

M.O.R.E. INTEGRATING THE MOUTH WITH SENSORY AND POSTURAL FUNCTIONS (4-SESSION PRE-RECORDED ONLINE COURSE WITH LIVE Q&A WITH EILEEN & PATRICIA)

Course Code: CA-22B-01

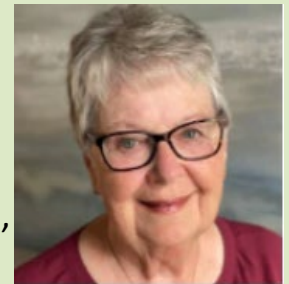
What you will learn?

- Outline the evolution of the M.O.R.E. Model, a developmental model based on foundations in neuroanatomy, kinesiology, child development, sensory motor function and clinical reasoning
- Describe the interaction of cranial nerves, the limbic system, cerebellum, brainstem, etc. and their contribution to development of the SSB
- Identify typical and atypical SSB oral motor development in children who have sensory processing/developmental dysfunction through functional observation
- *Apply treatment techniques designed to support oral motor function*
- Identify and document typical and atypical SSB respiratory development in children who have sensory processing/developmental dysfunction through functional observation
- Implement treatment strategies to improve respiratory patterns, self-regulation, postural control, visual motor skills, feeding and communication skills

Presented by:



Ms Eileen Richter,
MPH, OTR/L, FAOTA



Ms Patricia Oetter,
MA, OTR/L, FAOTA

Target: Occupational Therapist, Physiotherapist, Speech Therapist

Accreditations (HK Only): OT (12 pts); PT(8 pts);

Registration



Date & Time 17-18 & 24-25 Oct 2022 (4 evenings)

- Day1 & 3 @19:00 – 22:25 (HK Time)
- Day2 & 4 @19:00 – 22:05 (HK Time)
with live Q&A @21:35 - 22:05

Course Fee: HKD\$3,700@**

Group Discount: HKD\$3,500@**

(only for a group of 3 registrations with information of the other 2 co-registrants provided on the registration form. Each co-registrant has to fill in the enrollment form and pay individually)

**Including training materials & local postage that costs HK\$ 1,300@.

Application Soft Deadline*: 26 Aug 2022

(* Delivery of course materials before the beginning of the course is NOT guaranteed after the soft deadline)

^OT, PT, ST from neighbouring regions are welcome to register (with additional postage fee)

M.O.R.E. INTEGRATING THE MOUTH WITH SENSORY AND POSTURAL FUNCTIONS (4-SESSION PRE-RECORDED ONLINE COURSE WITH LIVE Q&A WITH EILEEN & PATRICIA)



Ms Eileen Richter,
MPH, OTR/L,
FAOTA,

- ◆ Master of Public Health degree in Maternal and Child Health
- ◆ 40+ years of working in public schools, hospitals and private practice.
- ◆ Co-author and contributor to professional books, articles and research
- ◆ International instructor on topic related to sensory integration, development



Ms Patricia Oetter,
MA, OTR/L, FAOTA

- ◆ Master degree in Special Education
- ◆ 40+ years of pediatric clinical experience in sensory integrative therapy, Therapeutic Listening, Samonas Sound Therapy, Cranial Sacral therapy and
- ◆ Certified in the administration and interpretation of the Sensory Integration and Praxis tests
- ◆ Co-authored a number of publications related to the treatment of sensory processing disorders



[Course Overview](#)



[Material List](#)

Tentative Course Schedule

Day 1 (17/10)	7:00-7:10 pm	Welcoming speech & Reminders by SAHK
	7:10-8:10 pm	Module 1A: Introduction to the Suck, Swallow, Breathe (SSB) Model
	8:10-9:10 pm	Module 1B: Clinical Reasoning & Functional Anatomy
	9:10-9:15 pm	Break Time
	9:15-10:30 pm	Module 1C: Neurological Substrates of the Suck/Swallow/Breathe Synergy
Day 2 (18/10)	7:00-7:47 pm	Module 2A: Functional Anatomy of Sucking & Swallowing
	7:47-8:22 pm	Module 2B: The SSB Synchrony – Feeding and Eating
	8:22-9:05 pm	Module 2C: Taste, Texture, Fit Practicum (Practicing along with the recording)
	9:05-9:30 pm	Module 2D: Oral Motor Assessment Issues
	9:30-9:35 pm	Break Time
	9:35-10:05 pm	Live Consultation (1) with Ms Eileen Richter & Ms Patricia Oetter
Day 3 (24/10)	7:00-7:50 pm	Module 2E: Oral Motor Treatment Strategies Practicum (Including Practicum Time)
	7:50-8:23 pm	Module 2F: Postural Development
	8:23-8:55 pm	The Relationship of Respiration to Function
	8:55-9:00 pm	Break Time
	9:00-10:00 pm	Biomechanics and Development of Respiration (Including Practicum Time)
	10:00-10:30 pm	Blow Toys Practicum
Day 4 (25/10)	7:00-7:40 pm	Module 3D: Assessment of Respiratory Function
	7:40-8:16 pm	Module 3E: Hands on Respiration Practicum (No Practicum Time)
	8:16-9:30 pm	Module 3F: Functional Respiratory Treatment
	9:30-9:35 pm	Break Time
	9:35-10:05 pm	Live Consultation (2) Ms Eileen Richter & Ms Patricia Oetter

Course Enrolment Form

PERSONAL INFORMATION

Name:

Mr/Ms/Dr/Mrs* _____ (Surname) _____ (First Name)

Occupation: _____ Organisation: _____

Contact number: _____ (mobile) _____ (office)

Practicing certificate registration number: _____

Correspondence Address

(for receiving course material): _____

Email Address (1): _____ Email Address (2): _____

COURSE TO ENROL IN

Course Title	Course Code	Registration Fee
<input type="checkbox"/> M.O.R.E. Integrating the Mouth with Sensory and Postural Functions (4-Session Pre-recorded Online Course with Live Q&A*)	CA-22B-01	<input type="checkbox"/> \$3,700 (Standard) <input type="checkbox"/> \$3,500 (Group Discount)^

^Only for a group of **3 registrations** with information of the other 2 co-registrants provided on the registration form. Each group registrant has to fill in this form and pay individually.

Name (Full Name)	Profession	Organisation	Mobile Number
co-registrant (1):			
co-registrant (2):			

PAYMENT

Payment should be made payable to "**SAHK**".

Bank name: _____

Cheque number: _____

*Delete as appropriate

I, the applicant, understand that the information provided on this form will be used by the SAHK Institute for course enrolment and administration purposes, and: (please '✓')

- I agree to the Institute keeping my personal data and wish to receive other course information from the Institute.
- I agree to the Institute keeping my personal data but do not wish to receive other course information from the Institute.
- I request to delete my personal data after completion of the course (Please note that the Institute cannot process your application for re-issuing of certificate, receipt, checking of CE points etc. after deletion).

The personal information stated above would be passed to Vital Links for maintaining the record of a participant's successful completion.

Applicant's Signature: _____ **Date:** _____

Application Method:

To register, complete and return this form together with cheque to:

***SAHK Institute of Rehabilitation Practice
17/F, 21 Pak Fuk Road, North Point, Hong Kong SAR***

Please mark “Course Application” on the envelope and put down the “applicant’s name” and “course name” on the back of the cheque.

Note:

1. Each enrolment form may only be used to apply for one course. Application to different courses must submit separate application with separate cheques.
2. Please fill out the required information in block letters and check the accuracy before mailing.
3. Course fees are non-refundable and non-transferable.
4. Refund will only be arranged upon course cancellation by the organizer.
5. Receipt acknowledgements and application results will be sent by e-mail.
6. For any enquiries, please contact us at (852) 2778 6191 or e-mail us at: irp@sahk1963.org.hk