

MULTI-AGENCY INTERNATIONAL TRAINING AND SUPPORT

CASE BOOK

For use with manual



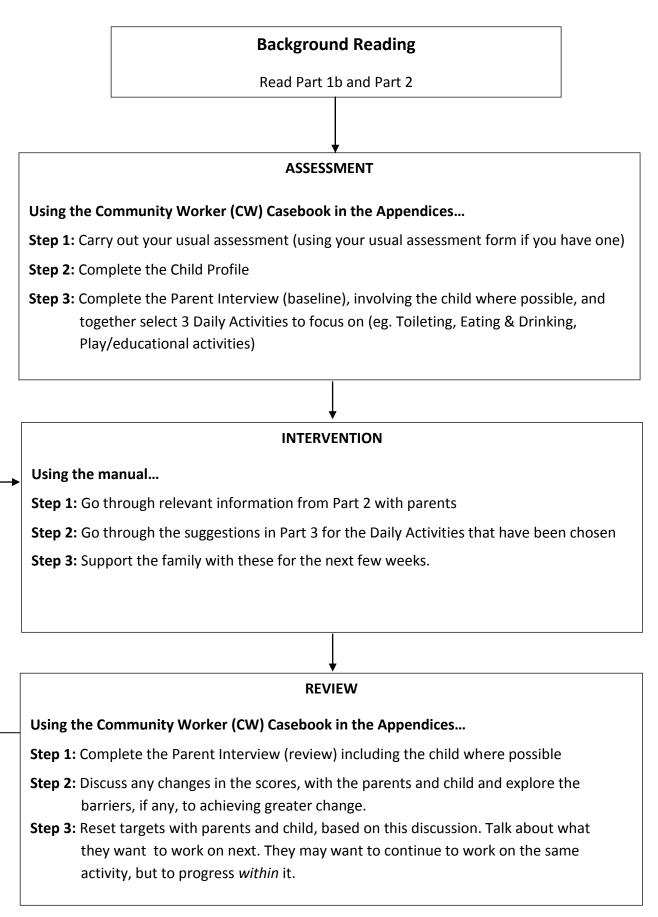
A Guide for Community Health Workers:

Promoting Development and Independence

in children with

Neurodevelopmental Disabilities through Support in Daily Activities

HOW TO USE THE MANUAL



CHILD PROFILE

Date.....

Community Worker name.....

Child name:	Date of birth:
Address:	
Any given diagnoses and known medical is	ssues:

Baby / toddler (0-2)

2+ years

; | |

Teenager

Areas of need			
	Yes: Level No	Y es No	
Motor (CP)		Hearing problems	
Intellectual disability		Visual impairment	
Social Communication		Communication difficulties	
Difficulties Or Autism		Behavioural issues	
	Yes No	Epilepsy	
Profound & Multiple Lear	ning Disabilities		

Comments:

Level Descriptors

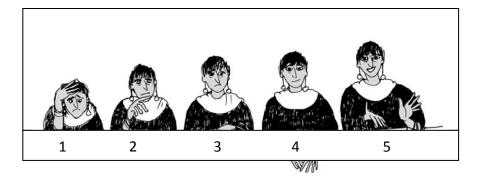
	Level III	Level II	Level I
Cerebral Palsy	This child needs full physical support for all activities. She is not able to sit, stand, or walk without adequate support and will probably need lifting. She has very limited use of her hands. If this child is able to talk, her speech is very difficult to understand even by people who know her well. She has difficulties eating and drinking (feeding herself, chewing and/or swallowing).	This child cannot walk on his own, but he can sit if he has support. (He may need help from an adult to get into and out of a sitting position). He can hold his toothbrush or spoon, but needs help to use them. His speech is difficult to understand by people who do not know him well. He may have some difficulties with chewing or swallowing.	This child can walk, but is unsteady on her feet and may need a walking aid. She is able to do things with her hands, but with some difficulty and may have problems with sitting balance when using both her hands. Her speech is fairly clear, but may be a little difficult to understand at times. She might have difficulties chewing or swallowing some foods (e.g. very crunchy, hard or chewy).
Intellectual	This child needs help with all activities. She	This child needs help to carry out	This child will learn to be independent with a
Disability	does not understand the task (why she needs to do it and how to go about it) nor	tasks, but with lots of repetition might learn to do them	little more help than is usually required. She is generally a slow learner, but with support will
	why something could be dangerous. Her	independently (e.g. dressing,	learn in time. She can talk, but usually in
	behaviour is like that of a much younger	washing, eating). He understands	simple sentences. She understands everyday
	child (e.g. mouthing objects, throwing	and uses some simple familiar	conversations. She will not achieve the same
	objects). Her behaviour can be repetitive	phrases. He does not always know	levels at school as her peers

	and be done to stimulate or calm herself	how to behave appropriately in	
	(e.g. rocking, chewing hand). She does not	different situations.	
	speak and does not understand others;		
	others have to interpret her communication		
	by understanding her behaviour. She may		
	have some difficulties with eating and		
	drinking.		
Social communication	This child does not use speech. He rarely	This child uses some words and	This child seems to be developing like other
Difficulties or Autism	approaches adults and may not show	some learnt phrases, but often	children, but prefers adult company or playing
	awareness of an adult nearby. He finds it	repeats what he hears again and	alone. He may have difficulties having a
	difficult to show his needs and does not	again (this may include songs,	conversation, but speaks normally in all other
	seem interested in others. He often shows a	television commercials, sounds,	ways. He likes his routines and can become
	high degree of interest in sensory	etc.). Rather than asking for things	upset when these are changed. He can be extra
	stimulation and shows repetitive behaviour	he may either try to fetch it himself,	sensitive to particular sensory experiences. As
	such as rocking, mouthing objects, flapping	or may place an adult's arm on the	the child grows up he has more and more
	hands, etc. He can seem like he is in a	object (eg. Packet of biscuits)	difficulties fitting in socially, making friends,
	world of his own. He may have behaviours	without looking at the adult. He	and understanding other people's point of
	that can hurt himself or others (e.g. head	can show particular interest or be	view.
	banging, biting self or others).	disturbed by certain sensory	
		experiences. He is obsessed with	
		the same routines and objects. He	
		may have rituals and interests in	
		unusual objects or parts of objects.	
		He likes to play alone and does not	
		share.	

Parent Interview – baseline

Ask parents:

How do you feel about your child's problems? (use the faces chart)



In your opinion, how well is your child managing in the following?

Activity of daily living	How well is your child managing? (1-5)				
1. Toileting	1 2 3 4 5				
2. Bathing	1 2 3 4 5				
3. Dressing	1 2 3 4 5				
4. Grooming	1 2 3 4 5				

©MAITS 2014 (V9)	Case number:					
5. Eating & drinking	1	L	2	3	4	5
6. Brushing teeth	1	L	2	3	4	5
7. Educational activities/Play	1	L	2	3	4	5
8. Resting & sleeping	1	L	2	3	4	5
9. Household jobs	1	L	2	3	4	5
10. Going to school	1	L	2	3	4	5
11. Going out: to the shops / the fields	1	L	2	3	4	5

INTERVENTION

Step 1: Introduce key principles to parents (Part 2 of manual)

Go through Part 2 of the manual, selecting relevant sections based on the Child Profile

- Importance of The Daily Routine (relevant to *all* children)
- Babies and Toddlers
- Important considerations and general principles for children with CP
- Important considerations and general principles for supporting children with Social Communication Difficulties and Autism
- Supporting children with profound and multiple learning disabilities
- Supporting teenagers (additional considerations)
- Top tips: Children with hearing impairment
- Top tips: Children with visual impairment
- Top tips: Communicating with children with disabilities
- Top tips: Understanding and managing behaviour
- Basic principles on the management of Epilepsy

Step 2: Follow the guidelines for 3 core activities (Part 3 of the manual)

Once everyone is familiar with the basic principles, use the advice in Section 3 of the manual to help guide parents on 3 activities of daily living. Select the section(s) of the manual that are relevant to the child's profile eg. CP level II, Intellectual disability level III etc.

You may like to start with: Toileting, Eating & drinking, Educational activities (play)

Visit summaries

Vicit	Date	What did you discuss	What materials did you use
Visit	Date	(include what 3 ADL you have chosen to work on)	(assessment forms, sections of manual etc)
1			Assessment forms:
			Sections of manual:
			Other:
2			Assessment forms:
			Sections of manual:
			Other:
3			Sections of manual:
			Other:

4		Sections of manual:
		Other:
5		Sections of manual:
		Other:
6		Sections of manual:
		Other:
7		Sections of manual:
		Other:
8		Sections of manual:
		Other:

Parent Interview – review

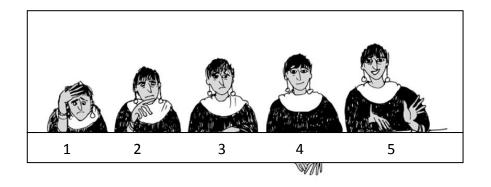
<u>Ask parents</u>: Have you noticed any changes in any of the following?

Activity of daily living	Any	What changes? Describe	How is your child managing now?				now?
	change: Yes/No						
1. Toileting	Y / N		1	2	3	4	5
2. Bathing	Y / N		1	2	3	4	5
3. Dressing	Y / N		1	2	3	4	5
4. Grooming	Y / N		1	2	3	4	5

5. Eating & drinking	Y / N	1	2	3	4	5
6. Brushing teeth	Y / N	1	2	3	4	5
7. Educational activities/Play	Y / N	1	2	3	4	5
8. Resting & sleeping	Y / N	1	2	3	4	5
9. Household jobs	Y / N	1	2	3	4	5
10. Going to school	Y / N	1	2	3	4	5
11. Going out: to the shops / the fields	Y / N	1	2	3	4	5

<u>Ask parents</u>: How do you feel about your child's problems?

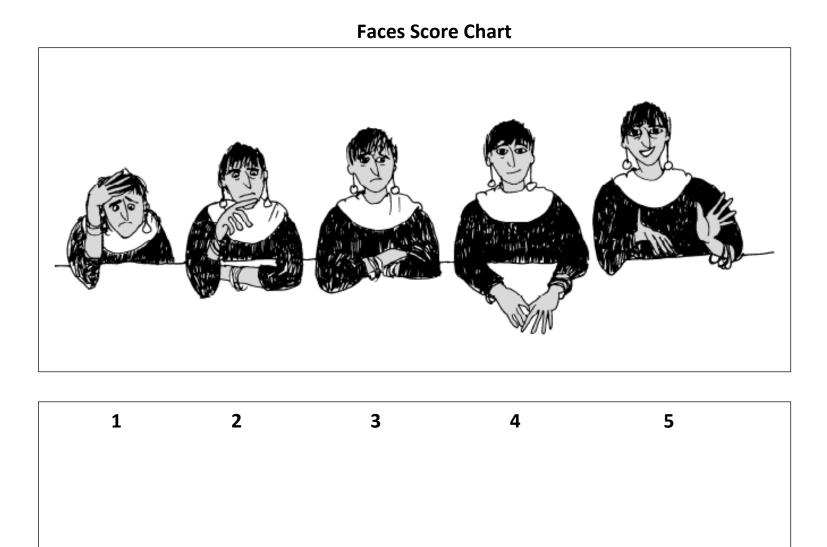
Comments:



Reset targets

Discuss any changes in the scores, with the parents and child and explore the barriers, if any, to achieving greater change.
 Note the discussion here:

Use this as a basis to talk about what they want to work on next. They may want to continue to work on the same activity, but to
progress within it.



Consent to use Photographs

I consent to the collection and use of my and/or my child's photographs

- □ For your report to your organisation
- □ In a published report for anyone to read
- □ For teaching purposes
- □ In leaflets and publications about the organisation, to encourage other people to support the charity
- □ On the organisation's website, to encourage other people to support the charity

Name.....

Signature.....

Date.....

