

## Cambridgeshire Position Statement: children and young people with sensory differences.

This document is to explain how occupational therapy can help children and young people with sensory differences.

- *How does occupational therapy help a person who may have sensory differences?*

Occupational therapy improves health and well-being by enabling people to participate in activities of daily living that are important to them. The way a person processes and responds to sensory information can make it difficult for them to engage in activities that others manage easily. Sensory differences are often associated with conditions such as autism and ADHD, but can also occur separately. How people manage daily activities has three elements:

- **personal** factors (such as their strength, coordination, sensory needs, motivation)
- the **activity** (e.g., getting dressed, brushing teeth, shopping)
- **environment** (physical, sensory, cultural, institutional).

Occupational therapy interventions can focus on any or all these three elements.

Sensory processing difficulties become an issue when they impact on a child or young person's ability to participate in activities that are necessary for their learning and development. The Royal College of Occupational Therapy suggests two strategies which aim to:

1. *Manage (not change) the sensory needs of the person.*
2. *Management through adapting the environment, modifying the task or developing strategies to self-manage their sensory needs*

*Are there specific qualifications needed to assess and provide provision for a child/young person with sensory differences affecting function?*

No. Qualified Occupational Therapists have the skills to identify an individual's sensory strengths and differences and their impact on daily activities.

*Is Sensory Processing Disorder a recognised diagnosis in the UK?*

No. Sensory Processing Disorder (SPD) is not included in the Diagnostic and Statistical Manual (Fifth Edition) or the ICD-10.

Sensory differences are considered a symptom rather than a diagnosis. The Royal College of Occupational Therapy (RCOT) do not therefore support the use of SPD as a diagnostic label.

*Does Cambridgeshire Local Authority fund Ayres Sensory Integration Therapy (SIT)?*

No, because the research evidence is inconclusive There is little robust scientific evidence to support the use of Ayres Sensory Integration Therapy (SIT) This view is supported by the Council for Disabled Children (Jan 2020).

New research from the National Institute for Health and Care Research (June 2022) compared Sensory Integration Therapy with the standard care offered by most services. The research concluded that Sensory Integration Therapy did not demonstrate clinical benefit over and above standard care across a range of outcomes (i.e., functional, social, behavioural, quality of life and wellbeing). It is also more expensive. (NIHR 2022).

*Sensory Attachment Intervention*

This is a play-based approach used to support children with sensory processing difficulties arising from attachment issues. It is based on Ayres Sensory Integration Therapy (SIT). There is currently no published research as to the effectiveness of this approach compared to other child and parent/carer joint approaches. Therefore, this intervention is not offered.

*Therapeutic listening (similar to Auditory Integration Therapy)*

This is a sound-based intervention using music. At present there is not enough evidence (Novak et al, 2019) to support the use of this approach as part of an occupational therapy treatment model. Therefore, this is not offered.

*\*The Local Authority will not apply a blanket policy to provision within an Education, Health and Care Plan and would be prepared to depart from local criteria where directed to do so.*

*(For more detailed information please refer to the long version of the position statement)*