CLINICIAN'S CORNER

NDT Training: An Eye-Opening Experience
Learning and Integrating NDT Theory into Practice

By Taryn L. Cucinotta, PT, MPT

Ever since graduating from physical therapy school six years ago and deciding that I wanted to work in pediatrics, I have been strongly interested in the NDT theory/approach/technique. An NDT eight-week course in pediatrics had been hosted at the facility where I was working in my first year of practice, and witnessing some of the treatment demonstrations increased that interest.

I was drawn to my co-workers who took the course as I saw how they were learning and evolving and immediately integrating their enhanced knowledge into their sessions. I wanted to soak up what they were learning. I loved the hands-on approach and the idea that I could use gentle hands to communicate with my clients (most of whom have little to no functional communication skills and significant cognitive delays) to let them know just what I wanted them to do, how to move, and where to go.

With experience, my handling and observation skills improved, as did my basic understanding of the whole child and how all the systems of the body interact. I found, however, that I continued to struggle with putting into words the science behind my treatment sessions: why I was doing what I was doing and why it worked was difficult to explain because I did not fully understand it myself.

When I had the opportunity to apply for the NDT pediatrics course, my main goal in doing so, aside from improving my overall clinical skills, was to gain better skills in analysis. I wanted to be able to look at a child, problem-solve what was limiting her function, and critically think about how to help improve that function.
What I learned in the course was that much of what I was already doing almost instinctively fell right in line with NDT; learning the theory and the neuroscience behind it gave me the resources to voice the “why."

My first favorite thing about the NDT 8-week pediatric course was the way in which child development was re-taught, with an emphasis not just on what happens when, but also on why it is important and on the implications for other skills that, ideally, will develop in the future. I learned that it is not the sequence of the functional skills achieved that is critical, but the components of those skills that create the foundation and allow for the development of more advanced function.

I also have a much better understanding of the progression of secondary impairments and what the rehab team and caregivers can do to prevent them. I learned just how much the gross motor development of a child is intertwined with his development in all other domains and just how critical it is for the entire team to work together, communicate openly, and learn from each other in order to facilitate the optimal level of function for that individual.

In my professional position, I am regularly asked to provide rationale and reasoning for our therapeutic approach to physicians and other clinical staff, other therapists, parents, and teachers, as well as PT, OT, and SLP students. This is perhaps the area of my clinical practice where I feel the most improvement as a result of the NDT courses. I am confident in my skills, my knowledge, and my reasoning, which allows me to accurately and effectively communicate what I am doing and why, and to explain the science and theory behind it.

My new skills become most evident to me when I come across a new client with whom I am not familiar, or when a colleague asks for input regarding one of her clients. It is a wonderful feeling to be able to observe a child and immediately (it’s becoming second nature!) start to think through the functional implications of what that child can and cannot do, to pick out the posture and movement behaviors limiting that function, and to identify the possible impairments leading to those behaviors. Learning how to break down an activity, transition, or movement into the component parts in order to identify the critical impairments made me finally realize that strong task analysis skills are an invaluable tool when treating movement disorders.

Even better, the NDT course helped me
develop my ability to brainstorm and identify multiple therapeutic activities and learn the techniques necessary to address those impairments. I now realize that I can use every single moment of a treatment session therapeutically and can therefore address multiple systems impacting that child’s function. I now put attention and planning into every input, movement, and transition; weight shifts have become foremost in my thoughts as I understand that they are the foundation of functional activity. I now have my “bag of tricks” to get the most out of my treatment sessions, to address multiple impairments with each technique or activity that I do, to structure and sequence my sessions so as to maximize the effectiveness, and to promote true functional improvements for each and every client.

I have become a totally different clinician from who I was prior to beginning the NDT course. Learning and integrating the NDT theory and perspective has allowed me to look at my clients through totally new and better-informed eyes. I now have a true, if not complete, understanding of how the various systems of the body inter-relate, as well as how the function of the nervous system affects what I see in the clinic, and therefore in the daily lives of my clients. I know that my understanding is far from complete. I continue to learn more, understand better, and apply my knowledge more effectively each and every day. That continues to inspire, motivate, and fill me with enthusiasm.

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