

Sensory Processing Measure (SPM) Chat
with Diana A. Henry, MS, OTR/L, FAOTA
in Chat Room on Deanna Iris Sava's www.otexchange.com site
August 20, 2008

4:00 PM [[deanna](#)] WELCOME to this chat and we're really glad you're all here. We anticipate that the discussion will last about 1-1/2 hours, with a possible 10 minute break at some point. If necessary, the chat can be extended to two hours.

4:03 PM [[deanna](#)] I'm going to introduce Diana Henry, then I'll let you know the information we need from each of you.

4:04 PM [[deanna](#)] For the past 30+ years, Diana Henry's mission has been to help everyone understand how SI/sensory processing impacts behavior, learning, and occupation. She began her SI career in 1976 as Lorna Jean King's student, working in Lorna's back yard. Diana is very approachable. Because she is open to always learning from others, she is appreciative of any feedback. In addition to co-developing the SPM, Diana has produced videotapes and published many books through Henry OT Services. To learn more about Diana, you can read her bio on her website, Ateachabout (www.ateachabout.com). As an aside, Diana and I have been very good friends and colleagues for a long time. We share an interest in animals and co-wrote the books Sensory Tools for Teens and Sensory Tools for Pets: Animals and People Helping Each Other.

4:07 PM [[deanna](#)] Can each of you let Diana know how familiar you are with the SPM and type one question you have for her.*

4:09 PM [[Shahnoor](#)] I have recently used the SPM and have found it very useful.*

4:11 PM [[rosalie](#)] I have just ordered the SPM and read it (but haven't used it yet).

4:11 PM [[Linda](#)] I have not used the SPM but am very interesting in purchasing this tool to use this year.*

4:12 PM [[lauren](#)] My OT team started using the SPM and found it extremely helpful and user friendly. My question to Diana is what would be the appropriate time frame to readminister the SPM to determine progress?*

4:12 PM [[Sue](#)] I have not used the SPM yet but am very interested in it. One of my questions would be the use of the home component verses the school component. Kids are so different at home and sometimes parents are not a good reporter either.*

4:16 PM [[Diana Henry](#)] Quick answer to Lauren's question on the use the SPM as a post test. We don't have a definite time frame yet as it is fairly new. I used it as a pre test in January 2008 and then as a post test in April 2008 (after the SPM team had developed

strategies and implemented them) with an autistic child and we saw BIG changes. The changes were apparent in many of the scores.

Now it was interesting that the Home Form showed worse scores after the post test even though the student had improved there, too. What we all discussed as a team was that sometimes parents and teachers rate children in a different way than a therapist would, because they come from a different perspective. This is one of the benefits of the SPM. You have the opportunity to see the children from the eyes of those that are rating them. This helps you to understand where they are coming from so you can better address their issues. So. We realized that the mother of the student I was sharing about whose post test scores worsened in the Home Form had initially seen her son as more independent than he really was. You all have had that experience I bet. They don't do it on purpose to trick us. They really do think their child is independent. Yet when you actually watch what they do, you see that they are giving moderate to maximal assist. This is sometimes true of assistants, too. So initially the parent in the pre test said that the child could dress Independently (for example) and when she had gone through the results of the initial SPM (pre test) and learned about his praxis issues, she had a better understanding about how much help she had been giving him. So in the time between the pre test and the post test, she had developed a more realistic understanding of his abilities and therefore began to encourage him to be more independent. Therefore although he was doing better in the post test, she was more realistic in her scoring. Does that make sense to you all? Any questions?*

4:28 PM [[Shahnoor](#)] Definitely makes sense. Would you say the best way to get the most accurate score is to get the parents to complete the test independently, or to sit with them and answer the questions together during an evaluation?*

4:29 PM [[Linda](#)] That's a good question. I have used other sensory profiles and sometimes will question a parent if I see that they do not see any problems and I do. What would you suggest?*

4:31 PM [[Diana Henry](#)] I always like to interview because I feel I get so much more info. The SPM was designed so you do NOT have to interview directly. It is best to let people tell you what they are experiencing as being real for them before stepping in. This is why it is good whenever possible to have as many raters complete the forms as you can, so you can obtain each person's perspective. Then you can have a conversation about what it all means. It is not necessary to have all the forms completed though if you do not have all the raters available. It just makes the SPM team collaboration that much stronger. Any questions about this?*

4:34 PM [[Sue](#)] I understand about getting different perspectives, but what happens when the parents report is significantly different than what we as a team is seeing in the school?*

4:37 PM [[Diana Henry](#)] Sue, that is where you can use the Total Sensory Scale Score to statistically compare the two scores. This is a unique feature of the SPM. Many of us have had the experience of hearing behaviors being so different at home than at school.

As authors, we decided it was important to be able to address this not from a "You are wrong, we are right perspective" but to be able to discuss as a team (home and school folks) why the child's behavior is so different in the two environments. It takes away the distrust (since this test was standardized with the same students in both home and school), which is another unique feature of the SPM, and makes space for a conversation to occur. Is it because there are more demands at school than at home? Is it because the school is more noisy than home? Is it because the child can take more sensory breaks at home, etc.? Does that make sense?*

4:42 PM [[Sue](#)] Yes, that does make a lot of sense! Sounds better than using the sensory profile for home and then the school companion for school where those two don't really compare. I didn't realize the SPM was standardized that way for home and school.*

4:42 PM [[carrence](#)] I love that it's standardized for home and school. It's great to see if there are differences. Leads to great conversations.*

4:42 PM [[Shahnoor](#)] I definitely see where you are coming from. However, in my setting we do not have the opportunity to use both forms, as we complete outpatient evaluations. If it is a kid that is picked up for regular treatment, then I think it would be helpful to see the whole picture.*

4:42 PM [[Diana Henry](#)] Working in my clinic, I always wanted to find out not only what was going on at home, but also what was going on in the school. Sometimes this was a challenge because it was difficult to get a clear picture of school performance if I was not there. I did like using the SFA in the schools and wanted to obtain the missing sensory piece in each of the environments. So with the SPM we designed it so it would be the same (Home and Main classroom) so they could be compared. I have found that if the school does not have a therapist, they are more than happy to have everyone fill out the form. And if the school has its own therapist, it is wonderful to collaborate with her/him as they too would like to get the info and collaborate with me. It is much easier because it is the same test. No longer us vs. them kind of scenario. And the outpatient OT learns about the challenges at school and also the great strategies they are already using. Does that make sense?*

4:44 PM [[Claudette](#)] What do you suggest when teachers/aides scores end up being skewed because of the child's behavior problems (i.e., refusal to comply, even though he can perform the task, is scored as fails to complete tasks with multiple steps)?*

4:45 PM [[Diana Henry](#)] It does become challenging when you see that answers are possibly skewed. Because the SPM also has questions and a scale for r Social Participation, there should be quite a few other instances where raters also noted the issues with behavior in the Social Participation category. This should stand out as you begin to do item analysis. It is important to not just depend on the score, but to take some time to compare the forms so you can understand the big picture. If social participation is what is influencing the performance, that should stand out. The SPM is really about sensory processing issues, so if the reason a child is not able to perform is because of

behavior, that should come through. The SPM can tell you not only if there is a sensory processing issue, it should be able to tell you when it is NOT a sensory based issue. Does that make sense?*

4:50 PM [[Claudette](#)] Yes. If the scores do show difficulty but it can be determined to be a behavioral based issue how do we state this in our findings and to the parents? Thanks!*

4:49 PM [[Linda](#)] Yes, and a big plus as it is an often asked question. *

4:49 PM [[Shahnoor](#)] Definitely, this is why I have used the SPM more than other sensory tests, not to mention that it is very user friendly for the parent and the therapist.*

4:49 PM [[carrence](#)] That's what is so great about his tool. I had a kid who everyone thought his problems were sensory based, but all of the sensory scores on the SPM were fine so even though he had difficulties with task completion and social participation, they were not sensory based considering the scores obtained.*

4:50 PM [[Sue](#)] That sounds promising...there are many times I feel it is behavioral and not sensory, sounds like the SPM will help with that.*

4:58 PM [[Shahnoor](#)] It does make sense. However, I find it very difficult to get follow through from some school therapists. I think the ones that don't feel like it is an us vs. them scenario are more than willing to assist. However, for those that feel threatened it is difficult to get the information that is necessary. I always try to see what the parent's main concern is. Is it truly school based or home based---then based on that, I will venture out one way or another. But I do understand how important it is to get the information from all parties, especially since the school therapists and teachers work with these children on a daily basis, versus in outpatient we will see them once or twice a week.*

4:59 PM [[rosalie](#)] I rarely have the opportunity to collaborate with an outpatient therapist. I am usually it. I see the benefit but I like the opportunity for collaboration home and school and varied school settings.*

5:00 PM [[Diana Henry](#)] I have found that I have felt threatened when I did not understand. I hope the SPM can also be used as a learning tool, not only for parents and educators, but also for OTs who may not have had the sensory background.*

5:00 PM [[carrence](#)] I think you need to have conversations with school therapists. Most outpatient therapists here end up telling us school therapists what we "should" be doing which doesn't go over well. An outpatient therapist really needs to understand how the school therapist works. We all don't operate the same.*

5:01 PM [[Sue](#)] I have had the opposite experience, with clinic OT making recommendations for sensory strategies for school without collaborating with me.*

5:01 PM [[carrence](#)] That too. And outrageous recommendations at that.*

5:02 PM [[rosalie](#)] I've had the same experience of a clinical OT coming to the school and telling the teacher how to set up her classroom and what to do for sensory breaks with no regard for the teacher. It was hard to deal with that situation as the school therapist.*

5:02 PM [[Diana Henry](#)] This is a great conversation to have: School services and Outpatient services.*

5:02 PM [[Shahnoor](#)] I see where you all are coming from. However, I think those therapists may not realize the difference between outpatient and school systems.*

5:02 PM [[carrence](#)] That's why I think it's important for the clinic therapist to understand how things work with the school therapist and at the school. All schools are also different.*

5:03 PM [[Claudette](#)] I believe that we should remember the differences between our 2 setting and try to support each other as much as possible.*

5:03 PM [[Sue](#)] I agree...maybe the SPM can be used for that purpose, if the clinic OT discusses the home component with the parents and then we discuss the school results.*

5:04 PM [[Diana Henry](#)] When we designed the SPM, we wanted to make a win-win situation between clinic based and school based services. BTW, that is why my email address as the AOTA SI communications liaison was "sis bridges." My mission was to bridge the gap between all including, schools and clinics. They are very different settings and both are VERY important in the lives of our children. I see it as two different cultures coming together to understand the challenges and the benefits of each setting.*

5:05 PM [[carrence](#)] Well said. And when you find someone who does want to collaborate, what a relief and how exciting it is. I find that so many clinic therapists seem to portray an attitude of we are the experts and you are just the school therapist.*

5:05 PM [[Shahnoor](#)] I think regardless of whether we are School or outpatient, we have to find strategies to work together. Ultimately it is the child that we should be focused on and I know it can be difficult at times, however the more collaboration that we complete the better it is for all the parties involved. I have always been willing more than a 100% to see any therapist's opinion on a child, however I don't feel I have had that be reciprocated at all. I do believe some of these are "biases," and maybe we (OT's) need to do a better job in understanding each others settings.*

5:06 PM [[carrence](#)] I had a great conversation just this week with a clinic therapist who really was very respectful of my opinion and I really felt wants to be on the same page with this kiddo. Doesn't happen often like that but I was excited. This therapist even explained to the parents that what happened in the clinic is very different than what would be happening at school. I just about fell over.*

5:06 PM [[Diana Henry](#)] I am happy to hear about the positive experiences and I feel certain that it will get better the more we can learn from each other.*

5:06 PM [[rosalie](#)] I completely agree with you, Diana, but unfortunately not everyone has a collaborative view at school or home.*

[[deanna](#) – inserted later] I try to view anyone working with a student/client as being part of the Team (parents, any private disciplines, school team, etc.) and everyone's input is important – rather than their being a dichotomy between the school and private sectors. Therapists and other professionals might be more familiar with a student/child in their particular setting, but in order to obtain the whole picture of a student, I think we need everyone's input/perspective.*

5:07 PM [[Diana Henry](#)] Have you read the book by Eckhart Tolle called the New Earth? He speaks about the cast system that exists in different cultures and also in our country, just a bit more subtle.

5:08 PM [[davina](#)] Can you give us the gist of the cast system for those who have not read it?*

5:09 PM [[Diana Henry](#)] I see the SPM as a possible way to get over the cast system mode of thinking i.e., we are better than them...Doctors are better than therapists, therapists are better than teachers, teachers are better than cafeteria workers, etc. I had an experience with a cafeteria worker who had completed the SPM and was complaining at the SPM team meeting that the student was making a mess because he was trying to 'drink' his Jello through one of the tiny juice straws. As a therapist, I was excited because I knew he needed the sucking oral motor activity He had very poor breath control, had poor scores in proprioception (Body Awareness Scale) and he was a sensory seeker. But it only took me a few minutes to realize I needed to honor what SHE was seeing and experiencing as being real for her. She was frantic about the mess. It was her job to keep it clean in the cafeteria. So by acknowledging where she was coming from instead of bullying my way through as the 'know it all', she and the team were able to discuss several strategies that would work for her as well as the student. Does that help you to understand what I meant by the cast system?*

5:14 PM [[carrence](#)] So what did you come up with?*

5:17 PM [[deanna](#)] Carrence, I attended Diana's SPM workshop (which is great) and there were so many ideas generated about this example that it would be too many to list here. I recommend her workshop.*

5:18 PM [[Diana Henry](#)] I bet you Carrence and many of you others could come up with great examples too.*

5:14 PM [[Linda](#)] I have worked both in a clinic and in schools. Took me a while to realize that we have to follow the LAW and that we are not mandated to Fix everything, but are there to support the child and teacher so the child can access her/his educational program. What a shock for a clinic based therapist. But the school therapist plays an incredibly exciting role and has unique challenges - we are on the teachers turf and, as Diana said, we have to respect that to implement change and help the student.*

5:17 PM [[lauren](#)] Diana I have used the same approach with many of the classroom teachers that I work with and noticed such a positive difference. Teachers want to feel heard and have their feelings validated. Then they will be more open to suggestions.*

5:18 PM [[Sue](#)] Diana, you mentioned the SPM team meeting...do you typically have a meeting with everyone who filled out the SPM? Is this the same as the team meeting with the family?*

5:20 PM [[Diana Henry](#)] Sue, When possible, I do try to meet with as many of those who completed the SPM as possible, because this is where and when the good exchanges begin...where the intervention ideas start to form. Where a music teacher may share what she is doing to support a student and the main classroom teacher may say that she does not have instruments, but she could move the student to an area where he can listen to music etc. It is great because I as the OT am not the one to 'tell people what they should be doing', but instead I am a facilitator in explaining how ideation and motor planning (Praxis) may be impacting the child's ability to play on the playground because she can't figure out how to start ...or how the child's poor proprioceptive feedback and sensory seeking needs are possibly causing him to push when interacting with others.*

5:25 PM [[Sue](#)] Makes sense. Do you do this meeting with the parents typically?*

5:27 PM [[carrence](#)] Diana can probably answer this better but I think the SPM is easier to use and interpret than the Sensory Profile. And you get target areas to work on. Isn't that great when you can facilitate a discussion and people come up with their own appropriate solutions? I have also used a chart format when reporting that identifies the activity, what sensory system it is addressing, and what outcomes (behavior changes) we might or hope to see. Helps people understand why we are deciding to do things.*

5:27 PM [[Diana Henry](#)] Carrence, I would love to see your chart!*

5:28 PM [[carrence](#)] I'll be glad to forward to anyone. I could put it on OT Exchange, too.*

5:28 PM [[Linda](#)] How much time does it take to complete the SPM? How much time to score? Is it difficult to analyze?*

5:47 PM [[Diana Henry](#)] It takes about 30 to 45 minutes for the parent to complete the Home Form and for the Main classroom teacher to complete the Main Classroom Form and then about 10 to 15 minutes max for the other environments (art, music, PE, Recess,

cafeteria and bus). Re: the time it takes to score (this is the best part. If you haven't seen our score form I know you will love it...much easier and faster than others). About 10 minutes. Re the time it takes to interpret: Now this is where you may take more time because you may want to do an item analysis and compare between environments. This is optional and quite helpful. Carrie's chart could be very helpful in putting all the scores together. Any other thoughts?*

5:50 PM [[carrence](#)] A comment as I was sitting here. Sensory is not my main area of interest although now since the word is out it seems to have reached epidemic proportions. But I feel so much more confident addressing it using this tool than I ever have before.*

5:51 PM [[Amy](#)] I LOVE THE SCORE FORM!!! I seem to struggle with interpretation some times. Without looking at her form I would have to agree.*

5:51 PM [[carrence](#)] I too love the score form. Brilliant idea with the carbon.*

5:52 PM [[Sue](#)] It sounds great, can't wait to order it!!*

5:52 PM [[Amy](#)] 100x faster to score and easy to score also when doing the calculations.*

5:53 PM [[lauren](#)] I agree.*

5:53 PM [[deanna](#)] I've been using the SPM since it was first published and I love it as well.*

5:53 PM [[Linda](#)] I agree. Looking forward to using it this fall. That's good to hear, Deanna.*

5:53 PM [[Claudette](#)] Make sure to tell whoever is completing the form to mark out their answer if they mess up and circle the new one instead of erasing. It will make your time much faster!*

5:54 PM [[Amy](#)] Good point, haven't mentioned that when I had people filling them out, I always just asked them.*

5:54 PM [[carrence](#)] I took the CEU credit information and got a copy of the test manual for myself. And I have always liked puzzles, that's why the interpretation is so exciting, especially when the pieces fit together.*

5:54 PM [[Diana Henry](#)] That's great Carrie. Good for you! Interpretation is always challenging for me and exciting...it is about putting the pieces of the puzzle together isn't it?...clinical reasoning. What is fun is working with everyone as not only is each child an individual and you have to address the sensory processing challenges, if he has some....but also each environment is unique with many possibilities.*

5:55 PM [[Diana Henry](#)] Before the chat ends today, I want to be sure to chat a bit about the upcoming SPM Preschool (2 to 5 years). We are presently (this week) finalizing our items for the new SPM preschool version for schools, homes, day care providers and clinics. We have already made a few changes in the Preschool version and we are open to feedback, ideas, needs and any other comments you would like to share so we can meet your needs. I thought you all might have some thoughts. Also, we will be doing our normative data collection this fall and if you work with that population, typicals or clinical cases, please email me at ateachabout@aol.com so I can put you on our list. It will be easy as there are less raters than the SPM...and WPS the publisher is very generous :-)*

5:55 PM [[carrence](#)] I would love to do it. And I have lots of preschools this year.

5:55 PM [[Sue](#)] This sounds great. I have some concerns about sensory issues in the little guys, who sometimes I feel is not always sensory, but just a kid being a kid. I only have a few preschoolers this year.*

5:55 PM [[Amy](#)] I just inquired a few days ago and I am looking forward to this and using on the preschoolers.*

5:55 PM [[Linda](#)] The therapists at our school are willing to do it as well-haven't heard back from you but hope to.*

5:57 PM [[Diana Henry](#)] Great. Many thanks. *

5:58 PM [[Claudette](#)] Diana, one more question that I mentioned earlier? How do you address in your reports or to the parents when it is not a sensory concern but one of behavior? *

5:58 PM [[Diana Henry](#)] I feel that it is our responsibility to be ethical and tell what we know to be true. I also think it is important to help the parents understand why it does not seem to be a sensory based issue, although sometimes sensory strategies can also help...i.e., when a child is in rage /fight or flight, using calming sensory strategies can help too. What is nice about the SPM is that it gives you the ability to show the Social Participation scores as being HIGH (not good) and the sensory scale scores as LOW (within typical range) . This is on a graph so they can see this. We then have the responsibility to not drop the ball, but to make suggestions/ recommendations for further testing to determine what is driving the behavior and to develop appropriate strategies for the environments that will support the student. As I said these could still include some sensory based strategies.*

6:10 PM [[deanna](#)] It's hard to believe that we've chatted for more than 2 hours. Thanks again for participating.*

6:10 PM [[Diana Henry](#)] Good night everyone...and good luck!*