



A Time-Saving Approach to /r/ and /s/ Remediation

Instructor:

Stephen Sacks
M.A., CCC-SLP

2010 Workshops
San Jose 5-7-10
Elk Grove 9-17-10
Oakland 10-8-10

8:30-3:30

Course Objectives


- To learn an efficient, systematic way to do articulation/phonology therapy with emphasis on the /r/ and /s/ sounds
- To learn the necessary prerequisite oral-motor skills
- To learn nonsense consonant-vowel combinations based upon facilitating contexts into CVCCVC contexts using coarticulation
- To learn how to transfer developed skills into real phrases, sentences and conversation

Learning Outcomes

The workshop is designed to train the SLP to:

- Explain the rationale for and explain how to achieve stabilization of the lips, jaw and tongue
- Identify the 3 phases of the SATPAC Program, what each phase involves and the rationale for each phase
- Develop individualized articulation and phonology disorders treatment plans using the SATPAC process
- Develop specific treatment programs using case studies

CEUs

<p>APPROVED PROVIDER</p>  <p>ASHA CONTINUING EDUCATION</p> <p>AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION</p>	<p>SATPAC Speech, LLC is ® approved by the Continuing Education Board of the American Speech-Language- Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. See course information for number of ASHA CEUs, instructional level and content area. ASHA CE Provider approval does not imply endorsement of course content, specific products or clinical procedures.</p>
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This course is offered for .6 ASHA CEUs
(Intermediate level, Professional area).

About SATPAC

"SATPAC is an amazing resource."
-Pam Marshalla

"SATPAC is a valuable tool..."
-Wayne A. Secord, Ph.D

SATPAC is a software program incorporating facilitating contexts, coarticulation and natural prosody. The program generates customized lists of nonsense words as well as phrases and sentences leading to rapid remediation due to the systematic nature of the lists.

Workshop Comments

"What a great time saver."

"This was probably the clearest, most functional presentation on artic./phonology I've seen in recent memory."

"I can't imagine improving on the info today."

"Too bad all workshops aren't this helpful."

"This was a great in-service."

"Your training was fabulous!"

"Wow, what a lot of work and thought you put into this program."

"What a useful product and approach."

"What a contribution to our field!"

"Thanks! This is a great program. I have seen it work."

"Great system. I have used it with success."

Workshop Schedule

(Please bring laptop if you have one.)

This workshop is also offered for 6 State of California CEUs

- 8:30 Intro and History
- 9:15 SATPAC Program Specifics
 - 7 Steps of the Establishment Phase
 - 9 Steps of the Generalization Phase
 - 3 Steps of the Transfer Phase
- 9:45 Developing Generalization Lists
- 10:00 Oral-Motor Skills as a Precursor to the SATPAC Program
- 10:15 Break
- 10:30 Oral-Motor Therapy Controversy
- 11:00 Multimodality Approach to /r/ Remediation
- 12:00 Lunch
- 12:30 Multimodality Approach to /s/ Remediation
- 1:00 Steve's /s/ Study
- 1:15 The Essential 10
- 1:30 SATPAC Computer Features
- 2:15 Break
- 2:30 Case Studies and Developing SATPAC Lists
- 3:15 Summary and Final Questions
- 3:30 End

Cancellation Policy: Requests for refunds must be made no later than 14 days prior to the presentation. After that, paid registrations will be credited for a subsequent SATPAC Presentation.

Checks/Credit Cards will not be cashed until 14 days prior to presentation date.

Registration Form

Register early!

Each workshop is limited to approximately 18 attendees to maximize individualized attention.

Registration Fee is \$230 (a \$20 savings) or \$100 w/o purchase of SATPAC

Specify Date _____ **Circle one**
(with) (without)
SATPAC Software

- Lunch is Included

Name _____

Affiliation _____

Address _____

City _____ Zip _____

Telephone-Day _____

Evening _____

E-mail _____

____ Enclosed is my check
to: SATPAC Speech, LLC.

Referred by: _____

We accept Visa and Master Card

Card # _____

Ex. ____ / ____ CVV# _____

- or register by fax 253-595-2102
- or phone 559-438-4426 (after 5 p.m.)