Coaching is a family centered evidence-based intervention shown to increase children’s development and participation in daily routines. This session will highlight key principles of early intervention and an overview of coaching quality indicators. Participants will be presented an overview of Kentucky Early Intervention System’s Coaching in Early Intervention Training and Mentorship Program currently being implemented to build the capacity of providers to enhance family-centered early intervention practice.

Participants will:

- Define key components of coaching interventions in the context of recommended practices.
- Outline the key phases of the Coaching in Early Intervention Training and Mentorship program being implemented in Kentucky’s Early Intervention System.
- Identify opportunities for embedding coaching into current practice areas.

10:30-10:45 Break

10:45- 12:15 Select one of the two Breakout Sessions

1. Managing Difficult Behaviors in Children
   Anika Gooch, MSSW, CSW & Elizabeth Turner, MSW
   KVC Behavioral Healthcare Kentucky Inc.

Mental health diagnoses pose a difficult challenge for occupational and physical therapists as well as speech-language pathologists. It is estimated that 13% of children age 8-15 have a mental illness, and many are eligible for special education services. Behaviors and symptomology associated with mental illness in children and adolescents can negatively impact the ability for these students to comply or participate in school-based interventions. The knowledge of and
utilization of principles of managing difficult behaviors can aid in achievement of goals and objectives in a special education setting.

Participants will:
- Be knowledgeable of the steps of applied behavioral analysis.
- Be knowledgeable of diagnostic criteria of oppositional defiant disorder, conduct disorder, disruptive mood dysregulation disorder, post-traumatic stress disorder, reactive attachment disorder and major depressive disorder.
- Learn specific behavioral management skills to mitigate difficult behavior.
- Understand principles of the WRAP team model to ensure coordination of care.

2. Application of Coaching Techniques for Strengths Based Interventions
   Elizabeth A. Grant, MS, OTR/L
   University of Louisville Weisskopf Center and University of Louisville Autism Center
   Shirley Peganoff O'Brien, PhD, OTR/L, FAOTA
   Eastern Kentucky University

   Coaching is an evidence-based, occupation-based and family-centered practice that focuses on supporting the client. Coaching is necessary for providers to understand and explore within practice settings. Through the use of evidence-based techniques, providers focus on strengths and assist clients with problem solving for effective decision making about engagement in life. The use of this strengths-based approach helps to build confidence and competence for both clients and families to aid in designing their own solutions for challenges that may arise at home, school or in the community.

   Participants will:
   - Understand coaching techniques for use by occupational, physical and speech therapists within a strengths-based approach to therapy.
   - Explore the components of coaching and their relevance to pediatric therapy sessions.
     - Analyze cases to discuss application of coaching within select settings.

12:15- 1:15  Lunch served in Rooms 014 and 114.

1:15 -  3:00  Select one of the two Breakout Sessions

1. Orthotics for Children
   Kathy Martin, PT, DHSc
   Krannert School of Physical Therapy, University of Indianapolis

   This presentation will review the current evidence for orthotic efficacy for children with cerebral palsy, myelomeningocele, and hypotonia. The strength of the evidence and important gaps in our understanding will be discussed along with strategies for managing those gaps. General concepts for how orthoses fit into an overall intervention plan will be explored.

   Participants will:
   - Discuss the current evidence for orthotic efficacy.
   - Discuss the quantity and quality of evidence currently available.
   - Compare and contrast orthotic intervention paradigms.
   - Review key components of the gait cycle and how orthoses affect gait.
   - Identify new trends and concepts.
2. Social Communication: Beyond Pointing and Eye Gaze  
Janine Schmedding-Bartley, PhD, CCC-SLP  
University of Kentucky

Autism spectrum disorder (ASD) is defined by two domains of symptoms: a presence of repetitive, restrictive patterns of behavior, interests, or activities, and impaired social communication. This presentation will focus on the social communication domain to provide an overview of skills that develop during the first two years of life and highlight social communication skills that children with or at-risk for ASD may not demonstrate. Video examples will be used to help differentiate between typical and atypical social communication development in young children. This knowledge is essential for identifying children with red-flags for ASD early and beginning intervention for ASD specific deficits.

Participants will:
- Identify and describe five social communication milestones that typically develop during the first two years of life.
- Describe the role emotional regulation plays in social communication.
- Observe and identify coordinated communication in toddlers.
- Reference social communication milestones to recognize children who are displaying delayed/atypical social communication development.

3:15-3:30 Break

3:30-5:00 Select one of the two Breakout Sessions

1. 24 Hour Positioning for the Child with Complex Neurological Needs: Birth through School Age  
Melissa Tally, PT, MPT, ATP & Kihmberly Hymore, MOT, OTR/L, ATP  
Perlman Center, Cincinnati Children’s Hospital Medical Center

This course is designed to discuss postural management and adaptive equipment of the child with complex neurological needs commonly referred to as 24-hour positioning. The topic of 24-hour positioning will be defined and supported with a helpful guide and equipment plan of care offering specific consideration at key periods of development and function, as well as for surgical interventions. 24-hour positioning is supported in the literature and is recommended throughout the lifespan. Key components of the equipment evaluation and considerations will be reviewed to encourage optimal equipment for function, access, medical management and participation.

Participants will:
- Define Complex Rehabilitation Equipment and 24 Hour Positioning and how they apply to daily activities for the complex patient birth through school age.
- Discuss the importance of positioning for postural management, development, functional ADLs, active participation and positive outcomes following surgical interventions
- List the main components of 24-hour positioning equipment evaluation process including application of an equipment plan of care to educate patient and caregivers.
- Introduce opportunities for collaboration among community providers and regional centers for 24-hour positioning, specialty assistive technology needs and pre-surgical assessment and equipment recommendations for patients, families and care teams.
2. Impact of Stress and Trauma on the Developing Child  
Denise Weiss-Salinas, OTR/L  
Senior Early Childhood Specialist, Save the Children USA

Chronic childhood trauma, or what experts call adverse childhood experiences (ACEs), can quickly disrupt a child's brain-building process. Like building a house in a storm or with low-grade materials and tools, ACEs are toxic to brain development and can compromise the brain’s structural integrity and connectivity. Left unaddressed, ACEs and their effects make it more difficult for a child to succeed in developing life skills, and contribute to long-term negative health outcomes. Research gathered in the CDC-Kaiser Permanente ACEs Study found that the greater the exposure to things such as domestic violence, addiction, and depression in early childhood, the greater the risk for later-life problems such as higher risk for chronic illnesses, poverty, depression and addictive behaviors. As therapists working closely with families, there is a critical role we can play in promoting change in early childhood based on a philosophy that preventing and mitigating adverse childhood experiences, and their impact, is a promising approach to helping young children reach their potential. This session looks at Kentucky’s Strengthening Families framework for supporting families, identifies protective factors and demonstrates the powerful role you have in buffering the effects of stress for the children and parents you serve, as well as yourself.

Participants will:
- Gain knowledge of what adverse childhood experiences are.
- Learn how adverse childhood experiences affect brain development in young children.
- Learn about Kentucky’s Strengthening Families framework.
- Learn about their role as clinicians in assisting families in reducing chronic stress and trauma for young children.

We reserve the right to make changes in the speakers and schedule as necessary.

Speakers

Cybil Cheek, M.Ed., DI, TDHH, received her M.Ed. degree in Interdisciplinary Early Childhood Education from the University of Louisville (UofL). She has been working with First Steps for more than 15 years as a developmental interventionist and teacher for the deaf and hard of hearing (TDHH). She also has previous experience in school districts and is a certified therapist in the Floortime Approach.

Anika Gooch, MSSW, CSW, grew up in rural Kentucky after moving from Santa Clara, CA. Growing up in pastoral Kentucky, where the majority of the population experienced poverty, laid a strong foundation for a career in social work. Ms. Gooch graduated from Centre College in Danville, KY with a Bachelor’s in Psychological in 2012. She later received her Master of Science and Social Work from Kent School of Social Work at the University of Louisville in 2016. Anika is currently pursuing her School Social Work Certificate through the University of Kentucky. During her two years of employment at KVC Kentucky, she has worked as a school and community-based clinician with children and adolescents with varying mental health needs. Her primary interests included disruptive, impulse-control, and conduct disorders.

Beth Graves, MS, CCC-SLP, received her M.S. degree in Communication Sciences and Disorders from Western Illinois University. She has been a speech therapist for 18 years, 11 of those years in early intervention, serving both as a provider and District Child Evaluation Specialist.
Elizabeth A. Grant, MS, OTR/L, is a Senior Occupational Therapist at the University of Louisville Weisskopf Center and University of Louisville Autism Center. She received her BA in Communication from University of Louisville, BS in Occupational Therapy from Spalding University, MS in Occupational Therapy from Eastern Kentucky University (EKU). Currently, she is working to complete her Occupational Therapy Doctorate from EKU with her capstone research focused on changing outcomes for adolescents with ASD through adaptive life skill groups. Her focused experience is within pediatrics in a variety of settings to include, NICU, inpatient rehabilitation, outpatient clinics, hippotherapy, aquatic therapy, school system, tertiary diagnostic center, and the autism center. Her current emphasis has been on providing client-centered, evidence-based and occupation-based services for clients and their families.

Kihmberly Hymore, MOT, OTR/L, ATP, is a graduate of Xavier University with a Masters in Occupational Therapy. She is a lead occupational therapist at the Perlman Center at Cincinnati Children’s Hospital Medical Center. The Perlman Center is a specialty center designed to address the complex therapy, developmental, assistive technology and care coordination needs of children, youth, and adults with cerebral palsy and other complex conditions. Kihm has experience and training in sensory integration, assistive technology, adaptive equipment, and cortical visual impairment. Kihm has become well-versed in the CVI Range, educating families, other team members, and co-workers about the CVI functional vision assessment and best-practice approaches for interventions to promote access and mobility to those with cortical visual impairment.

Kathy Martin, PT, DHSc, is a Professor at the Krannert School of Physical Therapy at the University of Indianapolis. She received a BA in Athletic Training from Purdue University, her MS in Physical Therapy from the University of Indianapolis, and a Doctor of Health Science from the University of Indianapolis. Her clinical background includes early intervention and inpatient pediatric general acute care. Dr. Martin teaches pediatric physical therapy and her research efforts have been focused on orthotic effectiveness and children with hypotonia. Dr. Martin is currently the Chair of the Education Committee for the Academy of Pediatric Physical Therapy and has been actively involved in identifying best practices in pediatric physical therapy profession education. She is also the 2008 winner of the Indiana Chapter of the APTA Frances Ekstam Award for outstanding contribution to the physical therapy profession.

Shirley Peganoff O'Brien, PhD, OTR/L, is a University Foundation Professor at Eastern Kentucky University (EKU) in Occupational Science and Occupational Therapy and recognized as a Fellow of the American Occupational Therapy Association. She has a BS in occupational therapy from Temple University Philadelphia PA, a MS in occupational therapy from Rush University, Chicago, IL and her PhD from the University of Kentucky in Educational Policy Evaluation and Evaluation. Dr. O’Brien has been a member of the EKU faculty for over 25 years. She has teaching and research expertise in policy development/ leadership, sensory modulation and autism, online learning and student mentoring. She is recognized for her application of interprofessional practice in community settings. Dr. O’Brien has received numerous service awards for her work in pediatric occupational therapy practice and serves as Faculty Innovator Coordinator at EKU.

Janine Schmedding-Bartley, PhD, CCC-SLP, is an assistant professor in the Division of Communication Sciences and Disorders at the University of Kentucky. She earned her master’s degree and PhD in communication sciences and disorders from Florida State University. She has expertise in early identification of autism spectrum disorder (ASD) and early parent-implemented interventions for very young children with ASD. Her research focuses on developing the capacity of community providers to identify and treat individuals with ASD.

Melissa Tally, PT, MPT, ATP, is a physical therapist and Coordinator of Occupational and Physical Therapy at the Perlman Center at Cincinnati Children’s Hospital Medical Center. She has worked at the Perlman Center for 20 years. She has experience serving children with a variety of complex diagnoses including CP, DD and other neuro-motor conditions. She has provided therapy within the Early Intervention and Early Childhood programs. Additionally, she specializes in the area of assistive technology and adapted equipment. She performs comprehensive equipment evaluations and treatment, with a focus on 24-hour positioning, for both children and adults who present with significant physical disabilities. In addition to serving patients, she also provides training, advocates for funding and supervises a staff of occupational and physical therapists at the Perlman Center.

Scott Tomchek, PhD, OTR/L, FAOTA, received his Ph.D. in Rehabilitation Sciences from the University of Kentucky. He has over 25 years of pediatric clinical practice experience in various settings and practice areas. He presently serves as Professor of Pediatrics, Assistant Director of the Weisskopf Center at University of Louisville
(UofL), and Clinical Director of the UofL Autism Center at Kosair Charities. He is the project director for the First Steps Record Review Project.

**Elizabeth Turner, MSW,** gained experience in traumatic brain injury rehabilitation and substance use disorder treatment following undergraduate work. It was working in a residential treatment facility for high risk teenagers that sparked an interest in working with preadolescent and adolescent youths suffering effects of attachment and complex trauma. After obtaining her MSW from University of Kentucky, Elizabeth began working with children in home and school settings primarily managing suicidal risk, depression, DMDD, trauma, and substance use disorder.

**Denise Weiss-Salinas, OTR/L,** is a Senior Early Childhood Specialist for Save the Children’s Early Steps to School Success early childhood home visiting program. She supervises home visiting and school-based programs in Kentucky, Tennessee, Mississippi, Arkansas, California, and Puerto Rico. Ms. Weiss-Salinas is a pediatric occupational therapist, having work in the field of rehabilitation for 40 years. Her career has spanned services in a variety of treatment settings including acute care, skilled nursing facilities, home health, school system, and early intervention. She has developed interdisciplinary treatment programs in Venezuela, Mexico, and the Dominican Republic. She has a private practice in Kentucky with an emphasis in early intervention, sensory motor integration, and autism.

**Serena Wheeler, MAE, IECE,** received her M.A. degree in Interdisciplinary Early Childhood Education from Western Kentucky University. She started serving families in 1991 as a mental health therapist. She served families in Frist Steps as a developmental interventionist and evaluator since 2000.
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NOTE: Attendance for this conference is limited and will be based on an equal distribution across disciplines with priority given to those who provide clinical education/fieldwork experiences to our students.

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Confirmation: Confirmation notifications will be sent via email when you register. Every effort will be made to contact participants in the case of cancellation and/or change in presenters.

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