

October 11, 2019

State Board of Chiropractic Examiners

To Whom It May Concern:

This letter is to state that as Director of Parker Professional Programs, I have reviewed the speakers below and determined that they are post-graduate level instructors, through a curriculum vitae or resume, and they have knowledge, training and expertise in the topics to be covered for “Family Chiropractic Care First” The documentation appears to fall within chiropractic guidelines of the various state boards.

Parker University  
Continuing Education  
2540 Walnut Hill Lane  
Dallas, Texas 75229  
[www.parker.edu](http://www.parker.edu)

Jenna Davis, DC

Please contact me if further information is needed, my direct phone number is 214-902-3492, or via email at [pfrase@parker.edu](mailto:pfrase@parker.edu).

Sincerely,



Phyllis Frase-Charrette  
Director of Professional Programs

## **METHOD OF CERTIFYING IN ONLINE ACTIVITIES**

1. **Name of Course:** Family Chiropractic Care First
2. **Organization Sponsoring the Course:** Parker University
3. **Course Objective:** To enhance the expertise of the Chiropractic Professional.
4. **Study Hours Required:** 1 Online
5. **Instructor(s):** Jenna Davis, DC
6. Educational background and experience of instructor(s) is on file in the University offices.
7. **Attendance Verification Method and Certifying Officer:** FL Licensees are required to provide a valid driver's license to be awarded CE. The Online presentation is delivered via web pages in which the participant must review anatomy images, read supporting text, listen to audio instruction, and answer test questions. The time the participant spends on each page is logged and tracked. In addition, the test questions must be passed, or the participant cannot continue on to the following pages. The computerized log files that track the participant's access time and usage will be utilized to validate the attendance and participation. The instructors will be available for questions via e-mail. Upon successful completion, Parker University Continuing Education Department will maintain and distribute attendance records.
8. **Textbooks and/or Equipment Required:** Internet
9. **Outline of Material Covered:** Attached
10. **Location(s):** Computer/Internet Based
11. **Date(s):** Based upon date of actual completion

## **Family Chiropractic Care First Jenna Davis**

### Course Description:

Have you wanted to fill your practice with more families and children but you aren't sure how? Do you want to have a practice that serves multiple generations? There is nothing more rewarding than having entire families under care. Dr. Jenna Davis will discuss research reinforcing why chiropractic is essential in all stages in life. You will learn practical changes for history, examination and clinic set up when wanting to attract and serve families of all ages. Finally Dr. Davis will discuss communication skills and will share tips for family friendly healthcare classes that will reinforce family wellness care, generate referrals and improve retention for years to come.

### OUTLINE

- I. The Benefits of filling a practice with families
  - A. Nature and Nurture
  - B. Research Study –Jablonka and Raz  
15 Minutes
  
- II. Attracting/serving Families of all ages
  - A. History
  - B. Examinations
  - C. Clinical set up  
15 Minutes
  
- III. Communication Skills for a family practice
  - A. Family healthcare classes
  - B. Changing times/technology  
15 Minutes
  
- IV. Summary and Patient Explanations
  - A. Family Wellness Care
  - B. Generating Referrals
  - C. Family retention  
15 Minutes

**Dr. Jenna Davis, D.C., FIAMA**

**A. PROFESSIONAL HISTORY:**

2010-present: Owner/President and private practice Acorn Family Health and Wellness Centre  
2004-2010: private practice at Alliance Healthcare Associates, Oakville, ON  
2003-2004: private practice at Kulhay Wellness Centre, Toronto, ON

**B. EDUCATIONAL BACKGROUND:**

April 2015: Completed Thompson Technique Integrated Methods Certification  
November 2003: Licensed Acupuncturist/Fellow from the International Academy of Medical Acupuncture (Clean Needle Technique, 250 Hours)  
October 2003: Logan Postgraduate College of NUHS Acupuncture 1 (Clean Needle Technique, 100 Hours)  
2000 - 2003: Doctor of Chiropractic degree (summa cum laude, 2<sup>nd</sup> in class) National University of Health Sciences (formerly NCC); Dean's List, Honor List, Who's Who in University and Colleges  
2002-2003: TA Cox Flexion-Distraction Certification Course  
2002-2003: TA Graston Technique Certification Course  
2000-2002: Bachelor of Human Biology, National University of Health Sciences  
1993-1998: Bachelor of Arts, Forensic Anthropology, McMaster University, Hamilton, ON

**C. EDUCATIONAL AND PROFESSIONAL SPEAKER**

Scientific, Chiropractic Technique, Infertility, Team Approach and Business Development Seminars and workshops for continuing education, key note speaking engagements, and general presentations delivered around the world.

**D. AFFILIATIONS, AWARDS, HONORS, ACCOMPLISHMENTS:**

November 2014-present: Board of Directors, Chiropractic Awareness Council, Ontario  
GTO, Parker University: 2013, 2014, 2015  
True Concepts Commitment to Excellence Award, May 2014  
Vitalistic Visionary Award, Life Vision Seminar, November 2014  
Nominated and finalist Oakville Award of Business Excellence, Chamber of Commerce, 2013  
Parker University Alumni Lifetime Member  
2008 to present: voted Best Chiropractor Oakville, ON and Best Chiropractic Clinic, Oakville, ON  
Oakville Beaver  
2008, 2012-2015: voted Best Chiropractor and Best Chiropractic Clinic, Oakville, ON, Oakville Today  
Member ICPA: 2003 to present  
2002-2003: NUHS Secretary Student Council  
2001-2003: NUHS Class President  
Attended a variety of seminars and proficient in: Activator Technique, Webster Technique, Pediatrics, B.E.S.T., Logan Basic, Craniosacral Therapy, Extremity Adjusting, Graston Soft Tissue Technique, Cox Flexion-Distraction Technique, Thompson Drop Table Technique

## ONLINE CE ATTENDANCE CERTIFICATE

**Name:** \_\_\_\_\_

**Title:** Online: XXXX

**Address:** \_\_\_\_\_

**Course #** XXXX

**Date:** XXXX

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Location:** Online

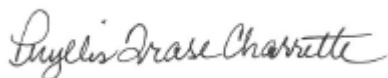
**STATE [only one per voucher]:** \_\_\_\_\_ **YOUR STATE LICENSE #:** \_\_\_\_\_

**DO NOT WRITE BELOW THIS BOX**

Completion Date	Class Hours	Course Title	Instructor
XX/XX/XX			

**TOTAL HOURS ATTENDED:** \_\_\_\_\_

**Board Approval No.** \_\_\_\_\_



\_\_\_\_\_  
**Phyllis Frase Charrette**  
Director, Parker Professional Programs

This certificate is to acknowledge your completion of the Online Continuing Education course shown above. This copy is for your records and can be submitted to your board of licensing. Please Note: Verify the information is correct upon receipt – discrepancies will only be accepted up to 6 months after the closing date of the course. Please keep this certificate in a secure place. Any replacement, copy, or fax will incur a \$25 fee per certificate.



These Questions are delivered via the Parker Seminars mobile App.

## Quality Feedback Survey

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Course Name: \_\_\_\_\_

Date: \_\_\_\_\_ Location: \_\_\_\_\_

**How did you hear about this Course?**

Parker Brochure     School E-mail     Referral     Parker Web Site     Other \_\_\_\_\_

**Please score each speaker on an “A to E” scale, with “A” Extremely Satisfied and “E” being Extremely Dissatisfied.**

How would you rate this speaker

a      b      c      d      e

Rate the overall content of the session:

a      b      c      d      e

Rate the classroom & facilities:

a      b      c      d      e

Please add any additional comments:

a      b      c      d      e

Is there a certain speaker or topic you would like to see next time?:

a      b      c      d      e

12) What topics would be of interest to you for future classes?  
\_\_\_\_\_

**Comments:**  
\_\_\_\_\_

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### THANK YOU FOR YOUR FEEDBACK!

The purpose of this quality feedback survey is to provide information to the Instructors and to Parker University about extant standards of performance. **Your response will be held in confidence. You will not be identified in any way by reference to your response. For additional complaints or concerns regarding this program please contact Parker University at 800.266.4723.** Parker University will share the outcomes of this evaluation with the Instructor, and will keep a copy on file in the Continuing Education Office to demonstrate compliance with accreditation standards and requirements.