PWR!Moves®

Therapist Certification Workshop

Date September 21-22, 2024

Location

Delivered via Zoom Eastern Time Zone

Workshop Fee

\$650 per person Discounts available for groups of 2 or more

What will you learn?



- How each of the Basic 4 PWR!Moves[®] provides you a PD-specific method of deconstructing and then retraining complex everyday movements (functions / ADL)
- How you can use PWR!Moves[®] to target specific Parkinson's symptoms, including rigidity, bradykinesia, incoordination, and reduced self-awareness
- How to implement Exercise **4**BrainChange[®] principles to achieve optimal performance and motor-cognitive challenge your clients with Parkinson disease
- How to develop treatment plants which integrate PWR!Moves[®] and progressive aerobic training tailored to individuals with different disease severities

Who is eligible?

- Physical Therapists, Physical Therapy Assistants
- Occupational Therapists, Occupational Therapy Assistants
- PT, PTD, PTA, OT, OTD, OTA students

For additional information see the PWR! Workshop registration page

501(C)3 Non-Profit Organization

Are continuing education hours offered?

For details see the continuing education information page at https://www.pwr4life.org/ceu-information/

Earn 15 -17.5 contact hours



PWR!Moves[®] Therapist Certification Virtual Workshop Agenda: Day 1

My Time	Eastern Time	Торіс
	11:00 am	Introduction and review of workshop materialsAbout PWR!
	11:30 am	Hot topics in Parkinson disease (PD)
	12:00 pm	 Review Basal Ganglia Circuits & Symptoms Exercise as medicine: Indications
	12:35 pm	Break
	12:50 pm	Exercise as medicine: Practice essentials—Exercise
	1:50 pm	Exercise as medicine: Practice essentials—PD-Specific skill training PWR!Moves Rationale / Multi-symptom approach
	2:15 pm	 Group Practicum: Level 1 Deconstructing Function Basic 4 PWR!Moves[®] in Standing, Sitting, All Fours, Prone & Supine Prepare, Activate, Boosts Connect to PD symptoms Connect to functional application PWR!Moves[®] Optimizing Quality
	3:45 pm	Long Break
	4:30 pm	 Faculty Demonstrations with people with Parkinson's (PWP) Basic 4 PWR!Moves[®] Live demonstrations of faculty working with people with PD Use handout to document treatment of volunteers
	5:40 pm	 Group Discussion and Breakout Session Debrief live demonstrations In breakout groups, use clinical decision-making skills in groups
	6:45 pm	Break
	7:00 pm	 Group Practicum Level 2 Mobility Flows Debrief Level 1 / Intro to Level 2 Basic 4 Flow Mobility Flows: Overground and Vertical
	8:35 pm	 Group Practicum: Level 2 Action Sequences (cont.) Functionality Flows
	9:00 pm	End of Day 1



PWR!Moves[®] Therapist Certification Virtual Workshop Agenda: Day 2

My Time	Eastern Time	Торіс
	11:00 am	Share your PWR! Pearls from Day 1
	11:10 am	Applying Exercise4BrainChange [®] Principles to PWR!Moves [®]
	12:35 pm	 Group Practicum: Review PWR!Moves[®] Level 1 & Level 2 Prepare, Activate, Flows, and Boosts Advanced Positions
	1:15 pm	 Group Practicum & Faculty Demonstrations Boost Progressions (i.e., Breathe, Hands, Eyes, Voice, Face) Level 2 Introduction to Multidirectional Practice
	1:45 pm	Break
	2:00 pm	 Group Practicum: Level 3 Multidirectional Mobility Progressions Positional / Vertical / Overground
	2:50 pm	 Group Practicum: Video Case Studies (N=4) Implementing the Retrain Functional Mobility Model in Rehabilitation
	3:30 pm	Long Break
	4:15 pm	 Group Practicum: Video Case Studies (cont.) Implementing the Retrain Functional Mobility Model in Rehabilitation Discussion on Dosage and Assessments
	5:40 pm	Exercise4BrainChange [®] Principles: Emotional Engagement
	6:00 pm	 Rehabilitation to Community and Back: New Paradigms Building your local PWR!Moves[®] networks as a PWR!Moves[®] Certified Professional
	6:20 pm	Q & A
	6:30 pm	End of Day 2



The PWR!Moves[®] curriculum is an extension of Dr. Farley's pioneering research in whole-body amplitude training using a singular attentional focus to target bradykinesia. But now, therapists will use different methods of instruction for a multi-symptom approach. Whole-body movement training is replaced with targeted whole-body functional skill-training with the goal to preserve functional mobility, functional fitness and participation. Instead of a strict protocol, therapists will be able to design and implement a flexible intervention framework that allows for clinical reasoning, personalization, adaptation and learning principled motor-cognitive progressions across disease severity. Finally, the curriculum is evidenced-informed and designed to be updated when new research becomes available.

To guide physical therapists in how to develop comprehensive plans of care that retrain functional mobility we have created a motor learning framework with three training levels that progress in difficulty and complexity (i.e., part to whole practice) and provide different methods of instruction to address multiple symptoms of PD. In Level 1, functional mobility is deconstructed into four fundamental skills (Basic 4 | PWR!Moves[®]) that address motor control deficits related to axial extension, weight shifting, axial mobility, and transitions. The focus is on two instructional methods: Prepare, the mindful rehearsal of each of these skills in different positions using whole-body large amplitude movements to target rigidity; and activate, the progression of these skills into high-effort repetitive "exercise" to target bradykinesia and strength. In Level 2, the focus shifts to rebuilding action sequences using these basic skills to simulate meaningful multidirectional overground movements and transitions (mobility) and daily physical activities (functionalities); an instruction method we call Flow to target incoordination and balance. In Level 3, therapists use Level 1 & 2 skills to target goals and to retrain personalized functional mobility goals determined in their rehabilitation plan of care. Throughout the part to whole, retrain functional mobility framework, therapists will learn to skillfully apply evidenced- informed learning techniques to exploit goal-directed and habitual pathways to increase success in real-life functional mobility conditions.

Recent advances in Parkinson disease (PD) basic and clinical science research suggest both physical rehabilitation and exercise have symptomatic benefits, increase the efficacy of antiparkinsonian medication, and result in motor and cognitive improvements. However, maintenance of physical activity and exercise habits is necessary to slow the motor and cognitive deterioration and lower mortality. Our goal is to prepare PD-specialized physical and occupational therapists to collaborate with their local PD-specialized exercise professionals and to include them as part of their clients' healthcare team to keep persons with PD moving back and forth from rehab to exercise and back to rehab for life. We believe that by focusing on the same fundamental PD-specific skills and methods of training in rehab and group exercise, it may be possible to extend the benefits of rehabilitation and reap the additive and complementary benefits of group exercise programs necessary to slow motor and cognitive deterioration and lower mortality.

Upon successful completion of this workshop, participants will be certified as PWR!Moves[®] Certified Therapists for three years.



- Lectures that allow time for questions and response to chat, participants share take-home points with each other on Day 2 AM to highlight what was most significant to their practice
- Interactive practicums with faculty whole group instruction to practice the PWR!Moves[®] fundamentals that includes face to face demonstrations and feedback (via zoom) with time for integrated questions and answers throughout the practicum.
- Interactive faculty instruction to show modifications (adaptations, progressions) with time for Q&A and feedback
- Faculty debriefs with chat and time to answer questions and discuss highlights.
- Live demos of faculty working with volunteers with PD of varying disease severity
- Faculty debrief of the volunteer demo to problem-solve, discuss clinical reasoning for intervention rationale and patient management, identify symptoms and modifications performed, and allow time for Q&A
- Break out session to learn from peers while problem solving their "next day" treatment session. Each group will report their consensus treatment ideas and provide their rationale to the whole group for further discussion and problem solving
- Pre-recorded videos of PWP to illustrate different constructs and treatment ideas
- Pre-recorded video cases (n=4) showing therapists implementing the curriculum with people with PD



Upon completion of the course, participants will be able to:

- 1. Discuss recent hot topics in Parkinson disease related to etiology, heterogeneity, and prevalence.
- 2. Recognize motor and non-motor symptoms and how they interfere with function and present barriers to all types of physical activity.
- 3. Explain the significance of exercise that targets prevention, disease correction, diseasemodification vs. symptoms of PD.
- 4. Summarize recent advances in basic and clinical neuroscience that have brought exercise to the forefront in PD treatment as it relates to progressive aerobics and PD-specific skill training.
- 5. Explain how the Basic 4 PWR!Moves[®] target motor control skills become impaired in people with PD and interfere with functional mobility.
- 6. Perform the Basic 4 PWR!Moves[®] in 5 positions: prone, supine, all fours, sitting, standing and be able to adapt and progress while optimizing quality of practice.
- 7. Describe how the curriculum may be personalized to differentially target multiple PD symptoms, including rigidity, bradykinesia, incoordination, attention and executive function.
- 8. Effectively use PWR!Moves[®] Boosts with PWP as a stand-alone tool or as a component integrated into interventions along with other PWR!Moves[®] exercises.
- 9. Effectively apply Exercise4BrainChange[®] principles to achieve optimal motor/cognitive challenge for your clients with Parkinson disease.
- 10. Develop treatment plans which integrate PWR!Moves[®] and progressive aerobic training tailored to individuals with PD with different disease severities.
- 11. Explain the significance of implementing the PWR!Moves[®] curriculum as a foundation for shared goals and bi-directional referrals for life.





Becky G. Farley, PT, MSPT, PhD

Dr. Becky Farley is a physical therapist, neuroscientist, Parkinson exercise specialist, Chief Scientific Officer and Founder of Parkinson Wellness Recovery | PWR!. She received a PhD in Neuroscience from the University of Arizona, a Master of Science in Physical Therapy from the University of North Carolina, and a Bachelor of Physical Therapy from the University of Oklahoma. She is a published author on exercise for people with Parkinson disease and gives public and medical seminars worldwide. Her postdoctoral research investigated the muscle activation deficits underlying bradykinesia in people with PD. She was awarded, and completed, an R21 NIH-funded randomized clinical trial to establish the benefits of LSVT BIG®, the first

whole-body, amplitude- focused, physical and occupational therapy exercise approach for individuals with PD. Dr. Farley also created PWR! Moves, a more flexible Parkinson-specific exercise approach that directly targets the training of amplitude into building blocks of function. Each building block counteracts a primary motor control deficit shown by research to interfere with everyday mobility. Dr. Farley has been training therapists and fitness professionals for the last 14 years and is now focusing on publishing data from the Tucson-based PWR!Gym and integrating new research into PWR!Moves[®] workshops and PWR!Gym programs. She believes lifelong access to integrated rehabilitation and community exercise and wellness programming is necessary to optimize and perpetuate functional mobility benefits and to slow disease progression.



Jennifer Bazan-Wigle, PT, DPT, CEEAA®

Jennifer Bazan-Wigle has worked in neurological rehabilitation for the entirety of her physical therapy career. She is currently a physical therapist at Parkinson Wellness Recovery's PWR!Gym in Tucson, AZ, where she specializes in one-on-one rehabilitation and group exercise instruction with people with Parkinson disease. Since 2013, she has focused on honing her expertise in treating the movement disorder and Parkinson's population, emphasizing freezing of gait and advanced PD. Jennifer is a PWR! Moves Certified Therapist, PWR!Moves[®] Certified Instructor, and a Certified Exercise Expert for the Aging Adult (CEEAA). Jennifer has delivered community, academic, and peer-reviewed presentations on Parkinson disease in the US and internationally. As an integral part of the NeuroFit faculty, Jennifer has

worked closely with Dr. Becky Farley to develop course content for PWR!Moves[®] Therapist and Instructor Training and Certification Workshops, and has delivered over 70 continuing education workshops, across the US and world. In doing so, Jennifer has helped thousands of physical therapists, occupational therapists, and fitness professionals implement evidence-based rehabilitation and group exercise for people with Parkinson disease.



Shelley Hockensmith, PT, MPT

Shelley Hockensmith is a physical therapist with nearly 20 years of experience in outpatient neurological rehab settings. She graduated from the University of Evansville with her MPT in 2003 and in 2008 became a Board Certified Neurologic Clinical Specialist re-certifying in 2018. She has experience in private practice and hospital-based multi-disciplinary neurologic teams working with people with neurological disorders such as stroke, multiple sclerosis, brain injuries, spinal cord injuries, and movement disorders. She also was fortunate to work in a specialized vestibular and balance disorder clinic as both clinician and coordinator with a team of

audiologists and physical therapists. As an avid believer in the power of exercise for people with Parkinson Disease, she became certified in LSVT BIG in 2007, attended one of the first PWR!Moves[®] workshops, and eventually began working at the PWR!Gym in 2019 as a PWR! Moves Certified Therapist. She joined the PWR!Moves[®] faculty in 2022





Maria Allen, PT

Certificate of Advanced Competency in Home Health

Maria has over 35 years of experience as a physical therapist treating people with neurological disorders, primarily severe brain injury, stroke, and vestibular dysfunction. She began to focus on working with the Parkinson's population in 2011. After earning her LSVT BIG certification, she became a PWR!Moves[®] Certified Therapist in 2013 and PWR!Moves[®] Certified Instructor in 2014. She began attending Parkinson disease related conferences, including Allied Team Training for Parkinson's (ATTP) in 2014, the 19th International Congress of Parkinson's Disease and Movement Disorders in 2015, and the World Parkinson

Congress in 2016. She had the privilege of volunteering at the PWR! Retreat in both 2015 and 2016. She developed and currently serves as Coordinator of a multidisciplinary Parkinson Wellness Program for a home health company serving the Central Coast area of California, which now serves over 260 PWP each year. She recently earned her Certificate of Advanced Competency in Home Health. She has been assisting with PWR!Moves® Therapist and Instructor Training and Certification Workshops since 2016. As a Home Health Consultant for PWR!, she has been instrumental in the development and teaching of our home health focused PWR!Moves® Therapist Training and Certification Workshops across the country. In March 2019, she joined the NeuroFit faculty to teach PWR!Moves® Therapist Workshops with more regularity. While not traveling the US teaching, Maria works closely with her local Parkinson Disease community and serves as the Board Advisor and Education Chair for the Central Coast Parkinson Association and as an Advisor for a group of Cal Poly, San Luis Obispo students-turned-entrepreneurs who are developing a new device for freezing of gait.



Kristina Dorkoski, PT, DPT, CEEAA® Board Certified Neurologic Clinical Specialist

Dr. Kristina Dorkoski is a physical therapist, Board-Certified Neurologic Clinical Specialist, Certified Exercise Expert for Aging Adults, Professional Yoga Therapist, and certified Pilates instructor. Dorkoski specializes in the rehabilitation of adults with Parkinson's disease and vestibular dysfunction. With over 20 years of clinical experience, she serves as lead therapist and mentor on the neurologic team at Allied Services Heinz Rehab outpatient center in Wilkes-Barre, PA. Dorkoski's treatment philosophy is to provide evidence-based, "whole person" care. She

enjoys coupling this approach with the advanced technologies available at her facility. Dorkoski earned her BS in health science and MS in physical therapy from Misericordia University, doctorate in physical therapy from Temple University, and Certificate in Vestibular Rehabilitation from the American Physical Therapy Association. She is an LSVT BIG® and PWR! Moves® Certified Therapist and past PWR! Retreat volunteer. Dorkoski is a long-term adjunct faculty member at Misericordia University, where she instructs neuromuscular labs and a special practices course on the use of Pilates and Medical Therapeutic Yoga® in rehabilitation. Dorkoski has taught continuing education courses for the Pennsylvania Physical Therapy Association and appeared as an expert panelist on public television programs. Additionally, Dorkoski is a 2022 Parkinson's Foundation Community Grant awardee and facilitates her local Parkinson's support group.



- 1. Ahlskog JE. Aerobic Exercise: Evidence for a Direct Brain Effect to Slow Parkinson Disease Progression. *Mayo Clinic Proceedings*. 2018;93(3):360-372. doi:10.1016/j.mayocp.2017.12.015
- Farley BG, Koshland GF. Training BIG to move faster: the application of the speed–amplitude relation as a rehabilitation strategy for people with Parkinson's disease. *Experimental Brain Research*. 2005;167(3):462-467. doi:10.1007/s00221-005-0179-7
- 3. Farley BG, Fox CM, Ramig LO, Mcfarland DH. Intensive Amplitude-specific Therapeutic Approaches for Parkinsons Disease. *Topics in Geriatric Rehabilitation*. 2008;24(2):99-114. doi:10.1097/01.tgr.0000318898.87690.0d
- Ferrazzoli D, Ortelli P, Cucca A, Bakdounes L, Canesi M, Volpe D. Motor-cognitive approach and aerobic training: a synergism for rehabilitative intervention in Parkinson's disease. *Neurodegener Dis Manag.* 2020;10(1):41-55. doi:10.2217/nmt-2019-0025
- Ferrazzoli D, Ortelli P, Madeo G, Giladi N, Petzinger GM, Frazzitta G. Basal ganglia and beyond: The interplay between motor and cognitive aspects in Parkinson's disease rehabilitation. *Neuroscience & Biobehavioral Reviews*. 2018;90:294-308. doi:10.1016/j.neubiorev.2018.05.007
- 6. Frazzitta G, Maestri R, Bertotti G, et al. Intensive Rehabilitation Treatment in Early Parkinson's Disease. *Neurorehabilitation and Neural Repair.* 2014;29(2):123-131. doi:10.1177/1545968314542981
- 7. Hirsch MA, Farley BG. Exercise and neuroplasticity in persons living with Parkinson's disease. *Eur J Phys Rehabil Med.* 2009;45(2):215-229.
- 8. Johansson ME, Cameron IGM, Van der Kolk NM, et al. Aerobic Exercise Alters Brain Function and Structure in Parkinson's Disease: A Randomized Controlled Trial. *Ann Neurol.* 2022;91(2):203-216. doi:10.1002/ana.26291
- 9. Marinelli L, Quartarone A, Hallett M, Frazzitta G, Ghilardi MF. The many facets of motor learning and their relevance for Parkinsons disease. *Clinical Neurophysiology*. 2017;128(7):1127-1141. doi:10.1016/j.clinph.2017.03.042
- 10. Moriarty TA, Mermier C, Kravitz L, Gibson A, Beltz N, Zuhl M. Acute Aerobic Exercise Based Cognitive and Motor Priming: Practical Applications and Mechanisms. *Frontiers in Psychology*. 2019;10. doi:10.3389/fpsyg.2019.02790
- 11. Nonnekes J, Nieuwboer A. Towards Personalized Rehabilitation for Gait Impairments in Parkinson's Disease. *Journal of Parkinsons Disease*. 2018;8(s1). doi:10.3233/jpd-181464
- 12. Sacheli MA, Murray DK, Vafai N, et al. Habitual exercisers versus sedentary subjects with Parkinsons Disease: Multimodal PET and fMRI study. *Movement Disorders*. 2018;33(12):1945-1950. doi:10.1002/mds.27498
- 13. Sacheli MA, Neva JL, Lakhani B, et al. Exercise increases caudate dopamine release and ventral striatal activation in Parkinson's disease. *Mov Disord*. 2019;34(12):1891-1900. doi:10.1002/mds.27865
- 14. Schenkman M, Moore CG, Kohrt WM, et al. Effect of High-Intensity Treadmill Exercise on Motor Symptoms in Patients With De Novo Parkinson Disease. *JAMA Neurol.* 2017;80045. doi:10.1001/jamaneurol.2017.3517
- 15. Schootemeijer S, Darweesh SKL, De Vries NM. Clinical Trial Highlights Aerobic Exercise for Parkinson's Disease. J Parkinsons Dis. 2022;12(8):2297-2306. doi:10.3233/JPD-229006
- 16. Tollár J, Nagy F, Kovács N, Hortobágyi T. Two-Year Agility Maintenance Training Slows the Progression of Parkinsonian Symptoms. *Med Sci Sports Exerc.* 2019;51(2):237-245. doi:10.1249/MSS.00000000001793
- 17. Wulf G, Lewthwaite R. Optimizing performance through intrinsic motivation and attention for learning: The OPTIMAL theory of motor learning. *Psychonomic Bulletin & Review*. 2016;23(5):1382-1414. doi:10.3758/s13423-015-0999-9
 - PWR! uses the latest research to inform our programs, workshops, and resources. The full body of research referenced during the workshop is updated regularly and can be viewed at:

pwr4life.org/parkinson-research