

Speech Therapy

Speech and language therapy treatments focus on the development of receptive and expressive language, feeding and swallowing abilities, social skills and cognitive needs, such as:

- Voice deficits and hearing delays
- Receptive and expressive language deficits
- Social skill and attention difficulties
- Apraxia
- Articulation disorders
- Oral motor delays with feeding
- Auditory processing and comprehension

Our speech-language pathologist can also assist families with the use of augmentative and assistive communication (AAC) devices.

Physical Therapy

Physical therapists help children reach developmental milestones related to gross motor development, from crawling to walking independently. Physical therapists may also assist families with selecting appropriate mobility and positioning devices such as wheelchairs, walkers, standers, helmets, and foot orthotics. Physical therapy can assist with many issues including:

- Gait disturbances and toe walking
- Postural alignment
- Balance deficits
- Rolling, sitting, crawling and walking delays
- Coordination difficulties

Free Pediatric Screenings

SRMC Pediatric Therapy Services offers FREE developmental screening for children ages 0-18 years old. You will be able to ask questions during your 20-30 minute screening with one of our qualified physical, occupational, or speech therapists. They will help you to determine if your child could benefit from further evaluation and treatment.

To schedule your FREE screen or for more information regarding our Pediatric Therapy services, call the SRMC Rehabilitation Services department at

(308) 254-5825 ext. 1453.



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Pediatric Therapy Services

Pediatric Therapy Services

At SRMC, we provide skilled pediatric therapy services in a safe, welcoming environment for children. Our pediatric therapists truly love helping children, offering treatment for a wide variety of diagnoses and special needs. Together, we are committed to providing comprehensive, multi-disciplinary care in an environment where children can achieve their goals and reach their fullest potential.

Services include occupational therapy, physical therapy, and speech therapy all in one, convenient location.

Occupational Therapy

Occupational therapists help children achieve goals related to fine motor skills, sensory processing, activities of daily living, and feeding. Children, including those with special needs, could benefit from occupational therapy with the following difficulties:

- Difficulty using utensils, using a toothbrush or hairbrush, etc.
- Difficulty using scissors or writing
- Problems with feeding such as gagging, picky eating, or refusal of foods
- Difficulty with buttoning, tying shoes, or managing zippers, and snaps
- Sensory processing difficulties such as trouble tolerating certain smells, sounds, environments or aversions to certain clothing or textures
- Difficulty with attention, following directions, and/or transitions between activities

Outpatient Therapy Services

In the outpatient treatment setting, a hands-on service approach is used, which provides the opportunity for the child to receive direct occupational, physical and speech therapy intervention from a team of therapists. The role of each team member is strictly defined with each providing separate evaluations, and goals for the child that are specific to their discipline coinciding with family needs, and each implements individual intervention plans. In this setting, therapists work directly with the child to develop specific skills to improve their success in a variety of settings.



The SRMC Difference

At SRMC, occupational, physical, and speech therapists work closely together to create individualized treatment plans for children with special needs. Therapy is carried out with a focus on creativity and fun, where every child can be successful. Our therapists establish goals and treatment plans based on the specific needs of each child and his or her family.



School-based Early Intervention Services

In school-based early intervention services a primary service provider approach (PSP) is used. The PSP receives consultation from the other team members (OT, PT, ST, Early Childhood Educator) regarding their specialty and shares this information with the child's family and caregivers to support their child in achieving the outcomes established in the Individualized Family Service Plan (IFSP). In this approach, a team of early childhood service providers work together to provide assessment.

Once the child qualifies for services, a member of the team then serves as the primary service provider. The goal of the PSP is to provide education and recourses to parents to develop their child's skills through natural learning opportunities.

Outpatient Therapy Services vs. School-Based Services

	Outpatient Therapy Services	School-Based Services
How Services are Initiated	By physician referral (may or may not require a face-to-face with doctor)	With permission from parent/guardian. School district completes evaluations and determines if student qualifies for Special Education Services.
Setting for Services	Therapy department or hospital in one on one setting.	Within the classroom (one on one or small groups), home or daycare environment.
Focus of Treatment	Hands-on service delivery approach with therapist working directly with child for skill development.	Consultative approach with therapist working with family, parents, teachers, or paras on strategies for skill development in natural environment.
Services/Service Providers Available	Speech, Occupational, and Physical Therapy.	Speech, Occupational, Physical Therapy, Early Childhood Special Education teacher, and Hearing and Vision Specialist.
How Services are Paid	Utilizing family insurance benefits.	Federally funded through the special education department at no cost to family.
Timeline	Therapists re-evaluate and update goals every 60 days and determine need for continued services.	Child is re-evaluated in all areas every 3 years with goals updated every 6 months or 1 year.
Service Times	Typically twice a week for 30-60 minutes.	Typically once week for 30 minutes or twice a week for 20 minutes.