

## Physical Needs and Access

- ◇ Fine motor skills may be limited due to carpal tunnel syndrome
- ◇ Support for all personal care/ monitor temperature control
- ◇ Assistance with carrying large items such as school bags and lunch trays
- ◇ Ensure equipment, furniture, academic resources and personal belongings are height accessible e.g. pegs/drawers/toilet/seating due to joint contractures in shoulders, joint stiffness and short stature
- ◇ May need specialist seating/equipment to ensure posture is maintained may require specialist wheelchair
- ◇ Access around the school if still mobile—steps, stairs, heavy doors. Rails may be needed e.g. in toilet/ stairs. Lever taps. Caution with sloped ground outside.
- ◇ Quiet area to rest with access throughout the day, stamina levels to be monitored
- ◇ Planned group movement around the school e.g. last/first to leave classroom and no queuing
- ◇ Emergency evacuation plan
- ◇ 1:1 support to keep safe and maximise learning
- ◇ Monitor eating and drinking as food may be crammed in mouth risk of choking
- ◇ If constantly chewing consider giving them a chewy toy
- ◇ Emergency anaesthetic plan due to risk
- ◇ Regular Physiotherapy and Occupational Therapy reviews
- ◇ Communication Book between home and school

## Future Needs

- ◇ Cervical Fusion and other possible surgery (hernia, carpal tunnel)
- ◇ Enzyme replacement therapy
- ◇ Regular reviews due to changing needs
- ◇ Behaviour and learning will deteriorate
- ◇ Hearing and vision can be affected, so be mindful of changes and monitor
- ◇ Condition is progressive and degenerative

### MPS II within School

**Guidance notes only depending on the severity of the disease on the individual**

### Writing Provision

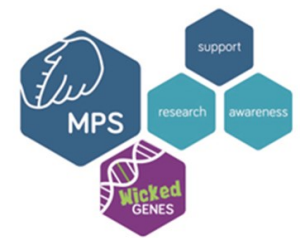
- ◇ Carpal Tunnel Syndrome affects grip and causes pain - clawed hands
- ◇ Grips for pencils/chubby pencils
- ◇ Short periods of writing
- ◇ Early access to ICT and touch typing/ Provision of laptop/I pad for sole use

### PE and Physical Exercise

- ◇ Alternative provision for contact sports—Awareness of damage to portacath if fitted
- ◇ Easily breathless due to rigid lungs and narrow airways

## PE and Physical Exercise

- ◇ No trampolining or forward rolls - potential damage to cervical spine
- ◇ Supervision during group play
- ◇ Seek advice from specialist physiotherapist
- ◇ Swimming and Hydrotherapy can be beneficial and possible substitute for PE lessons



## Curriculum and Lessons

- ◇ Consideration in lesson planning—integration with peers—mindful of their needs—activities differentiated when needed
- ◇ Educational activities to focus on maintaining fine and gross motor skills
- ◇ Behavioural difficulties/aggression/ unaware of danger, to be managed to keep peers and themselves safe—Hyperactivity
- ◇ MPS II children need repeat learning due to short concentration spans - neurological issues. Differentiated lessons and learning. The use of 1:1 support in class
- ◇ Routine and familiarity helps with learning, any changes to be introduced slowly
- ◇ Emphasis on helping to maintain skills learnt
- ◇ Emphasis on maintaining communication skills/sign language
- ◇ Physical limitations mean they tire easily.
- ◇ Positioning in class with easy visual access to board and teaching due to possible hearing /sight issues