

## POSITION STATEMENT ON THE ASSESSMENT AND TREATMENT OF CHILDREN WITH SENSORY INTEGRATION DIFFICULTIES

The following notice serves to provide the members of the occupational therapy profession and the public, including, but not exclusive to; parents, teachers, therapists, medical and paramedical professionals with SAISI's position and understanding of the assessment and treatment of children with sensory integration difficulties.

A child in this notice is described as an individual between the ages of 0 – 12 years.

SAISI prescribe the use of reliable, scientific assessment instruments in order to identify strengths and challenges that have an impact on functional performance. Standardized SI assessment tools are to be used alongside collateral information and researched clinical observations. This allows the therapist to design appropriate, individualized treatment goals to support the therapeutic intervention process. This intervention process should address the development of functional occupational performance based skills and adaptive behaviour.

SAISI promote the use of the Sensory Integration and Praxis Tests (SIPT). Internationally this test is recognised as the gold standard of assessment in the field of ASI®.

SAISI encourage the Data-Driven Decision Making process (Schaaf & Mailloux, 2015). This process supports a standardized and objective, outcomes based approach to the assessment and treatment of children with SI difficulties.

ASI® assessment and treatment must be carried out by an occupational therapist qualified in Ayres Sensory Integration®.

Parents should be provided with information to enhance their understanding of the underlying sensory systems and processes involved in the holistic development of the child.

Therapists need to have personal contact (preferably face-face) with caregivers and feedback on the child's therapeutic programme and progress needs to be provided on an ongoing basis. Caregivers must at all times, be recognised and included as part of the goal setting and therapeutic process of the child.

SAISI do not prescribe the use of generalised, non- standardised checklists and screening tools as the only methods of obtaining clinical information regarding the developmental, functional and behavioural status of a child.

SAISI rejects the use of the SCSIT. The use of the SCSIT is unethical as it is outdated and no longer in use. New research was conducted and the SIPT replaced the SCSIT.