



UNYTE-ILS SSP INTAKE FORM For Parents of Children (aged 0-18)

Child: _____

Parent/Guardian: _____

Provider: _____

Date: _____

Note to Parent:

As we start to consider the delivery of SSP for your child, it will be helpful if you could please answer the following questions as honestly as you can. Please be assured that the information you share with me is confidential.

As you will see, this is different from more traditional assessments or questionnaires you may have completed in the past. There are no rights or wrongs here. Instead, it is designed to give me more information about your child's current circumstances. You will see that there are two sections to this form for you to complete: one for you to share details about your child's experiences, and the other about resources available to them.

The details you share with me will help us work together to explore what will be the best way to move forward in your child's SSP journey. There are spaces for you to write more information that you think may be relevant or helpful for me to know.

Questions and Conversation Topics

CLIENT EXPERIENCE:

1. Sound sensitivity

Check all that apply and provide details:

- Auditory hypersensitivity/hyperacusis - certain frequencies of sound are strongly disliked; noisy environments are avoided
- Misophonia - specific sounds have to be avoided or feel unbearable
- Auditory Processing Disorder - hearing is normal but processing and understanding what is heard is compromised
- Difficulty hearing speech when there is background noise
- Other: _____

Details:

2. General sensory sensitivity

Check all that apply and provide details:

- Certain clothing and textures are irritating
- Certain tastes are overwhelming
- Extreme response to certain smells
- Difficulty knowing where limbs are in space
- Extreme motion sickness

- Hypersensitivity to light
- Inability to accommodate and adjust to certain sensations
- Other: _____

Details:

3. Prior listening experience:

- a. Prior completion of the SSP?

YES / NO

Please describe your child's previous experience with the SSP:

- b. Prior listening therapies?

YES / NO

Describe the therapy and your child's experience:

- c. How does music affect your child generally?

Calming,
Grounding

Aggravating,
Irritating



d. More about your child's experience with music (no scores):

i. How do they engage with music in their life?

ii. Do they listen to music often?

iii. What type of music do they like?

iv. Are there times when they prefer silence?

How do the above vary depending on how your child feels? It may be helpful to consider their level of tiredness, emotional state, and the time of the day.

Details

4. Nervous system tendency

When reacting to distressing events, it is normal to quickly move out of a restful (ventral vagal) state of social engagement and connection, and into a survival state.

There are two general types of survival responses or defensive states and we usually tend to move towards one more than the other. These two types are:

- Activation/mobilization (sympathetic hyper-arousal) or
- Shutdown/immobilization (parasympathetic dorsal vagal hypo-arousal)

Please use the lists below to help you consider which state your child tends toward more. It is helpful to circle the descriptors that apply.

In sympathetic hyper-arousal they might feel:

Worried	Jittery/ jumpy	Unable to relax	Unable to take things easily	Cranky
Wary	Impulsive/ reactive	Short- tempered	Inflexible	“Boiling” feelings
Consumed by racing thoughts	Heart beating fast	Rapid breathing	Unable to Focus	Too much energy
Other: _____				

In sympathetic hyper-arousal they might display the following behaviors:

Quick to become frustrated	Argumentative	Name calling or accusing	Fidgety/ constant movement	Sticky thoughts
Frequent bursts of anger & hostility	Resistance to suggestions	Pushing boundaries	Biting, hitting, throwing	Impulsive decisions or actions
Over-reactive responses	Walking or running away from situations	Crying, screaming, yelling	Threatening words or gestures	Tantrums
Other: _____				

In dorsal vagal hypo-arousal your child might feel:

Low	Shut down	Shame	Numb	Overwhelmed
Frozen	Sad	Depressed	Lifeless	Sluggish
Heavy	Isolated	No or slow energy	Want to curl up & hide	Avoidant
Withdrawn	Disconnected	Unreachable		
Other: _____				

In dorsal vagal hypo-arousal your child might exhibit the following behaviors:

Disengaging or fading away	Low muscle tone	Seeming to not hear what others say	Hiding or shrinking	Letting others speak for them
Slumped posture	Low curiosity/ lack of playfulness	Drowsy/tired	Retreating from social connection	Avoiding eye contact
Recoiling from touch	Giving up	Giving in	Unhealthy digestion	Flat facial expression & monotone voice
Other: _____				

a. When reacting to distressing events my child tends more towards:

Sympathetic hyper-arousal (activation/mobilization)

Dorsal vagal hypo-arousal (shutdown/immobilization)



In contrast to the two defensive states above, when your child is at rest and cues of safety outweigh any cues of danger in their environment, they will be in a ventral vagal state where they can be socially engaged, calm, have impulse control, and generally experience feelings of wellbeing.

In a ventral vagal calm state, your child might feel:

Safe	Alert	Proud	Interested	Curious
Calm	Content	Engaged	Active	Trusting
Willing	Accessible	Accepting	Ready to participate	Comfortable
Attuned	Connected	Confident	Cared for	Grateful
Other: _____				

In a ventral vagal calm state, your child might exhibit the following behaviors:

Engaged and aware	Reciprocal play	Interest in exploring	Advocating & doing things for themselves	Speaking their mind
Upright posture	Curious and playful	Ready to learn	Interested in social connection	Maintaining eye contact
Affectionate	Wanting to do things for themselves	Perseverance	Healthy digestion	Good facial expression & vocal prosody
Other: _____				

b. I have observed my child feeling safe and in a ventral vagal state and can relate to these descriptors.

Agree

Unsure

Disagree



5a. For Parent: Your own nervous system tendency

Just as your child’s nervous system tendency can help to guide their SSP facilitation plan, it is also helpful to know what your tendency is as a parent since this may also be a consideration in the approach. So please respond to the following questions - this time for yourself.

Please use the lists of descriptors below to help you consider which you tend more toward. **You may find it helpful to circle the words and behaviors that apply to you.**

In sympathetic hyper-arousal you might feel:

Anxious	Agitated	Restless	Tense	Irritable
Hypervigilant	Impulsive	Uptight	Rigid	Rage
Consumed by racing thoughts	Racing heart	Rapid breathing	Unable to Focus	Too much energy
Reactive	Stressed			
Other: _____				

In sympathetic hyper-arousal you might exhibit the following behaviors:

Quick to become frustrated	Use of loud voice	Name calling or making accusatory remarks	Fidgety/ constant movement	Intrusive thoughts
Frequent bursts of anger or hostility	No time or patience to make conversation	Confrontational or controlling	Angry or aggressive behavior	Impulsive decisions or actions
Over-reactive responses	Loss of patience	Panic attacks	Perseverative thoughts	Feeling defensive
Other: _____				

In dorsal vagal hypo-arousal you might feel:

Low	Shut down	Shame	Numb	Overwhelmed
Frozen	Sad	Depressed	Lifeless	Sluggish
Heavy	Isolated	No or slow energy	Want to curl up & hide	Avoidant
Withdrawn	Disconnected	Alone	Hopeless	Unreachable
Other: _____				

In dorsal vagal hypo-arousal you might exhibit the following behaviors:

Zoning out	Feeling outside of awareness	Withdrawing from connection	Hiding or shrinking	Letting others speak up and lead
Collapsed posture	Shutdown behavior	Depleted of energy	Socially isolating	Averting eye contact
Avoiding touch	Giving up	Giving in	Unhealthy digestion	Flat facial expression & monotone voice
Other: _____				

- a. After comparing the feelings and behaviors of sympathetic activation and parasympathetic dorsal vagal shutdown, when reacting to distressing events **I tend more toward:**

Sympathetic hyper-arousal (activation/mobilization)

Dorsal vagal hypo-arousal (shutdown/immobilization)



CHILD RESOURCES

5. Please answer the following to describe your current home environment:

a. General feeling at home

Calm

Chaotic



b. Noise levels at home

Peaceful,
Quiet

Frenzied,
Loud



c. People in your home

Supportive

Unpredictable



Details

6. Access to support (co-regulation) from others:

- a. Will a reliable, caring adult be able to support this child's experience with the SSP and to co-regulate with them?

YES / NO

Who will this be?

- b. Will you and your child have access to the same quiet space without interruptions for the SSP listening sessions during remote delivery?

YES / NO

Describe the space and conditions for the listening

- c. Will your child be supported to practice self-regulation between sessions and after completing SSP? Will they have access to healthy coregulation?

YES / NO

Describe

- d. Are the relationships your child has with the people in their life generally supportive?

YES / NO

Describe

7. Access to other nurturing and supportive resources (self-regulation):

Check all that apply:

- Nature, open spaces, park, or yard
- Pet
- Sport or playful movement, dance, gymnastics
- Simple breathing exercises, mindfulness or guided imagery, yoga
- Singing or playing a wind instrument
- Creative activities such as art, drama, or music (other than singing or wind instruments)
- Other: _____

8. Although there is always the possibility of unforeseen circumstances, it is helpful to know if there are any significant events likely to happen in your child's life or those close to them which may have an impact on their ability to benefit from SSP. It is helpful to be aware of these in advance, if possible, so they can be factored into the timing of SSP delivery.

Please provide details of any events happening or expected in the next few weeks or months so these can be considered. Examples are: exams, change of school or teacher, recent or upcoming move, friendship stress or trouble with peers, illness, new sibling, or recent loss of a family member or pet.

In general, how would you assess your child's and your family's current situation and experience? Does their life and world feel comfortable?

Comfortable

Unsettled



Details and comments

9. **Before starting your child's SSP journey, it is important you understand that this is a process you are engaging in together. It may require extra support of your child as their nervous system shifts and repatterns. Although the listening is passive, the work to sustain the experience is intentional, and requires active engagement from you throughout.**

Do you have a willingness to engage and participate fully with your child in the process with me as your SSP provider, and understand that the SSP is not a quick fix, or a stand-alone therapy?

I'm all in

I'm skeptical



Comments
