

Wednesday, 10:00 – 11:30, D4

## **MOVE International: Mobility Opportunities Via Education/Experience Introduction**

**Jennifer Egan**

586-405-1779 [egan.jennifer@sccresa.org](mailto:egan.jennifer@sccresa.org)

**Deborah Lawniczak**

810-455-4418 [lawniczak.deborah@sccresa.org](mailto:lawniczak.deborah@sccresa.org)

**Beverly Young**

810-455-4419 [young.beverly@sccresa.org](mailto:young.beverly@sccresa.org)

Objectives:

1. Identify effective methods for the practical application of concepts related to improving the delivery of services for persons with developmental disabilities
2. Identify and emphasize attitudes that enhance the opportunities for persons with DD to achieve their optimal potential
3. Develop strategies to promote community inclusion in meeting the needs of persons with developmental disabilities

Notes:

**MOVE: Mobility Opportunities Via Education**  
*“To Walk & Not be Weary”*  
 Quote by Linda Bidabe,  
 Founder of MOVE

Presenters: Deborah Lawniczak , Beverly Young & Louann Rinke RN

Woodland Developmental Center  
 St. Clair County RESA, Marysville, MI

4/19/2013 1

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**“MOVE”**  
**Mobility Opportunities Via Education**

- MOVE was created by Special Education teacher Linda Bidabe
- It was founded in the belief that the ability to move is the first foundation stone in building personal dignity.
- MOVE is designed to help individuals who have severe disabilities improve their ability to sit, stand, walk and transition while participating in their functional activities.

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**What MOVE is . . .**

- A collaborative effort between family and professionals “It takes a team to move”
- A program that changes ways of thinking, changes attitudes and promotes inclusive living
- A structured program based in assessment and accountability
- Embedded into existing curricula and activities that are important to the individual and their family

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## What MOVE is not . . .

- A cure
- Limited to people with multiple disabilities
- A pull-out, stand alone program
- Seeking to replace other services and therapy

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## How does mobility help?

Mobility involves weight bearing and moving in an upright position. It improves:

- Cardiovascular fitness
- Bone health
- Correct body alignment
- Respiratory health

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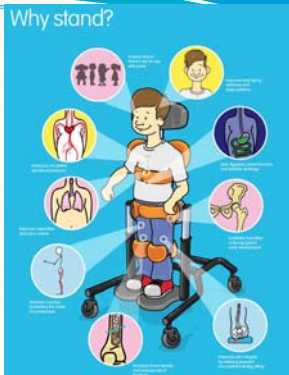
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Tadpole  
Adaptive, LLC  
2013



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## Purposes of the Program

Move is designed to:

- Use education as a means of systematically acquiring motor skills.
- Combine therapy and education to establish activity-based, functional programs for individuals and their caregivers.
- Help individuals naturally practice their motor skills while performing everyday tasks.



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- Reduce time and energy requirements for daily care.
- Provide a way to measure and show small increments of improvement in functional motor skills.
- Provide appropriate sequence of motor skills

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- Provide the individual with the basic motor skills needed for development of other skills such as expressive language, self-care, furthering education, work opportunities and recreational opportunities.
- Equipment that is used to support the program across the whole range of educational settings.



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## Curricular Approaches

<p style="text-align: center;">Developmental Model</p> <ul style="list-style-type: none"> <li>• Bottom Up</li> <li>• Teach skills from normal sequence of development</li> <li>• Skills taught in isolation</li> </ul>	<p style="text-align: center;">Ecological Model</p> <ul style="list-style-type: none"> <li>• Top Down</li> <li>• Teach activities &amp; skills needed to optimize independent functioning</li> <li>• Skills taught within functional activities that are relevant and of interest to the student and their family</li> </ul>
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## Three Instructional Challenges

<p>1) Time</p> <ul style="list-style-type: none"> <li>- Positioning</li> <li>- Needs</li> <li>- Medical Care</li> </ul> <p>2) Rate of Learning</p> <ul style="list-style-type: none"> <li>- 2000 trials</li> </ul>	<p>3) Generalization</p> <ul style="list-style-type: none"> <li>- Difficulty Transferring skills to new situations</li> </ul>
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## Three Solutions

- Teach during daily routines
  - transitions
  - daily activities
- Carefully select skills to be addressed
  - create meaningful opportunities for practice
- Teach in natural environments and activities

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## MOVE Pilot Program (11 students)

Prior to Program	After seven weeks
<ul style="list-style-type: none"> <li>• 4 sit safely on a chair</li> <li>• 3 fully bear own weight</li> <li>• 2 stand with assistance</li> <li>• 2 take steps in a walker</li> <li>• 0 walk up to 20 ft independently</li> </ul>	<ul style="list-style-type: none"> <li>• 9 sit safely on a chair</li> <li>• 10 fully bear own weight</li> <li>• 8 stand with assistance</li> <li>• 11 take steps in a walker</li> <li>• 1 walks up to 20 ft independently</li> </ul>

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## Things to consider for safety...

- Head too large to be supported by the neck
- Circulatory disease which prevents the participant from being placed in a vertical position.
- Respiratory distress
- Brittle bones
- Muscle contractures
- Curvature or rotation of the spine
- Hip dislocation
- Foot or ankle abnormalities
- Pain or discomfort in any part of the body

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## MOVE Curriculum/MOVE Assessment Profile cont'd

- Top-Down Motor Milestone Test
- Summary of test results form




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## MOVE Curriculum/MOVE Assessment Profile

- Six steps of the MOVE program
  - Step One – Testing
  - Step Two - Setting Goals
  - Step Three - Task analysis
  - Step Four – Measuring prompts
  - Step Five – Reducing prompts
  - Step Six – Teaching skills

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**Top-Down Motor Milestone Test**

**SUMMARY OF TEST RESULTS**

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

1. Write in squares representing the highest skill level.  
 2. Fill in all squares to the right of the success skill levels.  
 3. Circle skills to be addressed first.

	GRADUATE LEVEL	LEVEL I	LEVEL II	LEVEL III
A. MAXIMIZE AN OBJECT POSITION				
B. GRASP				
C. RELEASE				
D. TRANSITIONS FROM STANDING TO STANDING				
E. TRANSITIONS FROM STANDING TO SITTING				
F. SITTING TRANSITION TO STANDING				
G. WALKER POSITIONING				
H. TRANSITIONS FROM SITTING TO WALKING				
I. TRANSITIONS FROM WALKING TO SITTING				
J. WALKER BRACKETS				
K. WALKER WHEEL WALKING				
L. WALKER UP STEPS				
M. WALKER DOWN STEPS				
N. WALKER AND CHAIRMAN COORDINATION				
O. WALKER AND WALKER				
P. WALKER DOWN SLOPES				

PROPERTIES DERIVED FROM OTHER SCHEDULES ARE INDICATED BY ITALICIZED LETTERS AND NUMBERS

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## Varying Levels of Success

- Graduate Level
- Level I
- Level II
- Level III

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## GRAD LEVEL – WALKING FORWARD

Cora Rose



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## Graduate Level: Walking Forward

- Acquisition of skills at this level assures independent mobility in the home and minimal assistance in the community.
- Participants who complete this level graduate from the program and can expand their motor skills through traditional programs.
- A wheelchair is never needed.

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## Level I: Walking Forward

- Acquisition of skills at this level assures that no lifting of the participant by the caretaker is required.
- The participant can walk with both hands held or with a walker for a minimum of 300 feet.
- A wheelchair is needed only for long distances.

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**LEVEL I**

**CORTEZ**



**JONATHON**



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**Level II: Walking Forward**

- Acquisition of skills at this level assures that the participant will be able to walk at least 10 feet with help from another person or front leaning walker.
- Lifting is minimal due to help from the participant.
- A wheelchair is required for distances over 10 feet.

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**LEVEL II**

**Andrew**



**Corey**



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## Level III: Walking Forward

- Acquisition of skills at this level will improve bone health and functioning of internal organs as well as decrease the likelihood of joint deformities and pain.
- Three basic pieces of equipment were designed to be used as prompts for skill acquisition.
- These include a front-leaning chair a mobile stander and a front-leaning walker

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## LEVEL III

Michael



Amanda



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## LEVEL III AND HEALTH BENEFITS

Shaylynn



Andrew



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## Additional Benefits

- As a person gains motor skills, he becomes easier to care for at home and at school.
- As mobility improves, a person has better access to the community.
- Family and teaching team see progress as students become more functional in everyday settings.

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## What This Means . . .

MOVE produces results through hard work, repetition, and dedication by trained professionals and families throughout the world.

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## In Summary

*The best treatment method is the one that makes a positive, functional difference in the life of the student, the parents, and their community.*

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