Group Study Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions

Module Objectives and Activities

Learning Objectives

After completing the module, the participant will have the knowledge and skills to:

- 1. Describe the rationale behind an interdisciplinary approach to feeding assessment and intervention
- 2. Identify where an interdisciplinary approach is needed for a specific child
- 3. Identify the potential roles for each member of an interdisciplinary team
- 4. Determine what feeding team resources are available locally

Outline of Activities

- Introduction of the module
- Review handout packet materials with the group leaders
 - Learning objectives and outline of activities (this page)
 - PowerPoint slide handout
 - Resource list
 - Post-test
 - Evaluation form
 - Certificate of completion
- PowerPoint Presentation
 - Watch video segments of feeding team assessments and interventions.
 - Angel
 - The Lunch Bunch
 - Review contributors to and effects of feeding problems
 - Discuss the different forms that feeding teams can take...how teams might be formed in different settings
 - Review the potential roles of team members
 - Discuss case studies. What were the strengths of the feeding teams? How could they have been made stronger?
 - Case study: Chloe
 - Discuss resources for local feeding teams
- Post-test and evaluation forms
- Evaluation forms are exchanged for completion certificates
- □ Thank you for participating!



Group Study Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions

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Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions

Interdisciplinary Approach to Feeding



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- Nutrition for Children with Special Health Care Needs - 6 self-study modules
- Nutrition for Children with Special Health Care Needs - 4 group study modules (this presentation is one of them)
- Nutrition and Oral Health Curriculum all available (free) on-line at www.pacificwestmch.org

Interdisciplinary Approach to Feeding



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Group Study Curriculum
Module 1: Providing Family-Centered Care
Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions
Module 3: State and Local Nutrition Resources
Module 4: Improving Nutrition Interventions
Interdisciplinary Approach to Feeding Pac West MCH Distance Learning Network





Module 2: Interdisciplinary Approach to Feeding Interventions

- Video segments
- Review of Feeding Problems: contributors to and effects of
- Using a team approach to feeding problems
 - What does a feeding team do?
 - Who is on a feeding team?
- Case examples
- Discussion: implementing a team approach locally

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Learning Objectives

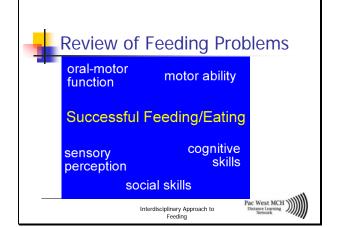
After completing the module, participants will have the knowledge and skills to:

- Describe the rationale of the interdisciplinary approach to feeding problems
- Identify when an interdisciplinary approach is needed
- Describe the roles of each team member
- Determine what feeding team resources are available locally

Interdisciplinary Approach to Feeding



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- Altered energy and nutrient needs
- Oral-motor problems
 - Delayed or slow development
 - Posturing and seating difficulties
 - Persistence of primitive reflexes
 - Craniofacial abnormalities
 - Uncoordinated suck, swallow, chew mechanisms

Interdisciplinary Approach to Feeding



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Contributors to Feeding Problems - continued

- Behavioral problems
 - Unpleasant intrusions into the oral cavity
 - Unpleasant feeding experiences
- Decreased appetite

Interdisciplinary Approach to Feeding



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Conditions That Can Interfere with Feeding

- Neurologic problems
- Congenital anomalies
- Metabolic disorders
- Cognitive or behavioral limitations
- Psychosocial issues
- Chronic illnesses
- GI disorders

oral-motor function motor ability

Successful Feeding/Eating
sensory cognitive perception social skills





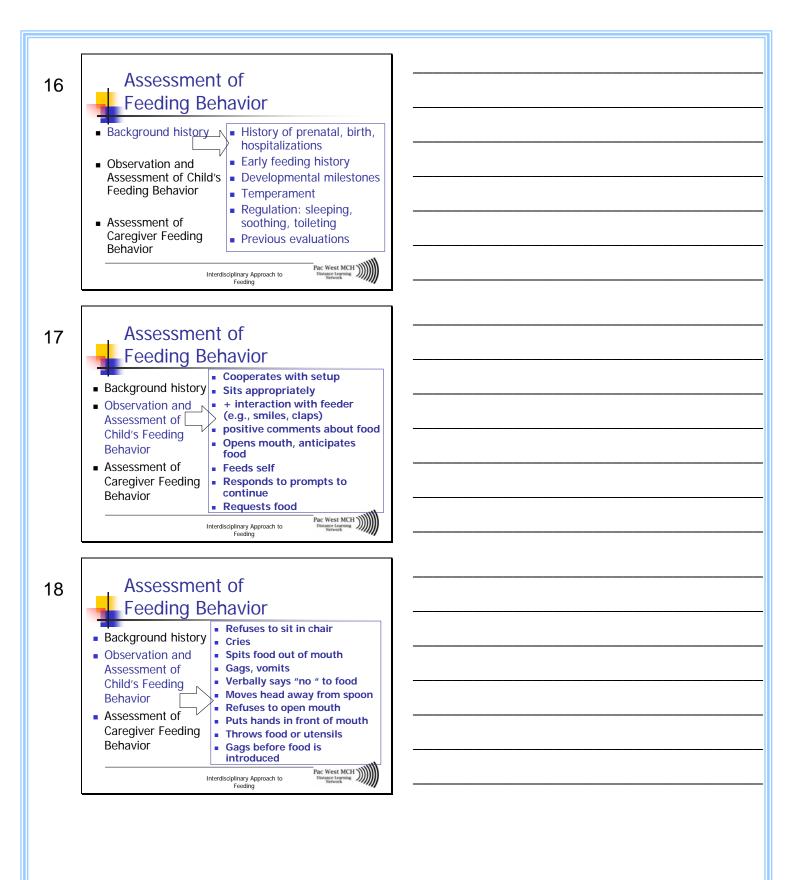
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10	Potential Effects of Feeding Problems	
	 Risk of nutrient deficiency (energy, fluid, protein, vitamins, minerals) Slowed growth (weight and/or stature) 	
	 Slowed growth (weight and/or stature) Social Relationship with family/caregivers 	
	Interdisciplinary Approach to Pac West MCH	
	Feeding Network	
11	An Interdisciplinary Team Approach is Needed When:	
	 Child has multiple, complex feeding issues, including more than one of the following: oral-motor, medical, nutritional, behavioral 	
	 Child has tried other uni-disciplinary feeding interventions (e.g., occupational therapy, or nutrition alone) without long-term success 	
	Multiple service providers have given the family conflicting recommendations Interdisciplinary Approach to Feeding Pac West MCH Distance Larging Pac West MCH Distance Larging	
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	Using a Team Approach	
	What does the team do?	

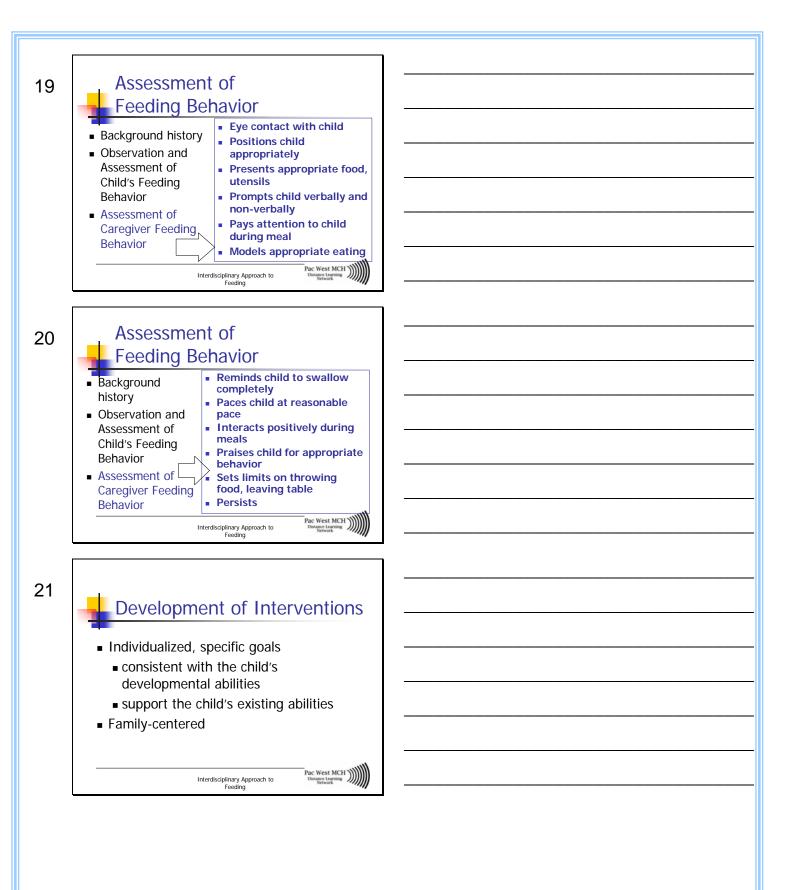
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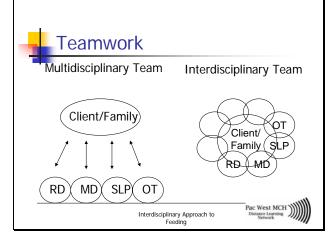
13 Video: Angel example of feeding team assessment Pac West MCH Interdisciplinary Approach to Feeding 14 Model Feeding Assessment Family brings food to feed child Brief interview with family Observation of feeding and behaviors of child and parents/caregivers Oral motor assessment of child Pac West MCH))))) Interdisciplinary Approach to Feeding 15 Model Feeding Assessment (continued) Nutrition and growth assessment Medical examination ■ Team conference Discussion and development of plan with the family Pac West MCH)))))) Interdisciplinary Approach to Feeding













Sara: An Example of Teamwork

The people involved in Sara's care were frustrated

- Dad: "Juggling too many recommendations, hard to fit everything in and keep it straight."
- RD: "Only one or two recommendations actually makes it into Sara's food pattern."
- OT: "I am trying to help Sara eat different foods, but I don't know which foods to offer."
- Teacher: "I want to continue the OT's interventions in the classroom, but I'm not sure what to do...they don't match the information sheet from the RD."

Interdisciplinary Approach to Feeding



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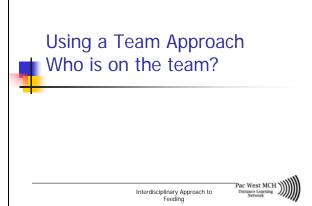
Sara: An Example of Teamwork (Continued)

Food- and eating-related issues are addressed efficiently, and efforts are streamlined:

- Dad: "Now, I know that we are following the recommendations at school and at home."
- RD: "We've developed more effective interventions, and I am confident that all recommendations are considered."
- OT: "I know that the foods and skills I am working with are also improving Sara's nutritional status."
- Teacher: "I can continue to help Sara learn to eat now that the therapies are manageable"



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Models: Examples of Teams

- 1. RD, OT, RN, family meet together at an Early Intervention center
- 2. PMD, public health RD, home SLP therapist meet with family individually and then communicate via conference call
- 3. RD, PHN, school SLP/OT/RN communicate about tube feeding and feeding therapy plan

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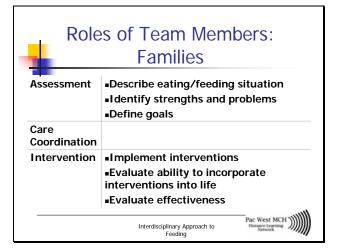
Potential Team Members

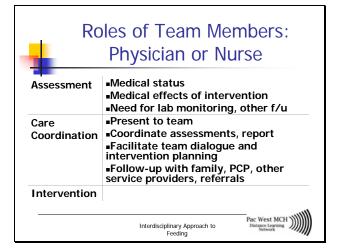
- Child's family/ caregiver(s)
- Physician
- Registered Dietitian
- Occupational Therapist
- Speech and Language Others Pathologist
- Physical Therapist
- Psychologist
- Nurse
- Social Worker
- Case Manager



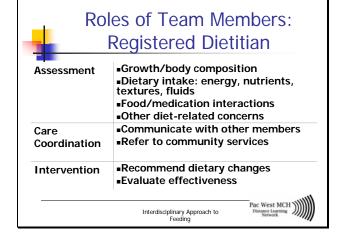








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Roles of Team Members: Psych/Social Professional

Assessment

Behaviors, attitudes in relation to food and eating through interview, observation

Care
Coordination

Refer to community providers
Refer to services and service systems

Intervention

Behaviors, attitudes in relation relation relation to food and eating through intervely method and eating through interview, observation

Care
Coordination

Refer to community providers
Refer to services and service systems

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Where would you fit on the team?

Yaroslav's EI program interested in developing a plan to expand his food repertoire

Teacher + behavior therapist + OT + WIC RD?







Where would you fit on the team?



Juliana seen at NeuroDev clinic annually. Between visits, WIC RD notices feeding skill delay, and calls RD with NeuroDev Clinic

- Feeding evaluation
- Begins feeding therapy at NeuroDev Clinic

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Video: Lunch Bunch example of feeding team group intervention



Interdisciplinary Approach to



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Chloe

- 6 years of age, transition off G-tube feedings
- Twin, previously LBW, repaired omphalocele
- Delayed development, but catching up





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Chloe

- **Initial assessment:** good oral-motor skills, catch-up growth occurring, lactose intolerance, small stomach capacity
- Recommendations: psychologist and nutritionist follow with behavioral approach to increasing oral feedings

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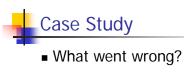


■ What went right?

Interdisciplinary Approach to Feeding

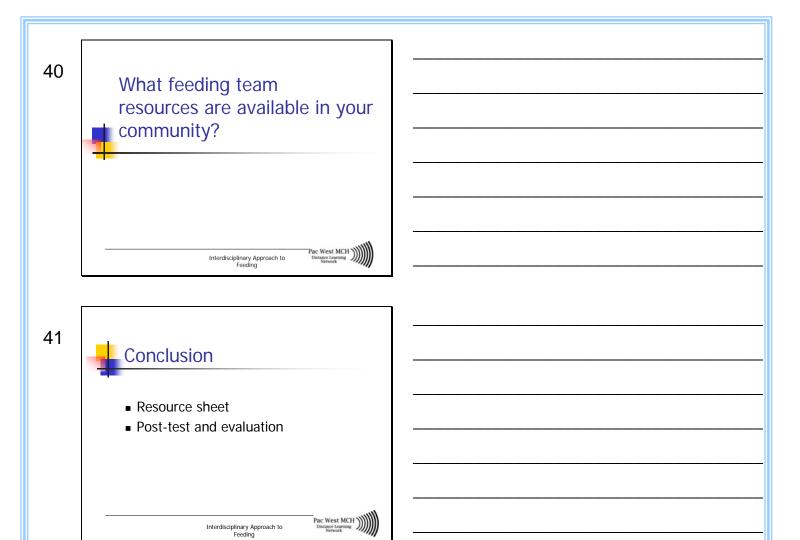


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Group Study Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions

Resources

Feeding and Eating. Nardella MT, Owens-Kuehner A. Feeding and Eating. In: Lucas BL, ed. *Children with Special Health Care Needs: Nutrition Care Handbook.* Pediatric Nutrition Practice Group and Dietetics in Developmental and Psychiatric Disorders, The American Dietetic Association. 2004. Available through ADA: www.eatright.org.

Oral-motor Feeding Problems. Glass RP. In: Nardella M, et al. *Nutrition Interventions for Children with Special Health Care Needs.* Washington State Department of Health. 2001. DOH Publication Number 961-158. This chapter describes the developmental sequence of oral-motor and self-feeding skills and outlines assessment, intervention, and evaluation of oral-motor feeding problems

To order, contact the Washington State Department of Health, Revenue Section, PO Box 1099, Olympia WA 98504 or visit the Washington State Nutrition for Children with Special Health Care Needs website: http://depts.washington.edu/cshcnnut. The publication can also be downloaded from the WA DOH website: http://www.doh.wa.gov/cfh/mch/CSHCNhome2.htm

Pre-Feeding Skills: A Comprehensive Resource for Feeding Development, 2nd ed. (2000) Morris S and Klein M. Therapy Skill Builders. A practical manual for feeding assessment and intervention. This revision of the 1987 book includes information about normal feeding development and factors that influence feeding. Assessment and treatment are discussed. Included is the Developmental Pre-Feeding Checklist.

Feeding and Swallowing Disorders in Infancy: Assessment and Management. (1992) Wolf LS and Glass RP. Addresses the diagnosis, evaluation, treatment, and follow-up of infants with varying types of feeding dysfunction. Item No. 076-1641-904-WT299

Feeding and Nutrition for the Child with Special Needs: Handouts for Parents. (1994) Klein MD and Delaney T. Therapy Skill Builders. A 600-page manual of reproducible handouts on nutrition and feeding issues. Topics include nutrition guidelines, breast and bottle-feeding, introducing food from a spoon, independent feeding, oral-motor treatment strategies, tube feeding, and family mealtime. Item No. 076-1643-32X-WT299.

Therapy Skill Builders
A Division of The Psychological Corp. (800) 211-8378
http://www.psychcorp.com

Collecting and Assessing Food Intake Information. Pipes PL, Glass RP. In: Trahms CM and Pipes PL. *Nutrition in Infancy and Childhood*, 6th ed. WCB/McGraw-Hill. 1997. A table in this chapter, Screening of Eating Abilities, lists guidelines for identifying problems with eating and feeding.

Feeding Infants: A guide for use in the Child Nutrition Programs United States Department of Agriculture Food and Nutrition Service. USDA FNS-258. 2001. The 105-page guide includes information on infant development, nutrition for infants, breastfeeding and formula feeding, preventing tooth decay, feeding



solid foods, drinking from a cup and choking prevention. This guide was distributed to child care centers, sponsors of CACFP homes, and state agencies, and is available in electronic format at: http://www.fns.usda.gov/tn/Resources/feeding_infants.html

How to Get Your Kid to Eat...but not too much. (1987) Satter E. Bull Publishing. This book is written for parents and discusses the impact of child development and parent-child relationships on feeding dynamics from infancy to adolescence.

Child of Mine, Feeding with Love and Good Sense. (2000) Satter E. Bull Publishing. This is a nutrition and feeding reference book for parents of children under age 4 years.

Both of the above books are available at bookstores, or directly from the publisher: Bull Publishing, http://www.bullpub.com.

Nutrition and Feeding for Infants and Children, Handout Masters. (1995, with 1997 updates) Satter E. Ellyn Satter Associates. Information is taken from *Child of Mine* and *How to Get Your Kid to Eat.* This set of handouts is appropriate for families, educators, and health care providers and is available from Ellyn Satter Associates, http://www.ellynsatter.com/order_form.html.

"Project Chance," A Guide to Feeding Young Children with Special Needs. (1995) Designed to assist early childhood program staff and other caregivers in feeding and nourishing children with special needs. Provides general information and practical tips on specific foods. Online: www.hs.state.az.us/phs/ocshcn/publications/prochance.htm

Office of Nutrition Services Arizona Department of Health Services 1740 West Adams, Room 203 Phoenix, AZ 85007 (602) 542-1886

Project SPOON: Special Program of Oral Nutrition for Children with Special Needs. (1991) Tluczek A, Sondel S. Report of a three-year pilot project using a multi-disciplinary model to serve parents of infants and children with chronic medical conditions. Available from the HRSA Information Center, Item Code: MCHE016. http://www.ask.hrsa.gov

Selected Nutrition Focus Articles:

Dietary and feeding needs of children with cleft lips and/or palates. Wong J and Cohea M. *Nutrition Focus*. 2001 16(4).

Guidelines for the use of thickeners in foods and liquids. Feucht S. Nutrition Focus. 1995 10(6).

Tube Feeding Update. *Nutrition Focus*. 2002 17(6).

Practical Tips for Tube Feeding. Frederick A. *Nutrition Focus*. 2003 18(1).

Transition from tube feeding to oral feeding. Glass RP, Nowak-Cooperman KM. *Nutrition Focus* 2003 18(2).



Eating/feeding problems of children: the team approach. Cloud HH, Bergman J. *Nutrition Focus.* 2004 19(6).

Diagnosis and Treatment of Feeding Disorders in Children with Developmental Disabilities. Schwarz SM, Corredor J, Fisher-Medina J, Cohen J, Rabinowitz S. *Pediatrics*. 2001; 108(3): 671-676. An abstract is available on-line; non-subscribers can purchase a copy of the article: http://www.pediatrics.org/cgi/reprint/108/3/671

Guidelines for the Development and Training of Community-Based Feeding Teams in Washington State. Pipes P. and Lucas B. Office of Children with Special Health Care Needs, Community and Family Health - Washington State Department of Health. 1994 (25 pages). This document provides guidelines for forming community feeding teams. These guidelines were developed from the Washington State experience.

For additional information or to receive a copy of the guidelines contact: Maria Nardella, MA, RD CSHCN Program, Dept. of Health
Community and Family Health
New Market Industrial Campus, Bldg 7, PO Box 47880
Olympia, WA 98504-7880
(360) 236-3573, Fax: (360) 586-7868



Email: Maria.Nardella@doh.wa.gov

Group Study Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions

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Mark True of F	False for each of the following statements.
	Sandy is an RD at the local early intervention center. She works with an occupational therapist, nurse, and social worker. They see children with feeding problems together, and work with families to develop comprehensive interventions. This is a description of an interdisciplinary feeding team.
	Transitioning a child from tube feedings to oral feedings always requires an interdisciplinary feeding team intervention.
	The nutritionist assesses a child's posture, tone, oral functioning, swallowing, reflux, growth and dietary intake as part of an interdisciplinary feeding assessment.
	Feeding team members have specific roles which do not overlap.
Give an exan	nple of one feeding team resource available in your community:



Group Study Module 2: Participating in the Interdisciplinary Approach to Feeding Interventions

Evaluation

Format and Design		Strongly				Strongly
The written materials supported the presenta	ation well	Agree 5	4	3	2	Disagree 1
he group dynamic helped me to absorb the		5	4	3	2	1
he PowerPoint presentation was helpful to		5	4	3	2	1
he way the materials were organized made	-	5	4	3	2	1
he format enhanced my understanding of t		5	4	3	2	1
he speaker/lecturer delivered the content w		5	4	3	2	1
/hat organization or format changes wo	uld have improved this presentati	on?	-1			""
ontent		Strongly Agree				Strongly Disagree
ne materials covered met the stated object	ives	5	4	3	2	1
hat I learned today is relevant to my clinica	al practice	5	4	3	2	1
ne clinical examples provided were				11Å	.	
consistent with what a clinician mig	ht encounter in practice	5	4	3	2	1
illustrated the points presented in the	ne module	5	4	3	2	1
fect on Practice					•••••••••••••••••••••••••••••••••••••••	
can think of recent instances where this info	ormation would have been useful to	5	4	3	2	1
y clinical practice		3	4	J 3		<u>'</u>
I plan to use this resource in my practice		5	4	3	2	1
I would recommend this curriculum to my peers		5	4	3	2	1
What is your discipline or area of ex Early Intervention Education Health Administration	pertise? Health Education Nursing Nutrition		Resource	t/ Family/ (s		r
Which category best describes you? Student Person with a disability Parent	☐ Paraprofessional☐ Policymaker☐ RD		☐ DTR ☐ Other:			
Which of the following describes yo	ur place of employment or age	ency:		mmunity o	organizati	on
☐ For profit agency☐ County/ state agency☐ Federal agency☐ Foundation	Hospital Interagency group Legislative body		=	ademic ins ner:		—

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Continuing Professional Education

Certificate of Attendance

Nutrition for Children with Special Health Care Needs Session Title: **Participating in the Interdisciplinary Approach to Feeding Interventions**

Participant Name

Date Completed City, State

1 # CPEs Awarded | II Level

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