DCD (Dyspraxia) Quick Tips Booklet

A practical, parent-friendly guide to understanding and supporting motor coordination

Understanding DCD

Developmental Coordination Disorder (DCD), also known as dyspraxia, affects how children plan, organise and carry out movements. It is a lifelong condition. Children may appear clumsy, move more slowly, or find everyday tasks more effortful than their peers do.

Because DCD affects both fine and gross motor skills, everyday activities such as dressing, handwriting, PE and getting organised can feel harder than expected.

DCD is not related to intelligence or effort. Children with DCD often try extremely hard, but their brains process movement differently. It is important for children to know that their difficulties are due to DCD, not because they are "not good" at something.

Motor planning explained

Motor planning is the ability to have an idea of how we want to move, plan how we will do it, and then carry out the movement. It helps us follow new instructions, move around busy spaces and learn new skills.

Motor planning has three stages:

1. **Ideation:** knowing what movement to perform
2. **Planning:** the brain works out how to do it
3. **Execution:** the body carries out the movement

Children with DCD may find any or all of these stages difficult, which can make new tasks feel confusing or overwhelming.

Diagnosis and pathways

DCD is diagnosed using internationally recognised criteria (DSM-5). Assessment looks at how a child learns and uses motor skills, how these difficulties affect everyday life, and whether they have been present since early childhood. Other medical causes must also be ruled out.

- **Criterion A:** Learning and carrying out coordinated motor skills is substantially below what is expected for the child's age and opportunities to learn.
- **Criterion B:** Motor difficulties significantly and persistently interfere with age-appropriate everyday activities.
- **Criterion C:** Symptoms have been present from an early age and did not develop after an illness or injury.
- **Criterion D:** Motor difficulties are not explained by another neurological, medical or physical condition. This is assessed by a medical doctor and is essential for a complete diagnosis.

Occupational Therapists assess functional skills, everyday impact and developmental history. Paediatricians assess medical factors and rule out other causes.

At Dr Cassie & Associates, we offer a unique joint assessment pathway: an Occupational Therapist and a Paediatrician assess your child together, in one appointment, on the same day. Families receive a complete assessment covering all four criteria in one place, without the separate steps often found in wider pathways.

Why diagnosis matters

A diagnosis helps children and families understand why certain tasks feel harder. It helps children see that their difficulties are due to DCD rather than a lack of ability. This can protect confidence and self-esteem, especially for children who have started comparing themselves with peers.

A clear diagnosis also helps adults respond with empathy rather than frustration. It opens the door to the right strategies, adjustments and teaching approaches at home and at school.

Quick tips

Posture

Good posture helps children use their hands, arms and body more effectively. A stable base reduces tiredness and supports smoother movement, whether eating dinner or doing homework at the table.

- Feet flat on the floor, with stable seating
- Table at elbow height
- Shoulders relaxed
- A clear, uncluttered workspace
- Non-writing hand steadying the page
- A quick posture reminder at the start of each task

Learning new skills

Children with DCD benefit from clear, structured teaching. They often need extra sensory information to understand what a movement should look and feel like.

- Use brightly coloured socks, balls or gloves
- Add visual sequences or step-by-step pictures
- Give one instruction at a time, using clear, concrete words
- Show the skill slowly and clearly, and let your child watch before joining in
- Break skills into small steps and repeat them the same way each time
- Practise in quieter, less busy spaces
- Allow extra processing time
- Encourage your child to talk through the movement
- Use predictable routines when moving from one activity to the next

PE and sports

Busy, fast-paced team sports can be challenging. Sports with fewer variables, such as swimming, running and cycling, are often more successful.

- Watch short videos of a skill before trying it
- Try lighter balls or larger targets

- Keep noise and movement around your child low when learning something new
- Look into local SEN sports groups

Self-care skills

Dressing, washing and organising belongings can be difficult. Backward chaining is a helpful strategy:

1. Break the task into steps.
2. The adult completes most of the steps.
3. The child completes the final step.
4. Each time you practise, the child does a little more, working backwards until they can do the whole task.

For example:

- Pulling up trousers after the adult helps with the legs
- Completing the final loop of shoelaces
- Brushing the last section of hair

Organisation

Organisation is part of motor planning. Clear routines help children feel more in control.

- Reduce clutter
- Use colour coding, such as coloured folders or trays
- Keep belongings in predictable places
- Pack bags in the same order each day, with a visual checklist
- Keep morning and home-time routines consistent

Whole-body sensory activities

Children with DCD often benefit from activities that give strong feedback to the body. This is called proprioception: the sense that tells the brain where the body is in space, making movements easier to plan and carry out.

Activities that provide strong proprioceptive input include:

- Pushing, pulling and carrying
- Climbing
- Swimming
- Cycling
- Martial arts

Try these as movement breaks, or before demanding tasks such as homework or getting dressed.

Building confidence

- Praise effort and persistence, not speed
- Offer achievable challenges and celebrate small wins
- Avoid comparisons with peers
- Encourage problem solving and exploration
- Avoid rushing your child

Sharing with school

These adjustments are worth discussing with your child's teacher or SENCo:

- Furniture that matches your child's height, checked regularly as children grow quickly and at different rates, especially in upper primary
- A seat where your child can clearly see demonstrations
- A place at the back of the line in PE, so they can watch the movement several times before their turn
- A predictable PE plan shared each half term, so skills can be previewed at home
- Quieter practice spaces for new skills
- Colour-coded trays or folders and a visual checklist for packing bags

Next steps

If your child has a specific goal, such as tying shoelaces or dressing independently, Occupational Therapy using the CO-OP approach (Cognitive Orientation to daily Occupational Performance) can help.

CO-OP is an evidence-based method recommended by the Royal College of Occupational Therapists. It teaches children practical everyday skills through structured problem solving. It is child-centred and builds independence, confidence and self-awareness, and it works particularly well for children with DCD who need support with motor planning and learning new routines.

To find out more about DCD assessments or Occupational Therapy programmes, please contact our admin team: ahp@drcassie.co.uk