

Faculty



Bonnie Cunningham, MA, PT, HPCS:

Bonnie is a licensed Physical Therapist in the states of New York, New Jersey and Pennsylvania. She holds a Bachelor of Science and a Master of Arts in Physical Therapy and Master of Public Administration. Bonnie is a registered member of the American Hippotherapy Association, Inc., a PATH Intl Certified Riding Instructor and certified as a National Assessor for riders interested in competing in national events and the Paralympics. Bonnie is a certified clinical specialist in hippotherapy, coordinating faculty for American Hippotherapy Association, Inc., has taught internationally and presented at national conferences. Bonnie is a physical therapist who utilizes hippotherapy treatment strategies. She has served the American Hippotherapy Association, Inc. as their first executive director, a past board member and past board president.



Speech Language Pathology in Motion

829 Old Nichols Road
Islandia, NY 11749
(631) 479-3393 Ext. 3
(631) 479-3358

tinarocco@speechinmotion.com

www.speechinmotion.com

Continuing Education

A certificate of attendance will be provided. Contact hours total 27. Courses are not pre-approved unless indicated otherwise.

Travel Information

The course will be held by Speech Language Pathology in Motion, on the property of Pal-O-Mine Equestrian in Islandia, NY.

ADDRESS:

Speech Language Pathology in Motion
829 Old Nichols Road
Islandia, NY 11749

AIRPORTS:

- JFK: 42 miles from facility
- LaGuardia: 41 miles from facility.
- MacArthur: 5.6 miles from facility.

HOTELS:

- **Hampton Inn** (2 miles away):
1600 Veterans Hwy, Islandia, NY
(631) 234-0400
- **Holiday Inn Express** (3.8 miles away):
2050 Express Dr. S., Hauppauge, NY
(631) 348-1400

We are situated approximately:

1 hour from NYC
1 hour from the Hamptons
30 Minutes from public beaches.
1 mile from the LIRR (Long Island Rail Road)

The curriculum may be utilized only under conditions set forth by AHA, Inc.



Speech Language Pathology in Motion

Presents

AHA Inc. Approved

Level I

Treatment Principles

August 25th-28th, 2018



*In partnership with
Pal-O-Mine Equestrian*



Islandia, NY

Level I Treatment Principles

This 4 day course is an overview of the principles of hippotherapy, designed for therapists (PT, OT, SLP, PTA, COTA, SLPA) interested in utilizing hippotherapy in their practice. The first day emphasizes the horse, and the importance of the quality of the horse's movement working in treatment. Using experiential non-mounted activities, the attendee will learn to interpret the body language of the horse, groom, tack and lead the therapy horse, recognize desirable conformation, soundness, movement quality, gaits, and understand training, conditioning and humane treatment of the therapy horse.

Building on these equine skills, the attendee will explore the dynamic system of therapist, patient, horse handler and horse as is applied in Hippotherapy. Topics include: the history and development of hippotherapy in the US, understanding the biomechanical and sensory interaction of horse/human, horse selection, safety principles, patient and horse selection, precautions and contraindications, patient evaluation, maximizing the effects of equine movement including use of school figures and movement progression, the role of the therapy team members, documentation, business aspects and current research in the effects of equine movement.

Adaptive riding instructors, horse handlers, administrators and others interested in hippotherapy treatment principles are welcome to attend, teamed with their therapist. Graduate occupational, physical and speech therapy students must be in their last semester of graduate school to be eligible to attend this course for credit.

Registration Information

All attendees will receive a hard copy of the AHA, Inc. Level I Treatment Principles Manual. The course fee also includes a continental breakfast and lunch. During the course you will be on and/or working directly with horses. Please have appropriate clothing/footwear. Helmets will be provided. If your weight exceeds 175 pounds, you may be excused from the mounted portion of the course. Indicate any special restrictions on the registration form.

Cancellation Policies: AHA, Inc. and the host facility reserve the right to adjust course dates, times and faculty to accommodate unforeseen circumstances including cancellation of the course due to insufficient registration up to 3 weeks prior to the scheduled start date. Notification will only be made to advanced registrants. Neither AHA, Inc. nor the host facility is responsible for any expenses incurred by registrants due to such adjustments.

Participant cancellation requests must be made in writing no less than 3 weeks prior to the course start date to receive a refund, minus a \$115 administrative fee. No refunds will be given for cancellations received within three weeks prior to the start of the course.

Course prerequisite: Successful completion of the on-line "Intro to Equine Skills" test reviewing equine care and management. Completion of the course must be at least 3 weeks prior to the start of the course. AHA, Inc. staff will confirm with the host site that the test has been completed and passed. The cost of the test is \$35.00. Visit the AHA, Inc. website under "Curriculum Overview," under the Education tab for a link to purchase.

Registration Form

Name: _____

Address: _____

City/ State/ Zip: _____

Phone: _____

Email: _____

*AHA, Inc. Member #/exp.: _____

New memberships are accepted. Join today at www.americanhippotherapyassociation.org.

Credentials as listed on course certificate:

Non-therapists: *Please Circle one:* Riding Instructor / Horse handler / Administrator / Other _____

Height _____

Weight _____

Special needs-mobility restrictions/diet/etc.

Registration is limited.

Early registration on or before June 25th, 2018

_____ \$800 for AHA, Inc. Member/\$900 for Non-AHA, Inc. Member

After June 25th, 2018

_____ \$900 for AHA, Inc. Member/\$1000 for Non-AHA, Inc. Member

___ Check - payable to Speech in Motion

___ Charge MC VISA AM EX

Name on Card _____

Card Number _____

Exp. Date _____ Security Code _____

Billing zip code _____