

# SenSi

Sensory Integration Therapy

# treatment





Sensory Integration Therapy

# Treatment Brochure

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# Assessments

This is supported by Adoption Support Fund, School Referrals School Assessments for EHCP, Private referrals.

At Sensi we can complete a wide range of assessment for children and adolescents, Exploring motor skills, Sensory processing Visual and auditory functioning, Receptive/expressive language & social communication & DCD / Dyspraxia diagnosis and assessment.

## Assessments we can complete are:

- Sensory Integration
- Cognitive Assessment
- Attachment assessment including MIM and CAPA
- Psychological assessment
- Psychotherapy assessment
- SLT Assessment
- Occupational Therapy
- Autism Diagnosis Assessment
- Nursing Assessment

# Sensory Integration

This is supported by Adoption Support Fund.

Sensory Integration (SI) is Evidence Based Practice and is a key treatment for ASD, ADHD and Developmental Trauma, amongst other conditions. Pre COVID 19, SI sessions would be delivered in a suitably equipped room with suspended equipment. Every activity provides vestibular, tactile and proprioception input. Sessions give opportunities for nurturing and challenge. Sessions focus on regulation, bilateral coordination, ocular motor control, postural control, sensory processing, motor development and sensory attachment. Sessions meet the Fidelity Measure of Ayres Sensory Integration (ASI). All therapy sessions work towards GAS goals, attached. During COVID 19 outbreak, senSI have loaned key pieces of equipment to families and are providing treatment sessions virtually, whilst ensuring that each activity provides tactile, vestibular and proprioception. These are further supported through the provision of weekly packs (described later) to educate families about the key senses and ideas to support key input.

Sensory processing difficulties (SPD) or sensory integration dysfunction (SID as it can be known) is used to describe a neurological impairment impacting on how we integrate and make sense of sensory information. Whilst SPD can exist in isolation, it is commonly seen in combination with other diagnoses. SI is neurological treatment that encompasses psychological and physiological approaches.

## Who will benefit from Sensory Integration therapy ? Those who have the following difficulties

- Autistic Spectrum Disorder
- Attention Deficit Disorder
- Children with Developmental Trauma
- Learning Disabilities
- Post traumatic event, illness or injury
- Dyspraxia and Developmental Coordination disorder
- Specific Learning Difficulties
- Regulatory and mood disorder - including those with mental health challenges



## Sensory integration therapy focuses on the development of:

- Sensory processing
- Self and co regulation
- Improved mental health
- SI is known to reduce Self Harming Behaviors
- Auditory processing
- Bilateral Coordination
- Ocular Control
- Motor Planning
- Social Communication
- Attention
- Daily Living skills and independence
- Social Skills
- Body Awareness – Proprioception
- Fine Motor Control



# Sensory Attachment Intervention

This is supported by Adoption Support Fund

Sensory Attachment Intervention (SAI) is an integrative approach to the treatment of children who have suffered abuse or severe neglect. Negative experiences in the womb and in early childhood impact on one's capacity to cope with stress throughout life.

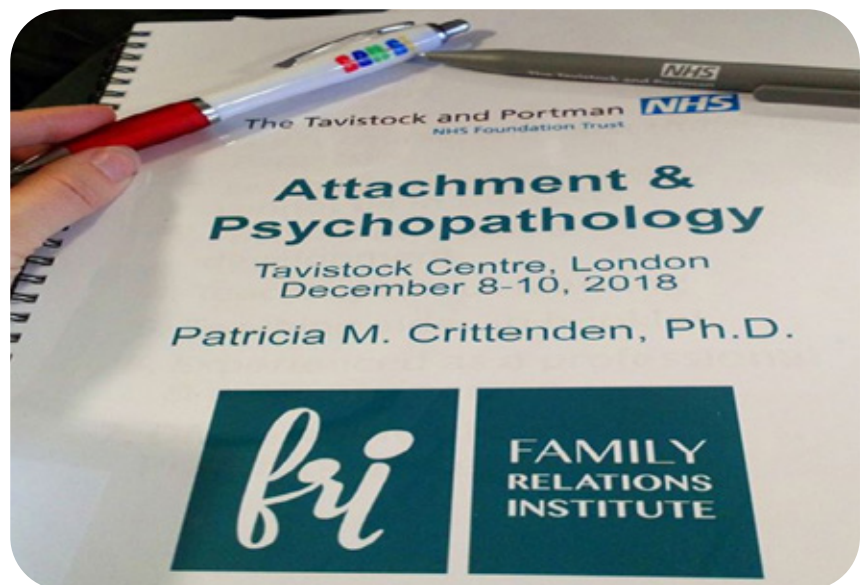
It is founded by Eadaoin Bhreathnach (image right) and based around the Psychopathology approach of Crittenden and Mary Ainsworth.

Children with a history of separation, abuse, loss, trauma and neglect can present with Sensory Processing Difficulties and poor emotional regulation. They become activated when exposed to sensations that are associated with the trauma history. They also have an internal working model as to how adults around them will react, based on their history and experience. Their sensory systems will be affected if pathways for survival have been over activated.

These children appear to either:

- Dissociate (under react)
- Collapse (loss of tone)
- Falsify regulation (compulsively comply), or
- Become aggressive and self-injurious
- Some over-rely on visual and auditory systems for distal warning
- Some are defensive to nurturing touch

Children develop behavioural strategies early on in order to survive their attachment environment. The goal is to either maintain the attention, and regulate the response, of their attachment figures or to elicit their attention and approval. While these self-protective strategies change in sophistication across the lifespan, the basic functions of attachment do not (Crittenden 2015)



SAI recognises the need to target the areas of the brain that are the source of the dysfunction. The first requirement is to establish regulation of arousal states i.e. to shift from the Autonomic Nervous System bias of either freeze dissociation or flight/fight responses (Schore 1994). It then focuses on facilitating modulation of the body senses through the just right combination of up regulating and down regulating experiences. This in turn enables higher level sensory, emotional and cognitive functioning.

## Referral Criteria

- Children must only be referred for an assessment if they will continue to have treatment.
- Child cannot receive SAI if they are undergoing other therapies
- Parent must engage in the process. If the sessions in any way re-traumatise the child or replicate the abuse, sessions will end.
- The parent must not discuss the child in front of them.
- Parent must be prepared to take the lead in the session, alongside their child, and not depend upon the therapist for structuring the session.

## Parent Child Engagement Sessions

Parents and children experience first-hand the regulating properties of food and sensory-motor play. The aim of these sessions is to enable children to remain regulated when engaged in activities that are normally challenging for them such as receiving nurturing care. Heart rate monitors are usually used. Sessions will either be within a Sensory Integration treatment room, or a swimming pool which focuses on Aquatic Sensory Integration. During the Coronavirus pandemic, equipment will be provided to enable parent-child engagement sessions within their own home environment, and the therapist will watch the session via Zoom/Skype. If this is too distracting for the child, the parent can film the session and send the footage to the therapist to analyse.



## Parent Debriefing Sessions

The purpose of the debriefing session is to facilitate attunement. Sessions are filmed, analysed and footage explored with the parents. Heart rate response may be discussed. This enables parents to consider their own state of arousal, their approach avoidance patterns, and their child's. It is not uncommon that parents' patterns are different to their child's and this needs to be accommodated. If parents are exposed to experiences which de-regulates them it impairs their capacity to regulate their child. Likewise if parents or therapists push the child into participating in activities that deregulates him or her it becomes counterproductive. Discussion therefore focuses on how best to achieve sensory and emotional regulation in sessions for both parties. The therapist also advises parents on how to facilitate regulated states within the home and school environments. At this current time, the debriefing session may take place virtually, via Skype/Zoom.

Usually, a parent-child treatment session is completed one week, and the debrief happens the subsequent week, and this pattern is repeated throughout the intervention.



# Sensory Integration Climbing

This is supported by Adoption Support Fund

Climbing is brilliant for the proprioceptive input (feedback to the muscles and joints) of climbing from hold to hold and also the vestibular input (gliding down on roped walls or jumping from bouldering walls). Climbing also provides other therapeutic benefits including active input for visual perception, cognitive skills and motor planning. There are three main types of climbing; bouldering, auto belay and roped climbing. Our therapists are trained in each type of climbing.

SenSI Climb offers children and teenagers a chance to interact with other children, with similar strengths and difficulties. Sessions can be individual or in small groups, with carefully planned group activities to develop social interaction, attunement, organisational skills and reliance on others.

The senSI staff supervise and support throughout the sessions, and are qualified and intuitive, and have a background in counselling, sensory processing and anxiety management. The children are gently encouraged to practice their social, emotional and functional skills by group activities, but also when asking for their climbing shoes and handling money to buy snacks and drinks. All of these skills including the physical climbing ensure the children leave feeling confident and happy.

Sensory Integration activities must comprise of Tactile, Vestibular and Proprioceptive inputs, in order to be 'true' ASI. Throughout the sessions, vestibular, proprioceptive and tactile input (the three essential sensory systems) are received through both climbing and sensory integration activities, assisting in the ability to self-regulate. Climbing also provides other therapeutic benefits including active input for visual perception, cognitive skills and motor planning. The therapeutic benefits of climbing have been explored using Ayres Sensory Integration Fidelity Measure (Parham et al, 2011).



# Psychotherapy - Art, Play & Integrative

This is supported by Adoption Support Fund Art Psychotherapy

## Art Psychotherapy

Art Therapy (or Art Psychotherapy) is a form of Psychotherapy where a person is able to explore difficult thoughts and feelings using art materials, whilst building a relationship with a professional trained to help them work through these issues. Through artmaking, people may be able to explore their thoughts and feelings in a different way, giving them a voice and developing their ability to reflect.

To benefit from Art Therapy your child does not have to be good at art, the aim is not to produce an artwork to display on a wall but to engage in a creative process. Some sessions may be entirely talking, some may be entirely artmaking, but most will be a mixture of both. It is entirely up to the person taking part in the sessions.

The aim is to work together with the Art Therapist, using art making to think about what is happening for them personally. Once engaged in therapy, a person may go through stages that they find difficult and this may result in upset or challenging behaviour. This is normal, and often a sign that things are getting better.

Throughout the creative process, information is gathered by the therapist surrounding the child's ability to relate and how they process being given a containing space where they are able to express themselves in the presence of a non-judgemental professional. Not only this, but focus is given to the process of creating the artwork and incremental changes in choice of materials, how they are used and how the child responds to such.

When children access art therapy, there are several elements at play. Metaphor can be utilised in order to express difficult feelings and thoughts in a much less confrontational way, perhaps discussing how a certain character feels about loss or grief as opposed to a direct approach to their own feelings. Simply using certain visceral materials, making a mess, or in fact tidying up the mess, can also lead to processing and interesting conversations. As psychodynamic practitioners, we believe that artmaking delivers a direct route to the unconscious, and whether this is incorporated into sandplay, clay, paints or other materials, a form of processing and development of self-awareness takes place when reflecting upon what is expressed within the sessions.

## Typical one to one sessions take the following format:

After the initial assessment period, the therapy begins at a child-led pace, working through issues as the child is comfortable to. At regular intervals, usually 6 weekly, a review session is held with the child to gauge whether they feel the sessions are helpful, but also to give an opportunity to look back at the progress they have made. Parents/carers are also invited to a review session without the child where we can discuss general progress and themes of the work. I will discuss with the child what

they would like shared with parents/carers from our sessions to ensure they are aware of the process and to maintain trust regarding confidentiality. Psychotherapy is generally quite a fluid process and is tailored specifically to each child. Having reviewed the work we can then decide whether it is helpful to continue sessions or work towards an ending - something that will need lots of preparation and reflecting upon in order to promote the experience of a 'good' ending.

If appropriate, Art Psychotherapy can also take the form of a group. These groups follow many of the same steps as above however focusing more on social interaction, relational dynamics and information gathered from the group as a whole.



# Integrative Child and Adolescent Psychotherapy

This is supported by [Adoption Support Fund](#)

Integrative child and adolescent psychotherapy can provide a flexible, creative and supportive way of working to help children and young people from complex and traumatic backgrounds. Therapy can include different mediums such as drawing, painting, clay, puppets, sand tray work, music, movement, role play and drama to help the child or young person to express feelings safely and explore their inner thoughts. As a child's main mode of communication is through behaviour and play, the use of creative mediums as a form of expression can be helpful for children and young people who may struggle to articulate their thoughts and feelings verbally. This way of working facilitates the possibility of expression of difficult and painful feelings whilst still maintaining a degree of psychological safety and distance.

Through supporting children and young people to safely express themselves using their imagination through these creative mediums the therapist can be alongside the individual and understand how their experiences and relationships have shaped their inner world. Integrative child and adolescent psychotherapists help to support the child or young person to make sense of these expressions and start to understand themselves

Integrative psychotherapeutic modalities include a depth of knowledge and understanding of the theoretical approaches of Psychodynamic, Psychoanalytic, Developmental Psychology, Person Centred, Gestalt, Transpersonal, Systemic and Cognitive therapies. Integrative child and adolescent psychotherapists are trained to carefully observe a child or young person and respond to what they might be communicating through their behaviour and play. They also apply their integrative framework of thinking to work with parents, families and carers and to training and supporting other professionals who work with children, young people, parents and families to ensure a deeper understanding of the child's or young person's perspective.



# Play Therapy

This is supported by Adoption Support Fund



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## What is Play Therapy?

Play is a child's natural form of expression; it is essential for development. Play Therapy is a form of psychotherapy which uses play and the creative arts as a means for children to explore their world. It provides opportunity for children to 'play out' their thoughts, feelings and experiences, and to make sense of their lives. A variety of mediums are available to children during their sessions including play, art, sand tray, clay, puppets, music, role play and therapeutic storytelling.

Play Therapy is child-led, it encourages children to express what they perhaps cannot verbalise within the safety of the therapeutic relationship. Play Therapy promotes psychological growth and change, helping children process and make sense of difficult life experiences.

"...toys are used like words for children, and play is their language" Garry L. Landreth

## Your Play Therapy Sessions

Initially, the Play Therapist will meet with the child's parent/carer to gather information alongside obtaining consent. Sessions take place at the same time/day each week and last around 40 minutes. An initial review is held around session 8 and then regularly thereafter. Goodman's Strength and Difficulties Questionnaires are used to give an idea of where the child is functioning and to gauge how many play therapy sessions might be needed. Children are offered a minimum of 12 sessions however, often more sessions are required depending on the needs of the child. Play Therapy is generally suitable for children aged 4-16 years old.

# Clinical Psychology

Including the following

- EMDR
- CBT
- CAT
- Mindfulness
- DBT Acceptance
- Commitment Therapy
- Cognitive assessments and Court Reports



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Clinical psychologists are experts in assessment and psychological therapy. We try to provide context for distress and psychological difficulty – people become distressed because of adverse life events and the meanings that they make of them. Our Clinical Psychologists take on the following therapeutic orientations:

1. First wave - behavioural,
2. Second wave - cognitive behavioural
3. Third wave - behavioural and cognitive psychotherapies.

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ACT takes the view that trying to change difficult thoughts and feelings as a means of coping can be counterproductive. Instead, ACT has six core processes: acceptance, mindfulness, cognitive defusion, “self as context”, defining values, and committed action. Essentially this involves being clear about what is really important in our lives; what our values are. Then we make sure that we behave in a “values congruent” manner, and managing any thoughts, feelings and behaviours that act as hurdles to do this.

## Dialectical behaviour therapy (DBT)

We offer DBT at senSI, based on cognitive behavioural therapy. The aim of DBT is designed to help:

- understand and accept difficult feelings
- learn skills and coping mechanisms to manage them
- become able to make positive changes.

'Dialectical' means trying to understand how two things that seem opposite could both be true. For example, accepting yourself and changing your behaviour might feel contradictory. But DBT teaches that it's possible for you to achieve both these goals together.

## Cognitive behavioural therapy (CBT)

This is undertaken by various members of the team, including our Clinical Psychologists and Psychotherapists. It is a type of talking treatment which focuses on how thoughts, beliefs and attitudes affect feelings and behaviour. It combines cognitive therapy (examining the things you think) and behaviour therapy (examining the things you do).

At senSI, in CBT sessions, we will help you identify and challenge any negative thinking patterns and behaviour which may be causing you difficulties. In turn this can change the way you feel about situations, and enable you to change your behaviour in future.

This can be provided for children and adults.

## Cognitive Analytic Therapy (CAT)

Our Psychotherapists at senSI offer CAT, which is a safe and clinically effective therapy intervention for people who wish to work through these underlying issues including history of abuse, trauma or neglect underlying their symptoms. A relationally focussed therapy like CAT can be helpful as it accesses and reflects on how the difficulties come up in normal life, and that includes the relationship between therapist and client: the goal here is to respectfully and progressively understand and name the difficulties together, as safely as possible.

In order to bring about change, CAT offers a way of:

- Thinking about yourself differently
- Finding out what your problems and difficulties are; their origin and how they impact on function, relationships and daily living.
- Thinking about the importance of relationships in your psychological life. This includes the relationship you have with yourself, and the relationship you have with the therapist
- You can do CAT individually, and sometimes in a group. A CAT therapy is time-limited, usually between 16-24 sessions

## Mindfulness

Mindfulness practice has been shown to help anxiety and depression in research studies. Mindfulness means knowing directly what is going on inside and outside ourselves, moment by moment. It is easy to lose touch with the way our bodies are feeling and to end up living 'in our heads' – caught up in our thoughts without stopping to notice how those thoughts are driving our emotions and behaviour. An important part of mindfulness is reconnecting with our bodies and the sensations they experience. This means waking up to the sights, sounds, smells and tastes of the present moment. That might be something as simple as the feel of a banister as we walk upstairs. Another important part of mindfulness is an awareness of our thoughts and feelings as they happen moment to moment. This allows ourselves to see the present moment clearly which can positively change the way we see ourselves and our lives.





## Compassionate Focused therapy

CFT starts from the philosophical position that humans have evolved with at least three primal types of emotion regulation system: the threat (protection) system, the drive (resource-seeking) system, and the soothing system. The central therapeutic technique of CFT is compassionate mind training, which teaches the skills and attributes of compassion. Compassionate mind training helps transform problematic patterns of cognition and emotion related to anxiety, anger,

shame and self-criticism. People can learn to manage each system more effectively and respond more appropriately to situations. Compassion focused therapy is especially appropriate for people who have high levels of shame and self-criticism and who have difficulty in feeling warmth toward, and being kind to, themselves or others. CFT can help such people learn to feel more safeness and warmth in their interactions with others and themselves.

Our Clinical Psychologists have expertise in working with adults and young people who have experienced trauma and Dr Newey is trained in the NICE guideline approved therapies for post trauma presentations, i.e. Trauma Focused Cognitive Behavioural Therapy or TF-CBT and Eye Movement Desensitisation Reprocessing (EMDR). TF-CBT is an evidence-based psychological therapy that aims at addressing the needs of people with post-traumatic stress disorder (PTSD) and other difficulties related to traumatic life events – it does include the accessing and processing of distressing memories. EMDR is a form of psychotherapy developed by Francine Shapiro in the 1990s in which the person being treated is asked to recall distressing images; the therapist then directs the patient in one type of bilateral sensory input, such as side-to-side eye movements or hand tapping.

Our Psychologists have considerable experience working with people on the autistic spectrum and with other neurodevelopmental differences.

# Life Story Work (BAAF Trained)

This is supported by Adoption Support Fund

Life story work is far greater than the creation of a photo album that identifies elements of an individual's life. Therapeutic life story work is the co-creation of an account of a unique individual's life providing an opportunity to work flexibly, creatively and with curiosity. Life Story Work helps children understand their history whilst creating a narrative for thinking about the future. It helps build resilience and increase self-worth and self-esteem.

A personal life history can feel extremely fragmented for children and young people that have been removed from the care of their family of origin and have gone on to suffer from placement breakdowns. To these children and young people their sense of self-worth, identity and belonging can feel enormously fragmented. The consequence of which can impact significantly on their psychological and emotional well-being.

The goal of therapeutic Life Story Work is to enable children and young people who have experienced pain, loss, trauma or neglect a space to safely reflect on their experiences, their feelings and how these may relate to their current feelings and behaviours. It is through this person-centred process that it becomes possible for the child or young person to find their voice and develop their personal agency to create a narrative of their past, present and hopes for the future. Thus, affording the potential to start to make sense of the past and present and develop compassion for themselves.

It is essential that prior to commencement careful and thoughtful preparation takes place. Historical information relating to the child or young person is essential including both pre and post birth history. This important work facilitates insight into the personal history and significant people within the child or young person's life. Careful consideration will then be given together with the team around the child or young person as to what is helpful for the child or young person to know.

Life Story Work is a therapeutic intervention which helps children to understand their past and make sense of who they are; we are all shaped by the stories we tell ourselves and others about our lives. Children in care or who have been adopted might not have key information about their past and where they came from, vital to their sense of self and identity. Life Story Work helps children to learn about and understand their past, providing a space to process thoughts and feelings in relation to their personal history. It is therefore essential the work starts when the timing is right for the child/young person.

## Life Story Work Sessions

Before working directly with the child, information is gathered about the child's life from Children's Services as well as current and past carers or families, depending on individual circumstances. The Life Story Work develops a timeline of life events, information about birth history, significant moves, significant people, and stories or anecdotes about the child.

Sessions take place on a regular basis (weekly in the early stages), and at the same time and place. Life Story Work is child-led; building rapport and creating a sense of safety is the focus of the first few sessions. Play and creative approaches are used to help children and young people express their

thoughts; the process integrates the child's feelings about their life as well as the facts.

Life Story Work takes the child through Present >> Past >> Present >> Future. The structure begins with the present as it is important for the child to understand and feel safe in the present before moving towards the past. Age appropriate information is shared dependent on the child's development, it is a unique and individual process. The child or young person's main caregiver will be a part of the therapeutic life story work together with the therapist. This is key in the reparative process of such sensitive work where a child or young person can safely share their experiences and feel accepted and valued. Through this process the caregiver develops a deeper understanding of the child or young person's inner world and their first attachment style. Through the therapist supporting the caregiver exploration can be made into how early messages were experienced for the child or young person through their early developmental phases and how these may have been internalised. This is vital in building attachments for the child or young person with their caregiver and for the potential of new internal working models to be created.

It is important that the caregiver and team around the child are fully committed to this process as this work being completed is paramount in the creation of a different outcome for the child or young person.

We may put a sensory spin on our life story work, such as using regulating properties of the pool, which can often symbolise womb space for the child.

One of the therapists offering this within senSI is a Therapeutic Social Worker and Play Therapist, trained with PTUK and BAAF.





# Theraplay

This is supported by Adoption Support Fund

Theraplay is a child and family therapy for building and enhancing attachment, self-esteem, trust in others, and joyful engagement. It is based on the natural patterns of playful, healthy interaction between parent and child and is personal, physical, and fun. Theraplay interactions focus on four essential qualities found in parent-child relationships: Structure, Engagement, Nurture, and Challenge. Theraplay sessions create an active, emotional connection between the child and parent or caregiver, resulting in a changed view of the self as worthy and lovable and of relationships as positive and rewarding. Therapists complete the MIM Assessment before commencing Theraplay.





# SenSI Therapeutic Parenting and Just Right State Parenting Programme

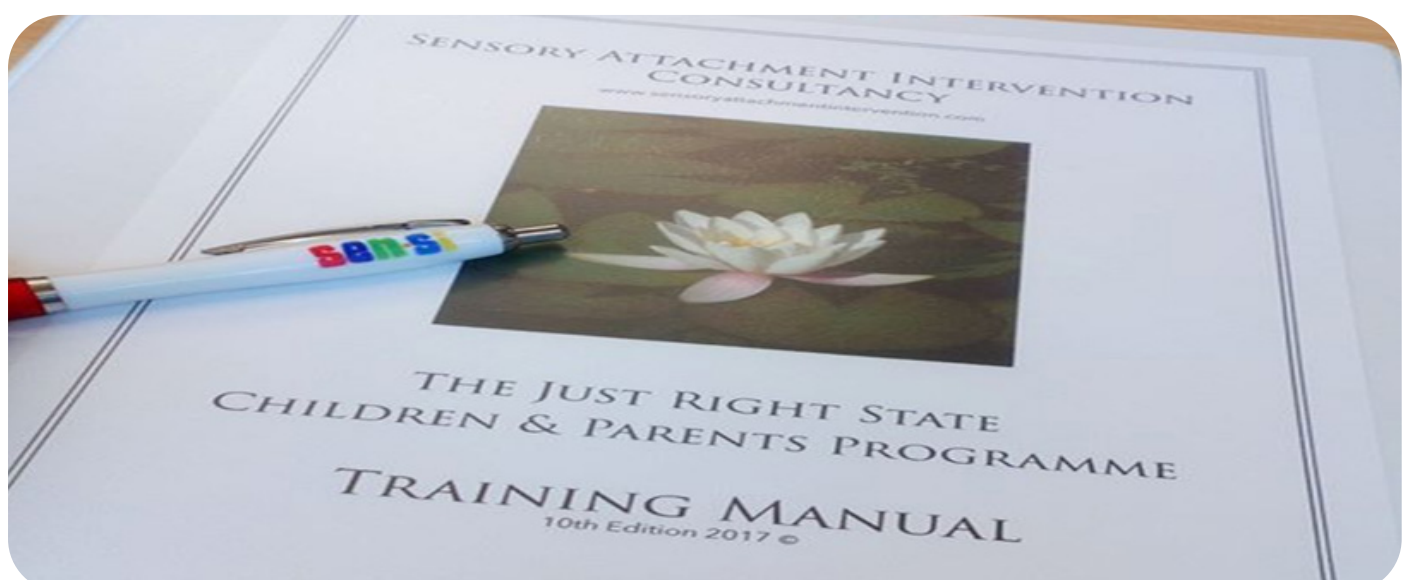
This is supported by Adoption Support Fund

Therapeutic Parenting encompasses an attitude in which an awareness of both yourself and your child guides your approach when reacting to behaviours. senSI Therapeutic Parenting embraces the work of Dan Hughes, Eadaoin Bhreathnach, Bessel Van Der Kolk and Patricia Crittenden. The approach is deeply rooted in Sensory Attachment, to ensure that parents are adequately regulated before commencing in this programme.

Children who have experienced trauma, and particularly those who also have attachment difficulties, commonly operate with a fear-based view of the world and find it hard to trust caregivers. While children that have not experienced trauma and have learnt to self-regulate may respond positively to 'common sense' parenting strategies, these strategies often elicit a degree of control over the child and do not work with traumatised children. Parenting children with trauma can be very difficult.

## senSI Therapeutic Parenting involves:

- Exploring the parent's experiences of regulation
- Use of Parental Response to Distress / Adapted Adult Attention Interview
- Explores how you responded to distress as a child, and how you respond to distress now as an adult. This is important so we can individualise your therapy and ensure your needs are also met.
- Practising self-care (parenting traumatised children can be traumatising – it is essential to make self-care a priority and to have a support network around you)
- Co-regulation (the ability to self-regulate while interacting with another, this may involve assisting your child's regulation through influencing but not controlling their action in a calm and regulated manner)
- Assisting regulation using the sensory systems (proprioceptive, vestibular and tactile)
- Creating a toolbox of strategies (Therapeutic Parenting differs for each family and so do strategies)
- Maintaining a connection with your child



As part of our Therapeutic Parenting work, we meet with parents/carers separately and explore their own responses to distress, and the strategies that they used themselves as a child, and now as an adult. We explore this at some length, to ensure that they themselves are not re-triggered by the child or situations, and build a toolbox of individualised strategies to help them maintain their own regulation.

Our aim is to strengthen the relationship they have with their child, in a very personalised and tailored way. It is essential that the parent understands and experiences their own regulated state, and so we welcome parents to participate in group sessions such as Parent Mindfulness sessions, Yoga, Relaxation and Massage, in addition to their 1:1 Therapeutic Parenting sessions with staff trained in the Dynamic Maturational Model, and work by Eadaoin Bhreathnach. Sessions may be filmed and microanalysed, with consent.

# Immersive Room

Our Immersive Room was created in response to COVID-19 and the challenges of adults and children to access environments conducive to positive mental health and wellbeing. The immersive room enables a secure environment in which therapists can deliver hands off therapy by virtually being present in the room and directing therapy from a separate location.

It also provides a space for adults, carers and parents to relax, and allow themselves some self compassion and 'time out'.

Compassion-focused therapy (CFT) aims to help promote mental and emotional healing by encouraging people in treatment to be compassionate toward themselves and other people. Compassion, both toward the self and toward others, is an emotional response believed by many to be an essential aspect of well-being

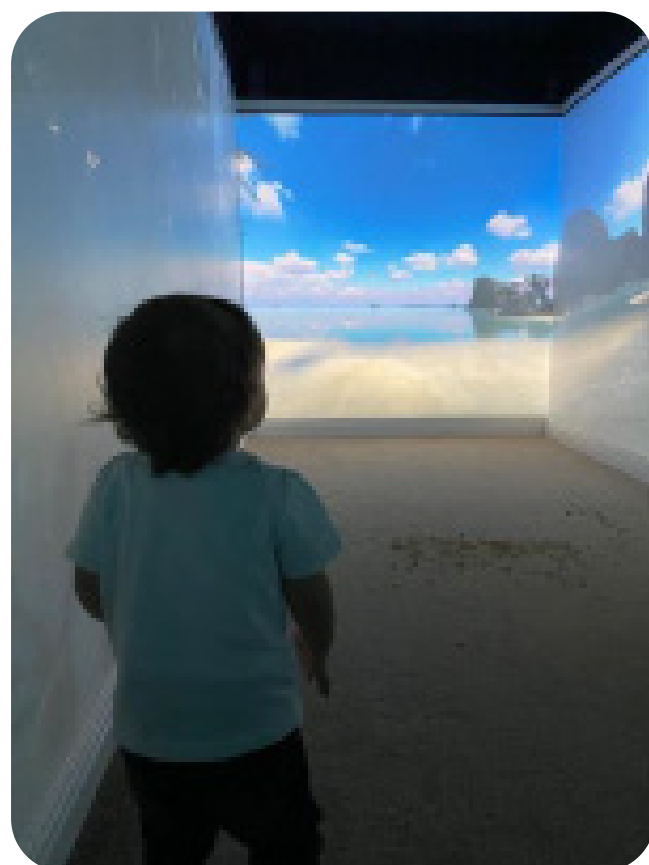
The scenes we can currently create are: Beach, Summer meadow, Flying, Under the sea, deep sea dive, snow, and desert outback.

Chirico and Gaggioli (2019) investigated how people responded emotionally after being exposed to a real-life panoramic view of a lake or to an immersive footage of that landscape. In summary, there were no affective differences between the VR and the real condition (except for anger, which was supposedly stronger in the real nature environment, and amusement that was stronger in the VR condition)

For example a nature scene in a virtual forest evokes similar beneficial outcomes than being in a real forest. This research suggests that VR nature experiences may be an appropriate compensation for people who cannot visit real nature for whatever reason.

This also enables us to offer safe, COVID secure virtual environments, such as the beach, for complex needs adults and children that are unable to visit a real environment

We also offer virtual horse riding in our immersive suite. Research indicates that a combination of horse riding and brain-building activities may help improve motor skills in children with neurodevelopmental conditions like autism-spectrum disorders and ADHD, a small study suggests.



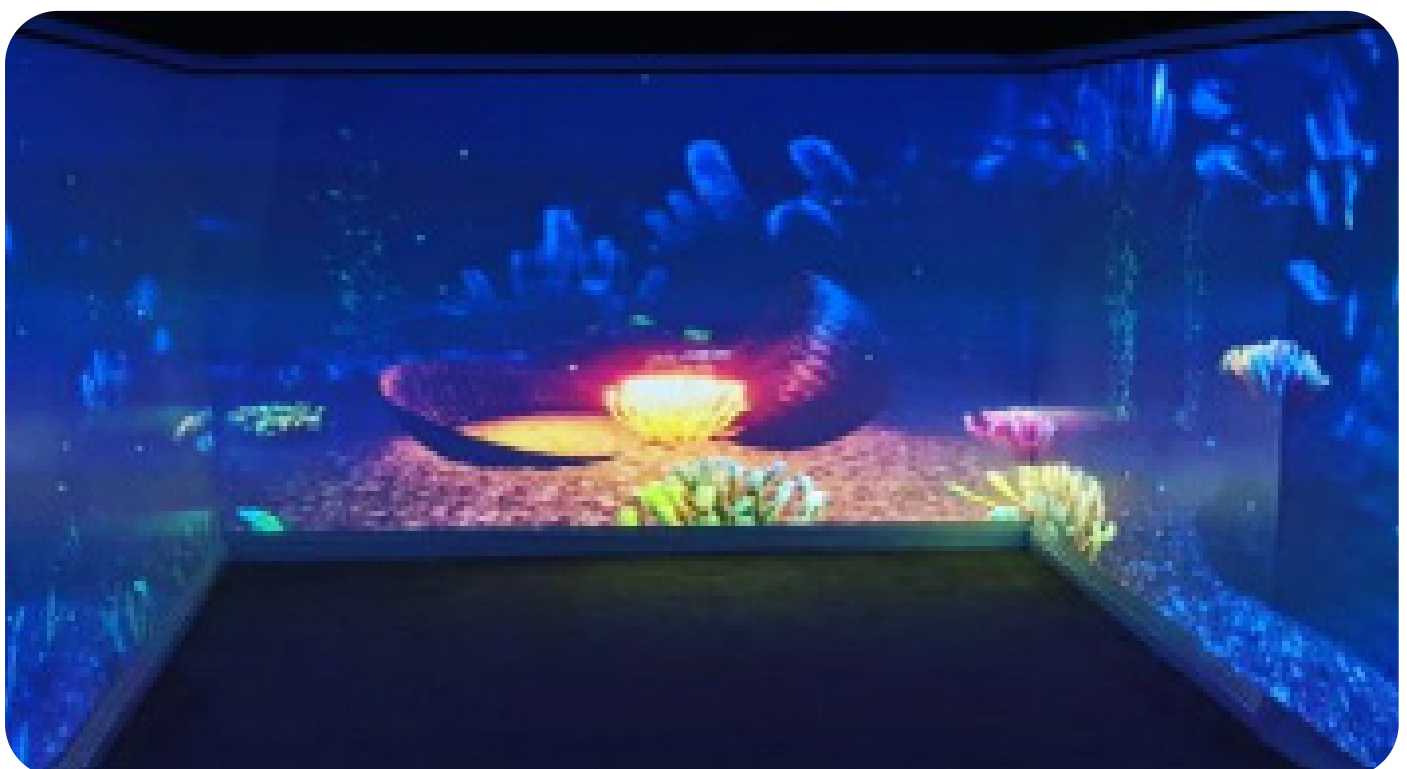
Horse riding appeared to have improved balance, posture, and core strength in children with ADHD and ASD. The other benefits of virtual Hippotherapy are

- Respiratory control
- Improved postural symmetry.
- Reduced abnormal muscle tone.
- Control of extremities.
- Trunk core strength.
- Improved gross motor skills.
- Enhancing balance and strength.
- Increase endurance.

The immersive therapy suite is available as part of a planned therapeutic journey or for private hire for single or family use.

We can provide a number of activities to complete while in your immersive session - please ask for more details.

Chirico, A., & Gaggioli, A. (2019). When virtual feels real: Comparing emotional responses and presence in virtual and natural environments. *Cyberpsychology, Behavior, and Social Networking*, 22(3), 220–226. <https://doi.org/10.1089/cyber.2018.0393>





# Training Packages

## Training Packages

This is supported by Adoption Support Fund and is also available privately or possibly through EHCP Personal Budget

### Parental training encompassing:

- Sensory Processing Difficulties and strategies to help at home
- Sensory Attachment - a look at attachment through the sensory perspective and strategies
- Play and the Powerful use of Play
- Secondary Trauma and Compassion Fatigue
- Sleep

### Other Training available for schools and professionals on:

- Sensory Processing difficulties and strategies to help
- Sensory circuits
- Zones of regulation
- Feeding difficulties and the impact of sensory challenges
- The impact of Developmental Trauma
- Foetal Alcohol Syndrome
- Mental health
- Anxiety Management
- Speech and Language Therapy and Social Communication
- Youth Mental Health First Aider



### Testimonial from a parent:

“I have been on lots of previous training courses and these were the best training courses I have ever been on. They have changed our lives. Before I came I was skeptical about what else I could learn but I have seen things so differently after coming on the courses and now feel empowered to try lots of different things to help. I feel I understand my child so much better now and we are much closer in our relationship.” Parent 2019

### Testimonial from a social worker:

“We had brilliant feedback from parents on the workshop you did for us recently” SW Coram March 2020

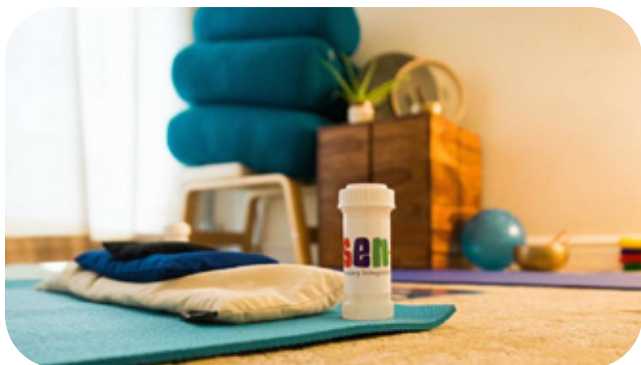
“Having attended your training recently, I feel much more informed when making a referral to your company and understand more about the treatment they will receive” SW Suffolk

### Testimonial from a teacher:

“Learning about sensory processing difficulties has been so enlightening and I can apply this to my whole class. It has been the best course I have ever done and I wish I could have done this years ago. It will definitely change the way I think about teaching going forwards” Teacher 2019

# Mindful Yoga, Massage & Holistic Therapy

Mindful Yoga is supported by the Adoption Support Fund. Mindfulness, yoga, massage and other holistic therapies are available privately.



Individual or family sessions, using Cognitive Behavioural Therapy techniques and Mindfulness strategies. Yoga is used to improve Interoception, to enable the child to 'tune in' to their body and emotional states. Yoga poses are chosen to help the child move from Sympathetic Nervous System, to Parasympathetic Nervous System through inversions.

Yoga also provides breathing exercises to improve vagal tone, which again enables a shift towards Parasympathetic Nervous System activation, which is essential for rest and digest, and attachment. We use partner poses, encouraging child-parent interaction and reliance on one-another in an emotional and physical sense.





# Antenatal/Pre-conception Support

This is not supported by Adoption Support Fund but may be available through CCT, charitable support, or privately

At SenSI we can provide a comprehensive package of support Pre-conception (before pregnancy/trying for a baby) and Antenatally (whilst pregnant)

This includes the therapies above such as Yoga, mindfulness, massage but also Rhythmic Movement Therapy as detailed below as well as mindful birth preparation and newborn prep classes. We can provide individual or group sessions.

## Rhythmic Movement Training

We are certified to provide Rhythmic Movement Training, which is a drug free approach to help physical, emotional, behavioural and cognitive challenges. RMT uses movements and various reflex integration techniques for optimal neural development.



## Prenatal RMT

According to the NHS around 1 in 7 couples may have difficulty conceiving. The National Institute for Health and Care Excellence (NICE) reports that, in the U.K., 25 percent of infertility is unexplained, (Reuters) Conceiving, or trying for a baby can be an exciting but worrying time. Things often do not go as planned and this can become stressful and difficult for a couple desperate to have a baby.

Rhythmic Movements are gentle rocking and reflex integration movements that stimulate neural pathways and promote learning, emotional balance and ease of movement. RMT is an effective way to help with symptoms of anxiety and emotional imbalances without the use of drugs. This can be particularly effective during an IVF process.

## Antenatal RMT

We can also offer RMT in pregnancy for mama and also postnatally to recover from birth or birth trauma. Again this is a gentle, no pain, non invasive, holistic therapy that can be taught by gentle touch and/or example.

There are many holistic therapies we can use to provide a journey for mamas and babies to recover from any change or trauma. Pregnancy and birth are often complex and traumatic and rarely straightforward

Dads or birthing partners often feel a sense of shock after experiencing their loved one give birth. RMT can help here too. Stress leads to an overactive nervous system, and biochemical imbalances. Experiencing fear, overwhelm, dread, and not being able to control a situation can cause great emotional stress that we can find difficult to talk about. RMT can help rebalance this situation and allow the body, mind and emotions space to heal and recover.

Our comprehensive therapeutic approach can apply to any stage of the journey and support complete wellbeing for the whole family.

## Baby Massage and RMT

We deliver baby massage, sensory baby and RMT, which addresses the role of babies' natural developmental movements during various stages of growth:

- Antenatally (Before birth)
- The first six months after birth
- As Babies mobilise and get up on their hands and knees
- Learning to walk



RMT allows a second opportunity to revisit a baby's early days and development. It enables us to integrate any reflexes that may not have initially played their role sufficiently or naturally and therefore become inhibited.

These movements are essential in order for foundations of neural network pathway growth and myelination (protection of the nerve pathways) in the brain. They are also important to establish head control, muscle tone and posture, which are all essential to ensure we can live life with ease and be able to express ourselves and our choices. RMT works by integrating the retained, or underdeveloped, infant reflexes (also called primitive reflexes or neonatal reflexes) which play a key role in development. Any disruption to a baby's developmental journey can cause an alteration of the body's ability to progress effectively. Ultimately this can have an impact on the possible presentation of Primitive Reflexes

At SenSI we can offer a tailored and unique assessment and treatment plan of RMT to babies on the postnatal ward, in NICU or at home.

Being born is traumatic! Especially if birth was too soon, labour protracted, or required instrumental delivery. RMT can help to soothe and settle stressed out newborn babies which in turn can help with feeding, settling and tummy issues, helping the body to adjust and perform just how it was intended.

# Sleep Support

This is not supported by the Adoption Support Fund but can be accessed privately or through CCT.

Our sleep programme supports all children from ages 1-18. This approach has been developed by The Children's Sleep Charity and offers evidence based techniques to support children's sleep. This programme has been specifically tailored to meet the needs of children with Sensory Processing Disorder, attachment difficulties and physical disabilities.

We adopt a gentle behavioral approach, with a focus on calming sensory techniques to be used throughout the day and bedtime, these include yoga, massage, recipes for scented bath products and much more. We discuss 'Sleepy Foods' that promote good sleep. We even include homemade body lotion and sleepy pillow spray with essential oils, plus a tailored sensory diet for your child which can be referred to each day and evening to ensure they are receiving enough sensory input throughout the day to meet their needs.

The common issues which may present include:

- Difficulty settling at the beginning of the night
- Waking throughout the night
- Waking too early to start the day
- Not falling asleep until late
- Difficulty getting up in the morning
- Daytime tiredness impacting on performance and behaviour



# Sleep Clinic for Babies under 12 months

This is not supported by Adoption Support Fund  
but is available privately.

Baby and parent sleep is vital in the first year of life. For adoptive parents, foster carers and birth parents we can offer expert advice based on clinical research and in association with the Children's Sleep Council. A multidisciplinary approach using our paediatric OT's and Nurse can address all sleep, settling and attachment issues.

- Night time terrors
- Separation anxiety and the need for your child to sleep besides you.
- Bed wetting



# Speech and Language Therapy

This is not supported by Adoption Support Fund but is available privately or possibly through EHCP Personal Budget



Approachable therapist providing comprehensive assessments and treatments to support the development of functional communication and active engagement in everyday life activities. Specialist Speech and Language assessment and therapy sessions, joint OT sessions available on request. During sessions we work collaboratively to achieve joint outcomes. Parents can be included in sessions to enable them to use relevant strategies at home.

## Social Communication Sessions

We also use Lego Therapy within our SALT and OT sessions as appropriate, and functional 'real life' experiences i.e. how to buy something in a shop, or speak on the telephone, or ordering a meal in a restaurant. We teach listening and speaking skills, as well as focusing on sequencing.

We use anxiety management strategies, and use prediction and reasoning skills within these sessions as appropriate such as supporting a teenager to know how to respond to a text message. We also deliver Social Skills groups. We support parents in teaching their child 'how' to play.



# NICU Graduate Support Programme

This is not supported by Adoption Support Fund but is available privately.

Ness is a fully qualified neonatal nurse with 20 years experience of caring for babies. She worked at the Norfolk and Norwich University Hospital in A&E and neonatal intensive care unit as a sister, but more recently was Senior Sister of the neonatal intensive care at Great Ormond Street Hospital for children in London.

She has conducted research into the developmental care of neonates and has a specialist interest in neurological development (how the brain grows) and attachment theory (how baby bonds with mum and family) Ness is not only degree qualified in neonatal nursing, with professional nursing and midwifery council registration, she has completed unicef and world health organisation (who) training in the 'baby friendly' initiative and infant feeding and has helped countless mothers and babies over many years.

Known as 'the baby whisperer' Ness is available to do online 30 minute or 1 hour sessions to support your nicu graduates needs. There will also shortly be access to online parent coaching and support for your growing graduate.

## Breastfeeding Support

This is not supported by Adoption Support Fund but is available privately.

This is an online service specifically developed to assist and support families of newborn babies and those who have had a neonatal unit experience during the coronavirus pandemic.. Once covid-19 has resolved a face to face experience will become available along with antenatal and baby massage/relaxation sessions.



# Weaning and Feeding Support for Babies under 12 months

This is not supported by Adoption Support Fund but is available privately.

Feeding is the most complex sensory task that your baby has to do in his first year of life. The brain organises and practices this. Initially babies have to conquer the ability to suck, breath and swallow all at the same time! When you only breathe through your nose, which babies do for the first 3-4 months, this is no mean task!

Then we challenge them with putting different foods, textures, temperatures, tastes and smells into that little hole in our face. Yet again our growing brain is challenged.


There are eight different senses that coordinate with each other when your baby eats. Their brain is complex, constantly busy and changing in order to adapt and respond to all the sensory information it is being given through baby's mouth. If your baby had a difficult start or experienced milk feeding issues, needed extra care and attention may be needed when introducing solid food.


This is where we can help. Just like a maths test at school, all of us process and achieve different results with information we are given. How that information is delivered is key, and will differ from baby to baby. Like that maths test, some will breeze through weaning without issue. Great! But mostly we need to just tweak a few things to make it easy, gentle and stress free for our babies to transition from milk feeds to solid foods.

Baby SenSI provides a bespoke programme of advice and support for parents requiring weaning encouragement and troubleshooting. We have 100% success rate and using a holistic approach are confident in the expert and professional advice we can offer.

# Recent feedback from our FaceBook page



Rosalyn Marshall  recommends Sensi Sensory Integration Therapy.

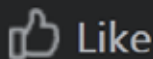
29 April · 

Would definitely recommend new (and not so new) mum's getting in touch with Ness. She is a highly experienced paediatric nurse and helped me so much to troubleshoot my little girl's sleeping and feeding issues. She was so kind and understanding and really took the time to listen to my concerns. We often doubt ourselves as new mums and Ness' reassurance really eased my anxieties. Her advice was easy to implement and she gave me some nice resources to help. It's great to be able to check things out with someone who knows what they're talking about. Thank you so much!



3

1 comment 1 share



Like



Comment



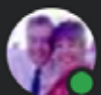
Share



Sensi Sensory Integration Therapy

Thank you for your comments and really pleased to hear how the advice and resources have already been implemented to good effect. Ness is extremely knowledgeable for sure! Let us know how the weaning and sleep plan goes xx

Like · Reply · 21 w



Write a comment...



# Hand Therapy

This is not supported by Adoption Support Fund

Each client will receive a tailored assessment and treatment sessions, as well as ongoing therapeutic support regarding accessing the educational curriculum and leisure activities. Our hand therapy service includes hand and upper limb assessments and treatments including soft and thermoplastic splinting.

## Conditions suitable for Hand Therapy:

- Neurological reasons– Cerebral Palsy
- Chronic instabilities of the wrist or hand
- Non-traumatic syndromes, such as osteoarthritis
- Burns management
- Rheumatoid arthritis, carpal tunnel syndrome And De Quervain's
- Wrist injuries
- Scar management
- Post-op management



# Daily Living Skills

This is not supported by Adoption Support Fund, but may be available through Access and Resources Team/CCT, and is available privately

As Occupational Therapists, we support individuals to live as independently and as functionally as possible, and we are concerned about all 'occupations' from self care tasks to leisure activities.

We support the development of daily living skills including:

- Toileting skills
- Washing and dressing
- Eating skills
- Sleep hygiene
- Domestic skills including meal preparation, laundry, household maintenance
- Use of public transport
- Budgeting skills
- Independent living skills
- Supporting young adults with embarking on new careers / job applications / enrolling on college courses etc



# Fine Motor Therapy

This is not supported by Adoption Support Fund but is available privately and may be available through EHCP



Fine motor skills guide the small muscle movements of the hand and fingers that allow a child to write and draw, as well as manipulate buttons, zips or scissors. When these skills are under-developed, the results can include reduced independence, school performance and self-confidence.

At senSI we provide a comprehensive assessment of fine motor skills using standardised and on standardised assessments. We assess fine motor skills including functional abilities, handwriting, hand reflexes and coordination. We can provide 1:1 handwriting programmes which can be facilitated at home or school. Group programme's can also be provided as required.

[We provide a range of therapeutic interventions tailored to the child's needs.](#)

**senSi Write:** We use a variety of mediums such as paints, chalk, foam as well as pens and pencils. Some activities are done to music, to help improve fluency at which the child writes. Exercises include reflex integration and tactile / proprioception awareness.

**Handwriting Treatment:** Activities are also chosen to increase shoulder stability, midline crossing and ocular motor control, all essential in the development of handwriting. Strength and reflex exercises in a fun way. We can also provide equipment to help with handwriting.



# Case Management / Housing adaptations / Wheelchair & Equipment Support

This is not supported by Adoption Support Fund is available privately, or through Compensation, Insurance and possibly through EHCP Personal Budgets Medical legal Compensation work

We pride ourselves on being client base therapy focused, providing an MDT approach and hands on therapy. Our Occupational Therapists are able to assess and prepare reports on a range of issues below. We are able to assess and support equipment provision, housing adaptation and rehabilitation programs. We also offer Case Management services.

## We can assess for:

- Personal care needs
- Equipment needs
- Domestic activities
- Case management
- Assistive Technology & equipment
- Housing specification & adaptations
- Therapeutic interventions

Comprehensive assessments will involve clinical and functional examination. We have experts in a range of specialist areas including but not exclusive;

- Traumatic brain injury including physical and cognitive dysfunction
- Spinal cord-injury
- Pediatrics & cerebral palsy
- Neurology – All aspects
- Hand and upper limb injuries including brachial plexus lesion and erb's palsy
- Trauma and orthopedics including amputation management (multiple limb deficient children)
- Rheumatology
- Chronic pain & fibromyalgia
- General medicines and surgery
- Mental Health
- Learning Difficulties & ASD

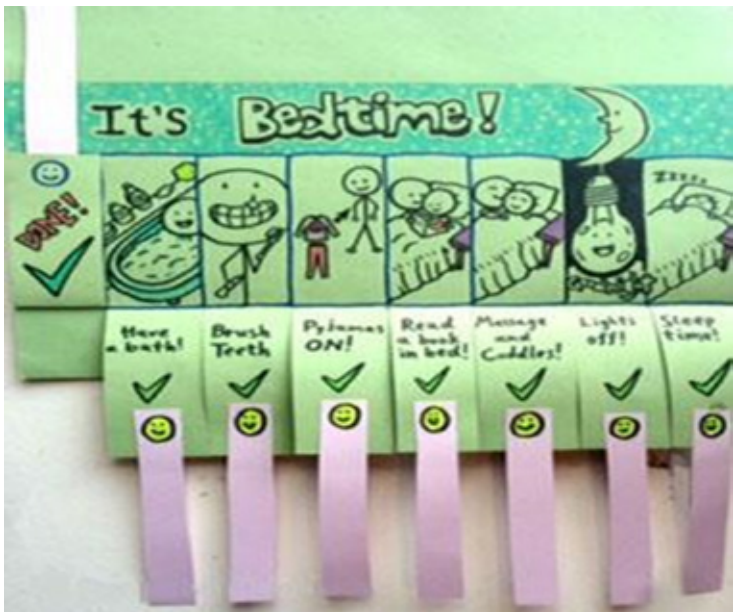
We also offer MDT approach and have a large team of professionals including:

- Specialist Speech and Language Therapist
- Specialist Occupational Therapist
- Clinical Psychology
- Art Psychotherapy
- Specialist Nurse



# Bespoke Resources

We make bespoke and individualised resources to help children with their daily routines, such as these below:



## Other Resources

Many resources can be found free of charge on our social media pages:



**Facebook** - senSI Sensory Integration Therapy

**Instagram** - sensi treatment 16

**You Tube** - sensi treatment

or download our app

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### **Opening Hours**

Monday –Friday 8am – 6pm

Saturday & Sunday 9am – 3pm