

Mable Therapy Case Study - Child B



Clinical Details

- Age: 5
- Diagnosis: Autistic Spectrum Condition
- Sensory processing disorder
- Attention and listening difficulties
- No functional Language
- Some echolalic phrases



Risk Factors

- · High level of clinical need
- Affecting Mum's mental health
- Not accessing an adequate level of support through NHS
- Affecting his participation in everyday activities
- Affecting his access to learning

Mable Timeline

Gather referral information and take case history

Referral made, by Child B's Mother. The initial consultation was booked within 48 hours. Assessment report was. written and received by parents 2 days following the initial appointment

Assessment Session

Assessment information was gathered through interview with parents, discussion with school placement and through assessment subtests administered in the initial session.

Theraputic intervention - 40 weeks

Ongoing therapy to address multiple targets including parent empowerment, development of

Impact and outcomes

End of block impact report addressing SALT targets, learning goals and impact on wellbeing.



Mable Therapy Case Study



Referral Information

Child B is a private referral. He is age four and has a diagnosis of Autistic Spectrum Condition. He receives Speech and Language Therapy support at school from the NHS, which includes visits three times per year. His Mother would like more support and so-referred to Mable Therapy.



Assessment

It was unclear from referral information whether Child B would engage with therapy sessions online, so we began with a trial session. He loved it, he was very engaged and motivated, and mum reported it was the only therapeutic intervention she had tried that held his attention for longer than a few minutes. Mable matched child B with Martha because of his complex profile. She has a history of working in the Autism diagnostic service at Leeds and the Hearing impairment and complex needs Team at Guys and St Thomas' in London. Child B was assessed dynamically over several shorter sessions to establish a baseline. A comprehensive report was written and shared with parents, school and his NHS Speech and Langauge Therapist.



Therapy

Therapy has focused on direct work with child B to increase his vocabulary, word knowledge and functional communication. Martha has also worked closely with his Mum to educate her about the nature of his diagnosis and the best way to support him at home. Martha also advocated for Child B in virtual school meetings. Child B has had weekly sessions with Martha for 40 weeks.



Outcomes

Child B has more functional communication; he now greets people he knows, requests activities within the sessions using short phrases, and participates in back and forth conversational turns. His echolalic behaviours have reduced as his language skills have developed. Child B's Mum feels "more empowered" she has joined several support groups for parents of children with an Autism diagnosis. She can advocate for her son's needs and is more accepting of his prognosis.

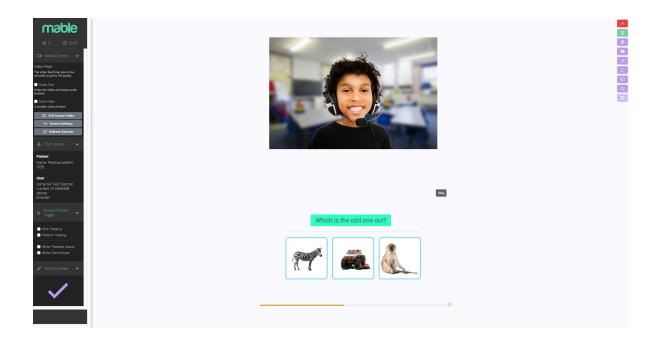


Mable Therapy Case Study



Taxonomic sorting - Odd one out

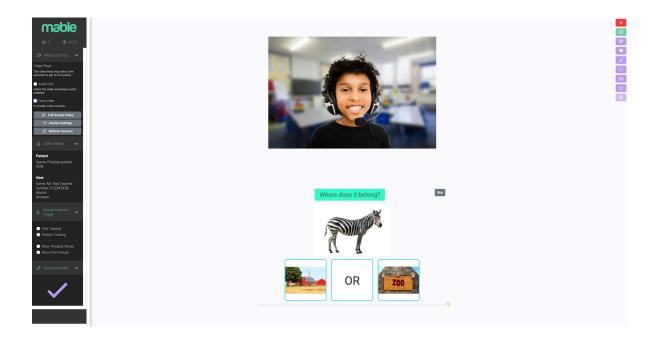
We are developing an understanding of hypernyms and hyponyms, especially concerning noun categories; in this exercise, we teach Child B about taxonomic sisters (Words at the same level in a taxonomy) and belong to the same semantic category of words.





Category sorting - Where does it belong?

Category sorting games help strengthen understanding of semantic links and strengthen neural networks to assist in word retrieval.



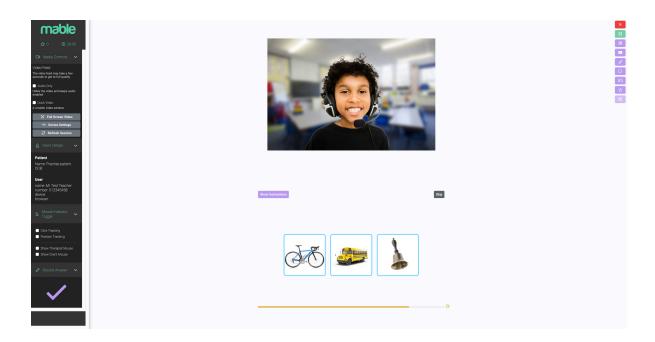


Mable Therapy Case Study



Identifying an object from a description of its function, properties and attributes

In this exercise, we have developed Child Bs semantic knowledge to the point where he recognises the function. Attributes, properties that categorise words and can listen to a description, retain and process the information and select a correct response from a choice of four. (Therapist asks - show me something you ride)





Parent support

In one of our initial sessions, we discussed that although Child B did not use many words, he communicated in several ways using his body language, eye contact, leading and vocalising. T was important for mum to observe and recognise these communicative behaviours.

