whilst remaining very still (like sleeping lions). Then hold their hands and push whilst encouraging the child to remain in the same position.

### Animal walks

Encourage the child to walk like different animals e.g. duck, bear, crab, frog, bunny hops etc. See who can do it best or maintain the position for longest.

## Arms away games

Practice activities where the arms are:

- Above the head e.g. passing ball
- Away from the body e.g. carrying a tray

### Curl ups

Ball position – the child lies on his back and pulls legs, arms and head forward to curl up into a ball and hold for as long as possible.

### Pushing and pulling games

E.g. tug of war, row-row the boat.