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## IMPROVING A CHILD'S PARTICIPATION IN ORAL MOTOR THERAPY

**BY JENNIFER DAHMS, MS/CCC-SLP, BCS-S**

### FINANCIAL AND NON-FINANCIAL DISCLOSURES

- I AM THE OWNER OF VALLEY PEDIATRIC FEEDING, LLC IN BOISE, IDAHO AND PROVIDE THERAPY SERVICES TO CHILDREN.
- I HAVE BEEN PAID AN HONORARIUM FROM SPEECHPATHOLOGY.COM FOR THIS PRESENTATION.
- I DONATE MONETARY FUNDS TO SMILE TRAIN, ST. JUDE CHILDREN'S RESEARCH HOSPITAL, AND THE RONALD MCDONALD HOUSE CHARITIES OF IDAHO.
- I AM AN ASHA MEMBER, ISHA MEMBER, AND A BOARD CERTIFIED SPECIALIST IN SWALLOWING AND SWALLOWING DISORDERS.

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## OBJECTIVES

- DESCRIBE 4 POSSIBLE REASONS THAT A CHILD MAY HAVE DIFFICULTY PARTICIPATING IN ORAL MOTOR THERAPY.
- LIST 3 REASONS WHY IMPROVED PARTICIPATION IS IMPORTANT TO THE ORAL MOTOR TREATMENT PROCESS.
- LIST 5 DIFFERENT ACTIVITIES THAT CAN BE UTILIZED TO IMPROVE A CHILD'S PARTICIPATION IN ORAL MOTOR THERAPY.

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## IMPORTANCE OF THE THERAPEUTIC RELATIONSHIP

- “THERAPEUTIC TECHNIQUES VS. THERAPEUTIC RELATIONSHIPS IN CHILD BEHAVIOR THERAPY” – AUGUST 1990
- PARENTAL RATINGS ON THE IMPORTANCE OF THE RELATIONSHIP VS. SPECIFIC TECHNIQUES AND HOW THE CHILD IMPROVEMENT PROGRESSED
- HIGH RATINGS ON RELATIONSHIP; HOWEVER, A STATISTICAL SIGNIFICANT CORRELATION WAS ONLY FOUND ON THE TECHNIQUE USED AND HOW CHILD IMPROVED
- RELATIONSHIPS AND ACTIVITIES ARE BOTH IMPORTANT FACTORS

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## EFFECTIVENESS OF SENSORY INPUT

- BASED UPON RESEARCH BY A. JEAN AYRES
- A DYNAMIC AND ECOLOGICAL THEORY THAT SPECIFIES THE CRITICAL INFLUENCE OF SENSORY PROCESSING ON HUMAN DEVELOPMENT AND FUNCTION (WIKIPEDIA REFERENCE)
- DISTRACTIONS – USE OF PLEASING SENSORY STIMULI TO DIVERT THE ATTENTION OF A PATIENT FROM AN UNPLEASANT CLINICAL EXPERIENCE (MEDICAL-DICTIONARY REFERENCE)

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## EFFECTIVENESS OF BEHAVIOR MODIFICATION

- BEHAVIOR MODIFICATION REFERS TO LIMITING BEHAVIOR-CHANGE PROCEDURES TO BEHAVIORS THAT ARE OBSERVABLE (WIKIPEDIA REFERENCE)
- ANALYZING BEHAVIOR-ENVIRONMENT INTERACTIONS
- MANY APPLICATIONS OVER THE YEARS BUT THE BASICS STILL APPLY

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## REASONS FOR DECREASED PARTICIPATION IN THERAPY

- MEDICAL HISTORY
  - INVASIVENESS
  - PAIN
  - GASTROINTESTINAL INVOLVEMENT
  - SURGERIES

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## REASONS FOR DECREASED PARTICIPATION IN THERAPY, CONT.

- CURRENT MEDICAL PROBLEMS
  - CONTINUED PAIN
  - ABILITY TO COMPLETE ORAL FEEDINGS
  - ADVERSE REACTIONS TO MEDICATIONS
  - ILLNESS

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## REASONS FOR DECREASED PARTICIPATION IN THERAPY, CONT.

- SENSORY DYSFUNCTION/AVERSION
  - ABILITY TO TOLERATE INTERVENTION
  - ABILITY TO SELF-REGULATE
  - ABILITY TO PARTICIPATE

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## REASONS FOR DECREASED PARTICIPATION IN THERAPY, CONT.

- ATTENTION AND FOCUS
  - HIGH LEVEL OF DISTRACTIBILITY
  - NOT LEARNING ABOUT THE PROCESS
  - MEDICAL DIAGNOSIS

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## REASONS FOR DECREASED PARTICIPATION IN THERAPY, CONT.

- ALERTNESS/FATIGUE
  - SLEEPING PATTERNS
  - FREQUENCY OF OTHER THERAPIES
  - TIME OF DAY
  - SEIZURE ACTIVITY
  - OVERALL TONE

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## REASONS FOR DECREASED PARTICIPATION IN THERAPY, CONT.

- HUNGER LEVEL
  - DOING PREPARATORY WORK BEFORE EATING
  - NAUSEA / GERD
  - COORDINATION OF THERAPY WITH FEEDING SCHEDULE (ORAL OR TUBE)

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## REASONS TO IMPROVE PARTICIPATION

- TO MEET THERAPY GOALS
  - OBVIOUS, BUT FUNCTIONAL
  - DEMONSTRATE IMPROVEMENT TO PHYSICIANS AND THIRD PARTY PAYERS

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## REASONS TO IMPROVE PARTICIPATION, CONT.

- TO MODIFY ACTIVITIES
  - IS WHAT WE ARE DOING EFFECTIVE?
  - SUBJECTIVE ANALYSIS OF HOW CHILD IS DOING
  - DO WE HAVE TO CHANGE WHAT WE ARE DOING?

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## REASONS TO IMPROVE PARTICIPATION, CONT.

- TO UPDATE HOME PROGRAMMING
  - GUIDE PARENTS IN THEIR ACTIVITIES AT HOME
  - MOVING ON TO THE NEXT “THING”
  - HELP WITH MEALTIMES

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## REASONS TO IMPROVE PARTICIPATION, CONT.

- TO ADVANCE SKILLS
  - EXAMPLE: MUNCHING TO DIAGONAL ROTARY CHEWING
  - GETTING TO THE NEXT STEP
  - RELATES TO CHANGE IN ACTIVITIES

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## REASONS TO IMPROVE PARTICIPATION, CONT.

- TO MODIFY BEHAVIOR
  - IF A CHILD IS NOT PARTICIPATING, WHAT DO WE WANT THEM TO DO?
  - BUILDING RAPPORT
  - BUILDING TRUST

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## WHAT DOES PARTICIPATION LOOK LIKE?

- IDEAL (T.)

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## ACTIVITIES

- USE OF DISTRACTIONS
  - AUDITORY
  - VISUAL
  - TACTILE

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## ACTIVITIES, CONT.

- EXAMPLE – USE OF DISTRACTIONS (TI. - 1)

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## ACTIVITIES, CONT.

- EXAMPLE – USE OF DISTRACTIONS (TI. – 2)

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## ACTIVITIES, CONT.

- REINFORCEMENT
  - FIRST THIS, THEN THIS
  - CHILD-GUIDED BUT ADULT CONTROLLED

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## ACTIVITIES, CONT.

- EXAMPLE – REINFORCEMENT (R.)

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## ACTIVITIES, CONT.

- GENERAL SENSORY INPUT
  - DEEP PRESSURE
  - VESTIBULAR
  - PROPRIOCEPTION

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## ACTIVITIES, CONT.

- GENERAL SENSORY INPUT EXAMPLES
  - BIG BODY HUGS / CRASH MAT
  - BOUNCING ON A THERAPY BALL
  - MUSIC FOR CALMING
  - CONSULT WITH OCCUPATIONAL THERAPY

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## ACTIVITIES, CONT.

- GUSTATORY STIMULATION
  - TASTES AND FLAVORS
  - TEXTURES OF FOOD
  - TOOLS VS. FOOD
  - TEMPERATURE

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## ACTIVITIES, CONT.

- GUSTATORY STIMULATION EXAMPLES

- IF A CHILD HAS A LOW REGISTER SENSORY SYSTEM, TRY TO INCREASE THAT SENSORY RESPONSE WITH INTENSE FLAVORS (SOUR CANDY, GARLIC POWDER, LEMON PEPPER)

- TRY INCREASING TEXTURE WITHIN THE ACTIVITY (ADDING BREADCRUMBS TO THERAPY TOOLS, COATING SOFT FOODS WITH CRACKER CRUMBS)

- IF A CHILD HAS A HIGH REGISTER SENSORY SYSTEM, MAKE FOODS ROOM TEMPERATURE VERSUS COLD (WARMER LIQUIDS VS. ONES WITH ICE)

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## ACTIVITIES, CONT.

- PREPARATORY

- GETTING READY

- LAYING OUT THE GROUNDWORK

- VISUAL SCHEDULE

- CUEING SYSTEM

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## ACTIVITIES, CONT.

- EXAMPLE – PREPARATORY (S.)

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## ACTIVITIES, CONT.

- SPEED
  - TIME CONSTRAINTS
  - OUR AGENDA VS. THE CHILD'S AGENDA
  - THINK TOLERANCE

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## ACTIVITIES, CONT.

- EXAMPLE – SPEED (J. - 1)

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## ACTIVITIES, CONT.

- EXAMPLE – SPEED (J. - 2)

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## ACTIVITIES, CONT.

- SUCCESSIVE APPROXIMATIONS
  - WHAT IS MY END GOAL?
  - HOW CAN I BREAK DOWN THE TASK?
  - HOW DO I MODIFY WHAT I AM DOING TO ACHIEVE WHAT I WANT?

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## ACTIVITIES, CONT.

- SUCCESSIVE APPROXIMATIONS EXAMPLES
  - IF TONGUE EXERCISES ARE YOUR GOAL AND YOU ARE USING A TOOL, YOU MAY HAVE TO WORK ON GETTING A CHILD TO ALLOW THE TOOL TO TOUCH HER LIPS BEFORE PLACING IT IN HER MOUTH
  - IF CHEWING EXERCISES ARE YOUR GOAL AND YOU ARE TRYING TO USE A TOOL, YOU MAY HAVE TO START WITH FOOD-BASED ACTIVITIES THAT YOU PRESENT TO THE CHILD'S MOUTH TO GAIN HIS TRUST

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## ACTIVITIES, CONT.

- COMBINATION OF APPROACHES
  - WHAT WORKS BEST FOR THE CHILD AS A WHOLE?
  - WHAT ARE HIS/HER FAVORITE ACTIVITIES?
  - HOW DO I MAXIMIZE THERAPY?
  - CAN I MULTI-TASK?

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## ACTIVITIES, CONT.

- EXAMPLE – COMBINED APPROACHES (L. -1)

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## ACTIVITIES, CONT.

- EXAMPLE – COMBINED APPROACHES (L. -2)

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## QUESTIONS?

- THANK YOU!
- VALLEYPEDIATRICFEEDING@YAHOO.COM

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## REFERENCES

- CHAPMAN BAHR, D. (2001). ORAL MOTOR ASSESSMENT AND TREATMENT: AGES AND STAGES. ALLYN & BACON.
- EVANS MORRIS, S. & DUNN KLEIN, M. (1999). MEALTIME PARTICIPATION GUIDE. PSYCHCORP.
- EVANS MORRIS, S. & DUNN KLEIN, M. (2000). PREFEEDING SKILLS: A COMPREHENSIVE RESOURCE FOR MEALTIME DEVELOPMENT. SECOND EDITION. PRO-ED.
- MOTTA, ROBERT & CHRISTOPHER LYNCH. THERAPEUTIC TECHNIQUES VS THERAPEUTIC RELATIONSHIPS IN CHILD BEHAVIOR THERAPY. PSYCHOLOGICAL REPORTS. VOL 67, 1: PP. 315-322. AUGUST 1, 1990.
- SWIGERT, N. (1998). THE SOURCE FOR PEDIATRIC DYSPHAGIA. LINGUISYSTEMS.

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## REFERENCES, CONT.

- IN MEDICAL DICTIONARY. RETRIEVED OCTOBER 23, 2016, FROM [HTTP://MEDICAL-DICTIONARY.THEFREEDICTIONARY.COM/DISTRACTION+THERAPY](http://medical-dictionary.thefreedictionary.com/distraction+therapy).
- IN WIKIPEDIA. RETRIEVED OCTOBER 23, 2016, FROM [HTTPS://EN.WIKIPEDIA.ORG/WIKI/BEHAVIOR\\_MODIFICATION](https://en.wikipedia.org/wiki/Behavior_modification).
- IN WIKIPEDIA. RETRIEVED OCTOBER 23, 2016, FROM [HTTPS://EN.WIKIPEDIA.ORG/WIKI/SENSORY\\_INTEGRATION-THERAPY](https://en.wikipedia.org/wiki/Sensory_integration-therapy).

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