



Using Specialist Seating in Schools or Settings

Please ensure that you have read and understood the manufacturer's guidelines for the child's chair. **Other things to consider:**

Daily - (every time the child goes into their chair) check

- Their bottom is right back in the chair
- The child is sitting with hips and knees in the same position on both sides.
- All recommended straps are done up firmly and securely as demonstrated by the Occupational Therapist (OT).
- If applicable, the tilt of the chair is right for the activity eg reclined for resting, upright for eating. The tray is on if it is required to help the child sit up well (should only be removed if the chair is sat at a table instead.) if you are not sure, ask the OT. N.B. Armrests should

be at elbow height to allow forearms to be straight and parallel with thighs and the floor.

• If applicable, change the height of the chair to suit the activity or table height.

Weekly- Checks that should be made include:

- Ensure all straps are set to the right size (firm as they loosen with use)
- Ensure all handles/screws are tightened so that they don't loosen and change the position of parts of the chair over time.
- Tighten screws on footplates and make sure they haven't dropped with the weight of the child's feet. (ask OT or see user manual if unsure)

NB. Unless told otherwise, the child's feet should rest flat on the foot rest and at a height that allows their knees to be bent to 90 degrees flexion .

If at any time you become concerned about

- a) the condition of any parts of the chair, including straps
- b) the child's position or fit in the chair
- c) broken parts
- d) changes in the child's seating needs
- e) redness or rubbing caused by equipment/straps
- f) pain caused by equipment/straps
- g) you require further advice from O.T

Then please alert the OT department straight away and they will liaise with Millbrook if appropriate.

The chair will be reviewed by the Occupational Therapy Service in 6 – 12 months to check for growth and positioning.

NB. Only adjust parts of the chair if they have moved out of their original position as set up by the OT e.g. foot plate dropping, arm rest dropping so that the tray doesn't fit. All other adjustments should be made only by Occupational Therapy.