PWR!Moves®
Instructor Certification Workshop

Date
February 12-13, 2022

Location
Delivered Via Zoom
Arizona Time

Eligible Participants

#1 NCCA recognized eligibility criteria
Certified Personal Trainers and Group Fitness or Group Exercise Instructors and Exercise
Specialists with a current certification recognized by NCCA.
#2 Non-NCCA recognized eligibility criteria
Physical Therapists, Physical Therapist Assistants,
Occupational Therapists, and Occupational Therapist Assistants
with current state licensure or certification.
Athletic trainer's (ATC), Kinesiotherapists (RKT), and Recreation therapists (CTRS)
with current certification or registration.
Yoga teachers are required to have completed
at least a 200-hour yoga teacher training program.
Pilates instructors are required to have completed
at least a 450-hour Pilates teacher training program.

Pending Approval for 1.5 CECs
American Council on Exercise (ACE)
American Academy of Sports Medicine (ACSM)
Athletics and Fitness Association of America (AFAA)
National Academy of Sports Medicine (NASM)
National Council on Strength and Fitness (NCSF)
National Strength and Conditioning Association (NSCA)

Registration Fees
$550 per person
$525 per person for groups of 2 or more
Check out our website for Early Bird pricing!

For more information email us at workshopsinfo@pwr4life.org, or to register online,
click here to visit our instructor workshop registration page.

Help people with Parkinson disease get better and stay better with exercise!

Recent advances in basic and clinical science research suggest that exercise approaches that promote aerobics and skill acquisition may protect and repair dopamine circuitry, improve motor and non-motor symptoms, and delay motor deterioration in people with Parkinson disease (PD).

Participants will be introduced to the PWR!Moves® curriculum, a PD-specific functional skill training curriculum guided by essential principles of learning and neuroplasticity. The PWR! Moves curriculum advocates for proactive rehabilitation and exercise paradigms which start at diagnosis and integrate therapy and community exercise for life through a shared focus on functional skill training. By focusing on the same foundational skills in therapy and group exercise, it may be possible to retrain and sustain physical activity and reap the additive and synergist benefits of both programs.

Participants will use the PWR!Moves curriculum to integrate PD-specific skill training into a multi-modal exercise program (flexibility, strength, balance, agility, aerobics). The specificity of training begins by targeting four motor control skills shown to deteriorate and adversely affect everyday movement for people with PD. These foundational skills (i.e., antigravity extension, weight shifting, axial mobility, transitions) correspond to each of the Basic 4 PWR!Moves (PWR! Up, PWR! Rock, PWR! Twist, PWR! Step) and are used as building blocks of function. While amplitude training is central to the PWR!Moves curriculum to target the symptom of bradykinesia, participants will learn other methods of instruction to target other symptoms that contribute to functional decline.

Rigidity — PWR!Moves are performed slowly, rhythmically, and with sustained effort.

Bradykinesia — PWR!Moves are performed as big and fast as possible with repetitive effort.

Incoordination — PWR!Moves are linked together into sequences that mimic everyday movement.

Automaticity — PWR!Moves are performed in conjunction with everyday motor and cognitive tasks.

To achieve the optimal physical and cognitive challenge point in class, participants will apply our Exercise4BrainChange® techniques, rooted in exercise science, motor control, and motor learning research. These techniques, informed by research, have been organized into categories that include high physical effort, attentional/cognitive challenge and emotional engagement. They will be applied across all aspects of skill training to target fitness and replicate real life physical and cognitive challenges.

Participants will learn to teach two group exercise class formats (PWR!Moves Group or PWR! Moves Circuit). The PWR!Moves Group class can be adapted for individuals with minimal to advanced levels of disease severity. The PWR!Moves Circuit class is designed for individuals with minimal to moderate levels of disease severity. Instructors will learn to use coaching techniques, feedback, equipment, and a variety of instructional methods to empower and educate class participants. The course will emphasize promoting an environment well-suited to learning that embraces an atmosphere of empowerment, motivation, membership, social enrichment, and fun!

Participants will have the opportunity to participate in a virtual PWR!Moves class with faculty, develop class activities, and rehearse the PWR!Moves activities virtually while interacting with PWR! faculty and other participants during the workshop. Participants will practice PWR!Moves alongside faculty in interactive demonstrations throughout the workshop. At the end of the program, participants will be competent to work with individuals with PD in a group or personal training setting. Emphasis will be on understanding leadership responsibilities, working within one's own scope of practice, establishing back and forth referrals and relationship building with your interprofessional team, and identifying other PD resources for your participants that need or request greater access to other types of exercise programming.

Key course objectives include: improving basic understanding of Parkinson disease, recognizing importance of collaborative relationships with healthcare and wellness providers, practicing within your own scope of practice, and being able to demonstrate and embed PWR! Moves principles and techniques into a multi-modal fitness program.

Pre-recorded webinars, interactive faculty demos, video cases with people with PD, interactive instruction with feedback (Q&A, chat, polls), and reviewing supplemental materials (handouts, slides) will be used to discuss optimal instruction, coaching, teaching essentials and strategies, as well as illustrate the real-world implementation of this physical activity framework for people with PD across disease severity levels.

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

1. Apply their basic understanding of Parkinson disease to be able to discuss the range of motor and nonmotor symptoms with persons with PD and their care partners.

2. Describe the type of available medical, rehabilitation, and neurosurgical treatments options available for People with Parkinson (PWP)

3. Describe how medications, deep brain stimulation, and symptoms (motor and non-motor) may affect an individual's ability to participate in and benefit from exercise.

4. Summarize recent advances in basic and clinical neuroscience that have brought exercise to the forefront in PD treatment as it relates to the importance of aerobics and skill training.

5. Recognize the importance of building relationships and collaborating with healthcare and wellness providers in the community, as well as understand the responsibility as a community group instructor to work within their scope of practice.

6. Explain how the Basic 4 PWR!Moves® target motor control skills that become impaired in people with PD and interfere with function.

7. Explain and instruct the goals of PREPARE, ACTIVATE, and FLOW targeting the primary symptoms of PD and incorporating examples of each concept.

8. Teach the Basic 4 PWR!Moves in different positions (prone, supine, all fours, sitting, standing) in a group format.

9. Demonstrate how PWR!Moves in different positions may be modified (adapted, regressed, progressed) for individuals with different disease severity levels or comorbidities.

10. Discuss how PWR!Moves can be integrated into mobility/functionality/daily tasks/lifestyle during a class activity.

11. Apply Exercise4BrainChange® Techniques within class design to achieve the optimal physical effort and cognitive challenge for each class.

12. Identify how each of the Basic 4 | PWR!Moves, in combination with different positions, can be used to train a multimodal exercise program, utilizing the domains of strength, balance, agility, aerobics and flexibility.

13. Explain the significance of targeting functional skills (PWR!Moves) as part of a multi-modal fitness for persons with PD.

14. Explain why PWR!Boosts are important in a PD-specific exercise program and be able to integrate them into an exercise activity or develop as a stand-alone activity

15. Anticipate high-risk fall activities and scenarios and be prepared to reduce fall risk during a class choosing from a variety of strategies (e.g., cues, equipment, class organization, instructions, and modeling/mental imagery).

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16. Optimize quality of practice by using equipment, modeling, mental imagery, voice, cues, instruction, and reward-based feedback to achieve optimal alignment, motor output (effort), and engagement.

17. Develop and perform a consultation/screening/assessment process to be able to determine fall risk and make recommendations to the most appropriate class based upon on class fall risk criteria, starting with high or low ability options.

18. Appropriately consider additional information such as motor and non-motor symptoms and environmental, personal, and psychosocial factors when developing exercise plans.

19. Design class plans for a PWR!Moves and/or PWR!Circuit class with the use of equipment while considering risks (# of participants, environment, fitness and mobility of participants)

20. Be prepared to respond to medical or safety incidents; distinguish between emergency and non-emergency incidents, and when a medical release is necessary to return to exercise.

21. Understand how to mitigate your risks by working closely with your PD-specialized therapist or others in your interprofessional team, track changes in health status, implement strategies in class set-up and design and communicate through caring and honest conversations with PWP and their partners.

22. Explain how PWR!Moves may be implemented across settings (therapy or community) and reinforced in other community research-based exercise programming (e.g., treadmill, cycling, pole walking, yoga, boxing, dance, Tai Chi).

23. Understand your leadership role as a PWR! PD-specialized exercise professional and be able to provide examples of how you can do that as a PWR!Moves group instructor.

PWR!Moves® Instructor Certification Workshop – Prework Lecture

	Registration
60 minutes	Fundamentals of Parkinson disease
	Fundamentals of Parkinson disease—Knowledge check
45 minutes	Fundamentals of Parkinson disease (part 2)
	Fundamentals of Parkinson disease—Knowledge check (part 2)
35 minutes	Therapeutic options for PWP: Medications
	Therapeutic options for PWP: Medications —Knowledge check
30 minutes	Therapeutic options for PWP: Technology
	Therapeutic options for PWP: Technology —Knowledge check
80 minutes	Exercise for brain health, neuroprotection and neuroplasticity
	Exercise4BrainChange and Practice Essentials —Knowledge check
30 minutes	Leadership: Interprofessional communication and building relationships
	END OF PREWORK

Prework is designed to be played in both single viewing or multiple viewing format per the convenience of the participant. The tests have been calculated as part of the completion time for each section.

Total anticipated completion time for each participant: 4.75 hours

PWR!Moves® Instructor Certification Workshop – Day 1 (Virtual)

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7:30 am	Registration
8:00 am	Welcome / Housekeeping / Getting to Know You / Workshop goals
8:15 am	Group Practicum #1- Time to PWR! Up, Let's do it • Standing PWR!Moves warm up • Connect to fitness domains
9:15 am	Break
9:30am	Group Practicum #2 - Interactive Faculty instruction • Level 1 - Make Function Exercise • Modifications for optimal quality • Boosts and more examples
11:30 am	Group Practicum #3 -- Virtual Breakouts for Assignments and teaching demo
12:00 pm	Meal / Long Break
1:00 pm	Group Practicum #4a - Interactive Faculty Instruction • Level 2 - Rehearse Action Sequences • Multi-Symptom methods of instruction • Flow and Boosts • Horizontal Mobility
2:15 pm	Group Practicum #4b - Interactive Faculty Instruction • Level 2 - Rehearse Action Sequences • Vertical Mobility • Multidirectional progressions • Functionality
2:45 pm	Discussion - Building your Level 1 & 2 Class
3:00 pm	Break
3:15 pm	Achieving Optimal challenge points across Levels 1-2 • Review types of feedback and cues • Discuss considerations of physical effort and cognitive challenge
3:45 pm	Group Practicum #5 - Interactive Faculty Demo • Faculty demo 3-4 sample class activities for each level • Discussion and Q&A
4:15 pm	Boosts (breath, hands, voice, eyes and face) - rationale in PD for each boost
4:55 pm	Reviews / Q&A PWR! Pearls for tomorrow
5:30 pm	End of Day 1

PWR!Moves® Instructor Certification Workshop – Day 2 (Virtual)

8:00 am	Welcome Back - PWR!Pearls
8:15 am	Level 3 - Rebuild Physical Activity • Functional Fitness
8:20 am	Fitness Components - Interactive Practicum / Discussion • #1 Strength (Research insights and designing activities) • Repeat for all other fitness domains (#2 Balance, #3 Agility, #4 Flexibility, and #5 Aerobics)
9:45 am	Break
10:00 am	Group Practicum #6 - Let's Practice Together • Interactive Faculty group instruction using multi-modal PWR!Moves group class template and hi and low modifications • Class set-up and design considerations
11:30 am	Meal / Long Break
12:30 pm	Teaching Strategies • Fall Risk considerations • Movement considerations • Medications • Deep Brain Stimulation (DBS) • Non-Motor considerations
1:15 pm	Teaching Essentials • Getting Started (Logistics, Forms) • Multilevel class criteria (Recommendation form)
2:15 pm	Logistical / Legal Risk Factors • Emergency Plan • Incident reporting • Red flags / Yellow flags
2:30 pm	Emotional Engagement / Psychosocial Considerations • Barriers to increased physical activity and exercise • Behavioral change resources
3:00 pm	Break
3:15 pm	Interactive Practicum - Decision-Making / Leadership • Video Cases • Discussion topics—hard conversations, rehab and wellness
4:15 pm	Leadership as a PWR!Moves Certified Instructor
4:30 pm	Better Together • Rehabilitation and Exercise for a Lifetime • Elevator Pitch—program summary • What you will be doing • What you will get from PWR!
4:45 pm	Q&A
5:00pm	End of Day 2

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Becky G. Farley, PT, MS, PhD

Dr. Becky Farley is a physical therapist, neuroscientist, Parkinson exercise specialist, as well as the 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.
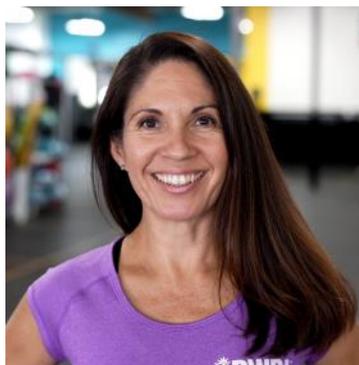
Jennifer Bazan-Wigle, PT, DPT, CEEAA®

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, with an emphasis on 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.

Sarah Palmer, MS, Exercise Physiologist, CSCS

Sarah is the owner and lead fitness trainer of **forever***fitness* personal training company in Cincinnati, OH, that includes in studio, in home, virtual and on-demand exercise classes. She has been working as an exercise professional since 1994. Sarah has specialized in working with people with Parkinson's and brings the experience, knowledge and access to a global team of experts in the field as well as continued advance training in PD-specific exercise including PWR!Moves Instructor, Rock Steady Boxing Coach, Delay the Disease, Allied Team Training for Parkinson's (ATTP), Brian Grant Foundation Parkinson Exercise Training for Professionals, and is Certified Strength and Conditioning Specialist (CSCS). She is a member of the MedFit Network as a Medical Fitness professional and a member of NeuroSpark Network. She donates her time to the PWR! Retreat each year in Arizona, has been a featured speaker at the Sunflower Rev it Up for Parkinson's Symposium and Expo, serves on their planning committee and co-presented at the Rock Steady Boxing Coach Conference in 2018. She is a Parkinson's Foundation Aware In Care Ambassador, participated in the Policy Forum in Washington, D.C. in the fall of 2019 to advocate for Parkinson's, and was on the Competency Development Committee for the Parkinson's Foundation to establish competencies for Exercise Professionals who work with people with Parkinson's disease. Her father had Parkinson's disease and this personal experience continues to inspire and motivate her professionally.

Nancy Nelson, ACE-CPT Parkinson Disease Exercise Specialist

Nancy Nelson has over 30 years of experience in the health and wellness industry. An avid proponent of continued education and training, she holds numerous credentials, including an ACE Personal Trainer certification, Rock Steady Boxing certification, Delay the Disease certification, Brian Grant Foundation training, Group Exercise Instructor training, Tai Ji Quan Moving for Better Balance (TJQMMB) training and is a Parkinson Exercise Specialist. For the past 15 years, Nancy has worked almost exclusively with people with Parkinson disease. In 2009, Nancy founded her company, PDEX, LLC, to offer group classes and personal training for people with Parkinson's throughout Portland, Oregon. During this time, she also taught evidence-based programs and conducted research projects with a focus on patients with Parkinson's disease and cancer for both Oregon Health Sciences University and the Oregon Research Institute. In 2016, Nancy moved to Tucson to take a role as Exercise Therapy Manager for Parkinson Wellness Recovery (PWR!). In 2019, Nancy joined PWR!'s professional education faculty to train and share her expertise with participants across the US.
Most recently, Nancy and her husband relocated to Bend Oregon to be closer to family. She has continued her relationship with PWR! by teaching virtual classes and doing one on one wellness consultations. Nancy was thrilled to be able to resume her relationship with OHSU's Get Fit Prostate team in September 2020, teaching TJQMBB. In addition, she is a coach for Rock Steady Boxing Bend and does personal training for people with Parkinson disease in her community. Outside of the gym, Nancy loves cycling, hiking, cooking, and her two English Springer Spaniels, Kimber and Hazel.

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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.

2. Alberts JL, Phillips M, Lowe MJ, et al. Cortical and Motor responses to acute forced exercise in Parkinsons disease. *Parkinsonism & Related Disorders*. 2016;24:56-62. doi:10.1016/j.parkreldis.2016.01.015

3. Borchers EE, McIsaac TL, Bazan-Wigle JK, et al. A physical therapy decision-making tool for stratifying persons with Parkinson's disease into community exercise classes. *Neurodegener Dis Manag. 2019;9 (6):nmt-2019-0019. doi:10.2217/nmt-2019-0019*

4. Bouca-Machado R, Maetzler W, Ferreira JJ. What is functional mobility applied to Parkinson's disease. J Parkinson Disease 2018;8:121-130.

5. Bouça-Machado R, Venturelli M, Tinazzi M, et al. Treating Patients Like Athletes: Sports Science Applied to Parkinson's Disease. *Front Neurol. 2020;11:228. doi:10.3389/fneur.2020.00228*

6. Cascaes da Silva F, Iop Rda R, Domingos dos Santos P, et al. Effects of Physical-exercise-based rehabilitation programs on the quality of life of patients with Parkinson's disease: A systematic review of randomized controlled trials. J Aging Physical Activity 2016;24(3):484-496.

7. Duchesne C, Lungu O, Nadeau A, et al. Enhancing both motor and cognitive functioning in Parkinson's disease: Aerobic exercise as a rehabilitative intervention. Brain Cognition 2015;99:68-77.

8. 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

9. Ferrazzoli D, Ortelli P, Madeo G, et al. 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

10. Hirsch MA, Farley BG. Exercise and neuroplasticity in persons living with Parkinson's disease. *Eur J Phys Rehabil Med*. 2009;45(2):215-229.

11. King LA, Horak FB. Delaying Mobility Disability in People With Parkinson Disease Using a Sensorimotor Agility Exercise Program. *Phys Ther*. 2009;89(4):384-393. doi:10.2522/ptj.20080214

12. Lauze M, Daneault JF, Duval C. The effects of physical activity in Parkinson's disease: A review. J Parkinson's Disease 2016;6:685-698.

13. Mak MK, Wong-Yu IS, Shen X, et al. Long-term effects of exercise and physical therapy in people with Parkinson disease. *Nat Rev Neurol*. 2017;13(11):689-703. doi:10.1038/nrneurol.2017.128

14. Sacheli MA, Murray DK, Vafai N, et al. Habitual exercisers versus sedentary subjects with Parkinson's Disease: Multimodal PET and fMRI study. *Mov Disord*. 2018;33(12):1945-1950. doi:10.1002/mds.27498

15. Marinelli L, Quartarone A, Hallett M, et al. The many facets of motor learning and their relevance for Parkinson's disease. Clin Neurophysiol 2017;128:1127-1141.

16. Onla-Or S, Winstein CJ. Determining the optimal challenge point for motor skill learning in adults with moderately severe Parkinson's disease. *Neurorehabil Neural Repair*. 2008;22(4):385-395.

17. Petzinger GM, Fisher BE, McEwen S, et al. Exercise-enhanced neuroplasticity targeting motor and cognitive circuitry in Parkinson's disease. Lancet 2013;12:716-726.

18. 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

19. Schootemeijer S, van der Kolk NM, Ellis T, et al. Barriers and Motivators to Engage in Exercise for Persons with Parkinson's Disease. *J Parkinsons Dis*. 2020;10(4):1293-1299. doi:10.3233/JPD-202247

20. Wulf G, Lewthwaite R. Optimizing performance through intrinsic motivation and attention for learning: The OPTIMAL theory of motor learning. *Psychon Bull Rev*. 2016;23(5):1382-1414. doi:10.3758/s13423-015-0999-9

21. Zemankova P, Lungu O, Bares M. Psychosocial Modulators of Motor Learning in Parkinson's Disease. *Front Hum Neurosci*. 2016;10(FEB2016):1-8. doi:10.3389/fnhum.2016.00074