frequently needed answers
This comprehensive list of questions was developed so that families know that services, qualifications of the professionals and their experience, vary from one practice to another. By choosing the specific questions that are most appropriate to the needs of your child and family, you will minimize the need to ‘shop around’. Thus, evaluation and treatment services will better match the unique needs of your child and family.

general questions
1. Which provider(s) in your practice primarily sees children with feeding struggles?
   - Looking for providers that have taken an interest in pediatric feeding struggles.

2. What percentage of the clients you serve have feeding struggles?
   - Looking for a practice that has experience – something above 10% would be a good answer.

3. How long have you been seeing children with feeding struggles?
   - Looking for someone who has a few years of experience.

4. Do you have specific education and training regarding pediatric feeding struggles?
   - Looking for someone who has sought out additional training to understand the issues.

5. Describe your overall approach to feeding struggles.
   - Looking for someone who understands that your child gives cues when something isn’t going well. They should value your voice and seek to understand why your child is struggling. Looking for someone who wants to be a part of the team that helps explore the issues, even if the team isn’t together.

6. How do you communicate results of the diagnostic testing, treatment goals, and other information with me and other providers who are helping to manage my child’s feeding struggles?
   - Looking for teams who partner with other disciplines and keep open lines of communication amongst each other as well as with you. Providing you copies of reports and taking the time to go over the reports with you or making sure you completely understand the results.

7. What is the best way for me to communicate with you?
   - The more ways you can communicate with your provider the better.
8. **After completing my child’s exam, how would you classify my child’s feeding struggles?**
   - Looking for a provider who will classify your child’s struggles as mild, moderate, or severe and create a treatment plan to match accordingly.

9. **Are there utensils that would make eating easier for my child?**
   - Looking for a provider who is familiar with adapted utensils, seating adaptations, and environmental factors during mealtimes that may make it easier for your child to succeed.

10. **Are there exercises my child can do to improve eating skills?**
    - Often there are exercises that may benefit your child depending on their unique skill set.
frequently needed answers

This comprehensive list of questions was developed so that families know that services, qualifications of the professionals and their experience, vary from one practice to another. By choosing the specific questions that are most appropriate to the needs of your child and family, you will minimize the need to ‘shop around’. Thus, evaluation and treatment services will better match the unique needs of your child and family.

general questions

1. Which provider(s) in your practice primarily sees children with feeding struggles?
   - Looking for those providers that have taken an interest in pediatric feeding struggles.

2. What percentage of the clients you serve have feeding struggles?
   - Looking for a practice that has experience – something above 20% would be a good answer.

3. How long have you been seeing children with feeding struggles?
   - Looking for someone who has a few years of experience.

4. Do you have specific education and training regarding pediatric feeding struggles?
   - Looking for someone who has sought out additional training to understand the issues.

5. Describe your overall approach to feeding struggles.
   - Looking for someone who understands that your child gives cues when something isn’t going well. They should value your voice and seek to understand why your child is struggling. Looking for someone who wants to be a part of the team that helps explore the issues even if the team isn’t together.

6. What type of medical information will you need prior to evaluating or treating my child?
   - Looking for someone that will do a thorough review of your child’s medical history.

7. How do you communicate results of the diagnostic testing, treatment goals, and other information with me and other providers who are helping to manage my child’s feeding struggles?
   - Looking for teams who partner with other disciplines and keep open lines of communication amongst each other as well as with you. Providing you copies of reports and taking the time to go over reports with you or making sure you completely understand the results.

8. How do you establish feeding goals?
   - Looking for someone that works with you to determine what goals are important to your family. They should also look for realistic goals that will build on your child’s skill and abilities, nutritional needs, medical needs, and goals that will take into consideration the parent/child relationship. (Example: It is hard to assess if your child will be completely weaned from a feeding tube until the program understands your child’s current skill and ability.)
9. If weaning from the tube is a primary goal for treatment, how does your facility manage it?
   - Looking to make sure they balance nutritional stability with weight management.

10. How frequently do you re-examine my child’s progress and how do you modify treatment goals as a result?
    - Looking to make sure they are assessing the progress and will modify the goals if something isn’t working to ensure progress is made.

11. What is the best way for me to communicate with you?
    - The more ways you can communicate with your provider the better.
INTERVIEWING ALLIED HEALTHCARE PROFESSIONALS

ADDITIONAL QUESTIONS TO ASK A REGISTERED DIETITIAN

1. How do you determine my child’s current nutritional status and how do you create a treatment plan to help my child progress?
   - Looking for someone who wants a food log to understand your child’s current intake. They should also want to work with other disciplines to help create a plan to ensure nutritional status is optimized while understanding your child’s current skill and ability (Example: Your child may not be able to get their protein from a whole piece of chicken so they need a plan to include how to get the required protein from other foods that matches your child’s skills set or tolerance)
   - Looking to make sure they are examining your child’s overall nutritional status, not just looking at weight, as it relates to height, weight, head circumference, etc. How is your child growing?

2. Do you recommend any laboratory or other testing be done? If so, what?
   - A basic metabolic panel (BMP) or chemistry panel provides helpful information about electrolytes, kidney function, and blood glucose.
   - A complete blood count (CBC) provides information about anemias.
   - A prealbumin provides the best information about protein status.

3. What growth should I expect from my child?
   - Looking for someone who looks at the growth beyond just a chart. Provider should reinforce that your child must follow their own growth curve.

4. What is a healthy weight, height, head circumference for my child?
   - Every child’s growth is different and a provider should explain what patterns might look like for your child.

5. What unique serving size is appropriate for my child?
   - Looking for someone who is willing to help you determine the unique serving sizes that are appropriate for your child.

NOTES:
ADDITIONAL QUESTIONS TO ASK A PSYCHOLOGIST

1. **How do you assess the current parent-child relationship?**
   - Looking for someone who is going to watch the feeding interaction

2. **What is your experience with parent-child coaching?**
   - Looking for someone who has experience with a family-centered approach to feeding struggles and emphasizes the importance of parent-child coaching.

3. **Do you watch me feed my child? Do you feed my child? Do you watch them feed themselves?**
   - This is important so they can assess the parent-child relationship but also understand any other mealtime behaviors that may need to be explored.

4. **What is the response in a therapy session if my child becomes upset, refuses to eat, coughs, gags or vomits?**
   - Looking for someone who is willing to explore what might be causing these behaviors to happen and not just pushing past the cues, force feeding, or assuming it is only behavioral.

NOTES:
INTERVIEWING ALLIED HEALTHCARE PROFESSIONALS

ADDITIONAL QUESTIONS TO ASK A SPEECH-LANGUAGE PATHOLOGIST OR OCCUPATIONAL THERAPIST

These professionals, speech language pathologists or occupational therapists, typically specialize in the evaluation and treatment of feeding struggles, such as Dysphagia. Although their basic professional training is different, they may have additional training in feeding therapy that is similar. One or both might be appropriate depending on your child’s unique needs.

1. How do you identify the current skills that my child has and work to improve them?
   - Looking to make sure they are starting with a baseline that works for your child. (Example: Can your child handle solids or do they need to start with food that melts easily or purees?)

2. What standardized tests do you use for evaluation?
   - Looking essential test to obtain reliable and valid information such as oral-motor tests, sensory tests, praxis test, etc.

3. Do you watch me feed my child? Do you feed my child? Do you watch them feed themselves?
   - Important for them to understand all dynamics involved in the mealtime.

4. What is the response in a therapy session if my child becomes upset, refuses to eat, coughs, gags or vomits?
   - Looking for someone who is willing to explore what might be causing these behaviors to happen and not just pushing past the cues and force feeding.

5. After completing my child’s exam, how would you classify my child’s feeding struggles?
   - Looking for a provider who will classify your child’s struggles as mild, moderate, or severe and create a treatment plan to match accordingly.

6. Are there utensils that would make eating easier for my child?
   - Looking for a provider who is familiar with adapted utensils, seating adaptations, and environmental factors during mealtimes that may make it easier for your child to succeed.

7. Are there exercises my child can do to improve eating skills?
   - Often there are exercises that may benefit your child depending on their unique skill set.

NOTES:
INTERVIEWING A FEEDING TEAM

two or more disciplines, representing at least one physician and one allied healthcare professional, evaluating/treating the patient’s feeding struggles independently or at the same time, in collaboration with one another. Physicians such as a pediatrician, gastroenterologist, pulmonologist, etc. and allied healthcare professionals such as a speech-language pathologist, registered dietitian, psychologist, etc.

frequently needed answers
This comprehensive list of questions was developed so that families know that services, qualifications of the professionals and their experience, vary from one practice to another. By choosing the specific questions that are most appropriate to the needs of your child and family, you will minimize the need to ‘shop around’. Thus, evaluation and treatment services will better match the unique needs of your child and family.

general questions
1. Which provider(s) in your practice primarily sees children with feeding struggles?
   • Looking for providers that have taken an interest in pediatric feeding struggles.

2. What percentage of the clients you serve have feeding struggles?
   • Looking for a practice that has experience – somewhere above 25%.

3. How long have you been seeing children with feeding struggles?
   • Looking for a practice who has a few years of experience.

4. How long does it take to get an appointment?
   • Many organizations have waiting lists. Be sure you understand what the possible wait time is for the evaluation and then how long it will take until treatment can be offered.

5. What type of medical information will you need prior to admitting my child to the program?
   • Looking for a team that will do a thorough review of your child’s medical history.

6. Are there a number of specialists who represent various disciplines involved in the evaluation? Are the same specialists involved in the treatment of my child? If not, how do they differ and why?
   • You are looking to make sure the team has a number of disciplines represented in both the evaluation and the treatment. Many experts agree that the most efficient means of evaluating and treating feeding struggles is a team approach. This means obtaining care from multiple specialists, often in the same clinic, who all work together, share the same goals and use similar theoretical approaches.

7. Do you have specific education and training regarding pediatric feeding struggles?
   • Looking for someone who has sought out additional training to understand the issues.
8. Describe your overall approach to feeding struggles.
   - Looking for a team that understands that your child gives cues when something isn’t going well. The team should value your voice and seek to understand why your child is struggling.

9. How do you communicate results of the diagnostic testing, treatment goals, and other information with me and other providers who are helping to manage my child’s feeding struggles?
   - Looking for a team who partners with other disciplines and keep open lines of communication amongst each other as well as with you. Providing you copies of reports and taking the time to go over reports with you or making sure you completely understand the results.

10. How do you establish feeding goals?
    - Looking for a team that works with you to determine what goals are important to your family. Also looking for realistic goals that will build on your child’s skill and abilities, nutritional needs, and medical needs. The goals will also take into consideration the parent/child relationship.
    (example: It is hard to assess if your child will be completely weaned from a feeding tube until the program understands their current skill and ability)

11. If tube weaning is a primary goal for treatment, how does your facility manage it?
    - Looking to make sure they balance nutritional stability with weight management.

12. What is the response in a therapy session if my child becomes upset, refuses to eat, coughs, gags, or vomits?
    - Looking for someone who is willing to explore what might be causing these behaviors to happen and not just pushing past the cues, force feeding, or assuming it is only behavioral.

13. How frequently do you re-examine my child’s progress and how do you modify treatment goals as a result?
    - Looking to make sure they are assessing the progress and will modify the goals if something isn’t working to ensure progress is made.

14. What is the best way for me to communicate with you?
    - The more ways you can communicate with your provider the better.
additional questions to ask intensive inpatient and outpatient feeding programs

We define feeding programs as programs where a child is accepted to and discharged from the program, treatment occurs for a set period of time such as 2, 4, 6, or 8 weeks, and is more intensive than traditional outpatient therapy. There are two common options for feeding programs - intensive outpatient or intensive inpatient.

**Intensive outpatient** treatment typically occurs 1 or more times a day, several days a week, usually 5 days a week.

**Intensive inpatient** treatment typically requires an overnight stay; feeding sessions occur multiple times a day, usually 7 days a week.

1. **How long has the program been in existence?**
   - Looking for some history so you can feel confident the program is reputable.

2. **Can I contact parents who have completed the program I’m interested in?**
   - If not, do they have parent satisfaction polls they can share with you and do they have long term data they can share about their success rate?

3. **How long is the duration of the program?**
   - Some programs may be up to 8 weeks or more. Looking to make sure a program will fit your family’s needs and resources.

4. **Will my child be evaluated by your team before being accepted into the program?**
   - The best programs want to independently evaluate your child so they can design the most effective treatment plan prior to beginning treatment.

5. **After my child’s evaluation, will the treatment plan be discussed with me and how long will it take until treatment begins?**
   - Often programs have wait times between evaluation and the start of treatment. You want to make sure the suggested timeframe works for your family.

6. **How do you assess my child’s medical status, skill & ability level, behavior/psychology status, and nutritional status?**
   - **Medical:** If it’s an intensive program, the best programs offer medical testing onsite or they have access to quality providers who they routinely work with to fully understand a child’s existing medical status. Often children will require tests such as an endoscopy, gastric emptying study, video swallow study, allergy testing, motility testing, etc. Looking for a program that has the onsite expertise or access to the expertise.
INTERVIEWING A FEEDING TEAM

two or more disciplines, representing at least one physician and one allied healthcare professional, evaluating/treating the patient’s feeding struggles independently or at the same time, in collaboration with one another. Physicians such as a pediatrician, gastroenterologist, pulmonologist, etc. and allied healthcare professionals such as a speech-language pathologist, registered dietitian, psychologist, etc.

- **Growth and Nutrition:** The best programs have a registered dietitian, on the team, who should do a thorough nutritional assessment, which includes a food log, and ask other detailed information about your child’s nutritional status.

- **Skill and Ability:** The best programs have specialists, occupational therapist and/or speech and language pathologist, who thoroughly understand a child’s skill level. They will perform oral-motor tests, sensory tests, and praxis test that are essential to obtaining reliable and valid information. In some instances, children will need diet modifications to match their skill level. For example, a three year old may only have the skills to eat pureed food.

- **Family and Behavioral Psychology:** The best programs have a psychologist to assess and advise on the parent/child interaction during mealtimes and understand the behavioral components that may be influencing mealtime behaviors, both good and bad.

7. **How do you evaluate progress toward feeding goals and how am I included in the evaluation process?**
   - Looking to see how progress is assessed is how often it is measured. The best programs will meet at least once a week and will include you as well as all other disciplines who are treating your child as part of the meeting in real time.

8. **What does a typical day in the program look like?**
   - Make sure you understand the frequency of meals and what type of support you may or may not receive on the weekends. You should also ask about what type of other activities are provided for you and your child. Activities such as school time for an older child; a place to nap for a younger child; parent support groups for you, etc.

9. **What type of housing is available for out of area families?**
   - Looking for affordable options such as a partnership with Ronald McDonald house, hotels that offer discounts for families being treated; special rates for apartment rentals, etc.

10. **What follow up care do you provide after discharge? How do you support a family once they go home, particularly if they live out of state?**
    - The program should also prepare you for your home life environment when you are back to reality with possibly other kids, animals, parents that both work full time, etc.
    
    - Looking for a program that offers follow up to ensure progress continues to be made. You should have a set schedule for future contact with the full team.
    
    - You want to make sure they are willing to collaborate with other providers for your child’s ongoing care and have a set schedule for future contact.