

## Dyspraxia Initial Checklist

This checklist only provides an indicator as to whether a student is experiencing difficulties associated with dyspraxia. An educational psychologist, occupational therapist or speech therapist will usually undertake the formal diagnosis of dyspraxia and suggest strategies to support the student. Dyspraxia is closely related to other specific learning difficulties and so a broader assessment for Special Educational Needs is often required should they be identified as presenting with dyspraxia-type difficulties. Ideally, the checklist should be completed collaboratively by two or more staff.

Student		Date		Staff	
---------	--	------	--	-------	--

This student has been known to staff for \_\_\_\_\_ weeks / months.

	yes	no	unsure
1. is noticeably clumsy / has poor coordination.			
2. has poor posture.			
3. walks and / or runs, hops, skips awkwardly.			
4. experiences significant difficulty in catching / throwing games, struggles to ride a bike etc.			
5. presents with observable lateral confusion i.e. writes with left hand, kicks a football with right foot etc.			
6. has a poor sense of direction, struggles to understand 'just behind', 'in front of' etc.			
7. has a history of speech and language problems.			
8. struggles to remember a sequence of instructions, routines etc.			
9. quickly forgets newly learned skills (poor short term / working memory).			

10. is working at a significantly lower reading and/or spelling level to that of their peers (2years +).			
11. has difficulty writing fluently – usually use to being unable to hold a pen or pencil properly.			
12. makes mistakes when writing letters – especially letter reversals, confused starting points, irregular size.			
13. experiences difficulty in dressing and feeding themselves (cannot tie shoe laces, cannot use knife and fork properly).			
14. is overly-sensitive to touch, certain types of clothes, plasters, having their hair brushed etc.			
15. comes from a family with a history of learning difficulties.			
16. appears much more restless than their peers, will often squirm and not sit properly on their chair.			
17. may experience phobias and unexplained fear (sometimes related to confined spaces).			
18. may present with fixated, repetitive behaviours.			
19. experiences difficulty in communicating through both spoken and written language despite having a sound level of understanding.			

Further Action:	
	This student requires continuous support with their additional needs.
	This student requires occasional support with their additional needs.
	This student is not a cause for concern.

**Sources:**  
<http://www.educational-psychologist.co.uk/dyspraxiacklist.htm>  
[http://www.dyspraxiafoundation.org.uk/services/ed\\_classroom\\_guidelines.php](http://www.dyspraxiafoundation.org.uk/services/ed_classroom_guidelines.php)