Assessment and Treatment of Children with Oral Motor, Feeding/Swallowing and Respiratory Function Challenges:

Children with Neuromuscular Involvement
Rona Alexander, PhD, CCC-SLP, BCS-S, C/NDT

Faculty

Rona Alexander, PhD, CCC-SLP, BCS-S, C/NDT - A longtime member of the Education Resources faculty and an accomplished author, Rona Alexander is a speech-language pathologist specializing in the assessment and treatment of oral motor, feeding/swallowing, and respiratory-phonatory function in infants and children with neuromuscular involvement. Dr. Alexander is a qualified speech instructor in Neurodevelopmental Treatment, delivering expert clinical knowledge and a personable instructive style through her basic pediatric and advanced NDT courses. She is a co-author of the book, Normal Development of Functional Motor Skills: The First Year of Life, and codeveloper of The ABCs of Pediatric Feeding and Swallowing. She also has served as a member of the ASHA Steering Committee for Special Interest Division 13: Swallowing and Swallowing Disorders. Dr. Alexander maintains a private practice, provides consultation services and conducts workshops on oral motor, feeding/swallowing, and respiratory coordination development, assessment and treatment.

Financial: Rona Alexander receives a speaking fee from Education Resources as well as royalty payments from Clinician's View and a co-author of the book published by The Hammill Institute on Disabilities. Non-Financial: She is a member of the NDTA and the NDTA Instructor Group.

About this Course

This course delivers clinically relevant assessment and treatment strategies for infants and children with neuromuscular impairments and challenges to their oral motor, feeding/swallowing and respiratory function. A special emphasis is on postural alignment and control as well as on sensory factors that can influence a child’s feeding and swallowing. Effective treatment strategies to improve cheeks/lips, tongue, jaw and rib cage function will be highlighted. Participants will engage in extensive clinical problem-solving via group case analysis and patient demonstration sessions.

Objectives

Participants will be able to apply course learning immediately to:

- Clinically assess oral motor, feeding/swallowing and respiratory coordination function in infants and young children
- Detail the essential components of comprehensive intervention programming for young children with neuromuscular involvement
- Implement effective body alignment, positioning for the modification of oral, pharyngeal, and respiratory function in intervention programming
- Perform treatment strategies to improve the function of the cheeks/lips, tongue, and jaw in children with neuromuscular involvement

Audience

Professionals with a foundation in the components of typical and atypical oral motor, feeding/swallowing, respiratory-phonatory and general movement development and experience in services for infants and children with neuromuscular challenges.
### Schedule – Day 1

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-9:00</td>
<td>Registration/Continental Breakfast</td>
</tr>
</tbody>
</table>
| 9:00-10:45 | Primary Areas Influencing the Child’s Feeding and Swallowing Function  
1. Oral Issues  
2. Pharyngeal Issues  
3. Gastrointestinal Issues  
4. Respiratory/Airway Issues  
5. Behavior Management Issues |
| 10:45-11:00 | Break |
| 11:00-12:30 | Primary Areas Influencing the Child’s Feeding and Swallowing Function (cont.) |
| 12:30-1:30 | Lunch (on your own) |
| 1:30-3:00 | Primary Areas Influencing the Child’s Feeding and Swallowing Function (cont.) |
| 3:00-3:15 | Break |
| 3:15-4:30 | Primary Areas Influencing the Child’s Feeding and Swallowing Function (cont.) |

"The best course I've been to. Any pediatric SLP should take this course."

— Melissa E, SLP

### Schedule – Day 2

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-9:00</td>
<td>Continental Breakfast</td>
</tr>
<tr>
<td>9:00-10:45</td>
<td>The Clinical Assessment Process</td>
</tr>
<tr>
<td>10:45-11:00</td>
<td>Break</td>
</tr>
<tr>
<td>11:00-12:30</td>
<td>Intervention Programming and the Development of Appropriate Functional Outcomes and Treatment Strategies</td>
</tr>
<tr>
<td>12:30-1:30</td>
<td>Lunch (on your own)</td>
</tr>
<tr>
<td>1:30-3:00</td>
<td>Patient Demonstration and Discussion</td>
</tr>
<tr>
<td>3:00-3:15</td>
<td>Break</td>
</tr>
<tr>
<td>3:15-4:30</td>
<td>The Influences of Body Movements and Postural Alignment/Stability on Oral Movements and Rib Cage/Respiratory Function</td>
</tr>
</tbody>
</table>

### Schedule – Day 3

<table>
<thead>
<tr>
<th>Time</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:30-9:00</td>
<td>Continental Breakfast</td>
</tr>
<tr>
<td>9:00-10:30</td>
<td>The Influences of Body Movements and Postural Alignment/Stability (cont.)</td>
</tr>
<tr>
<td>10:30-10:45</td>
<td>Break</td>
</tr>
<tr>
<td>10:45-12:15</td>
<td>Mealtime Feeding Strategies and Treatment Strategies</td>
</tr>
<tr>
<td>12:15-12:45</td>
<td>Break</td>
</tr>
<tr>
<td>12:45-3:15</td>
<td>Mealtime Feeding Strategies and Treatment Strategies (cont.)</td>
</tr>
</tbody>
</table>
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**Credits**

This course meets the criteria for 17.5 contact hours (1.75 CEUs). **TX Physical Therapy Association approved provider. Application has been made to the MN Board of Physical Therapy. The MI, MO, KS, and WI Boards of Physical Therapy recognize other state board approvals. This course satisfies CE Requirements in IA.**

Application has been made to the FL Physical Therapy Association for 21 continuing education contact hours.

Approved provider of continuing education by the American Occupational Therapy Association #3043, for 17.5 contact hours (1.75 CEUs) - Intermediate Level Occupational Therapy Process: assessment, intervention. The assignment of AOTA CEUs does not imply endorsement of specific course content, products or clinical procedures by AOTA.

Approved by the **TX Board of OT Examiners.**

Approved provider of the FL Board of Occupational Therapy-CE Broker-21 hours

Approved provider of the ASHA CE Provider - 1.75 ASHA CEUs (Intermediate Level, Professional area)

This course is offered for up to 1.75 ASHA CEUs (Intermediate Level, Professional area)

This program has been submitted for approval of 17.5 clock hours of continuing education credit by the TX Speech Language-Hearing-Association (TSHA).

17.5 hours of this course qualify toward the 20-hour requirement for NDTA re-certification.

Please contact us with any special needs requests: info@educationresourcesinc.com or 508-359-6533

**Locations and Dates - 2020**

<table>
<thead>
<tr>
<th>Month</th>
<th>Location</th>
<th>Provider</th>
</tr>
</thead>
<tbody>
<tr>
<td>March</td>
<td>Grand Rapids, MI</td>
<td>Spectrum Health-Helen DeVos Children’s Hospital</td>
</tr>
<tr>
<td>May</td>
<td>Minneapolis, MN</td>
<td>Alliana Health System - Allina Commons</td>
</tr>
<tr>
<td>Nov</td>
<td>Winter Park, FL</td>
<td>FL Hospital Pediatric Rehabilitation</td>
</tr>
<tr>
<td>December</td>
<td>Plano, TX</td>
<td>Children’s Health Specialty Center at Cityville Southwestern Medical District</td>
</tr>
</tbody>
</table>

Register at educationresourcesinc.com
$625 fee. Deadline for registration is 3 weeks prior to course. Registration will be accepted after deadline on a space available basis. Cancellation accepted up until 2 weeks before course, minus an administration fee of $75. NO REFUNDS WITHIN 2 WEEKS OF COURSE.

Please make check payable and return to: Education Resources, Inc. 266 Main St., Suite 12 • Medfield, MA 02052 508-359-6533 or 800-487-6530 (outside MA) FAX 508-359-2959 • www.educationresourcesinc.com

Limited enrollment. We encourage you to register online!

Oral Motor, Feeding/Swallowing and Respiratory Function Challenges/Alexander
❑ March/MI  ❑ May/MN  ❑ Nov/FL  ❑ Dec/TX

Course Registration Form

Name: ____________________________________________________________

Address: ________________________________________________________

City: ___________________________________ State: _______ Zip Code: ______

Home Phone: _____________________________ Work Phone: ______________

Cell Phone: ______________________________________________________

Needed in the event of an emergency scheduling change

Email: __________________________________________________________

Please clearly print your email address for course confirmation

Employer: _______________________________________________________

Discipline: __________________________ Specialty: ___________________

How did you learn of this course ________________________________

Education Resources reserves the right to cancel any course due to insufficient registration or extenuating circumstances. Please do not make non-refundable travel arrangements until you have called us and received confirmation that the course will be held. We are not responsible for any expenses incurred by participants if the course must be cancelled.

❑ I have read your refund policy above and understand.

Cardholder’s name & billing address with zip code if different from above:

______________________________________________________________

______________________________________________________________

______________________________________________________________

Signature ________________________________________________________

Amount charged ________________________________

I hereby authorize you to charge my: ❑ VISA    ❑ MC    ❑ DISCOVER#

Exp. Date _______________CVV2 Code__________________

Register at educationresourcesinc.com