

**Occupational Therapy**

**Speech Therapy**

**Physical Therapy**

**Feeding Therapy**

**&**

**Crossway Academy K-8**

**Welcome Packet**

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 Welcome Packet

***Mission***

Crossway, Inc. provides comprehensive pediatric occupational therapy services for children and families with special needs in the home, natural environment or clinic setting. The team at Crossway, Inc. believes in integrating the family, caregivers and the multi-disciplinary team into the individualized treatment program for a child with special needs.

***History***

As a practitioner, Shelley Dean, OTD, OTR/L recognized a need for more pediatric therapy services in the Charlotte area. In 2004, Shelley opened Crossway Pediatric Therapy as a sole provider. Shelley chose the name “Crossway” to demonstrate the journey made by families and children with special needs. The image of the bridge symbolizes the child’s path which ultimately leads to their dreams and independence if provided with the. appropriate supports. Through this vision, Shelley has expanded her services from a sole provider to a multidisciplinary team with an office of nearly 5,000 square feet of therapeutic space. Through the support and dedication of the therapists and specialists, Crossway has grown and will continue to grow to meet the demands of the Charlotte area. The team at Crossway believes in using multidisciplinary and educational approaches to facilitate the desired goals for each child and their supporting family.

Many children develop typically. They need only love, nourishment, and a gentle guiding hand to help them develop into successful adults. On the other hand, some children need a little extra support to reach milestones necessary to develop into successful and independent adults. Crossway Pediatric Therapy facilitates development and supports families through occupational therapy, learning specialists, speech and language pathology, and physical therapy.

Keep in mind that each family comes to Crossway at a different point in their journey. We are here to help and support your child and family to the best of our abilities. At times the therapists will make recommendations for services provided within Crossway and to outside sources. Some children require the support of only one discipline, while other children need the support of various therapists in addition to supporting disciplines such as neuropsychologists, neurologists, psychologists, etc.

***The Crossway Difference***

The Crossway family is dedicated to providing the best therapy possible and therefore the training of each therapist is extensive. Crossway therapists and specialists seek out the most recent research and treatment approaches to help facilitate and support the development of each child.

Crossway Pediatric Therapy is dedicated to supporting and facilitating the developmental milestones necessary to help children succeed at school, in the community, and within their family. Crossway believes in building self-esteem and self-confidence necessary to be as independent as possible.

***The Therapy Process***

Crossway services a vast number of children in the clinic, at home, and in the school settings. Many of the therapists are required to leave the clinic throughout the day to treat children in other settings within the community. For families receiving services in the early intervention program of the CDSA, it is expected that you will be a part of your child’s therapy in order to perform the activities when your therapist is not there. We are here to educate you on how to play, transition and go through your daily routines so that you can also illicit the optimal responses from your child. Grandparents or other caregivers are invited to come to the therapy sessions at your discretion if you think that it will help to increase the awareness of how to work with your child.

Families receiving services in the clinic, we ask that you arrive 5-10 minutes before your appointment and return to pick up your child at least 15 minutes before the completion of his/her session. It is important to the therapists at Crossway to provide the best treatment possible to each child and must therefore adhere to his/her schedule. If at any time you feel as though you have not received enough information about your child’s treatment session or overall treatment plan, please talk with your therapist and set up a family conference.

If your child is attending a 60 minute treatment session it will typically be laid out as follows:

* 1-5 minutes – Therapist will ask about the child’s week and inquire about any changes in schedule, difficulties outside the clinic, affects of prior treatments, and other pertinent information.
* 45-50 minutes – Your child will receive about 50 minutes of skilled therapy
* 5-10 minutes – The last portion of the session the therapist may ask you to observe the child and/or discuss the overall treatment session. At this time the therapist will typically provide strategies and/or “homework” to translate treatment activities across settings.

Many parents and guardians find it very beneficial to come to each treatment session with a notebook and pen to record information provided by the therapist. Throughout your child’s time at Crossway you should expect to receive various hand outs, homework assignments, resources, home exercise programs, etc. Crossway is here to address the needs of each child, however strategies and activities must continue within the home and community for your child to reach his/her highest potential.

***Insurance Information***

Due to the variations of insurance coverage, it is critical to keep track of the number of therapy sessions attended by your child. Crossway keeps count of the total number of visits, however to avoid confusion and unexpected coverage issues it is very helpful to also keep track for your self. Attached, you will find a visit count form to help keep track of the number of visits your child has attended as well as your co-payment and general coverage of therapy services. Unfortunately, many insurance companies only cover a certain number of visits per year. By keeping track of the number of visits, you will avoid unexpected issues related to the number of visits allotted to your child. We are currently on panels with BCBS of NC, NC and SC Medicaid, Aetna and Medcost.

 ***Cancellation policy***

Due to the demand for OT, ST, and PT, any appointment cancelled with less than 24-hours notice and not rescheduled will result in a cancellation fee of $55. Repeated cancellations may result in either forfeiture of permanent appointment or termination of service. Failure to contact the office prior to appointment time will be as no show and a full fee-for-service may be charge. Cancellation fees are not reimbursed by insurance companies or Medicaid and will be billed to the responsible party.

***Location attractions***

In case you need to run a quick errand while we work with your child in our fun play house, Crossway is conveniently located down the street from a variety of stores and restaurants including Wal-Mart, Dollar Tree, Harris Teeter, Steak and Shake, McDonalds the New Zealand Café and more! But, don’t forget to come back in time for a tutorial on the activities that were conducted, assessments and suggestions for home programming.

When leaving the clinic make a left on Monroe Rd. followed by a left on Sardis Rd. The restaurants and stores are located on both sides of the street. Please remember to return to the clinic 15 minutes prior to the end of your child’s therapy session.

***Closing Dates***

Crossway Pediatric therapy will be closed on the following Holidays:

* + - * New Years Day
			* Memorial Day
			* 4th of July
			* Labor Day
			* Thanksgiving Day
			* Christmas Day

***Therapies Provided by Crossway Pediatrics***

* **Occupational Therapy**

Pediatric occupational therapists focus on the development of children necessary to be successful in their everyday life. The first five years of life are an important time for growth and development. Development refers to the change in a child that occurs during the life span. The changes occur in an orderly sequence involving physical, emotional and cognitive development. For children who do not progress through the developmental sequence, OT can provide support and skilled treatment to help facilitate and meet the developmental milestones throughout child development.

Nearly all intervention activities with children have playful qualities, because play is an occupation of high relevance and importance to a child. Play within a therapy session begins with the child’s current skill level, then the therapist guides the activity to a point at which it becomes challenging for the child, with the goal of eliciting a higher level response. The therapist grades (makes it easier or more difficult) to focus on the specific skills necessary to help the child meet his/her goal. The therapist supports performance through modeling, cueing, physical assistance, and reinforcement (Case-Smith, 2005).

OT intervention addresses the following areas (Case-Smith, 2005):

* Bilateral motor integration
* Fine motor strength and coordination
* Visual perception
* Visual motor skills
* Handwriting
* Splinting
* Gross and fine motor development
* Self-care
* Sensory processing
* Social skills
* Cognition (memory, sequencing, safety awareness, etc)
* Timing and rhythm
* Adapting activities or providing assistive technology
* Modifying environments
* Promoting children’s participation and preventing disability through education of the child and supporting family
* **Physical Therapy**

Physical and occupational therapy often share similar or common goals for their clients and offer complementary approaches to intervention. While both therapies address similar goals, the disciplines use different techniques, theories, and approaches to treat clients. Treatment typically includes therapeutic exercise, cardiovascular endurance and training, and training in activities of daily living (American Physical Therapy Association, 1999). As with occupational therapy, in the pediatric setting PT provides treatment through the use of play.

Physical therapy intervention addresses joint function, muscle strength, mobility and endurance. Physical therapists address gross motor skills that involve the large muscles of the body and help to improve children’s posture, gait, and overall body awareness.

In general services for children provided by physical therapists include (Case-Smith, 2005):

* Developmental Activities
* Strengthen
* Movement and mobility
* Tone management
* Motor learning
* Balance and coordination
* Recreation, play, and leisure
* Equipment design, fabrication, and fitting
* Orthotics and prosthetics
* **Speech-Language Pathology**

According to the American Speech-Language-Hearing Association (ASHA, 2002), speech pathologists work to prevent speech, voice, language, communication, swallowing, and related disabilities. They screen, identify, assess, diagnose, refer, and provide treatment and intervention, including consultation and follow-up services, to children at risk for speech, voice, language, communication, swallowing and related disabilities (Case-Smith, 2005). Speech and language disorder can affect the way children talk, understand, analyze or process information. Speech disorders include the clarity, voice quality, and fluency of a child’s spoken words. Language disorders include a child’s ability to hold meaningful conversations, understand others, problem solve, read and comprehend, and express thought through spoken or written words.

Communication also develops in an orderly sequence. Language skills are divided into receptive and expressive language. Receptive Language refers to what a child understands such as vocabulary, following directions and pointing to pictures. Expressive language refers to what a child can communicate either by words, signs or gestures. Speech skills are the skills required to produce certain sounds, often called articulation or phonology. Speech-language pathologists may also prescribe and dispense augmentative and alternative communication devices and other communication prostheses and assistive devices. Furthermore, they work with children who have oral motor problems that cause eating and swallowing disorders.

Speech-Language Pathologists address the following areas (Case-Smith, 2005):

* Provide prevention, screening, consultation, assessment and diagnosis, treatment, management, and counseling for the following disorders:
	+ Speech
	+ Language (comprehension and expression in oral, written, graphic language: language processing, and pre-literacy
	+ Swallowing
	+ Sensory awareness related to communication
* **Learning Support Specialist**

Learning Support is an area distinct from other educational or instructional fields. A Learning Support Specialist is experienced and trained to focus on the process of learning and how to facilitate learning by addressing different processing areas (visual processing, memory, auditory processing, etc.) utilizing multisensory methods and programs. Often, this work is focused on reading or math, but it can also effectively address comprehension, language processing and writing skills. The goal of working with a Learning Support Specialist is to improve foundational academic skills to the point where a student is meeting his/her academic potential and able to work more independently. The Learning Support Specialists always begins at the student’s current level of function and moves forward to help facilitate learning and further skill development. Developing confidence with new skills and abilities is an important part of Learning Support. Often, the methods utilized by a Learning Support Specialist can help when other methods seem ineffective. Learning support specialists are flexible enough to deal with anything, creative enough to address every student’s needs, and have the ability to make even hard work enjoyable. The relationship between Learning Support and other therapies is ideal in a multidisciplinary therapeutic environment because collaboration and knowledge of other professional disciplines is integral to success.

In general, learning support specialists work with students of all ages to improve their reading, math, writing, comprehension and language processing skills through the use of multi-sensory processing methods. The focus of treatment is on the development of confidence, necessary to identify and use the child’s strengths, even when facing challenging work.

* **Feeding Therapy**

 Mission: to teach children with sensory processing disorder, food allergies and difficulty

 eating that eating is fun and to educate the families how to have family meals and how to feed

 their child with sensory processing disorder including shopping and cooking. The feeding clinic

 will also educate doctors on the myths of feeding and how to address the myths.

 As therapists and parents, we have so badly wanted our clients and kids to eat that we have tried

 almost anything. As parents you may even feel that you have tried everything... rewards,

 bribes, begging, etc. Some things may have worked, if only for a while, and some things didn't, but

 the child is still struggling with eating. Now, it's time to look at what we may have done wrong

 and how to approach the child with new tools that are proven effective.

 The feeding clinic is made up of occupational therapists (OT), speech therapists (ST),

 registered dietitians (RD) and outside consultants from the mental health field such as a

 individual with their Masters of Social Work (MSW), a psychologist and an M.D.

Our therapists implement the S.O.S. (Sequential Oral Sensory) Approach to Feeding (Kay A. Toomey, Ph.D., Author).

We specialize in the treatment of these issues:

Failure to Thrive

Picky Eaters

Oral Motor Difficulties

Dysphagia

Feeding Sensory Issues

Problem Feeders

* **Crossway Academy**

 There are many wonderful schools in the Charlotte area that do a wonderful job with our

 children. However, the families at Crossway Pediatric Therapy repeatedly approach us

 expressing their concerns regarding whether or not their child is getting what they need at

 local schools regarding academia and social skills. Specifically, children who learn differently

 as well as need help with social skills.

 Therefore, we at Crossway Pediatric Therapy are excited to respond to this feedback by starting

 a combined Clinic-School called Crossway Academy which opened in Fall of 2011. One of

 our hopes is to reach out to the families that currently home school their children because they

 are unable to find the right school fit for their children and yet the child continues to need

 social exposure and tutoring.

 Crossway Academy is for children ages 6-10 and/or for a middle school for children ages 11-14.

 The Academy is located onsite within Greylyn Business Park. Education is provided by

 qualified special education teachers that are dedicated to this mission.

**Family Treatment Log**

Please record the date of each treatment session to keep track of his/her visit count

1.\_\_\_\_\_\_\_ 10.\_\_\_\_\_\_\_ 19\_\_\_\_\_\_\_ 28\_\_\_\_\_\_\_\_\_

2\_\_\_\_\_\_\_\_\_ 11\_\_\_\_\_\_\_\_ 20\_\_\_\_\_\_\_\_ 29\_\_\_\_\_\_\_\_\_

3.\_\_\_\_\_\_\_\_ 12.\_\_\_\_\_\_\_\_ 21\_\_\_\_\_\_\_\_ 30\_\_\_\_\_\_\_\_

4\_\_\_\_\_\_\_ 13\_\_\_\_\_\_\_\_\_ 22\_\_\_\_\_\_\_\_ 31\_\_\_\_\_\_\_\_\_

5.\_\_\_\_\_\_\_ 14.\_\_\_\_\_\_\_\_\_ 23\_\_\_\_\_\_\_\_\_ 32\_\_\_\_\_\_\_\_

6.\_\_\_\_\_\_\_\_ 15\_\_\_\_\_\_\_\_\_\_. 24\_\_\_\_\_\_\_\_\_ 33\_\_\_\_\_\_\_\_\_

7.\_\_\_\_\_\_\_\_ 16\_\_\_\_\_\_\_\_\_\_ 25\_\_\_\_\_\_\_\_\_ 34\_\_\_\_\_\_\_\_\_\_

8.\_\_\_\_\_\_\_\_ 17.\_\_\_\_\_\_\_\_\_\_ 26\_\_\_\_\_\_\_\_\_ 35\_\_\_\_\_\_\_\_\_\_

9.\_\_\_\_\_\_\_\_ 18\_\_\_\_\_\_\_\_\_\_\_\_ 27\_\_\_\_\_\_\_\_\_ 36\_\_\_\_\_\_\_\_\_\_\_

Co-Pay:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Deductable:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Effective Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of visits:

 PT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 OT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 SP\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Therapist Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_