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# **SECTION 1** INTRODUCTION TO THE SCOOOT



### LET'S GET READY

With Scooot, you can begin to provide different opportunities for developing your child's mobility, ability and participation skills using our Scooot Activity Programme.

Of course you can choose to simply let your child use Scooot and move around independently - many families love to do this. However, by carefully choosing the activities your child carries out in Scooot, you can work on developing your child's skills in all areas.

In this booklet, we provide you with help and guidance from our qualified Occupational Therapists to support you in getting the most out of your Scooot.



For the introduction of any mobility device to be successful, it must be accompanied by a training programme.1-3



### What is the Scooot

Scooot is a configurable 4-in-1 mobility rider. It provides a means for self-initiated movement and independence in children with mobility challenges.

The concept of Scooot came from Cerebra, a UK charity that aims to improve the lives of children with neurological conditions through research, information and support<sup>4</sup>. The idea came from a mother whose daughter was a 'bottom shuffler'. Cerebra designed a simple scoot board for the little girl, pictured on below.

Cerebra found that many families asked about their product and so they wanted to work with a company to produce it on a larger scale. They chose Firefly by Leckey after the success of the GoTo seat partnership.

Firefly is a division of Leckey (www.leckey.com), a company known worldwide for making postural equipment for children with special needs. However, Firefly's unique focus is special needs family participation, which provides a perfect match for Scooot.





### Who can use the Scooot?

Scooot is an early mobility product, designed to give children a fun experience of movement when they may not be able to move very well by themselves. Scooot has been designed for children ranging from approximately 2-6 years old (maximum weight of 22kg) and Gross Motor Function Classification System (GMFCS) levels II - IV.

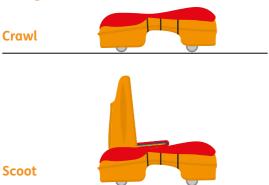
A child will get the most benefit out of their Scooot (in all configurations) if they are able to hold their head up. Without the advanced backrest, children need to have a reasonable level of trunk control (able to sit on floor with minimal pelvic support) to use the 'Scoot' or 'Ride' functions. The advanced backrest provides additional trunk support for children who need it. If your child has extremes of tone, or has had certain types of surgery (tight hamstrings, for example), we recommend that you seek advice from your physical therapist and/or physician before using Scooot at all.

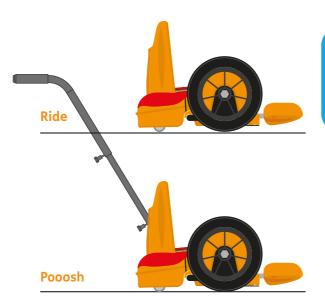
Your child's abilities may still be emerging and so they may only be able to manage a short time in Scooot before getting tired. That's OK – go at their pace, and they may soon build the skills and stamina needed. Deciding how long to use the Scooot for depends on your child's abilities, their mood and the time of day.

Be guided by your child, but avoid letting them become too fatiqued as this may impact on their abilities in other daily activities. Your child may enjoy using Scooot frequently, in which case daily use may be appropriate. If they have emerging postural skills or sensory issues, you may find that you need to go more slowly.

# Configuring your Scooot

### There are four configurations to Scooot:





**Assistive devices** benefit the activity and participation of children with functional impairments.<sup>5</sup>



The Scooot has been updated to include a higher backrest, which will provide your child with more support and reduce the amount of trunk control required to use the Scooot. The new backrest will allow your child to lean back and get more stability from the scoot than the old backrest provided. The backrest depending on your child's size should come to just below their shoulder blades, so it does not impact on your child's ability to self propel.

The advanced backrest provides your child with extra postural support. The laterals are height adjustable, so as your child grows the laterals can be moved to ensure your child receives support where they need it most. Once you have your configuration set up, you need to place your child into the Scooot securely. For Poosh, Scoot and Ride, place your child with their bottom against the backrest and fasten the lap strap.

For Crawl, make sure the padded cover is attached and place your child onto the Scooot with their head facing towards the front (where the Firefly logo is) as shown in the picture on the left.





# **SECTION 2** THE SCOOOT **ACTIVITY PROGRAMME**



### Did you know?

The map model is based on the World Health Organisation's ICF-CY framework. Turn to the Resource section at the back for more info.

## What is the Scooot **Activity Programme?**

The Scooot Activity Programme provides a series of carefully selected activities which can contribute to your child's development.

There are three key areas of the programme: Mobility (M), Ability (A) & Participation (P). This is the map:

### Mobility (M)

is your child's ability to access their world and gain as much independence as possible;

### Ability (A)

refers to all aspects of your child's physical, cognitive and social development;

### Participation (P)

is about enabling your child to experience as many activities as possible.

The Scooot Activity Programme consists of the MAP Mobility Assessment; the MAP Activity Worksheets; and an optional MAP Abilities Assessment to review your child's progress (see the Resource section).

The Resource section also includes a list of activity suggestions for encouraging development in different skill areas and a table to show activities that are suitable in each configuration. Finally, the Resource section provides details on how to review and record any progress.

As Scooot primarily enables children to experience movement, the Scooot Activity Programme begins with the MAP Mobility Assessment.

# Overview of the Scooot Activity Programme

Scooot **Your Scooot** Read the arrives! instructions and configure the Scooot if necessarv Find your child's mobility starting point for each configuration using Remember to Repeat at the map mobility assessment record your regular child's stage intervals, and goals for example once per month Choose mobility, ability & participation activities to work on using the map activities worksheet Don't overdo it! Try to practice activities little and often

> Record progress using the map mobility assessment and optional map abilities assessment

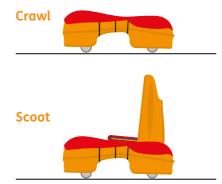
### Finding your child's mobility starting point

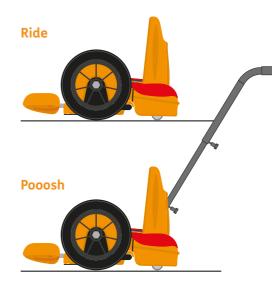
#### Using the MAP mobility assessment

From the outset, it's important to understand how well your child can use Scooot, as well as what they find difficult. This helps you figure out what stage to work on next.

Your child's mobility starting point is simply what your child is able to do at this moment in time, in whichever configuration of Scooot you wish to use. You know your child better than anyone, so along with the MAP Mobility Assessment you (and your therapist if possible) will be able to work out their starting point. Remember that all children are different and your child's starting point may not be the same as that of other children.

Our MAP Mobility Assessment (see Resources) helps you to decide your child's mobility starting point in each of the four Scooot configurations.





The stages for each configuration are a bit like building blocks, each one supporting the next. For example, in RIDE configuration, the stages build from sitting comfortably in Scooot to independently moving RIDE and negotiating obstacles.

To decide which stage your child is currently at in your preferred mobility configuration(s), use Scooot for a couple of short sessions and judge their response. Remember you can refer to the **Scooot User Manual**. online instructional videos and the additional guidance notes in the Resource section of this booklet to help you.

Use the MAP Mobility Assessment to identify which stage most closely matches your child's activity in Scooot for your preferred mobility configuration(s) and record the date. In the example below, on 12th January 2016, the child using RIDE configuration is able to bring their hands to the wheels, but does not yet understand how to make any movement. They are at Stage 2 and the date is recorded (shaded yellow in the example).

Once you know what your child can currently do in Scooot for your preferred mobility configuration(s), you can choose to aim for the next stage or maintain the stage your child is currently at. To use the RIDE example again, this child would be working towards moving Scooot in any direction (Stage 3 shaded pink in the example).



Each configuration contains stages and goals designed to help your child progress as much as they are able to.

#### STAGES DATE



STAGE 1	Tolerates sitting in Scooot but does not touch wheels
STAGE 2	Brings hands to wheels but does not produce movement 12.12.16
STAGE 3	Can move Scooot forwards/backwards/both
STAGE 4	Can turn Scooot in addition to above
STAGE 5	Can use Scooot independently and negotiate obstacles



### **DID YOU KNOW?**

the right equipment and therapy that encourages mobility has been shown to prevent or slow down secondary deformities<sup>1</sup>

# **Choosing Activities using the MAP Activity Worksheets**

Now that you have found your child's starting point for your preferred mobility configuration(s), it's time to choose the configuration you want to work on and find its corresponding worksheet. There are four worksheets in total, one each for POOOSH, RIDE, SCOOT and CRAWL.

The worksheets consist of a number of suggested activities which are organised as Mobility, Ability and Participation. Activities within Mobility will help develop your child's skills for moving Scooot. Ability and Participation suggestions are activities which will help your child's physical, cognitive and social development, as well as widen their experiences.

As children with special needs have different abilities and learn at different speeds, some of the activities suggested within your worksheet might not be suitable for your child. We have included a list of activities in the Resource section to allow you to pick and choose alternative activities that may be more suitable for your child.

We want you to get the most out of your Scooot Activity Programme and ultimately, your Scooot, so we have two separate tables of activities. As all activities have more than one benefit, the first table shows the range of developmental areas each activity can develop while the second table shows activities which are suitable for each configuration.

If you are unsure about which activities to choose, it's best to speak to your therapist. You can also contact us using the contact details provided on the back page of this booklet.







### **DID YOU KNOW?**

evidence suggests that providing family-centered care can improve a child's development and decrease parental stress¹

### Remember

Progress in Scooot will vary a great deal from child to child some learning much faster than others. It depends on many things, including their disability, any underlying (or associated) health conditions and how regularly they use Scooot.

If things aren't going to plan don't lose heart! Keep a record of the stage your child is at and take a break, or go back to an earlier stage if you need to.

Your child will benefit from the experience Scooot can provide them with - whether that's being at floor level, being able to selfpropel a little, or even being able to move around independently or being pushed around their

For some children, maintaining a stage is an achievement in itself.

Don't be tempted to exaggerate or over-estimate the stage your child is at, even if they are close to the next stage. Be realistic and then you can be sure that when progress occurs, it's the real deal.





Read about other families Scooot stories at:

www.fireflyfriends.com/ therapists/case-histories/ scooot

## How to review your progress

### It's useful to try to review your child's progress because it:

- Helps you to understand any influence that the Scoot may have on your child's development;
- Keeps you focused on encouraging your child to achieve the next stage;
- Helps you look back and remember how far your child has come, especially if you take photographs and/or videos as you go along.





## How to review your progress using the MAP Mobility Assessment

As Scooot concentrates primarily on mobility, you can use the MAP Mobility Assessment to review your child's progress. After about a month, simply repeat the process of assessment and check how your child is doing against the stages for your preferred Scooot configuration(s).

If your child has reached a new stage, then write the date beside it. You are then aiming for the next stage, as you did before. If your child hasn't quite reached the next stage, don't worry, just keep going and review again in another month or whenever you feel your child has made progress.

### **Optional MAP Abilities Assessment**

Some parents have reported unexpected changes in their child's abilities outside of Scooot use (for example, sitting balance on the floor) which they believe are related to using Scooot.

If you notice any additional changes, try to capture these using the MAP Abilities Assessment (see Resource section).

This will help to give you a much more rounded picture of your child's progress. Simply choose whether you feel your child's skills in the six ability areas (hand function, floor play, communication, attention, exploration and fun) are (a) worse than before you started using Scooot; (b) the same as before; or (c) better than before. Make a note of any specific changes you have noticed and try to describe what is different.

### Sharing your progress with us at Firefly

We'd love to hear how you and your child are getting on with your Scooot Activity Programme, especially if you've completed one or two reviews. Going by the stories we have heard from families through Facebook and Twitter, we believe that Scooot can benefit children in a number of ways. It can be difficult to show this because families share their stories in so many different ways.

The Scooot Activity Programme provides families, not only with a therapy tool, but a system for recording progress, which means we can compare stories. And if we can show patterns, we can demonstrate the benefits of Scooot to families and their therapists more reliably.

So, if you'd like to be part of this bigger picture, please email your reviews to scooot.programme@ fireflyfriends.com



### Top Tips

- Choose a time when your child is well rested and ready to use their Scooot. Try to wait at least 30 minutes after eating before using the Scooot and avoid using it before bed.
- Use the Scooot for a short time to begin with (around 5 minutes). Once your child becomes comfortable with the configuration you are using, increase their time in the Scooot.
- Encourage your child to initiate their own movement and the direction of movement. Guide your child's arms or legs if they need a little help.
- Try to make the experience fun for everyone involved include siblings and friends. You can use the Scooot to play with toys, listen to music or complete everyday tasks (e.g. getting something from the cupboard).
- Keep an eye on your child's confidence before and after using the Scooot and note how much your child is enjoying the Scooot session.

- Note how much your child is motivated to use the Scooot before using it, and how motivated your child is when using it.
- Take photographs and videos as you go along, remembering to note the date - they form a really helpful part of your review.

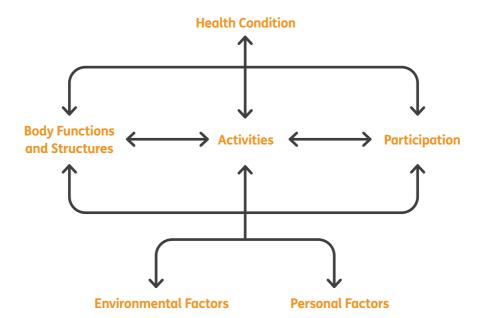


# SECTION 3 RESOURCES



## ICF-CY and Map explained

The International Classification of Functioning, Disability and Health for Children and Youth (ICF-CY) is an internationally recognised framework which is designed 'to record the characteristics of the developing child and the influence of its surrounding environment.' (World Health Organisation, 2007). This means that health and function are emphasised, and disability or difficulties with function are viewed simply as part of the overall health spectrum. The focus is balanced between what children and young people are able to do, as well what they have difficulty with. The overall model is below:



International Classification of Functioning, Disability and Health Framework for Children and Youth (WHO, 2007). The **health condition** is generally considered the child's diagnosis this could equally be 'asthma' or 'cerebral palsy'. Body structures and functions relate to the health condition and describe what is wrong with the body. This may be wheezing (for asthma), or high muscle tone (for cerebral palsy).

The body functions and structures affect the child's activity. Does the child become short of breath? Can the child rise to stand and walk? What is the child capable of doing?

Activity impacts on the child's level of **participation** in everyday activities such as playing, eating, dressing, cycling, going to the shops, involvement in sports etc...

Alongside these factors is the acknowledgement that the child's environment and individual personal factors influence their development. Parents, siblings, motivation, cognitive ability, housing, infrastructure of local health and education services, and access to sports and leisure facilities are a few of the environmental and personal factors that may impact on a child's development in each area.

Research suggests that therapy which looks at multiple areas appears to be more beneficial than a single treatment approach. Therefore, interventions should target body functions and structures, activities and participation, as well as environmental and personal factors (Chiarello & Kolobe, 2006).

#### **Firefly**

At Firefly by Leckey, our vision is to create a world where every child with special needs can enjoy a childhood filled with play, participation and possibilities.

Working with the community of parents and therapists we will campaign for change and co-create unique, innovative, life changing products.

We recognise that we are not able to change a child's health condition or environment, but by using Firefly products, we believe we can have an influence on their body structures, activities and participation. So, we have developed our own MAP framework to reflect where we can help.

#### The MAP

The MAP is Firefly and Leckey's own framework for understanding how products can help children with disabilities. With the child, their family and the products at the centre of the model, their developmental progress is influenced by mobility, ability and participation.

For example, by using a product to stretch muscles (body functions and structures in the ICF-CY), we may actually improve **mobility** which we define as a child being able to access their world and gain as much independence as possible. And of course, products which move will encourage mobility too!

A product might encourage a child to develop hand function, concentration or communication (activities in the ICF-CY). We have termed this **ability**, which we define as improving physical, cognitive and social development.

Similarly to the ICF-CY, we have defined **participation** as being able to experience as many activities as possible.



### Therapy terms explained

#### **Gross motor skills**

Large movements usually related to developmental milestones e.g. rolling, sitting, crawling, cruising and walking.

#### Reach

Part of gross motor skills, stretching arms to reach across the body, upwards or

#### Fine motor skills

Small movements usually related to hand function e.g. pincer grasp, ability to hold a crayon,

#### Bilateral hand function

Part of fine motor skills using both hands together to hold, throw, catch, build, open etc.

#### Visual-motor skills

The ability to co-ordinate eyes and movements. Visual-motor skills affect the ability to kick a ball (eve-foot co-ordination), pick up a block (eye-hand coordination), or drink from a cup (hand-mouth co-ordination).

#### Confidence

Self-assured and willing to try new things.

#### Engagement

Obvious enjoyment from taking part in an activity.

#### **Motivation**

Eagerness to take part in an activity and responds positively. May become upset when it's time to finish.

#### Communication

The ability to listen and respond through facial expressions, gestures, sounds or words.

#### Tracking (vision)

The ability to follow a stimulus using the eyes, with or without moving the head.

### **Everyday activities**

Activities that people do on a day-to-day basis e.g. walking, brushing teeth, setting the table.

#### Sensory skills

The ability to process information (e.g. light/dark, hot/cold, rough/ smooth, noisy/quiet) using the senses to understand the world and carry out everyday activities more easily.

### **Getting prepared**

There are four configurations for Scooot: POOOSH, RIDE, SCOOT and CRAWL. If you have purchased the 4in1 scooot, all four configurations will be achievable. With the 3in1 version, ride, scoot and crawl can be achieved.

You can purchase the Pooosh Assembly as a separate accessory through www.fireflyfriends.com in the 'Accessories' section.

Set up Scooot in your preferred configuration using the Scooot User Manual and online resources.

Select the configuration according to your childs' current strengths and abilities, bearing in mind that the easier position is the POOOSH configuration and the CRAWL configuration is generally more difficult.

Once you have selected a configuration, choose a time when you and your child don't have to rush. Allow your child to use Scooot in your preferred configuration and watch your child's reaction. This will help you find their Mobility starting point on the MAP Mobility Assessment and then you can begin to work your way through the stages. The following sections guide you through the stages of each Mobility configuration.



**Need more trunk support** for scoot or ride? The advanced backrest may help. See the 'accessories' section of

www.fireflyfriends.com

# **Assessing for POOOSH** configuration

**Stage 1** of Pooosh configuration is to familiarise your child with scoot and all of the various features.

As your child becomes used to scoot, they will continue to develop their head and trunk control - this is Stage 2. Your child will be fully dependent on the parent or therapist to push them ground in scoot.

Your child can start to work towards Stage 3, when they indicate either verbally or non-verbally where they would like to go when sitting in scoot.

They begin to interact with the environment around them. If your child loves to constantly move around in the scoot, they are ready to move to Stage 4. Encourage your child to reach for the wheels - they may begin to move forwards and backwards. They may require hand over hand assistance to move the wheels.

As your child becomes more confident with this movement Stage 5 involves turning the scoot around in circles and beginning to navigate objects with assistance from parents or therapists.



## Assessing for RIDE configuration

Stage 1 of RIDE configuration is building sitting tolerance in Scooot.

Children are often attracted to the wheels on RIDE, but it can take some time for them to work out how to use them. Stage 2 refers to children who are curious about the wheels and can place their hands on them, but just haven't quite figured out how to produce movement. If your child is at Stage 2, you can work towards achieving Stage 3 movement forwards, backwards or both.

If your child is already able to move in both directions, learning how to negotiate turns (Stage 4) is the next target. When your child becomes confident in moving in all directions, they can aim for Stage 5. This requires independent movement without verbal or physical prompts, particularly if the child bumps into or has to negotiate around objects.





# Assessing for SCOOT configuration

At first your child might find their environment a little distracting in this position, particularly if sitting at floor-level is a new experience for them. They might also find sitting in the SCOOT position difficult, because of the level of trunk control required to sit upright. Stage 1 of the **SCOOT Configuration is** building sitting tolerance.

The first movement children tend to do in SCOOT configuration is push backwards, as it requires less effort than pulling forwards. Because of this, Stage 2 is for children who can push themselves backwards and are aiming for Stage 3: moving themselves forwards. If your child is able to propel themselves both backwards and forwards, turning themselves in either direction, then Stage 4 is their next aim.

Only select Stage 5 if your child is able to move independently without verbal or physical prompts, particularly if the child bumps into or has to negotiate themselves around an object.





# Assessing for **CRAWL** configuration

Give your child time to get used to the CRAWL configuration. This is often a difficult position for a child as it means they have to work hard to lift their head against gravity. However it's especially important for developing neck and shoulder strength. As a result, tolerating this tummy position is Stage 1 of CRAWL configuration.

If your child is comfortable with CRAWL position, aim for Stage 2 - lifting head to look forwards. Once your child is able to hold their head up, encourage them to place their hands and/ or feet on the ground to achieve Stage 3. If your child is able to push themselves backwards in this position, they are at Stage 4.

Stage 5 is for children who can use their hands and/or feet to propel themselves in any direction while holding their head up.





**Need more trunk support** for scoot or ride? The advanced backrest may help. See the 'accessories' section of

www.fireflyfriends.com



### **MAP Mobility Assessment**

Your child's name:	
Date of birth:	
Diagnosis:	
Date of assessment/review:	
	_

### **STAGES**



#### **CRAWL**

STAGE 1	Tolerates sitting in Scooot	
STAGE 2	Brings hands to wheels but does not produce movement	
STAGE 3	Can move Scooot forwards/backwards/both	
STAGE 4	Can turn Scooot	
STAGE 5	Can use Scooot independently and negotiate obstacles	

	STAGES	DATE
	SCOOT	
STAGE 1	Tolerates sitting in Scooot	
STAGE 2	Can move Scooot backwards	
STAGE 3	Can move Scooot forwards and backwards	
STAGE 4	Can turn Scooot in either direction	
STAGE 5	Can use Scooot independently and negotiate obstacles	



STAGE 1	Tolerates tummy position but head drops frequently	
STAGE 2	Able to lift and hold head up in tummy position	
STAGE 3	With head up, places hands on floor but cannot crawl in tummy position	
STAGE 4	With head up, uses hands and/or knees and feet to push forwards or backwards	
STAGE 5	With head up, uses hands and/or knees and feet to push forwards and backwards, freely changing direction	

### STAGES DATE POOOSH

STAGE 1	Becomes familiar with sitting in Scooot	
STAGE 2	Develop head and trunk control	
STAGE 3	Interact with the environment - indicate what they would like to explore	
STAGE 4	Bring hands to wheels with assistance and begin to explore movement (forwards and backwards)	
STAGE 5	Bring hands to wheels with assistance, turn scooot and navigate objects	

### **MAP Activity Programme** work sheet for:

### Crawl

The specific stage we are working on is:

#### **Mobility Activities**

- Use toys to encourage your child to lift their head and focus their attention
- encourage your child to move towards them



Activities for physical, cognitive and social development

### **Ability Activities**

- Building blocks
- Retrieve items from boxes, cupboards, etc...
- Jigsaws
- Read a book
- Manoeuvre beads on an abacus



Activities that enable as many experiences as possible

#### **Participation Activities**

- CRAWL towards a family member, friend, or pet
- Play games such as races, catch/tag or hide and seek
- Take part in floor play at home or in circle time at school.
- Make an obstacle course, adding more obstacles as mobility in CRAWL improves



Use the Scooot on different floor surfaces to grade activity i.e. start on wood and build to carpet.

Working on tummy time regularly when not in CRAWL will help to encourage head lift.



### **MAP Activity Programme** work sheet for:

### **Scoot**

The specific stage we are working on is:

#### **Mobility Activities**

- Try going backwards first place skittles
- can feel the movement they have to make



Activities for cognitive and social development

### **Ability Activities**

- Kick a ball while seated in SCOOT
- · Reach for items on the floor
- Ask your child to get items from cupboards, fridge, etc...
- Skittles/Bowling
- · Throw and catch a ball



## Activities that

enable as many experiences as possible

#### **Participation Activities**

- Sit in front of a long mirror, and sing action songs
- · Read a book with a sibling
- Bring turn-taking games down to floor level to play with a sibling or friend, for example Pin the Tail on the Donkey



Attach 'bump-dots' to the outer rim of the Scooot wheels to encourage your child to feel for the wheels and achieve movement.



## **MAP Activity Programme** work sheet for:

### Ride

The specific stage we are working on is:

#### **Mobility Activities**

- Push the wheels of Scooot to demonstrate to your
- Use your hands to guide your child's hands to the their hands in the direction you are working on



Activities for cognitive and social

#### **Ability Activities**

- Ask your child to retrieve objects from the floor, a different room, or from cupboards, etc...
- Throw and catch a balloon, ball, beanbag, etc...
- Choose clothes from a low drawer



Activities that enable as many experiences as possible

#### **Participation Activities**

- Move towards a family member, friend or pet
- Play games such as races, catch/tag or hide and seek
- Take part in floor play at home or in circle time at school
- Make an obstacle course, adding more obstacles as mobility in RIDE improves



Use the Scooot on different floor surfaces to grade activity i.e. start on wood and build to carpet.



## **MAP Activity Programme** work sheet for:

### **Pooosh**

The specific crawl stage we are working on is:

#### **Mobility Activities**

- Place your child's hands on the wheels and provide physical assistance to move the wheels forwards and
- Allow your child to get used to holding onto the

M

Activities for physical, cognitive and social development

#### **Ability Activities**

- · Ask your child to point at various items within the environment i.e show me where your toy box is
- Place objects on the floor and ask your child to pick them up and place them on their knee
- Your child could complete a jigsaw puzzle whilst seated in the scooot



Activities that enable as many experiences

#### **Participation Activities**

- Go to the park, explore using Scooot outside
- Play throw and catch a bean bag or light ball with brothers and sisters
- Go to the zoo or pet farm. The child could hold animals on their knee

as possible



Use the Scooot on different floor surfaces to grade activity i.e. start on wood and build to carpet.



# Ability Activity Suggestions

ACTIVITY SUGGESTIONS	GROSS MOTOR SKILLS	REACH	FINE MOTOR SKILLS	
BALL PLAY				
BRUSH TEETH/HAIR				
BUILDING BLOCKS				
CATCH / TAG				
CHOOSE CLOTHES				
CHORES E.G. CLEANING FLOOR				
CIRCLE TIME				
CLAPPING HANDS TO SONGS / CLAPPING GAMES				
DRAWING ON THE FLOOR				
DRESSING - ZIPS AND BUTTONS				
FOLLOW THE LEADER				
FOLLOW TOYS WITH EYES				
GETTING ITEMS FROM CUPBOARDS, FRIDGE ETC				
HIDE & SEEK				
JIGSAWS				
PASS OBJECT FROM ONE HAND TO ANOTHER				
PICKING UP SMALL OBJECTS E.G. LEGO PIECES, BEADS				

Note: many activities can address almost all the ability areas with some thought. The dots ( ) listed capture the main benefits of each activity, but there are many overlaps. For example, talking your child through your chosen activity includes communication in every case.

BILATERAL HAND FUNCTION	VISUAL MOTOR SKILLS	COMMUNICATION	EVERYDAY ACTIVITIES	SENSORY SKILLS	PARTICIPATION

# Ability Activity Suggestions

ACTIVITY SUGGESTIONS	GROSS MOTOR SKILLS	REACH	FINE MOTOR SKILLS	
PIN THE TAIL ON THE DONKEY				
PLAY-DOH – PLAY WITH IT, ROLL IT OUT, PUSH SMALL OBJECT INTO IT				
POINT AND NAME OBJECTS/FOLLOW POINTING WITH EYES OR HEAD				
POPPING BUBBLES				
POPPING BUBBLE WRAP				
RACES				
ROLL OVER BUBBLE WRAP				
SKITTLES / BOWLING				
SORTING TOYS BY COLOUR				
SORTING TOYS BY SIZE				
SQUEEZING BOTTLES E.G. PAINT BOTTLES				
TRAY SAND PLAY				
TEARING AND STICKING PAPER				
THROW AND CATCH A BALLOON, BALL, BEANBAG ETC				
TOUCHING OBJECTS OF DIFFERENT TEXTURE				
USING SCOOOT IN BRIGHT / DARK AREAS				
USING SCOOOT IN QUIET / NOISY AREAS				
USING SCOOOT WITH SLOW / FAST MUSIC				

Note: many activities can address almost all the ability areas with some thought. The dots ( ) listed capture the main benefits of each activity, but there are many overlaps. For example, talking your child through your chosen activity includes communication in every case.

BILATERAL HAND FUNCTION	VISUAL MOTOR SKILLS	COMMUNICATION	EVERYDAY ACTIVITIES	SENSORY SKILLS	PARTICIPATION

## Activity Suggestions - Configurations

#### **ACTIVITY**

**BRUSH TEETH/HAIR** 

**BUILDING BLOCKS** 

**CATCH/TAG** 

**CHOOSE CLOTHES** 

**CHORES E.G. CLEANING THE FLOOR** 

**CIRCLE TIME** 

**CLAPPING HANDS TO SONG/CLAPPING GAMES** 

**DRAWING ON FLOOR** 

**DRAWING ON TRAY ON LAP** 

**DRESSING - ZIPS AND BUTTONS** 

**FOLLOW THE LEADER** 

**FOLLOW TOYS WITH EYES** 

**GETTING ITEMS FROM CUPBOARDS, FRIDGE, ETC** 

**HIDE AND SEEK** 

**JIGSAWS** 

PASS OBJECT FROM ONE HAND TO ANOTHER

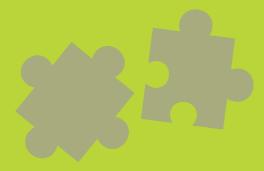
**PICKING UP SMALL OBJECTS E.G. BEADS, LEGO PIECES** 

PIN THE TAIL ON THE DONKEY

PLAY-DOH – MANIPULATING PLAY-DOH, ROLLING IT OUT, PUSHING SMALL OBJECTS INTO IT

POINT AND NAME OBJECTS/FOLLOW POINTING WITH EYES OR HEAD





POOOSH	RIDE	SCOOOT	CRAWL
X	X	X	
Х	X	X	Х
	X	X	X
X	X	X	
			X
X	X	X	
X	X	X	
			X
X	X	X	
X	X	X	
X	X	X	X
X	X		
X	X	X	
X	X	Х	X
X	X	X /	X
X	X	X	X
X	X	X	X
X	X	X	Х
X	X	X	X
X	X	X	X

Continued overleaf...

## Activity Suggestions - Configurations

#### **ACTIVITY**

**POPPING BUBBLES** 

**POPPING BUBBLE WRAP** 

RACES

**ROLL BALL TO FAMILY MEMBER/FRIEND** 

ROLL OVER BUBBLE WRAP

SKITTLES/BOWLING

**SORTING TOYS BY COLOUR** 

**SORTING TOYS BY SIZE** 

**SQUEEZING BOTTLES E.G. PAINT BOTTLES** 

TRAY SAND PLAY

**TEARING AND STICKING PAPER** 

THROW AND CATCH A BALLOON, BALL, BEANBAG, ETC

**TOUCHING OBJECTS OF DIFFERENT TEXTURES** 

**USING SCOOOT IN BRIGHT/DARK AREAS** 

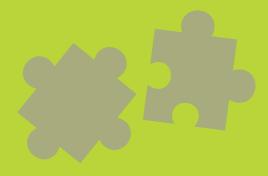
**USING SCOOOT IN QUIET/NOISY AREAS** 

**USING SCOOOT WITH SLOW/FAST MUSIC** 









POOOSH	RIDE	SCOOOT	CRAWL
X	X	X	X
X	X	X	X
X	X	X	X
X	X	X	X
X	X	X	X
X	X	X	X
X	X	X	<b>y</b>
X	X	X	K
X	X	X	
X		X	
X	X		
X	X	X	
X			X
X	Х	X	X
X	X	X	X
X	X	X/	X

## MAP Ability **Assessment**

We would love to hear about your progress send your reviews, photos and videos to:

> scoooot.programme @fireflyfriends.com

Your child's name:
Date of birth:
Diagnosis:
Date of assessment/review:

Ability Area	Worse than before	Same as before	Better than before	Your comments (describe any differences you have noticed)
Hand function  Reaching, grasping, moving objects from hand to hand, using both hands together, feeding self or drinking.				
Floor play Sitting balance, attempts to move around on floor, ability to move around on floor.				
Communication Levels of understanding vocalising to show moods, use of words.				
Attention Concentration on activities, level of motivation or confidence.				
Exploration Levels of interest in people, surroundings, messy play, sensory activities with noise, lights or touch.				
Fun Levels of happiness, enjoyment of others' company, engagement in activities, smiling.				

## Sharing your progress with us

We love seeing and hearing about your progress using Scooot. It really helps us advise and guide other parents and therapists within the community and helps them decide if the Scooot is suitable for them and their child or client.

	A photograph or scan of your completed initial Mobility Assessment Sheet and a further two reviews of it. This should cover a time period of a minimum of two months.
	Photographs or videos that demonstrate the progress you have made at each of these reviews (ideally a minimum of three).*
	A photograph or scan of one completed Ability Assessment Sheet.
	Photos and videos demonstrating each ability exercise you worked on
Send	all of these to scooot.programme@fireflyfriends.com and one of the team will be in touch.
41.67 1	

\*We love reviewing your photos and video footage - to avoid blurriness and to make sure we can view them properly, please take them with a digital camera, or a camera phone that offers a high resolution of image/video quality.

- 1. Bastable, K.G. (2014). The effect of non-powered, self-initiated mobility on the engagement of young children with severe mobility impairment. Ph.D thesis, University of Pretoria.
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- 4. Cerebra (2014). About Cerebra. Available: http://w3.cerebra.org.uk/about/. Last accessed 12/01/2016.
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- 6. Skar, L. (2002). Disabled children's perceptions of technical aids, assistance and peers in play situations. Scandinavian Journal of Caring Sciences; 16: 27-33.
- 7. Berlin, L.G., Brooks-Gunn, J., McCartan, C. & McCormick, M.C. (1998). The effectiveness of early intervention: examining risk factors and pathways to enhanced development. Preventative Medicine; 27: 238-245.
- 8. Ohqi, S., Fukuda, M., Akiyama, T. & Gima, H. (2004). Effect of an early intervention programme on low birth weight infants with cerebral injuries. Journal of Paediatric Child Health; 40: 689-695.





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