

Thursday, November 7

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|------------------------|----------------|
| | 7:30 - 8:00 |
| | 8:00 - 8:15 |
| | 8:15 - 12:00 . |
| Break | 10:15 - 10:35 |
| Lunch provided on-site | 12:00 - 1:00 |
| | 1:00 - 4:00 |
| Break | 2:30 - 2:45 |
| Social Hour | 4:30 - 6:30 |
| | |

Friday, November 8

| 7:30 - 8:00 | Registration |
|---------------|---|
| 8:00 - 12:00 | |
| 10:00 - 10:35 | Break & Business Meeting for MSLHA Members, Election* |
| 12:00 - 1:00 | Lunch provided on-site |
| 1:00 - 4:00 | |
| 2:30 - 2:45 | Break |

*Please contact an EC member or email: MaineSpeechLanguageHearing@yahoo.com if you are interested in holding an office or participating on a committee.

BIOGRAPHIES

Ann Kummer PhD, CCC-SLP FASHA, retired as Senior Director of the Division of Speech-Language Pathology at Cincinnati Children's (the largest pediatric SLP program in the nation). She's done hundreds of national and international lectures on cleft palate and velopharyngeal insufficiency. She is the author of entitled Cleft Palate and Craniofacial Conditions: A Comprecurrently Professor of Clinical Pediatrics and Otolaryngology at the University of Cincinnati College of Medicine and teaches the craniofacial course at 5 universities. Dr. Kummer has received numerous honors and awards. She's an ASHA Fellow and received Honors of ASHA in 2017.

DISCLOSURE - Financial: Dr. Kummer will receive an hon from MSLHA for her presentation. She receives royalties from Jones & Bartlett Learning for the textbook: Cleft Palate and Craniofacial Conditions: A Comprehensive Guide to Clinical nent, and to Super Duper, Inc. for the clinical device, Oral & Nasal Listening. Dr. Kummer is employed by the Craniofacial Clinic and VPI Clinic, for which she receives a

Gina England MA, CCC-SLP, is a medical speech pathologist who has practiced in New Hampshire since 1981. She has worked all along the medical continuum of care including acute care, acute inpatient rehab, outpatient, day treatment, SNF and home health. Her areas of interest and specialty include cognitive rehabilitation, dysphagia, aphasia, adult acquired apraxia and post- concussion syndrome.

She has been a national presenter on topics concerning cognitive-communication disorders, dysphagia and postconcussion syndrome. She currently serves on the Board of Directors for the Brain Injury Association of New Hampshire and has served as Adjunct Faculty for The University of New Hampshire, Granite State College and Nashua Community

After 38 years of clinical practice, she continues to experience the joy in working as a speech and language pathologist in all children. Daniel's work centers around theory development settings with all ages.

DISCLOSURE - Financial: Ms. England will receive an honorari-

pathologist as a "second career" in 1990. She is a Board

Recognized Specialist in Fluency and Fluency Disorders, as a member of the initial cohort in 2001. She worked in the public-school setting for 10 years before joining the University of Maine, and recently "retired" from active, part time work as clinical faculty and supervisor in the Conley Speech Language and Hearing Center. Marybeth has maintained an active private practice, specializing in children, teens, and adults who stutter since 1994. Marybeth was awarded the National Stuttering Association Speech Language Pathologist of the year numerous professional articles, 23 book chapters, and the book in 2011 for her work to improve support services for children who stutter and their families and MSLHA Distinguished hensive Guide to Clinical Management, 4th Edition. She is Public Service Recognition Award in 2018. She continues to volunteer for the National Stuttering Association (NSA) and is the leader of the Eastern Maine Chapter of the NSA.

> DISCLOSURE - Financial: Ms. Allen will receive an honorar from MSLHA for her presentation. Non-financial relationship:
> Ms. Allen is a member of the National Stuttering Association, and is also the leader of the Eastern Maine Chapter of the NSA.

Jane Puhlman Phd, CCC-SLP, is an assistant professor in the department of Communication Sciences and Disorders at University of Maine. Her research centers around early intervention, specifically examining parent-child interactions within routines and creating interventions that are feasible and family focused. In addition, she investigates interventions to support language and literacy development for children who are Deaf or hard of hearing. Jane has been a licensed speech pathologist since 2003.

DISCLOSURE - Financial: Dr. Jane Puhlman will receive an honorarium from MSLHA for her presentation and she receives a salary from the University of Maine. No relevant non-financial

Daniel Puhlman Phd, is a faculty member in the human development and family studies program at University of Maine, part of the School of Educational Leadership, Higher Education and Human Development. His research is focused on family processes such as fathering and parenting. Specifically, he looks at co-parenting relationships and how mothers and fathers influence one another in the raising of and qualitative exploration of these family processes. He is also a Marriage and Family Therapist and has worked clinically with families for the past 15 years.

DISCLOSURE - Financial: Dr. Daniel Puhlman will receive an honorarium from MSLHA for his presentation and he receives a Marybeth Allen MA, CCC-SLP, BCS-F, is a salary from the University of Maine. No relevant non-financial





MAINE SPEECH LANGUAGE HEARING ASSOCIATION

2019 **CONFERENCE: NOVEMBER 7-8, 2019**

DoubleTree Inn by Hilton | Portland, ME

Conference Topics: THURSDAY AM OPTIONS

- 1. Clefts & Other Orofacial Anomalies: Effects on Speech & Resonance
- 2. Developing Creative & Functional Home Programs/The Post Therapy Phase of Recovery: Resources & Tools for the Ongoing Recovery Of Cognitive-Communication Skills
- 3. Therapy & Goals for the beginning stutter: What do they look like?

THURSDAY PM OPTIONS

- 1. Speech/Resonance Disorders & Velopharyngeal Dysfunction
- 2. Managing Challenging TBI Behavior Through Cognitive Reconnections
- 3. Therapy & Goals for the persistent stutter: What do they look like?

FRIDAY AM OPTIONS

- 1. Evaluation of Speech/Resonance Disorders & Velopharyngeal Dysfunction
- 2. Incorporating the Web Into Our Daily Interventions: Websites for Adult Rehabilitation
- 3. Addressing Maternal Gatekeeping in Early Intervention

FRIDAY PM OPTIONS

- 1. (A) Treatment of Resonance Disorders & VPI (B) Sound Judgement: Specific Speech Therapy techniques for Achieving Placement & Carry-Over
- Executive Functions: Low Tech and High-Tech Remediation Strategies

CEU Information: Up to 1.2 CEUs Intermediate / Professional Level



The Maine Speech-Language-Hearing Association is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. See course information for number of ASHA CEUs, instructional level and content area. ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.



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THURSDAY

AM OPTION # 1 THURSDAY: 0.6 CEUs

Clefts and other Orofacial Anomalies: Effects on Speech and Resonance

Presented by ANN KUMMER Presentation of normal orofacial anatomy and physiology and how types of clefts and orofacial

anomalies can affect speech and resonance. Syndromes will be presented with their typical dysmorphic characteristics. Included will be a discussion of the controversies regarding ankyloglossia. Many photos and short videos will be used for illustration.

Learner outcomes: Learners will be able to...

- 1.) discuss how clefts and various orofacial anomalies can affect speech and resonance.
- 2.) make a differential diagnosis between obligatory distortions and compensatory speech errors that result from orofacial anomalies.
- 3.) identify dysmorphic features that can potentially have an impact on function and are common in craniofacial

AM OPTION # 2 THURSDAY: 0.6 CEUs

Developing Creative and Functional Home Programs/The Post Therapy Phase of Recovery: Resources and Tools for the Ongoing Recovery of **Cognitive-Communication Skills**

Presented by GINA ENGLAND

In our current healthcare environment, benefits for rehabilitative services are grossly inadequate. The SLP is challenged with limited visits and patients experiencing more debilitating deficits as acute care lengths of stay continue to decrease. A functional home program has become one of the most critical components of the SLP's treatment plan and must be initiated long before discharge from therapy. Today's course will provide clinicians with an abundance of available resources and tools that will allow them to develop home programs that are creative, meaningful and relevant. Resources will include websites, apps, workbooks, games and software. In addition, participants will receive templates for data collection and patient instruction.

Learner outcomes: Learners will be able to...

- 1.) State a minimum of 3 components to a successful cognitive-communication home program
- 2.) Summarize a minimum of 3 iPad applications and/or internet resources that will enhance the home program
- 3.) Identify a minimum of 3 community-based activities that can facilitate ongoing cognitive-communication recovery

AM OPTION #3 THURSDAY: 0.6 CEUs

Therapy and goals for beginning stuttering: What do they look like?

Presented by MARY BETH ALLEN

Complete review of theories of causation, development and nature of Child Onset Fluency Disorder, followed by evidenced based therapy programs will be presented. Strategies and methods for working with parents and family environment will be discussed. A dedicated opportunity for participants to submit questions from their own caseload, will be provided.

Learner outcomes: Learners will be able to...

- 1.) Explain current understanding of the etiology and developmental variables related of child onset fluency
- 2.) Understand the two basic approaches to early stuttering intervention and be comfortable making individual choices based on client situations and preferences
- 3.) Understand and provide individualized therapy goals and strategies to implement both indirect and direct therapy strategies for the child who is beginning to stutter.

PM OPTION # 1 THURSDAY: 0.6 CEUs

Speech/Resonance Disorders and **Velopharyngeal Dysfunction**

Presented by ANN KUMMER

The presenter will provide a description of normal resonance and resonance disorders (hypernasality, hyponasality, and cul-de-sac resonance). Normal and disordered velopharyngeal function will be discussed. The effect of velopharyngeal dysfunction on both speech production and resonance will be explained and demonstrated. Many short videos will

Learner outcomes: Learners will be able to...

- 1.) Identify the characteristics and causes of resonance
- 2.) Describe the different types of nasal emission and its secondary effects on speech.
- 3.) Discuss the types and causes of velopharyngeal

PM OPTION # 2 THURSDAY: 0.6 CEUs

Managing Challenging TBI Behavior Through Cognitive Reconnections

Presented by GINA ENGLAND

The sequelae of TBI often include emerging behaviors that challenge the quest for independence. Impulsivity, aggression, depression and social inappropriateness become barriers to emotional, social and vocational recovery. Too often the survivor is defined by these behaviors which are attributed as a natural response to the "injury". In truth, many of the persistent challenging behaviors of TBI can be directly related to a specific cognitive deficit. Traditional techniques address the behavior, but not necessarily what is "driving" the behavior. Today's presentation will focus on cognitive deficits that are most likely to "drive' these behaviors and offer strategies to neutralize the behavioral responses to these deficits.

Learner outcomes: Learners will be able to... 1.) Define the relationship between post TBI challenging

behaviors and coanitive deficits

2.) Correlate specific behaviors with specific cognitive deficits 3.) Describe the significance of transition time to the management of challenging post TBI behaviors

PM OPTION # 3 THURSDAY: 0.6 CEUs

Therapy and goals for persistent stuttering: What do they look like?

Presented by MARY BETH ALLEN

This session will begin with a discussion of the complexity of stuttering and the importance of integrating its affective, behavioral, and cognitive (The ABCs) features into all aspects of assessment and therapy. Therapy strategies and activities, that work on all these aspects of stuttering, will be discussed and demonstrated, and will also focus individualization for each child or adult who stutters. A major intention will be to show how the same therapy activity/strategy can integrate the ABCs as well as, be used in ways that help generalize learned skills and attitudes to many different contexts. There will be dedicated opportunity for participants to submit questions from their own caseload for discussion by

Learner outcomes: Learners will be able to...

- 1.) Discuss the chronic nature of stuttering and the interrelationship of its social, emotional, and cognitive
- 2.) Provide therapy strategies and transfer activities for persistent stutterer which integrate both speech control and stuttering management.
- 3.) Develop individualized goals for children and adults who stutter which are measurable, realistic and easy to

Go to www.maineslp.org for more detailed descriptions of conference topics.

FRIDAY

AM OPTION # 1 FRIDAY: 0.6 CEUs

Speech/Resonance Disorders and

Velopharyngeal Dysfunction Presented by ANN KUMMER

Description and demonstration of simple low-tech and "no-tech" procedures that can be used for the assessment of speech sound and resonance disorders in clinic or school setting. The participants will learn skills for making a differential dx regarding disorders that require physical management versus those that require speech therapy. Specialized diagnostic procedures will be briefly discussed. followed by tutorial on how to do an effective intraoral. There will be a great deal of "audience participation".

Learner outcomes: Learners will be able to...

- 1.) Use appropriate procedures for assessment of speech, resonance, and velopharyngeal function.
- 2.) Make a differential diagnosis between characteristics of "nasality" that requires surgery versus speech therapy
- 3.) Conduct an effective intraoral examination in order to diagnosis structural anomalies that can affect speech.

AM OPTION # 2 FRIDAY: 0.6 CEUs

Incorporating the Web Into Our Daily Interventions: Websites for Adult Rehabilitation

Presented by GINA ENGLAND

Today's course will illustrate the presenter's concept of "simulation therapy". Simulation Therapy involves the utilization of technology to create therapy activities that are based in a virtual environment versus the more traditional desk top tasks. This approach affords the patient to more readily "master" skills required for independence in their personal and/or professional lives. Today's discussion will focus on the history and application of this therapeutic approach as well as demonstrate a variety of websites and applications; most of which are free and available within public domain. Simulation therapy offers the clinician a golden opportunity to increase the "functional factor" of their therapy interventions by providing creative and relevant activities to their patients.

Learner outcomes: Learners will be able to...

- 1.) Describe the concept of simulation therapy
- 2.) List a minimum of 3 websites that can facilitate simulated advanced coanitive-communication during a speech therapy session
- 3.) Define functional interventions in the presence of limited

AM OPTION # 3 FRIDAY: 0.6 CEUs

Addressing Maternal Gatekeeping in **Early Intervention**

Presented by JANE & DANIEL PULMAN The session will present El research focused on father's involvement. Then define and explain maternal gatekeep ing and provide examples. A link will be made between maternal gatekeeping and how it may support or hinder the coaching model in early intervention. Presented strategies will include ways to assess for gatekeeping behaviors, assist and facilitate co-parental cooperation and evaluate the need for more intense co-parental therapy. Examples using El strategies will be used during

Learner outcomes: Learners will be able to...

- 1.) Participants will be able to identify the importance of nvolving fathers in El intervention services.
- 2). Participants will be able to identify and describe the various types of maternal gatekeeping behaviors.
- 3.) Participants will be able to identify at least 3 strategies for working with co-parenting dyads where maternal gatekeeping is problematic

PM OPTION # 1 FRIDAY: 0.6 CEUs

Part I:Treatment of Resonance Disorders and VPI

and

Part II: Sound Judgment: Specific **Speech Therapy Techniques for Achieving Placement and Carry-Over**

Presented by ANN KUMMER In Part I: Description of treatment of resonance disorders and velopharyngeal insufficiency/incompetence (VPI), including prosthetic and surgical management. Focus on to whom the patient should be referred, based on the evaluation results. In Part II Discussion of speech therapy and a "cookbook" of specific therapy techniques for a variety speech sound errors, including effective and easy techniques to correct a lateral lisp and /r/. Tips on achieving rapid carry-over using motor learning principles will be

- disorders and velopharyngeal dysfunction, including surgical procedures, prosthetic devices, and speech therapy.
- various speech sound errors.
- 3.) Achieve more rapid carry-over thorough the use of motor memory principles.

The rehabilitation of executive function skills may incorporate both a restorative and compensatory approach. Today's course will focus on the necessity of including compensatory strategy training during any executive function treatment plan. When considering the selection of a compensatory strategy one size does not fit all. Recognizing the barriers to successful training is just as important as identifying the factors that will promote optimal outcomes. Our remediation strategies should never resemble a "cookie cutter" approach. Each individual patient will require their own unique set of strategies. In the spirit of individuality, examples of both Low Tech and High Tech strategies will be identified and discussed.

Learner outcomes: Learners will be able to... high-tech remediation modalities

- be employed for executive function development
- 3.) Identify a minimum of 3 high tech strategies that can be employed for executive function



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Learner outcomes: Learners will be 1.) Describe various treatment options for resonance 2.) Apply effect speech therapy techniques for

PM OPTION # 2 FRIDAY: 0.6 CEUs

Executive Functions: Low Tech and High Tech Remediation **Strategies**

Presented by JANE PULMAN

1.) Define the benefits attributed to both low tech and 2.) Identify a minimum of 3 low tech strategies that can



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