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The Sensory Processing Measure–Preschool (SPM-P)—Part Two: Test–Retest and Collective Collaborative Empowerment, Including a Father’s Perspective

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As a follow-up to “The Sensory Processing Measure–Preschool (SPM-P)—Part One: Description of the Tool and Its Use in the Preschool Environment” (Miller Kuhaneck, Glennon, & Herzberg, 2011/this issue), this case illustrates the use of the SPM-P as a test and retest in promoting understanding of how sensory processing issues drive challenging behaviors. A father’s unique perspective illustrates how the SPM-P promotes collaborative empowerment among SPM-P team members, including the occupational therapist, occupational therapy assistant, preschool teacher, paraprofessionals, grandparents, and parents.

Keywords Sensory processing, assessment, collaborative team empowerment, sensory based, intervention, test–retest

Sensory Processing Measure–Preschool (SPM-P) and Team Collaborative Empowerment: An Occupational Therapist’s Perspective

Although collaboration is often encouraged, the process can be daunting when one attempts to explain the difficult topic of sensory integration and sensory processing. When a child with difficulty processing and integrating sensory information (Schaaf & Davies, 2010) is observed by those who are not experienced or trained in this area, it is easy to dismiss the challenges (even when the student is in special education) as something the child can control “if he tries.” Helping others “see” the relationship between sensory processing and challenging behaviors is what the Sensory Processing Measure–Preschool (SPM-P) does quite well. The reader will learn how the complexity of sensory processing issues can be understood and, through team collective empowerment (Turnbull, Turbiville, & Turnbull, 2000) give all who live and work with the child self-confidence and authority to develop and embed daily routines and activities within the resources and constraints of the environment or “ecocultural niche” (Lane, 2006).

Declan (the name has been changed for confidentiality purposes) is a precocious 5-year-old with above average intelligence who says that when he wants to remember something he “puts it under his hair.” He lives with his parents and 11-year-old sister,
diagnosed with autism. Declan had attended a Montessori school and, according to his school records, “experienced significant difficulties related to attending and following directions.” Declan’s father explains he now understands that sensory processing issues coupled with the lack of boundaries in the Montessori program that Declan attended made it difficult for his son to succeed. Declan was then placed in a developmental preschool.

In addition to performance-based assessments, the SPM-P was used twice, initially in January 2010 and as a retest in March 2010. Declan’s special education preschool teacher had requested the initial SPM-P because she “wanted Declan to be successful in kindergarten and was not sure how he would function in a large class setting.” When completing the initial SPM-P School Form, she remarked that Declan is “full of life and has a heart of gold” and “when he crashes into others, he has no response, except feels bad when he is made aware of having done so.”

When completing the initial SPM-P Home Form, Declan’s parents reported that “he is very creative,” “frequently runs and plows into you,” and “at times appears to be volatile and emotional.”

The other important members of the team included two grandparents, two paraprofessionals, the occupational therapy assistant (OTA), and the occupational therapist (OT). Although their answers were not scored, their responses and experiences with Declan were crucial in providing additional insight resulting in team empowerment and collaboration. The grandparents, who occasionally cared for Declan and his sister after school, described him as “happy,” “bossy,” and “requiring supervision all the time, especially in large stores.” The two paraprofessionals who supported the special education preschool teacher in the classroom and on the playground observed that Declan “wants to do his thing” and “runs into peers.” The OTA commented that Declan appears to be “smart enough to self-regulate, yet he bumps into kids and plows into other people, unaware of his environment.” The OT noted that Declan did not interact with peers or play on the equipment on the playground. Rather, he chose to go around and around on the scooter every day during recess.

**Analyzing SPM-P Results**

On the initial SPM-P Home Form, Declan scored in the typical range in hearing, balance, and praxis. He scored in the some problem range in Social Participation (SOC), Vision, Touch, and Total Sensory Scale. He scored in the definite dysfunction range in proprioception or body awareness (BOD). BOD is a lay term used in the SPM-P for easier understanding by those who are not familiar with the medical term. See Home Form Summary Sheet dated January 2010 (Figure 1).

On the initial SPM-P School Form, Declan scored in the some problem range in SOC, Vision, Hearing, Touch, Balance, Praxis, and Total Sensory Scale. As on the Home Form, he scored in the definite dysfunction range in proprioception (BOD). See School Form Summary Sheet dated January 2010 (Figure 2).

The environment difference score of $-3$ (calculated using the total sensory systems [TOT] $T$ scores of both forms) indicated Declan’s sensory functioning was similar across home and school environments. Both the SOC scores on home and school and the TOT scores (a composite score that includes the items from all the sensory systems) fell in the some problem range. Therefore, Declan’s challenging behaviors appeared to be resulting from the presence of general dysfunction in sensory processing.

The percentile scores (home: 98; school: 99) for proprioception (BOD) that fell in the definite dysfunction range indicated that Declan scored worse than 98% to 99% of the children in the normative sample. When asked what she had learned from using the SPM-P, Declan’s mother stated,
### Figure 1.

**SPM-P Home: Initial test.**

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**Table 1:** SPM-P Home Form

| Name of Child: Declan | Age: 3yrs 4mos | Gender: M |

**Date this form completed:** 1-11-10  
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**Raw Score:**

- **T Score:**
- **Interpreting Range (T97-997):**
- **Some Problems (T90-T95):**
- **Definite Disadvantage (T95-995):**

**DIFF Interpretation:**

- **DIFF = 10:** DEFINITE difference. More problems in School than at Home
- **DIFF = 14:** DEFINITE difference. More problems in School than at Home

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Figure 2. SPM-P School: Initial test. Source: Material from the SPM-P copyright © 2010 by Western Psychological Services. Reprinted with permission of the publisher, Western Psychological Services, 12031 Wilshire Boulevard, Los Angeles, California, 90025, USA (www.wpspublish.com). Not to be reprinted in whole or in part for any additional purpose without the expressed, written permission of WPS. All rights reserved (E-mail: rights@wpspublish.com) (color figure available online).
I learned how dysfunctional he was. Everyone just said “Oh he is a boy. He has a lot of energy.” Even though I had the motherly instinct and thought to myself “And people have more than one?” that is pretty significant dysfunction. So it made sense with the way he was acting.

Proprioception provides a child with the ability to sense the position in space of all body parts (Miller Kuhaneck, Ecker, Parham, Henry, & Glennon 2010). Basic functions of proprioception include the detection of joint position and movement, the development of a body scheme or body map, regulation of motions, and the modulation of the child’s state of arousal (Blanche, Bodison, Chang, & Reinoso, 2010).

An item analysis revealed proprioceptive sensory integration vulnerabilities related to perception at home (tends to pet animals with too much force, bumps or pushes other children) and at school (moves chair roughly, accidentally breaks glue sticks, slams door shut or open with excessive force, uses too much force when playing with objects, bumps into peers excessively, closes scissors forcefully with tight squeeze with each snip). Proprioceptive vulnerabilities were also related to sensory seeking at home (seems driven to seek activities such as pushing, pulling, dragging, lifting, and jumping; jumps a lot) and at school (jumps excessively). Although there were other sensory issues, proprioception appeared to be a major factor contributing to the difficulties noted when Declan interacted with family members, teachers, peers, and his environment.

Proprioception plays a significant role in body awareness, attention, activity level, knowing how fast and how hard to move, and self-modulation. Together with the tactile system, proprioception provides the perceptual awareness of one’s own body boundaries, leading to an understanding of the meaning of boundary words such as “stop” and “no.” With the vestibular system, proprioception provides information about movement of the body through space (Watling, Koenig, Davies, & Schaaf, 2011). When the body is not receiving accurate information about a specific body part and how it is moving in space, intervention would highlight promoting sensory processing. In Declan’s case, this would include “upping the ante” with activities providing movement against resistance and activities requiring joint compression and weight bearing. Participation in karate, gymnastics, and even yoga activities could be beneficial by providing increased focus on body awareness through weight bearing and muscle stretching and increasing baseline vagal tone resulting in increased self-regulation (Mollo, Schaaf, & Benevides, 2008).

**Team Intervention Planning**

The SPM-P is a collaborative instrument and provides opportunities for making informed decisions about intervention. The OT brought the team together (OTA, parents, teacher, paraprofessionals, and school principal) in mid-January for 1 hr. The team meeting included providing information on sensory processing, discussing the initial SPM-P test results, and using Quick Tips, a family- and teacher-friendly process that promotes capacity building by taking advantage of embedding strategies into school and home routines that are already in place and naturally occurring (Henry & Basaraba, 2011). This collaborative meeting was less formal than legal individualized education plan (IEP) meetings (Monteiro, 2010). All team members were on board as the OT gently guided them to take ownership, brainstorm, and generate ideas. Mutual respect and treating each team member as an equal encouraged them with the choice to cocreate within their own natural unique environment. As has often been said, “[i]nstead of giving them the fish, teach them to fish” (Cermack, Blanche, & Windsor, 2010).
The following are examples of how the team discussions went that day.

OT: If one looks at the SPM-P item, *Moves chair roughly (shoves chair under desk or pulls out chair with too much force)*, one might want to encourage Declan to push heavy weighted objects such as a shopping cart with heavy items in it.

MOTHER (with a smile): What about chores? Could I have him help put the wet laundry into the dryer? And I have a van filled with Girl Scout cookies. Could Declan unload them from my van? (See Figure 3.)

OT: That would work! There is also the item, *Accidentally breaks glue sticks, crayons, or pencils, or tears paper from too much force*. One may want to increase the weight and resistance on objects such as pencils, lunch trays, belts, and back packs to increase workload.

TEACHER: Instead of glue sticks, could I give him the big plastic glue bottle to squeeze? He would get the muscle work he needs . . . and he would not have to feel bad about breaking my glue sticks. (See Figure 4.)

OT: Yes, that is a good idea. What about the item, *Slams door shut or opens doors with excessive force*? Pushing/pulling the door open then being the door holder, then closing the door as quietly and slowly as possible could be helpful.

TEACHER: We have jobs in my classroom. He could be the door opener and holder throughout the day.

OT: Yes, he would feel proud and enjoy his job! Here is one that often gets him into trouble: *Bumps into peers excessively (e.g., while in line or moving around on the playground)*. Offering a physical boundary, either tactile or visual, to keep him in place and showing him where to start or where to go next, could increase his success while we all work on helping his body “know” where it is in space.
TEACHER: We have colored plastic disks that I could line up in front of the door, which would let all the students know where to stand when they line up to go outside. (See Figure 5.)

FATHER: Those disks make me think of when Declan had no sense of where he should stand while playing Wii bowling. He kept banging into the table. So I placed one of his puzzle pieces on the floor where I thought it would be safe for him to stand and told him “Stand here when you do it.” From then on, he was locked in. That was his spot.

Although the focus during the team meeting that day was on proprioception, the OT also encouraged the use of vestibular and tactile activities throughout the day, with an emphasis on providing modulating linear and touch pressure input. The question, “How much is too much input?”, was raised with the concern that Declan could have difficulty with self-regulation following all of the new additional input. The OT encouraged the team to emphasize embedding intensive sensory input throughout the day (which could also include linear vestibular: bouncing, hopping, and jumping) followed by maintained touch pressure (which could include a firm hug, rolling the large ball over him during recess, or the “pizza game” wherein the child is squished between pillows) and proprioceptive “heavy work.” Finally, because the occupation of a preschooler is play, emphasis was placed on integrating the input into his everyday life as “fun.”

**Communicating Progress**

The team decided to up the ante and provide the sensory input intensity for 2 months. The SPM-P would then be used as a retest to measure progress, and the team would meet again in the end (March 2010) to discuss whether changes in behavior could be seen at home and in school. Throughout the 2 months, e-mails and phone conversations were shared on an
ongoing basis between the OT and all the members of the team, including the grandmother. What follows are examples of the information shared.

OTA (late January): We are encouraging more variety on the playground, instead of only using the scooter. He is encouraged to do the wheel-barrow walk, play push-pull games, climb, slide, swing, and bounce on the ball. We are “holding him to task” by providing a visual check-in that he is not taking just another spin on the scooter. He is now initiating other activities at recess. He is also exploding with excitement about making words... with chalk he wrote log, then said, “If I put an f and an r, I can make frog.”

TEACHER (late January): We are using elastic bands at circle time. They seem to settle him down. He does not make all the sounds he used to make. We are having him use flannel boards to have him build words with pictures.

MOTHER (late January): We are trying to keep him very busy, lifting, pulling, pushing, squishing, and helping all around the house. Behavior seems to be the same... spelling and reading really taking off. Go figure.

OT (early February): Great that you have all been upping the ante with sensory input. Wonderful to hear about the spelling and reading. Perhaps you can integrate body activities by having him make letters with his body and make words with the play dough or cookie dough. Regarding his behavior, until he can automatically feel when he is being too rough, help him understand the difference between hard and gentle with physical objects, such as using play dough or handling eggs.

PARAPROFESSIONAL 1 (early February): I saw him do something great on his own. He took chalk outside and wrote the alphabet, backwards but all correct. He got other kids involved and I saw more interaction with the kids. I have had him use the band to stretch before circle time. He is sitting well in the chair using the bands. (See Figure 6.)
Figure 6. Band around chair legs (color figure available online).

Figure 7. Wet clothes in dryer (color figure available online).
MOTHER (early February): Things are going well. From our end, he is a lot less emotional and upset about everything that doesn’t go his way. Our living room seems like a gym, as we try to get over our furniture being used as a trampoline. Since it is old, we don’t mind, and we explained that you are not allowed to jump on other people’s furniture. He is doing a lot of bouncing from one piece to the other, climbing, cushions falling on him, as well as using the trapeze bar we put up for him. The big exercise ball, the stretching band, and whatever chores I can think of like carrying groceries and loading the dryer with wet clothes. (See Figure 7.)

In addition, I have him signed up for karate and tumbling this week. We have a lot of fun implementing, though it is never ending, which can be daunting at times. Finally, his school work seems to be taking off like crazy. I wonder if he is able to concentrate more? Whatever it is, he is spelling, cutting art projects, and trying to read non-stop at home.

GRANDMOTHER (early February): We have seen Declan many times and have done the following:

Swimming: His latest is to pull himself out of the pool and jump in . . . over and over again. He can now dive to the bottom of the pool for objects. That is a lot of pulling for a little one.

Biking: Declan and I had a blast the other day . . . we went biking and he found a circle he enjoyed riding in . . . Of course it had a puddle . . . 45 minutes later he was covered in mud and as he put it “This was the best time ever. I have never been this dirty.” We rode our bikes home, laughing all the way.

Ball work: We have a big garage and we emptied it and play kick ball and toss. He rode his scooter for quite a while.

Museum: He loved the science museum and all the different stations.

Park: He climbed the rock wall on the big kids’ area over and over again . . . loved it and the hand-over-hand ladder.

PARAPROFESSIONAL 1 (mid-February): I learned after the SPM-P that he likes touch. So he now gets a hug as soon as he is here. I observed him today lying on our turf, and then some boys came up and laid down next to him. I asked, “What are you all doing?”, and they did not respond. They just got up and went under the play bridge. It was amazing to me. They just followed Declan around. He was making friends, and nonverbal communication was fun.

PARAPROFESSIONAL 2 (mid-February): We have noticed that although he could barely move before, he can now do the crab walk without collapsing. We have gotten him to log-roll on the grass, and other kids have been joining in. He has started to get more interaction with the kids and not bumping and running into them.

FATHER (mid-February): He has started taking the cushions off the chairs and making a path to the TV. Then he jumps up and down as he goes back and forth. He did this the other night just before bed, and I swear it wiped him out. I’ve never seen him fall asleep so quickly after getting in bed. (See Figure 8.)

OTA (end of February): We have incorporated some structure and leading him to different pieces of equipment on the playground. He is spontaneously using a variety of playground equipment without adult facilitation. I met with his teacher, and we discussed a Sensory Story (Marr & Nackley, 2009) to introduce about attending to circle time. It includes using a sock buddy and giving yourself a hug or squeeze.
The SPM-P was completed again by each member of the team as a retest in mid-March. It showed changes at home, including social participation (Figure 9). All of Declan’s scores at school showed improvement, including social participation and proprioception (Figure 10).

In addition, clinical observations were redone by the OT who stated, “It is amazing how far he has come.” The Draw-A-Person Test (Harris, 1963) was initially administered in mid-January. When it was re-done in mid-March, it showed marked changes and could be interpreted as indicating improvement in body scheme (see Figures 11 and 12). The SPM team met again for 1 hr the end of March to discuss what they had learned from using the SPM-P, changes they had seen in the 2 months, and future recommendations. Following are some examples of what was shared.

TEACHER: The SPM-P made me aware of his need for more sensory input in the classroom and at recess. On the playground, we added more and, with that, we found that when he came in the classroom, he was not as wound up. He is self-regulating now! Not talking out as much . . . knowing “I need to raise my hand” . . . and that is getting him ready for kindergarten!
Figure 9. SPM-P Home: Retest (solid line). Source: Material from the SPM-P copyright © 2010 by Western Psychological Services. Reprinted with permission of the publisher, Western Psychological Services, 12031 Wilshire Boulevard, Los Angeles, California, 90025, USA (www.wpspublish.com). Not to be reprinted in whole or in part for any additional purpose without the expressed, written permission of WPS. All rights reserved (E-mail: rights@wpspublish.com) (color figure available online).
**Figure 10.** SPM-P School: Retest (solid line). Source: Material from the SPM-P copyright © 2010 by Western Psychological Services. Reprinted with permission of the publisher, Western Psychological Services, 12031 Wilshire Boulevard, Los Angeles, California, 90025, USA (www.wpspublish.com). Not to be reprinted in whole or in part for any additional purpose without the expressed, written permission of WPS. All rights reserved (E-mail: rights@wpspublish.com) (color figure available online).
MOTHER: Though he is still challenging (sometimes if he loses the vote he wants to make
the number 1 bigger than the number 3 to ensure that he wins), I argue with him less,
and he has less meltdowns. Part of what I learned with the SPM-P was what I had
to do to facilitate his improvement. I now give him more boundaries by giving him
choices between possibilities. He asks for touch pressure, so we do the pizza game. It
is all coming together.

FATHER: He does not run into people as much. He likes the karate and gymnastics. Though
he has always been a hugger, I have learned about his need for touch and how much
he thrives on helping . . . the lifting, tug of war at night . . . his night time settling is
instant. He likes to help out, and he gets a lot out of the physical . . . and the self-
esteeem.

GRANDMOTHER: I have enjoyed learning more things, because I did not know what to
do. I used to spray the sunscreen, now I rub the cream on all over. I also now wrap him
up really tight with the towel as the “hot dog” game. When he goes into fits, they are
way, way, way less, and he comes out of them so much faster. I think he has had quite
a bit of progress.
PARAPROFESSIONAL 1: I have seen him in a whole different way since we tried all the suggestions. I think the ideas will help other students at other grades, too.

OTA: We were able to offer changes in routines in the classroom and on the playground. Personally, the biggest walk-away from using the SPM-P was the collaboration between home and school. This resulted in us using strategies that could be used across all environments, including gymnastics and swimming with his grandparents. Yeah SPM team!

OT: I think the SPM-P created a great opportunity for the team to collaborate through joint decision making and shared accountability for Declan’s intervention. Besides having the parents very actively involved, we also had the opportunity to have some members that may not always attend meetings around a student (i.e., paraprofessionals, OTAs, etc.). They all have valuable information for the team, which we know, but sadly may not always acknowledge by not including them in the more formal IEP meetings.

As a follow-up to the IEP meeting in April, the team met with next year’s kindergarten teacher to prepare her for Declan’s “precociousness” and his sensory needs. They decided that if necessary, the new team would complete the SPM for elementary school students.
(Parham, Ecker, Miller Kuhaneck, Henry, & Glennon, 2007) in October of the new school year, once the school staff has known Declan for at least 1 month. This would provide the opportunity for all, including home, main classroom, music, art, physical education, recess, cafeteria, and bus personnel to be empowered to collaborate and brainstorm ideas for creating a sensory safe kindergarten year for Declan.

**SPM-P and Our Family: Two Parents’ Perspectives**

When we were invited to participate in the SPM-P assessment for our son, we were excited—and nervous. We had been through other assessments involving our daughter, and we understood the benefits could be tremendous in terms of identifying tactics and strategies for her cognitive, social, and neuromuscular development. And though the long-term benefits of assessments are real and often dramatic, the process of committing to paper your child’s weaknesses is emotionally draining.

Nevertheless, we decided to take full advantage of the SPM-P because the upside—a child more fully prepared for kindergarten and beyond—would eclipse any near-term angst we felt as parents.

The most striking difference in the SPM-P and other assessments we have completed is its multidimensional structure. In the past, we would sit down at the end of a long day and ask each other the questions listed on the assessment form: *How often does your child do this or that? How would you rate your child’s ability to accomplish X or Y?* It was not until we completed the SPM-P that we realized how narrow our view was of our children’s abilities and challenges. All we could do is answer based on what we see at home, in the car, or out running errands. Without the knowledge of how, in this case, our son behaves or performs at school or when he is with his grandparents, we can only offer one perspective—and only one path for addressing the issues.

Implementing the SPM-P allowed us to get a rich, comprehensive view of our son’s behavior, challenges and strengths from his teachers and classroom paraprofessionals, his grandparents, the OTA, and the OT. The SPM-P and the Quick Tips process offered us a new method for working with our son throughout the day to meet his needs in terms of physical activity, muscle input, and structured activities—from play time to helping with chores.

The SPM-P showed us that even the tiniest change to how we go about our day—letting him help carry in the groceries or playing tug-of-war while getting ready for bedtime—could have a lasting impact on our son’s development and general well-being. Also, we now seek opportunities to get him involved in projects around the house: lugging groceries in from the car or carrying towels from the laundry room to the bathroom. When beginning a painting project, we have him assist in carrying the brushes or paint cans. If appropriate, we will allow him to paint with us, as in the case with our aging picnic table. The pride he would feel in painting the table far outweighed any risk in it not looking like a show piece. Another example: Recently he and his grandfather helped us change the tires on one of our cars. By letting him roll the tires to where we need them and using the drill to tighten the lug nuts, we could see his self-confidence soar and his energy level decrease. Perhaps just as important, he enjoyed a restful night of sleep. During Girl Scout cookie sales, he worked alongside us loading and unloading cases of cookies to and from the car.

Our son, like most kids his age, enjoys playing video games, watching his favorite TV shows, and fiddling on the computer. However, he is not one to spend all day doing any of these things. He thrives on physical activities, so we enrolled him in karate and gymnastics...
classes. Not only do these activities offer the physical input he needs, they provide excellent opportunities to learn concepts that were raised in the SPM-P: standing patiently in line, listening to instructors, waiting for his turn, and following rules.

The year before he attended prekindergarten at his current school, he attended a Montessori school. His experience there could only be described as a nightmare. We could not pinpoint the reasons why it did not work out; we had a general idea but nothing specific—until we completed the SPM-P assessment. Our son thrives on structure, on rules, and on consistency. The problem was, we did not realize the degree to which he needs those elements in his school day until we started listening to the members of the SPM-P team. Montessori allowed too much freedom in many areas and far too little in others.

One afternoon, he lined up a set of blocks in a row, flat on the ground, and began jumping over them. A friend watched as the teaching aid scolded him for doing so. The reason she gave him? “Blocks are for stacking, not jumping over.” You could just see his little mind thinking, “This does not compute.” And the reason it did not click for him is because he was told to select an activity and have fun. He did, or so he thought, but then the rules were changed for him midway through.

At home, we started to see where as parents we needed to create more structure, and one of the methods was giving him fewer choices. A question such as “What do you want for lunch?” is a lot for him to process. Now we give him two or three choices and he can more easily wrap his head around the idea. And, this helps us avoid the inevitable “I want mac and cheese” only to find out that we do not have any mac and cheese in the house. Also, when taking him out for a fun errand, we no longer ask where he wants to go; instead, we say, “Would you like to go here or here?” These minor adjustments have created major improvements in how we all go about our day.

Thanks to the SPM-P, we recognized the type of environment our son needs to thrive in kindergarten. He needs direction. He needs physical input. He needs responsibilities. We might have discovered this on our own; maybe we would not have. That is why we are so thankful to have participated in the SPM-P. Already we are seeing a dramatic change in his academic work—both in terms of interest and quality. We believe the SPM-P has given him the tools to concentrate more in the classroom and to take the initiative at home to pick up books, write stories, and initiate art projects. His confidence is through the roof.

Had we not embraced the SPM-P collaborative process, we would have been behind the curve as our son heads into kindergarten. Thankfully, that is not the case. Today we have a thorough roadmap for his academic and social success. And, we have a team that has his best interests in mind. Together, we are shaping our son’s future. What more could two parents ask for?

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