Photo

*Use the STARS Sensory Checklist and home and school to regularly update this document with the young person where appropriate.*

*Only* **Key** *information relating to the young persons sensitives needs recording. The profile is a snapshot to support.*

*The document should be shared with all staff who work with the young person so that strategies can be implemented effectively.*

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| --- | --- | --- | --- |
| **Sensory Stimuli** | Key hypersensitivities (I will avoid) | Key Hyposensitivities (I will seek) | Strategies to help me in school |
| **Sight** | * I don’t like bright lights * Displays with bright colours hurt my eyes |  | * **Let we wear my sunglasses if I need to** * **Do not make me work in the IT room with the bright lights** |
| **Smell** | * The smell of some foods like fish and egg make me feel sick | * I like to sniff people * I like the smell of washing powder and perfume | * **Let me have my blanket from home with me to smell when I need to** * **Check with Mrs White before food tech if we are using egg or fish and if so, let me do an activity outside of the classroom** |
| **Taste** | * I only like certain foods and will only eat my packed lunch from home |  | * **Do not force me to try new food if I do not want to, it makes me very stressed** * **Let the dinner ladies know that I should only eat my packed lunch** |
| **Hearing** | * Loud noises hurt my ears * I do not like going to assembly because of the music and noise * I can’t concentrate in lessons if it is too noisy and I can get cross with my friends for shouting |  | * **Let me wear my ear defenders when I need to** * **Allow me to sit outside the assembly hall with the door open and my ear defenders on. I will sometimes go in if it is quiet enough** * **I have a ‘break’ card that I will show you if I need some time alone out of the classroom. I will come back when I am ready** * **Teachers can remind my friends to be quieter and not shout out in the lesson** |
| **Touch** |  | * I like to rub and squeeze different fabrics * I touch other people a lot and will stroke their arms if my head is buzzing | * **Let me have my blanket from home that I can stroke when I need to** * **Remind me with your ‘hands down’ symbol that I should try not to stroke other people and instead give me my blanket** * **Give me lots of things to touch and squeeze during my lessons** * **Let me keep my box of sensory toys nearby** |
| **Balance (vestibular)** |  | * I like to spin | * **Allow me to use my break card to go for a movement break when I need to** |
| **Proprioception (body/space awareness)** | N/A | N/A |  |
| **Interoception (internal body awareness i.e. thirst, needing the toilet, pain)** |  | * I find it hard to tell if I need to use the bathroom | * **You can remind me verbally to try and go to the bathroom** * **Put my ‘toilet’ symbol at regular intervals on my visual timetable** |