HOME PROGRAMME · WEEK 1

Aarav's home programme

Behavioural Action Plan & Insights
For Aarav, 4 years 3 months

Provisional · pending clinical review



7
ACTIVITIES THIS WEEK

about 45 min
TIME EACH DAY

In 4 weeks
REVIEW

Inside this programme

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Prepared	10 October 2026
Reference	NUR-SAMPLE-0001

This programme was prepared for Aarav, aged 4 years 3 months, from answers given by a parent or caregiver. It turns what stood out into a week of short, practical activities at home, in plain language, a starting point for you and your care team, not a diagnosis.

At a glance

Where each area sits, and the plan for this week.

Here is where each area sits, from what you told us.

AREA	MEETING MILESTONES	KEEP MONITORING	NEEDS ATTENTION
Milestones		● Keep monitoring	
Everyday independence			● Needs attention
Connecting & communicating		● Keep monitoring	

Your plan this week

Hands and body	**1 activity**
Senses and calm	**2 activities**
Focus and routines	**2 activities**
Connecting and talking	**2 activities**

Parent-reported strengths

Curious · Playful

In your words: “Gets very upset when the morning routine changes and covers both ears at the mixer.”

How we chose the activities

The areas that stood out most were Routines and coping with change, Senses, Everyday independence, Talking and understanding. Each activity is matched to one or two things you told us and pitched one step below where Aarav is now, so it succeeds early.

PROVISIONAL; PENDING CLINICAL REVIEW

Notes for your care team

A summary you can take to a paediatrician, therapist or teacher.

Parent/caregiver-reported screening for Aarav (4 years 3 months, 51 months) on 10 October 2026. Screening items are derived from established developmental scales; results support conversation and care planning and are not a diagnosis.

Milestones · closer look	**Keep monitoring**
Everyday independence · closer look	**Needs attention**
Connecting & communicating · closer look	**Keep monitoring**

Your child needs professional support. Please meet your child's doctor or a child development specialist. Meanwhile, you can start this plan at home.

Compared with children of the same age, your child is not yet doing these things

COPING	flap their hands, rock, or spin around
SENSES	stare into space for long periods, not noticing what is around them
SELF-CARE	eats neatly and uses a spoon or fork well
TALKING	tells you when hungry, cold, or tired
COPING	insist on carrying an unusual object, like a string or bottle cap
SENSES	have trouble following a moving object, like a ball, with their eyes
SELF-CARE	buys something and brings back the item and the right change
TALKING	mix up 'I' and 'you', like saying 'you want' for 'I want'
COPING	restless and unable to sit still
SENSES	look at things in unusual ways, like sideways or very close up
SELF-CARE	travels alone to familiar places nearby
TALKING	miss what people really mean, taking their words too literally

PROVISIONAL: PENDING CLINICAL REVIEW

Goals for the next four weeks

Small, measurable steps. Check them together when you review the tracker.

1 Coping with change

Routines and coping with change

You told us: "How often does your child flap their hands, rock, or spin around?" often.

TARGET Gets through one everyday change with a warning and one calm-down step.

HOW TO TRACK Note the change, the warning given, and what helped.

2 Calmer with sounds, touch and movement

Senses

You told us: "How often does your child stare into space for long periods, not noticing what is around them?" often.

TARGET Uses one calming activity before a hard moment, with a reminder, on most days, and long upsets become shorter.

HOW TO TRACK Each evening, note any big upset, how long it lasted and what helped.

3 More done on their own

Everyday independence

You told us: "Eats neatly and uses a spoon or fork well" not yet.

TARGET Completes one chosen daily step (for example putting on shoes or washing hands) alone on 5 of 7 days.

HOW TO TRACK A sticker on the routine chart for each day.

4 More ways to ask and tell

Talking and understanding

You told us: "Tells you when hungry, cold, or tired" no.

TARGET Asks for something they want with a word, sign or gesture at least 5 times a day.

HOW TO TRACK Tally marks on the fridge sheet during meals and play.

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Your daily routine

This week's activities, placed in times you already have.

Fit the activities into times you already have. The same times each day matter more than doing a lot, and on a busy day one activity is enough.

Morning

Wake-up and getting ready — about 15 min

Body Map Drawing: Building Awareness of Body in Space

Use a picture checklist for getting ready; let them do the last step alone.

Through the day

At the moment each one is for — about 5 min

Three Lines a Day: Finding the Pattern

The Same Warning, Every Time

After school

Table time — about 12 min

Fat Crayon Colouring: Building the Tripod Pencil Grip

Play time

Games together — about 10 min

Show and Tell Moment: Sharing an Experience with a Comment

Want + Object: Building the First Word Combination

Evening

Wind-down and check-in — about 8 min

Lotion Hands: Gradual Touch Tolerance on Hands

Two minutes: tick the tracker together and name one thing that went well today.

Bedtime

Calm routine

Same order every night: bath or wash, one story or quiet music, lights low.

Give a sticker for each activity tried, not only for success. Five stickers earn a small treat you choose together (a trip to the park, a favourite game, extra story time).

Hands and body

Occupational-therapy style activities: short, playful practice of the hand and body skills that stood out, built into things you already do.

THIS WEEK'S GOAL

Build the hand and body skills that stood out this week, at Aarav's pace (4 years).

FOCUS

Everyday independence

Activities in this section

1. Fat Crayon Colouring: Building the Tripod Pencil Grip

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Fat Crayon Colouring: Building the Tripod Pencil Grip



Where	**Table time**
Time	**12 minutes**
Level	**3 of 5**
You need	**Jumbo or triangular crayons (triangular cross-section naturally positions fingers into tripod), Large colouring sheet with thick outlines (simple shapes: circle, square, star)**

Chosen from your answers: “eats neatly and uses a spoon or fork well” not yet.

How to do it

1. Model the tripod grip: crayon rests on the middle finger, pinched between thumb pad and index finger pad. Show the child slowly. 'Thumb here, pointer here, resting on this finger.'
2. Help the child position their fingers; do not force. The triangular crayon makes this easier as each flat face accommodates one finger.
3. Start with large, open areas to colour; direction and staying inside lines do not matter yet. The grip is the target.
4. Every 2 minutes, do a 'grip check': ask the child to hold up the crayon without moving. Check: are three fingers in position? Adjust gently if not.
5. Praise grip, not artwork: 'Look at how you're holding it; perfect three-finger grip!'
6. If the child fatigues and grip deteriorates: stop, rest for 2 minutes, and resume. Do not correct grip more than twice in a row.

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WHAT TO LOOK FOR

Child spontaneously picks up the crayon with a tripod grip without being reminded, the grip has become the natural default

WHEN IT FEELS HARD

Make the task smaller, one step, one minute, and help hand over hand, then fade the help.

Take care: Do not correct grip during colouring in a stressful way, a gentle physical prompt, not a verbal reprimand

Senses and calm

Sensory-integration style moments: predictable input for the body at the same times each day, so big feelings have somewhere to go.

THIS WEEK'S GOAL

Give Aarav's body the input it needs at the same times each day, gently (low intensity).

FOCUS

Routines and coping with change · Senses

Activities in this section

1. Body Map Drawing: Building Awareness of Body in Space
2. Lotion Hands: Gradual Touch Tolerance on Hands

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Body Map Drawing: Building Awareness of Body in Space



Morning moment

Where	**Floor play**
Time	**15 minutes**
Level	**3 of 5**
You need	**Large roll of paper or several taped A3 sheets (long enough to trace the child's body), Crayons or markers, A mat or clean floor**

Chosen from your answers: “flap their hands, rock, or spin around” often; “restless and unable to sit still” often.

How to do it

1. Ask the child to lie down on the large paper sheet. Trace their full body outline with a thick marker. This is playful; narrate: 'I'm drawing your arm... your leg... your head!'
2. The child stands up and looks at their outline. Ask: 'Is this you? Let's check, where are your hands? Show me on the drawing.'
3. Together, draw in body parts the child names; eyes, belly button, knees. This builds body schema vocabulary.
4. Now the proprioceptive awareness activity: call out a body part. 'Touch your left knee!' The child touches without looking. Then check against the drawing.
5. Add movement: 'Reach both hands above your head; freeze! Now where are your hands? Point to them on the drawing.'
6. End with a full-body squeeze: the child hugs their arms across their chest, then wraps arms around their legs; proprioceptive feedback to all major joints.

PROVISIONAL — PENDING CLINICAL REVIEW

WHAT TO LOOK FOR

Child narrates their own movement: 'My right arm is up, my left leg is bent'; spontaneous proprioceptive self-reporting

WHEN IT FEELS HARD

Shorten it, lower the intensity, and stop while it still feels good. Never insist.

Take care: If the child is strongly opposed to being traced, the caregiver can model by tracing their own body first

Lotion Hands: Gradual Touch Tolerance on Hands



Evening moment

Where	**Calm corner**
Time	**8 minutes**
Level	**1 of 5**
You need	**Unscented moisturising lotion (fragrance-free), Small towel, A preferred activity or screen time as a co-regulator during the session**

Gives Aarav's body steady, predictable input at the same moment each day.

How to do it

1. Give the child a heads-up: 'We are going to put lotion on your hands. You can say stop any time.' Honour all stop signals immediately.
2. Apply a small amount of lotion to your own hands first and show the child. Let them watch and touch your hands if they choose.
3. Ask: 'Shall I do your hands now?' Begin with the back of the non-dominant hand, the least sensitive area.
4. Use firm, slow strokes (not light feather-touch, which is more alerting). Stroke from wrist toward fingers, 3 times.
5. Pause, check the child's face. If calm, move to the palm. If distressed, stay on the back of the hand or stop.
6. Finish with gentle joint compression: hold the hand flat between both of yours and press firmly for 5 seconds. This is organising and often calms the sensory system after touch input.
7. End with a small reward; preferred item, praise, or transition to a loved activity.

PROVISIONAL: PENDING CLINICAL REVIEW

WHAT TO LOOK FOR

Child keeps hand still or voluntarily extends the other hand for lotion without being asked

WHEN IT FEELS HARD

Shorten it, lower the intensity, and stop while it still feels good. Never insist.

Take care: If the child has known skin conditions, allergies, or open wounds, consult a physician before applying lotion

Focus and routines

Behavioural-approach style routines: one instruction, one step, one short block at a time, so starting, waiting and stopping get easier.

THIS WEEK'S GOAL

Practise one routine at a time with Aarav: starting, waiting and stopping.

FOCUS

Routines and coping with change

Activities in this section

1. Three Lines a Day: Finding the Pattern
2. The Same Warning, Every Time

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Three Lines a Day: Finding the Pattern



Where	**Calm corner**
Time	**5 minutes**
Level	**4 of 5**
You need	**Your phone, or a sheet on the fridge**

Chosen from your answers: “hit, bite or push others without a clear reason” often; “have tantrums, like screaming or dropping to the floor” often.

How to do it

1. For one week, write three lines each evening about the hardest moment.
2. Line one: what happened in the five minutes before.
3. Line two: what your child actually did, plainly enough that someone else would recognise it.
4. Line three: what you did straight afterwards, honestly.
5. At the end of the week, read them together and look for the routine that repeats.
6. Take the notes to any appointment; they are more useful than a description.

WHAT TO LOOK FOR

A pattern becomes obvious that nobody had noticed while living it

WHEN IT FEELS HARD

Make the step smaller and the time shorter, keep your words the same each time, and stop while it is still going well.

Take care: Record one behaviour, not everything

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The Same Warning, Every Time



Where	**Calm corner**
Time	**5 minutes**
Level	**2 of 5**
You need	**A timer, or nothing at all**

Chosen from your answers: “have tantrums, like screaming or dropping to the floor” often; “get very upset when routines or the way things are arranged change” often.

How to do it

1. Pick the transition that causes the most trouble, such as a screen going off.
2. Decide one sentence and keep it word for word: "Five more minutes, then we stop."
3. Give it at five minutes, then again at one minute. Never more than twice.
4. When the time is up, follow through without restating the reason.
5. Name how they handled it, not just that they did: "You stopped when the timer went."
6. Use the identical wording tomorrow.

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WHAT TO LOOK FOR

They start winding down at the first warning rather than at the end

WHEN IT FEELS HARD

Make the step smaller and the time shorter, keep your words the same each time, and stop while it is still going well.

Take care: Do not give a warning you are not going to follow through on

Connecting and talking

Behavioural-approach style games: tiny back-and-forth exchanges that make looking, sharing and asking worth it.

THIS WEEK'S GOAL

Turn everyday moments into short back-and-forth exchanges: tells you when hungry, cold, or tired.

FOCUS

Talking and understanding

Activities in this section

1. Show and Tell Moment: Sharing an Experience with a Comment
2. Want + Object: Building the First Word Combination

PROVISIONAL: PENDING CLINICAL REVIEW

Show and Tell Moment: Sharing an Experience with a Comment



Where	**Floor play**
Time	**10 minutes**
Level	**3 of 5**
You need	**A short, novel video clip (30–60 seconds) on a tablet; something surprising or funny: animals doing unexpected things, bubbles, silly sounds, Tablet or screen**

Chosen from your answers: “tells you when hungry, cold, or tired” no; “miss what people really mean, taking their words too literally” often.

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How to do it

1. Sit side-by-side with the child. Start the video clip without announcing it. Watch it together.
2. During the video, model shared reference: at a surprising moment, look away from the screen at the child's face, make an expression (surprised, amused), then look back at the screen.
3. When the clip ends, say: 'Wow; did you see that?' Pause. Wait for the child to respond or look at you.
4. If the child comments or looks at your face to check your reaction: celebrate it warmly. 'You're telling me about it! Yes, that was so funny!'
5. Replay the clip. This time, before a key moment, say: 'Watch this part...'; setting up anticipation for a shared reaction.
6. Record: how many times did the child look at your face during or after the video (not to request a replay, but to share the experience)?

WHAT TO LOOK FOR

Child points at the screen or says something like 'again!' or 'look!' while glancing at your face; evidence of wanting to share the experience

WHEN IT FEELS HARD

Follow what your child is already doing, wait longer than feels natural, and celebrate any attempt.

Take care: Use only calm, age-appropriate content; avoid videos that may over-arouse or distress

Want + Object: Building the First Word Combination



Where	**Mealtime**
Time	**10 minutes**
Level	**5 of 5**
You need	**3 preferred items the child can already label with one word, A small barrier or cover to create a requesting context**

Chosen from your answers: “tells you when hungry, cold, or tired” no; “mix up 'I' and 'you', like saying 'you want' for 'I want'” often.

PROVISIONAL: PENDING CLINICAL REVIEW

How to do it

1. Place one preferred item behind a small barrier (a book standing upright, or a box). The child can see it but cannot reach it.
2. Wait. When the child reaches, points, or looks at you: model the two-word phrase clearly: 'Want ball.' Say it once. Do not repeat.
3. Wait 5 seconds. Reward any approximation, 'wan ba', 'want', 'ball', with the item plus the complete phrase modelled back: 'Yes! Want ball!'
4. Once the child uses a two-word phrase spontaneously: up the criterion. Do not give the item for a single word alone; wait, expectant face, tap your lips gently to signal 'there's more.'
5. Practise across all 3 items in the session, rotating randomly.
6. Generalise in daily life: before giving a snack, drink, or screen time, wait for the two-word phrase naturally.

WHAT TO LOOK FOR

Child uses the phrase across contexts not trained in sessions, at dinner, with grandparents, at school, without prompting

WHEN IT FEELS HARD

Follow what your child is already doing, wait longer than feels natural, and celebrate any attempt.

Take care: Do not introduce this exercise until the child has at least 5 spontaneous single words, the component words must exist before they can be combined

Fridge sheet

Keep this on the fridge or on your phone for the moments that are hard.

WHEN	SAY	HELP THEM	THEN
Big frustration or meltdown	**"I can see this is hard. I'm right here."**	Breathe together or go to the calm corner	Talk about it later, when calm
A change to the usual plan	**"In five minutes we are going to stop and go out."**	A warning, the same words each time	Name how they coped, not just that they coped
Upset by noise, touch or crowds	**"Too loud? Let's take a break."**	Ear cover, a quiet corner or a tight hug if wanted	Calm voice; return when ready
Can't sit still before a task	**"Let's do our wall push-ups first."**	Two minutes of heavy work (push, pull, carry)	Start the task straight after
Stuck in a daily routine step	**"First shoes, then park."**	Do the last step on their own	Sticker on the routine chart

PROVISIONAL: PENDING CLINICAL REVIEW

For Aarav's school

Small adjustments that match what you are doing at home.

Share this page with the class teacher, special educator or school counsellor. Small adjustments at school work best when they match what you do at home.

WHAT TO ASK FOR	WHY IT HELPS
A warning before changes to the timetable	Most of the upset is about the surprise, not the change itself.
A quiet place to go when it gets too much	Leaving early beats being sent out later.
A quiet spot to calm down, and warning before loud events	Noise and crowds can overwhelm; a plan prevents upsets.
A quiet fidget (stress ball, textured strip) during seated work	Gives the body input without disturbing others.
A visual checklist for class routines (bag, tiffin, homework)	Builds independence with the same steps as home.
Short, one-step instructions and a picture or written reminder	Helps them understand and follow the class plan.

PROVISIONAL: PENDING CLINICAL REVIEW

When to get more help

Signs to act on, and what to do.

IF YOU NOTICE	WHAT TO DO
Loses a skill they already had (words, walking, toileting)	See your paediatrician soon; do not wait for the four weeks.
Any sudden change in health, sleep or behaviour that worries you	See a doctor promptly and take this programme with you.
Everyday changes still cause big upset after four weeks	See your paediatrician or a child psychologist.
Reactions to sound, touch or food stop daily life (meals, bathing, school)	Ask for an occupational therapist with sensory experience.
Daily routines still need full help after four weeks	Ask an occupational therapist about next steps.
Not using new words, signs or gestures after four weeks	Ask for a speech and language therapy assessment.

Four weeks is a good time to review. If something on this page happens sooner, do not wait.

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Who can help

The people most likely to help with what stood out, and what to ask them.

Paediatrician or family doctor

Looks at overall health and growth, and can refer you on.

"Here is our home programme; is there anything else we should check?"

Occupational therapist

Helps with hand skills, body movement, senses and daily routines.

"Can you check hand skills and sensory needs, and adjust these activities?"

Speech and language therapist

Helps with understanding, talking and other ways to communicate.

"How can we build more words and gestures at home?"

Child psychologist

Helps with attention, behaviour, feelings and coping skills.

"What routines and rewards would help focus and coping at home?"

Special educator

Adapts learning and classroom routines to how your child learns best.

"Which classroom adjustments would help, and how can home match them?"

You

You are the link between home, school and every professional. You know your child best.

Bring this programme and your tracker to every appointment.

PROVISIONAL: PENDING CLINICAL REVIEW

Four-week tracker

Tick a box each week you tried the activity. Bring this page to your next appointment.

Activity	Week 1	Week 2	Week 3	Week 4
Fat Crayon Colouring: Building the Tripod Pencil Grip	☐	☐	☐	☐
Body Map Drawing: Building Awareness of Body in Space	☐	☐	☐	☐
Lotion Hands: Gradual Touch Tolerance on Hands	☐	☐	☐	☐
Three Lines a Day: Finding the Pattern	☐	☐	☐	☐
The Same Warning, Every Time	☐	☐	☐	☐
Show and Tell Moment: Sharing an Experience with a Comment	☐	☐	☐	☐
Want + Object: Building the First Word Combination	☐	☐	☐	☐

What to watch this month

Each day, note one moment when Aarav managed a step alone, one moment that was hard, and what helped.

What I noticed

Week 1

Week 2

Week 3

Week 4

PROVISIONAL: PENDING CLINICAL REVIEW

A note for you

Small, regular practice at home is one of the most useful things a family can do. You do not need to do everything on these pages; pick one or two activities, fit them into your day, and build from there.

Celebrate the small wins: every sticker, every try, every calm moment counts. Hard days are part of it; come back to the plan the next day.

Look at the tracker together after four weeks. Keep what helped, drop what did not, and share what you noticed with your care team.

With you along the way: the Nurture team

PROVISIONAL: PENDING CLINI



Care-team notes and next steps

What each area suggests, how this programme was chosen, and where to go from here.

Care-team notes

Milestones: Parent reports a small number of age-expected skills not yet present for the current age band; earlier band largely intact. Suggest review at the next routine visit if unchanged after four to six weeks.

Everyday independence: Parent reports a notable lag in everyday independence relative to age across more than one area. Suggest a developmental review; an occupational-therapy or adaptive-skills assessment may be appropriate.

Connecting & communicating: Parent reports some differences in social relating, communication, behaviour patterns or sensory responses; fuller rating in the middle range. Suggest monitoring, discussion at the next visit and re-screening in two to three months.

Suggested next steps

1. Try the home activities for four weeks and note what you observe.
2. Share this report with your paediatrician, therapist or teacher.
3. If this area is marked Needs attention, ask your care team whether a formal assessment is appropriate.

PROVISIONAL: PENDING CLINICAL REVIEW

About this programme

It is not a diagnosis and does not replace an assessment by a qualified professional. If you have concerns about your child's development, share this report with your paediatrician or care team.

Activities come from a curated library of occupational-therapy, sensory-integration and behavioural approaches, chosen by fixed rules from what stood out in the answers. Wording is provisional pending clinical sign-off. Stop any activity that upsets your child and tell your care team.

Items are original screening wording inspired by common developmental constructs, not licensed proprietary forms. Bands are this product's wording, not publisher cut-offs.

Programme summary

Planner	**nurture-2026-10-02.2 · starting level 3**
Activities	**ot_tripod_grip_01, si_proprioceptive_awareness_01, si_tolerate_light_touch_01, aba_abc_notes_01, aba_transition_warning_01, aba_shared_reference_01, aba_two_word_request_01**
Sensory intensity	**low**
Reference	**NUR-SAMPLE-0001**
Prepared	**10 October 2026**
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