The IOPTP Newsletter

The International Organisation of Physical Therapists in Paediatrics

Edition 21, April 2019

President's Message



30 days until WCPT Congress in Geneva, Switzerland as I write this message. There is much excitement about this Congress in one of the world's most beautiful cities, Geneva, Switzerland. The IOPTP officers and committee chairs look forward to greeting members of our organization and meeting other paediatric physical therapists. The IOPTP officers and committee chairs have been busy completing activities to address paediatric practice, education, and research. Communications have expanded through our Facebook page as we receive requests for more "friends" and post more relevant information.

The program for the WCPT Congress is quite broad: covering general topics like health promotion, rehabilitation, leadership, education, professional issues, technology and robotics, and advanced practice. More sessions are focused on cardiorespiratory, musculoskeletal, neurology, oncology, pain, older people, and specific treatment approaches. Paediatric platforms cover multiple perspectives. (see paediatric platform schedules on page 3 of this newsletter) In addition, there is a panel discussion on paediatric transition to adult care on Sunday, 10:45-12:45. A networking session will be held on Sunday, May 12 at 1:00-2:15 to discuss paediatric PT practice around the world.

The business of the WCPT Congress includes elections of officers for the next 4 years, motions to support WCPT operations and physical therapists across the world. The IOPTP will hold a business meeting and reception on Saturday, May 11, from 5:00-7:30. An overview of

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For submissions or questions regarding the newsletter please contact the newsletter editor Erin Wentzell PT, DPT, PCS at IOPTP accomplishments through committee work will be summarized. Elections for officers and member organizations will be held. This year we have 6 additional organizations seeking membership in IOPTP: Belgium, Colombia, Greece, Saudi Arabia, Spain and the United Kingdom.

For those of you attending WCPT, be sure to find the IOPTP booth in the exhibit hall. The IOPTP board members hope to meet you in Geneva.



Announcing: a new IOPTP research grant

The IOPTP Research Committee has developed a proposal for a research grant. 3 proposals were received. The proposal selected will be announced at the IOPTP meeting in Geneva. We plan to fund a project each year going forward. Be thinking about research projects you are interested in. Expect the call for 2020 to go out through this newsletter in early 2020.

Communications

We are pleased to provide information through the IOPTP webpage, newsletters, and communication with member organization presidents. We would like to hear from you. Let us know of other ways to network and share ideas and questions. Erin Wentzell, our communications chair, welcomes help with sharing news and resources with paediatric physical therapists internationally. Let her know your ideas and ways you can help.

Best regards,

Sheree York PT, DPT, PCS, cNDT

Sheree york

President, IOPTP

WCPT GENEVA PAEDIATRIC SCHEDULE AT A GLANCE

SATURDAY MAY 11

10:45 – 12:15 Paediatric Platform Presentations

PL-947 - FAMILY-CENTERED CARE IMPROVED EXECUTIVE FUNCTION IN PRETERM INFANTS WITH VERY LOW BIRTH WEIGHT AT PRESCHOOL AGE

Liu, Fang Wei (Taiwan) @

PL-1445 - CHARACTERISTICS OF CERTIFIED NEONATAL THERAPISTS (CNTS): A CERTIFICATION PROMOTING EVIDENCE-BASED PRACTICE IN THE NEONATAL INTENSIVE CARE UNIT

Kloosterman, Consuelo (United States) @

PL-1605 - FAMILY-CENTERED INTERVENTION FAVORED LANGUAGE OUTCOME VIA IMPROVED QUALITY OF MOTHER-INFANT INTERACTION IN FIRSTBORN PRETERM INFANTS IN TAIWAN

Liu, Fang-Chi (Taiwan) ®

PL-2073 - RISKS FOR ALTERATIONS IN NEUROVELOPMENT BY THE GENERAL MOVEMENT ASSESSMENT IN INFANTS EXPOSED TO INTRAUTERINE ZIKA VIRUS

Panvequio Aizawa, Carolina Yuri (Brazil) @

PL-2116 - IMPACT OF A 12-WEEK CLASSROOM-BASED GROSS MOTOR PROGRAM ON MOTOR PROFICIENCY, MATHEMATICS AND READING PERFORMANCE OF YEAR 1 SCHOOL CHILDREN

Macdonald, Kirsty (Australia) @

PL-2755 - THE PERCEIVED PHYSICAL CHALLENGES IN ADOLESCENTS WITH PERINATALLY ACOUIRED HIV

Comley-White, Nicolette (South Africa) @

PL-2768 - MUSCLE STRENGTH AND ENDURANCE IN CHILDREN LIVING WITH HIV Potterton, Joanne (South Africa)

5:00 – 7:30 Business Meeting & Elections

SUNDAY MAY 12

10:45 - 12:45 Panel discussion: Paediatric Transition to Adult Care

1:00 – 2:15 Networking Session: Paediatric PT Practice Around the World.

MONDAY MAY 13

10:45 – 12:15 Platform Presentations

PL-621 - FUNCTIONAL GAIT ASSESSMENTS IN CHILDREN WITH DEVELOPMENTAL COORDINATION DISORDER: A USEFUL COMPLEMENT TO THE CURRENT MOTOR SKILL INVESTIGATION?

PL-1548 - SPORT-FOCUSSED GROSS MOTOR ASSESSMENTS FOR AMBULANT CHILDREN WITH CEREBRAL PALSY

Clutterbuck, Georgina (Australia) @

PL-2216 - THE EFFECTS OF SERIAL CASTING ON THE LOWER LIMB FOR CHILDREN WITH CEREBRAL PALSY: A SYSTEMATIC REVIEW WITH META-ANALYSIS Milne, Nikki (Australia)

Output

Description:

Output

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PL-2980 - FACTORS ASSOCIATED WITH INFANT MOTOR DEVELOPMENT FROM BIRTH TILL INDEPENDENT WALKING: A SYSTEMATIC REVIEW OF LONGITUDINAL RESEARCH Boonzaaijer, Marike (Netherlands) \odot

PL-3004 - DO PHYSICAL THERAPY SERVICES FOR CHILDREN WITH MOTOR DISABILITIES ABIDE BY THE LAWS? A QUALITATIVE EXPLORATORY RESEARCH Waiserberg, Nilly (Israel)

PL-3212 - THE DUTCH GO SLOW? CANADIAN NORM VALUES OF THE ALBERTA INFANT MOTOR SCALE EVALUATED FOR DUTCH INFANTS

van Maren-Suir, Imke (Netherlands) @

PL-2935 - POSTURAL CONTROL PREDICTS GROSS MOTOR COORDINATION IN PRIMARY SCHOOL CHILDREN WITH AND WITHOUT COORDINATION DIFFICULTIES Allinson, Gemma (Australia)

Output

Description:

PL-2093 - VESTIBULAR AND OCULOMOTOR FUNCTION IN CHILDREN WITH CEREBRAL PALSY: DESCRIPTIVE STUDY

Almutairi, Anwar (United States) @



IOPTP ELECTIONS

SLATE OF OFFICERS FOR ELECTION AT GENERAL MTG, 2019

President: Sheree York, PT, DPT

USA

Vice President: Karen Hurtubise PT, MS

Canada

Secretary: Barbara Connolly PT, DPT, EdD, FAPTA

USA

Treasurer: Anjo Janssen PT, PhD

Netherlands

Member at Large: Kristy Nicola PT, PhD

Australia

Olayiwola Uthman Anjorin PT, MSc

Nigeria

IOPTP Candidate Biographies and Statements

PRESIDENT

Sheree Chapman York, PT, DPT, PCS

Sheree Chapman York has recently joined the faculty at the University of Alabama at Birmingham Physical Therapy Department as an Assistant Professor. She had been the Director of the Physical Therapy and Occupational Therapy Department and Early Intervention Services at Children's of Alabama since1996, She received BS and MS degrees in Physical Therapy from the University of Alabama at Birmingham and her DPT from Rocky Mountain University of Health Professions. She completed a Maternal and Child Healthcare

fellowship at the University of North Carolina at Chapel Hill. She is an American Board of Physical Therapy Specialties pediatric clinical specialist. Dr. York has worked in pediatric physical therapy for over 30 years, most recently in Newborn Follow-up Clinic, Early Intervention, and neonatal intensive care units. She served on the Alabama Governor's Early Intervention Interagency Coordinating Council and on various committees focusing on training EI providers. She has served the American Physical Therapy Association in various roles including: Governance Review, CSM Review, and Learning Center Task Force; President, Legislative Chair, Chief Delegate, and Delegate for the Alabama chapter; and Vice President, President, Regional Director, State Representative, Education Committee Chair, and Hospital-based Special Interest Group Chair for the Academy of Pediatric Physical Therapy. In 2007 she was elected Secretary and in 2015 President of the WCPT International Organisation of Physical Therapists in Paediatrics.

I am honored to have served as the first Secretary and second President of the IOPTP. I hope to be elected to serve a second term as President at the WCPT Congress in May 2019. My clinical experience has prepared me to understand the challenges and opportunities physical therapists face. My experience in organizational and institutional leadership has prepared me to continue to serve the IOPTP as President in 2019-23. As IOPTP Secretary, I was closely involved with the development of the constitution, bylaws, and policies and procedures. From 2007 to present, I have worked closely with the Executive Committee and committee chairs to lead the work of the IOPTP: recruiting new member organizations, communicating with members, cosponsoring and participating in WCPT and APTA conferences, and leading business meetings and networking sessions at WCPT Congresses. My role with the onsite WCPT Congress also included serving as a delegate and monitor for the 2011, 2015, and 2019 General Meetings. As President since 2015, I have participated in regular conference calls with WCPT officers, staff, and other subgroup leaders to share information from the IOPTP perspective and to be informed of the direction for WCPT in general. In addition, I participated in conference calls and assigned a local PT to attend meetings related to international healthcare for children and families through public schools and community-based clinics.

The IOPTP has the opportunity and the responsibility to develop and disseminate resources and to provide support for member organizations and potential member organizations. I am committed to leading and representing the IOPTP by communicating regularly with the Executive Committee and committee chairs to meet the strategic plans identified by the board and by coordinating our efforts with the WCPT staff and officers. Through these efforts we can make a difference in the education and work of paediatric physical therapists and in the lives of the children and their families around the world..

VICE PRESIDENT

Karen Hurtubise PT, MS

Serving as Secretary of the IOPTP over the past years has provided me with a better understanding of the issues facing pediatrics physiotherapists, a sensitivity to their broad-based needs of our membership, and a desire to work diligently to improving pediatric physiotherapy services and the functioning of children with chronic conditions. This experience has, however, made me recognize a need for ongoing learning about, and from our global community. It is with this shared learning philosophy in mind, that I would like to continue

my involvement with the IOPTP Executive, in the position of Vice-President. As outlined, my practice, management, research, teaching and association experience, I believe that I possess the requisite knowledge and skills to fulfill the role.

Practice Experience: I have been a pediatric physiotherapist for over 25 years practicing in acute care and rehabilitation facilities across Canada, assessing and managing the needs of infant, children, and adolescents with various neurological, musculoskeletal, and cardio-respiratory conditions.

Management Experience: I have assisted in the development, implementation and management of rehabilitation programs for youth (e.g. adolescents with eating disorders, youth with pain-related disability, and those transitioning to adulthood) and defining the role of physiotherapists in providing these services.

Research and Knowledge Transfer Experience: Following the competition of a Master in Rehabilitation in 2009, where my qualitative study focused on parents perspectives on family centered-care, I lead re-designing our early childhood rehabilitation program to align services with current evidence and the parental recommendations arising from the study.

I am currently completing doctorate studies in Health Sciences Research, focusing on the effectiveness of a pediatric rehabilitation program, using a participatory research approach and a mixed method design, with an advisory committee composed of key stakeholders, including knowledge users (e.g. clinicians, managers), parents and youth, guiding the study. My research interest and publications span a variety of topics including parent experiences, adult learning, knowledge translation, interdisciplinary service models, program development, implementation and evaluation, and quality improvement.

Academic and Teaching Experience: I have been involved in the development and delivery of physiotherapy curricula specifically in pediatrics (e.g. parent education, pediatric pain), program development and evaluation, and quality improvement in multiple graduate programs across Canada. In doing so, I have used a variety of mediums, including synchronous and asynchronous web-based platforms.

Association Experience: I have served as the secretary for the International Organization of Physical Therapist in Pediatrics (IOPTP) since 2016. My previous experience includes 5 years on the board of the Canadian Physiotherapy Association (CPA) from 2003-2008, serving as president and Canada's representative to the North American Caribbean Region of WCPT from 2004-2007, including hosting the WCPT Congress in Vancouver, Canada, where the IOPTP was founded. I have maintained involvement in Pediatric Division, the pediatric sub-section of CPA, being a member of the national executive (2014-2016). I have also been involved in other pediatric healthcare organization including the Canadian Network for Child and Youth Rehabilitation, and Children's Healthcare Canada.

TREASURER

Anjo Janssen PT, PhD

Anjo Janssen completed her physical therapy degree at the HAN University of Applied Sciences in 1984. She started working as a physical therapist at the Radboud University Medical Centre at the Department of Physical Therapy in 1984 and from 1986 she has worked at the Pediatric Physical Therapy unit. From 1991 to 1994 she studied Pediatric Physical Therapy at the HU University of Applied Sciences in Utrecht, followed by scientific education at the Dutch Allied Health Sciences Institute from 1995 to 1996. She acquired her Master of Science degree in Physical Therapy Science at the Utrecht University in 2006 and her PhD in 2012 at the Radboud University.

Anjo Janssen currently is working at the Radboud University Center in Nijmegen. Beside her involvement in patient care, she is working as teacher at at the HBO master Pediatric Physical Therapy in Utrecht and she is an active post-doc researcher. Moreover she is an active member of the Dutch association as a member of the scientific and educational committee (1999-2013). She was the first author of the most recent professional profile written in the CAN-MEDS model (2014).

She is one of the authors of the Pediatric Physical Therapy Handbook used in the Netherlands by all pediatric physical therapists. Anjo is cosupervisor of two pediatric physical therapist PhD candidates and very motivated to join the IOTP board. Anjo has shown that she has the competences to serve as an active and stimulating colleague. She has combined practice with research and education, which is a perfect combination to perform as a board member at this international level.

SECRETARY

Barbara Connolly, PT, DPT, EdD., FAPTA, C/NDT

Barbara Connolly received her BS degree in physical therapy from the University of Florida; a DPT degree from the University of Tennessee; a M,Ed. degree in special education with a minor in speech pathology and an EdD in curriculum and instruction from the University of Memphis. She is Professor Emeritus at the University of Tennessee Health Sciences Center where she served as Chair of the Physical Therapy Department for 24 years and Dean of the College of Allied Health Sciences for 2 years. In addition to teaching at the University, she maintained a clinical practice and participated in research. She is the immediate past President of the Foundation for Physical Therapy Research. She served as the first President of the International Organization of Physical Therapists in Pediatrics (2007 – 2015). She also has served on the American Physical Therapy Association(APTA) Board of Directors, on the APTA Pediatric Specialty Council and the American Board of Physical Therapy Specialists. She was President of the Section on Pediatrics of the APTA from 2002-2006. She received the Bud DeHaven Leadership Award, the Research Award and the Jeanne Fischer Distinguished Mentorship Award from the Section on Pediatrics. She is a recipient of the Golden Pen Award from the American Physical Therapy Association for her publications. In 2002, she received one of the highest honors from the APTA when she was named a Catherine Worthingham Fellow. In 2014, she received the Marilyn Moffat Leadership Award and in 2016, she received a Lucy Blair Service Award. She is the first author of more than 32 publications in peer reviewed journals, has written 21 book chapters and has coauthored or edited eight textbooks for physical therapists. She is certified in NDT and in SI. She continues to provide professional development courses both nationally and internationally.

As the first president of the IOPTP, I feel pride in the accomplishments of our organization. The IOPTP have grown in size and in responsiveness to the members in the 11 years since our inception. Since leaving the position of President, I have served as Chair of the Education Committee and have worked on developing a statement on entry level pediatric content for physical therapy programs. I also have participated in the development of grant funding for our members. Both of these tasks have been completed. I would like to continue to serve in whatever capacity needed in the IOPTP and look forward to continuing my involvement in the IOPTP in the role of secretary if elected.

MEMBER AT LARGE (One to be elected)

Kristy Nicola PT, PhD

I was awarded my Doctor of Philosophy in the field of Physiotherapy, and have a reputation for expertise in paediatric physiotherapy, underpinned by over a decade of experience. I have worked as a paediatric physiotherapist in different settings including: community, private practice, education and on an outreach team, delivering family-centred services to children of all ages and diagnoses. As a senior physiotherapist within the Australian Government, I lead a multidisciplinary team in providing services to children and their families. I have worked as a lecturer where I developed and delivered undergraduate and post-graduate paediatric curriculum and won numerous awards for teaching excellence from the School, Faculty and University. In addition, I have led and undertaken paediatric research. I have published manuscripts and presented my research at conferences. I received the Yvonne Burns Prize in Paediatric Physiotherapy for Outstanding Postgraduate Achievement in research, along with the Australian Physiotherapy Association Conference Award for best Rural/Remote Paediatric Physiotherapy Presentation. I am a certified instructor for the Neurosensory Motor Developmental Assessment and have delivered workshops both nationally and internationally. Over the past twelve months, I have resigned from work and taken the time to be with and care for my youngest son as he was diagnosed with chronic lung disease and required surgery and ongoing care. This has given me the opportunity to commit to my chosen profession in different ways. For instance, I am now the Deputy Chair for the Queensland Chapter of the National Paediatric Group (NPG) in the Australian Physiotherapy Association (APA). In addition, I am sitting on the Scientific Committee for the paediatric stream of the upcoming 2019 APA Conference.

I was the first Australian to sit on the Executive Board of the International Organisation of Physical Therapists in Pediatrics (IOPTP) and have demonstrated the capacity to establish and maintain networks with the committee. In the time that I have been in this role, I have committed to attend teleconferences and completing tasks asked of me. I have provided detail to include in the newsletter, and fostered communications between the President of the APA, NPG and the president of the IOPTP. I have advocated for the IOPTP by contributing to communications within the APA to request members to volunteer for the IOPTP, or simply advise them of current IOPTP actions. For example, I write the quarterly newsletter for the NPG and have been able to commit a section of this newsletter to 'what is happening within the IOPTP'.

I have been a committed member of the IOPTP and embrace the challenges of continuing in this role. I am willing and able to devote both more time and effort to meet the responsibilities and welcome further

opportunities to contribute to the committee and organization. I have thoroughly enjoyed meeting different individuals with the same passion and helping out where my skills could be used. I wish to continue in this role, to further support the committee in meeting our goals, and continue to contribute to connecting paediatric physiotherapists world-wide.

Uthman Olayiwola Anjorin, Bsc, Msc, NDT

- Consultant Physiotherapist
- Deputy Director of Physiotherapy University of Ilorin Teaching Hospital (UITH)
- Member of Management Governing Board Federal Teaching Hospital, Gombe
- Head of Unit Paediatrics Rehabilitation UITH
- Head of Faculty of Paediatrics National Postgraduate Physiotherapy College of Nigeria (NPPCN)
- Associate Lecturer College of Health Sciences, University of Ilorin
- Member British Association of Bobath Trained Therapist (MBABTT)
- Fellow of National Postgraduate Physiotherapy College of Nigeria (NPPCN)
- Fellow American Academy of Cerebral Palsy and Developmental Medicine (FAACPDM)
- Specialized Paediatrics and Neuro-disability Physiotherapist
- Chartered Physiotherapist

I have conducted over 30 CPD training in the 6 regions of the country. My recent workshops have been on Good Practice Framework For Working With Vulnerable Persons; Developing And Implementing Clinical Practice Guidelines (Cpgs): A Paradigm Shift For Better Patient Care; Sensory Disorders And Motor Impairments: Significance Of Co-Existence And Interactions; Windows Of Opportunities For Life Long Independence In Children With Chronic Long Term Conditions; Handling For Good Functional Recovery: Children With Developmental Disorders; Approaches And Models For Good Functional Recovery In Neurologic Rehabilitation. Emphasis On Adult Stroke And Cerebral Palsy; and Movement Analysis In Neurodisability Management.

I have received several recognition awards both national and international such as Dignity Ambassador, Sheffield Care UK,

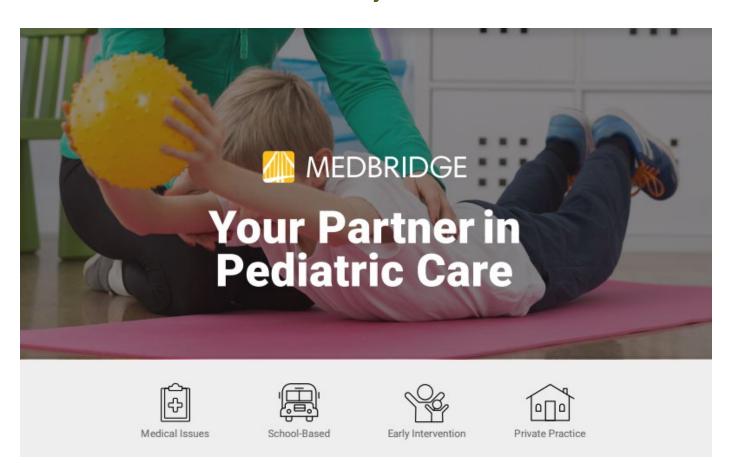
- 5th Thompson Abayomi Oshin 2017
- Achievement and Innovation Award 2017
- Best Top 5 Students in Neuroanatomy. College of Medicine University of Lagos

Additionally, I have continued to contribute to professional Advancement through developments of programs such as Childfind, Intervention and Integration Program 'CIIP'; Care and Integration for Adolescent and Adults Living with Disability 'CAAD' and the 'Safe Driving Badge'.



Partnership spotlight: Medbridge

The IOPTP has a NEW exciting partnership with MedBridge for on-line continuing education. Reduced annual rates are available to IOPTP members. Link to the Educational Opportunities on the IOPTP web page for more information about access and the variety of courses.



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Physical Therapy: Pediatrics

INTRODUCTION TO THE MEDBRIDGE PEDIATRIC PHYSICAL THERAPY TRACK

The MedBridge Pediatric Physical Therapy course offering consists of several course series segmented into different focus areas. The track provides a structured program that is adaptable to all levels of users. Our goal is to help individuals learn from the best instructors in the industry providing comprehensive, evidence-based course content for the pediatric specialist. Topic areas include: neuromotor and neuromuscular impairments, school-based therapy, NICU, orthopedics, genetic conditions, and more.

Courses

Neuromotor

- Overview, Assessment, and Treatment of Cerebral Palsy
- · Neurogenesis and Developmental Disorders
- Neuroplasticity
- · Participation, Fitness, and Addressing Obesity
- · Orthotics/Bracing
- Hemiplegia
- · Contemporary NDT Treatment
- · Constraint Induced Therapy
- · The Sensory Side of Pediatric Toe Walking

Neuromuscular

- · Overview, Assessment, and Treatment of Torticollis
- Duchene Muscular Dystrophy
- · Scoliosis
- · Partial Weight-Bearing and treadmill training
- Orthotic Interventions for Low Tone, with a Focus on Down Syndrome

Genetic Disorders

- · Spina Bifida
- Down Syndrome
- Hemophilia
- · Rhett Syndrome and Fragile X
- · Respiratory, Cystic Fibrosis, and Asthma
- · Juvenile Idiopathic Arthritis

Early Intervention

- · Developmental Coordination Disorder
- Early Intervention Considerations for Cerebral Palsy, Autism, Down Syndrome and other Disabilities
- · Facilitation of Mobility and Assisted Mobility

NICU

- · Overview of Positions, Sensory Environment, and Feeding
- · Family-Based Care and Routines
- · Substance Exposure
- Infant Movement: Postural Control/Motor Movement and Development

School-Based

- Effective Evaluation Strategies For School-Based Therapists
- IEP Document and Goal Development
- Service Delivery Models
- · Mental Health and Promotion
- · Routines Based Early Intervention and Learning Opportunities
- · Working with students with learning disabilities

Orthopedics

- · Pediatric Upper Extremity Injuries in Sports
- · Pediatric Orthopedic Injuries: Foot and Ankle
- · Growth and Development
- · Pediatric Orthopedic Injuries
- · Pediatric Oncology and the Effects of Cancer
- · Pain Management

Featured Instructors

In addition to the core curriculum, the Pediatric Track Includes:

Additional Areas of Focus

- Taping
- · Assistive Technology
- · Traumatic Brain Injury/Brain Tumors
- · Motor Learning and Motor Control
- · Pediatric Pelvic Floor Rehabilitation
- · Lifespan: transition from childhood to adulthood
- · Addressing children with Spinal Cord Injuries
- · Serial Casting/Prosthetics
- · Special Olympics
- · Roles and Responsibilities of Related Service Providers

Barbara Connolly EdD, DPT, MEd, BS, FAPTA Roberta "Bertie" Gatlin PT, ScDPT, PCS Susan Effgen PT, PhD

Patricia Montgomery PT, PhD, FAPTA Elizabeth Kennedy PT, PhD, PCS

Cindy Miles PT, PhD. PCS, CNDT

Kathy Martin, PT, DHSc

Claudia Senesac PT, PhD, PCS

Mary Jane Rapport PT, DPT, PhD, FAPTA

Plus many additional instructors!



Board & Committee Chair Spotlights: Meet the Leaders of the IOPTP

Sheree York (president)

I retired from Children's of Alabama Feb 20. Hospital and Dept staff graciously hosted a party for colleagues, friends and family. On Feb 21, I joined the PT faculty at University of Alabama at Birmingham, where I received my BS and MS in Physical Therapy and worked as pediatric faculty and coordinator of a pediatric faculty practice from 1990-1996. It's like "coming home". I look forward to working with a great group of faculty with connections across departments and schools at UAB.



Ria Nijhuis-van der Sanden (vice-president)



After 10 years professorship and 45 years of working as pediatric physical therapist my retirement started with a farewell speech in the Nijmegen theatre. It was a great celebration with family, students, colleagues and patients. The coming 5 years I will still work at the university to coach the 22 PhD candidates finishing their theses. So my grandchildren need to share me with my work. The attached picture added to an exit interview show two of them looking forward to future travels with the camper.

Karen Hurtubise (secretary)

In December, I became a grandmother to a beautiful baby boy and have enjoyed watching the wonders of normal development in action daily. I am also desperately trying to complete my PhD in health service evaluation in 2019. To celebrate the completion of my data collection and second manuscript, my husband and I traveled to South America for the first time. As food, wine and adventure lovers, we took advantage of everything Peru and Ecuador had to offer. Although our first visit, it most certainly will not be out last!



Grace O'Malley (treasurer)

I work clinically in Temple Street Children's University Hospital (Ireland) where I lead a multidisciplinary service for child and adolescent obesity. I also works as a researcher in the Division of Population Health Sciences in the Royal College of Surgeons in Ireland. One of the projects I am working on currently is in the area of obesity monitoring and prevention called Big Data Against Obesity (BigO). This project is funded by the European Commission H2020 programme and seeks to collect and analyze big data on children's behavioural patterns and their environment. The project engages with school children as citizen scientists so they can help map the environment in which they live.

BigO will use the data to extract evidence on the local environmental factors which might influence childhood obesity (e.g. density of fast food outlets, access to green space or play facilities). BigO hopes to enable public health authorities to plan, develop, and execute effective programs against obesity. It also aims to help healthcare professionals to understand the environmental and behavioural drivers of obesity in their patients. For more information visit the project website https://bigoprogram.eu/. This type of project is important to physiotherapists as it addresses some key issues of interest to therapists like: physical activity behaviour and how this affects adiposity and fitness: how accessible the child's neighbourhood is and where advocacy efforts may be needed to ensure safe walkable environments for all children regardless of ability.

The screen shots below display how the user takes pictures of advertisments he/she is exposed to in their neighbourhood



& where these adverts are located.





Hilda Mulligan (research committee)



I am looking forward to meeting up with friends from around the world at WCPT congress in Geneva in May. This is the conference that always reminds me of where I 'belong' - physical therapists are truly a 'breed of our own'. Meantime, I have had the pleasure of getting to know a new great nephew, who lives in my home town, so I will get to see him quite a bit. He is photographed here with me on the 5th day after his birth. The wonder of a new life...

Barbara Connolly (education committee)

I just finished the 4th edition of the pediatric textbook (<u>Therapeutic Exercise in the Developmental Disabilities</u>) that I have coedited with Patricia (Trish) Montgomery. The first edition was published in 1987... so the text has a 32 year history. The text has been translated into several other languages as well and we hope that will occur with this edition as well. However, Trish and I don't think we will be up to doing the 5th edition!



Erin Wentzell (communications committee)



I recently went back to school and am working towards my doctorate in public health in health behavior at the George Washington University. I am loving the focus on community and population health! In addition, our family just welcomed a rescue puppy named Violet into our home, she is such a sweetheart!



Committee Spotlight: Education Committee

January 2019

International Organisation of Physical Therapists in Paediatrics (IOPTP) Statement on

Paediatric Essential and Recommended Content Areas in Entry Level Professional Physical Therapy Education

INTRODUCTION

The IOPTP acknowledges that the paediatric content in physical therapist professional entry level educational programs varies worldwide and that for some countries, mechanisms already exist to provide extensive paediatric content. However, this is not universal. The IOPTP anticipates that different countries will use this curriculum guide to varying extents dependent on their needs. While some aspects of this guideline may already be implemented, other aspects may include elements to which countries are striving to fulfill.

In 2011, the World Confederation for Physical Therapy (WCPT) developed "Guidelines for physical therapist professional entry level educational programs" ¹. The current identification of the paediatric essential content areas by the IOPTP was developed to expand the description of the paediatric content that should be incorporated in professional entry-level educational programs. The IOPTP guideline and the WCPT guideline may provide guidance on professional entry-level standards, curriculum? criteria, or courses of action in areas relevant to physical therapy education research, practice, or policy. These guidelines may be used for curriculum planning, curriculum development, in internal and external quality assurance processes and benchmarking, and standards assessment.

The Paediatric Content Areas were developed through a review of the literature on core competencies in paediatrics in physical therapy, along with a survey of the IOPTP member countries which was based on the outcomes of the literature review. The survey process identified the *Essential Content Areas* (ECA) in paediatric physical therapy curriculum (where 50% or more countries agreed that these survey items were important for entry-level education) and *Recommended Content Areas* (RCA) (where 40%-49% of the countries agreed that these survey items were important for entry-level education). The guidelines developed by the IOPTP incorporated the ECAs and RCAs, while highlighting additional areas identified that might be addressed.

Additionally, a mapping process then was used to confirm that the previously identified ECAs and RCAs were represented in the WCPT guidelines and to identify areas in the WCPT guidelines that were not represented in the IOPTP survey. To better encompass the constructs of the WCPT Guidelines, the IOPTP is recommending that paediatric-specific knowledge, skills. and abilities be applied across all aspects of the patient management model outlined in the WCPT Guidelines. The IOPTP also is recommending that all aspects of evidence–based practice and the ICF-CY model are supported in the educational content. Additionally, provision of family-centered care

and inclusion of content related to health promotion and fitness are strongly recommended.

While the IOPTP guidelines have been developed with input from, and specific reference to, the Member Organisations of the IOPTP, it also was developed with the intent that countries who are not members of the IOPTP or countries where the profession is not represented in WCPT will be able to use the guidelines.

THE NATURE OF PHYSICAL THERAPY EDUCATION

Physical therapist professional entry-level education programs need to equip students with the necessary communication and decision-making skills to work in collaboration with their patient/client, carer, other professionals, and colleagues ^{1 p.7}

The physical therapist professional curriculum includes content, learning experiences and clinical education experiences that encompass: Management of patient/clients with an array of conditions across the lifespan.

Essential competencies in physical therapy entry-level education should prepare clinicians to provide evidence-based, patient/client and family-centered care for paediatric patients/clients and their families.

The graduate of a physical therapy entry-level education program should demonstrate knowledge, skills, and abilities related to paediatric physical therapy as per the content areas listed below. The graduate should be able to apply an understanding of these content areas to clinical decision making and to successfully interact with infants, children, adolescents and their families/carers.

ESSENTIAL CONTENT AREAS (ECA's) in PAEDIATRICS:

- Typical development of motor, sensory, cardiorespiratory, cognitive, and socialemotional function.
- Atypical development of motor, sensory, and cardiorespiratory function related to common paediatric conditions.
- 3. Selection and implementation of age-appropriate <u>examination techniques</u> related to:
 - a. Motor development and function
 - b. Other areas global development
 - c. Integumentary system
 - d. Cardiorespiratory system
 - e. Orthotics, prosthetics, assistive devices
 - f. Functional training

- g. Physical agents, electrotherapy
- 4. Selection and implementation of age-appropriate intervention techniques
 - a. Strengthening
 - b. Motor development
 - c. Motor control
 - d. Motor planning
 - e. Integumentary system
 - f. Cardiorespiratory system
 - g. Orthotics, prosthetics, assistive devices
 - h. Functional training
 - i. Physical agents, electrotherapy
- 5. Family-centered care
- 6. Culturally competent care
- 7. Age appropriate communication

RECOMMENDED CONTENT AREAS (RCA's) in PAEDIATRICS:

- Typical development of language and communication to assist the physical therapist in successfully interacting with infants, children, adolescents and their families, and referring infants, children, adolescents when appropriate.
- Atypical cognitive and social-emotional development to more effectively
 work with children with cognitive impairment, autism spectrum disorder
 and other paediatric conditions that may impact the child's ability to
 interact with the physical therapist and participate in the physical therapy
 process.
- Laws and regulations related to services for individuals with disabilities/special needs - so that the physical therapist may more successfully assist the child/family in accessing available services.

Additionally, the WCPT Practice expectations (Section 5.1) cover content with unique paediatric information and application and should be included in physical therapy educational programs. These expectations address:

- a. Health promotion, wellness, fitness and injury prevention
- Inter-professional practice and/or working within the paediatric healthcare/educational team
- Delegation within the paediatric team

REFERENCE

^{1.} WCPT Guideline for Physical Therapist Professional Entry Level Education. 2011



The IOPTP FACEBOOK page is a great resource for upcoming events and information on the IOPTP and the WCPT. It is also a great resource for information on pediatric physical therapy with an international prospective on research, practice and advocacy.

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Join a Committee Today and become a part of this dynamic organization http://www.wcpt.org/ioptp/committees

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We are seeking submissions for the next newsletter.

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APRIL 2020

Please send submissions to Erin Wentzell at ewentzell@amail.com