

## IN THIS ISSUE

President's Message

The Power of Stories

UBC SASS Updates

CKNW Supports Intensive Fluency Therapy

Roundtable Discussion for School SLPs

BCASLPA Awards: Nominations

Best Practices in Literacy Instruction

BCASLPA In The Community

Waiting Room Changes

Book Review: Stuttering Superhero



# Vibrations

March 2017

## ► PRESIDENT'S MESSAGE



Dear Members,

2017 is flying by, and you have been a busy crowd! From career nights, to community presentations, and a slew of professional development activities, SLPs and Audiologists are incredibly active here in BC!

BCASLPA Directors are excited to be providing education to provincial and federal governments on various topics in communication health. Sherri Zelazny (Vice President) spoke in December 2016 at the Vancouver meeting of the federal governments working group, "Consulting with Canadians with Disabilities", and Andrea Bull (Director of Audiology, Public) will be presenting to the provincial government caucus on Hearing Health in March 2017.

This spring brings our provincial election, and a great opportunity for BCASLPA and our members to highlight the importance of communication health to the public and

candidates for election. BCASLPA has a variety of resources from May Month and other campaigns that can be a helpful source of information to provide to the public, your local MLA, or candidates for election. Contact Janet at the BCASLPA office if you require materials, or the Provincial Director responsible for your area of practice if you would like further support.

This edition of Vibration brings a wide variety of content, reflective of the variety of interests and practice in our membership. Enjoy!

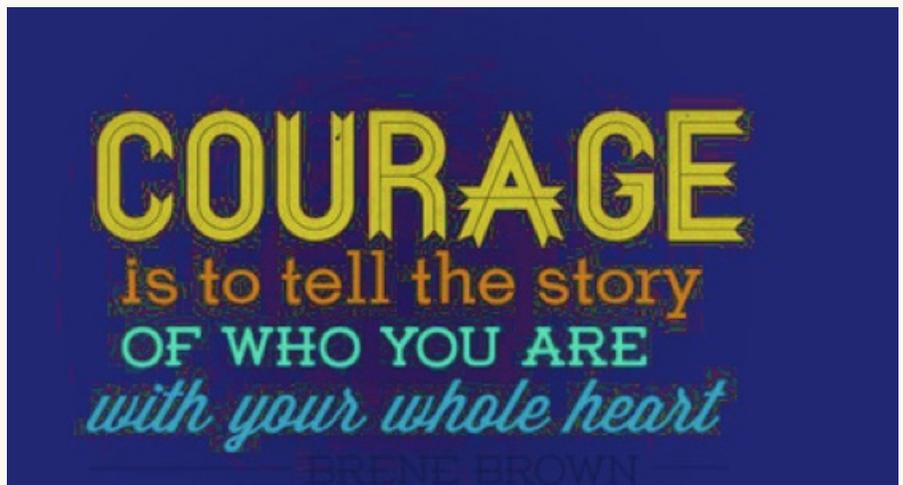
Kate Ballem Chase, M.Sc, D.Phil, RSLP



# ▶ THE POWER OF STORIES

This is a summary of a presentation at the BCASLPA Conference in October called *How incorporating the patient/family story into clinical practice can improve interprofessional collaborative practice*. The presenters were a team from Sunny Hill Health Centre for Children: Karen Derry, an SLP, Alda Antunes Silvestre, a nurse, and Sue Robins, a mom.

**If you touch hearts, you will change minds.**



Patient and family stories are powerful agents for change in the world of health care. Holding space for these stories can help shape practice and bring together a diverse team of clinicians to work with patients and families to shape their rehabilitation goals.

Many of the families involved with the acute rehabilitation program at Sunny Hill Health Centre for Children are adjusting to a new life and creating new dreams after a catastrophic accident or diagnosis. Telling stories can be healing, make sense of random events, and help give families a voice in situations that are stressful to them.

At this talk, each of the presenters opened with her own personal story. Karen shared her time spent early in her clinical practice with a young man with autism, and how she realized that setting therapy goals around his strengths wasn't enough. As she matured in her practice, she knew she needed to also include the family's hopes and dreams to make the young man's goals more meaningful.

Alda openly shared her story about a loved one, and how her family was not being listened to in the world of mental health, and how this led her to write her Master's major essay about the healing power of storytelling in clinical practice. Her focus with the Sunny Hill staff is to guide them to focus on the family and child experience of living with illness, disability, or injury.

## CREDITS:

Editor: Marianne Bullied    Communications: Janet Campbell

Layout: Zoe Grams

Contributors: Kate Chase, Sandra Collins, Karen Derry, Susan Edwards, Melanie Houston, Sue Robins, Alda Antunes Silvestre, UBC SASS, Pam Waterhouse, Carol Westdal, Sherri Zelazny.

**DEADLINE FOR JUNE ISSUE SUBMISSIONS: MAY 10, 2017  
TO SUBMIT, EMAIL [MARIANNE.BULLIED@GMAIL.COM](mailto:MARIANNE.BULLIED@GMAIL.COM)**



Finally, Sue presented a personal story about what she's learned from her youngest son, who is 13 years old and has Down syndrome. She spoke of the importance of seeing her son as a teenage boy first, not merely as a diagnosis or a list of deficits, and how she uses stories to talk to clinicians about her son.

### Reframing complaints as constructive feedback.

The interest in stories at Sunny Hill began with a family complaint. Alda met with a family whose child was on the Acute Rehabilitation Unit. This family felt their stories, what mattered to them, were not being listened to. Alda recognized that it was crucial to integrate this family feedback into improvements on the unit.

This led to a quest to understand the value of stories. Nursing students from Langara College did a literature review and interviewed families and staff. In the literature<sup>1</sup>, honouring stories has been proven to improve the quality of care and enhance family centredness. Stories can communicate families' ever changing identity that was affected by their diagnosis or event that has happened. Telling stories helps families slowly heal and gradually have the chance to become whole again.

### One of the most sincere forms of respect is actually listening to what another has to say.

– Bryant McGill, author

Being open to stories helped tackle the 'expert notion' that no clinician knows it all, and that through stories, staff can learn the best way to help the families they are caring for.

Drawing upon the good work done by the [IHI MyStory Project](#), some practical changes were made on the unit:

- Staff started writing down what they learned from a child/family each day and reflecting on how they will apply what they learned to their practice.
- There is now a process to take lessons gleaned from a family's story to drive quality improvement changes on the unit.
- Templates were created to give staff prompts to walk a child and family through their stories.
- There is an ongoing process to centre the therapy goals on the family and child goals.

Sunny Hill also began two reflective practice exercises involving stories: a book club, which selects books like [The Spirit Catches You and You Fall Down](#), and [The Boy in the Moon](#); and a regular TEDTalk featuring videos like [The Power of Vulnerability](#).

The speakers urged the audience to commit to one small action to incorporate stories into their work. This can help improve clinical practice, bring teams together and importantly, nurture healing relationships for clients and their families.

Authors from Sunny Hill Health Centre for Children: **Karen Derry**, RSLP, M.Sc., Collaborative Practice Lead, **Alda Antunes Silvestre**, RN BSN MSN, Professional Practice Leader, Nursing and **Sue Robins** former Family Engagement Advisor.

### References

Kiser, L.J., Baumgardner, B. and Dorado, J. (2010). [Who Are We, But for the Stories We Tell: Family Stories and Healing](#). *Psychological Trauma: Theory, Research and Practice*, 2. 243–249.



# ▶ UBC SASS UPDATES

## FIRST SCHOOL SYMPOSIUM ON “HOT TOPICS IN SPEECH, LANGUAGE, AND HEARING: FROM THE RESEARCH LAB TO THE CLINIC, AND THE OTHER WAY AROUND”

The School is excited to announce its first symposium, titled “Hot Topics in Speech, Language, and Hearing: From the Research Lab to the Clinic, and the Other Way Around”. The symposium will be held on April 1st, 2017 in the Friedman Building at the Point Grey Campus.

Planned activities include two parallel sessions in the morning and two in the afternoon, given by School faculty (Dr. May Bernhardt, Dr. Sig Soli, Dr. Navid Shahnaz, and Ms. Eavan Sinden) on topics that are of high interest among clinicians: clinical practice in a multicultural and multilingual world, silent hearing loss, and counselling skills development. Attendees will also have the opportunity to engage in discussions about research questions with School faculty.

Up to 50 seats will be available for each of the parallel sessions. Attendees will select one parallel session in the morning, and one in the afternoon at the time of registration; registration for these sessions will be on a first-come, first-served basis.

Clinical faculty (clinicians who have an appointment as UBC clinical faculty at the time of registration), and students will be able to register at a discount rate. A discount rate is also available for early registrants (before March 5, 2017).

You will find more details about the symposium on the symposium website at:  
<http://audiospeech.ubc.ca/hot-topics-in-speech-language-hearing/>

## NEW FACULTY APPOINTMENTS

Marcia Choi has accepted an offer of appointment in our school as our new full-time Instructor in speech-language pathology, effective March 1, 2017. Ms. Choi is an experienced clinician, facilitator, and instructor who has 20 years of experience with health teams with expertise in interprofessional practice. In the last year, she has worked in the School as our part-time Clinical Practicum Coordinator. She has extensive experience working in public health settings and in private practice. Since 2008, she has been President of Casson & Choi Incorporated, a company that offers leadership and professional development services. Marcia will be replacing Lisa Avery, Senior Instructor, who will go on retirement at the end of March 2017.

Jenny Hatton is the school’s new Audiology Clinical Faculty Representative on the school Committee, effective October 1, 2016. She is taking over for Anna Van Manen, who had been the audiology clinical faculty representative for several years. Jenny Hatton is a clinical audiology specialist working for the BC Early Hearing Program. She specializes in pediatric ABR testing, and supports other audiologists around BC who provide these services. In addition to her clinical audiology role, Jenny is a member of the BC Hands & Voices board of directors, has taught several ABR classes and labs at UBC, and has personal experience growing up with hearing loss. She welcomes the opportunity to become involved in the collaboration between UBC SASS and clinical audiology.

Tracey Findlay is the school’s new SLP Clinical Faculty Representative on the school Committee, effective February 1, 2017. She will be replacing Marcy Adler-Bock, who had been the SLP clinical faculty representative for the past few years. Tracey Findlay has been a Clinical Instructor with the school for over 20 years and is a champion in supporting student education and clinical educators as

well as other initiatives in the school. Tracey is the practice leader for speech-language pathology at the GF Strong Rehab Centre, UBC Hospital, and Vancouver General Hospital. In the last year or so, she has worked with the College of Speech and Hearing Health Professionals of BC regarding advanced competencies, she has been part of the development of an electronic health record across 3 health authorities, and she has worked on standardizing practice guidelines. Tracey held this role previously and reports she is looking forward to resuming the role and getting to know some of the new clinical educators and representing the speech-language pathology clinical faculty.

We are delighted to welcome Marcia, Tracey, and Jenny, and we would like to thank Lisa, Anna, and Marcy for their outstanding contributions to our school over many years!

## ▶ CKNW SUPPORTS INTENSIVE FLUENCY THERAPY



CKNW's continuing commitment to assist families in need made a significant difference in the lives of students who stutter and their families in 2016, making it possible for them to participate in a unique and life-changing experience.

Summerspeak's Saanich Intensive Program provided therapy for four middle school students at Saanich Commonwealth Place in August. Langley Summerspeak Intensive Programs, held in Walnut Grove in July, included

twelve students ranging in age from five through eighteen. Thanks to grants from CKNW, seven students whose families needed financial assistance participated enthusiastically in intensive therapy for stuttering through the Saanich and Langley Summerspeak Intensive Programs.

Every year since the inception of Summerspeak in 1989, participants have benefited from the support of CKNW Orphans' Fund and other local charities. Their generous support has improved countless lives.

Summerspeak's principal speech-language pathologists, Sandra Collins and Carol Westdal, are Registrants of CSHHPBC and members of SAC and BCASLPA. Summerspeak uses an eclectic approach incorporating best practices in fluency therapy, from the highly regarded Australian Lidcombe and Camperdown programs to the development of meta-cognitive skills and mindfulness. Parents learn to provide positive and specific feedback and to support their child as they move forward in developing fluent speech patterns.

2017 programs are planned for Langley in July and Saanich in August. Please contact **Carol Westdal** [cswestdal@gmail.com](mailto:cswestdal@gmail.com) or **Sandra Collins** [scollins-slp@shaw.ca](mailto:scollins-slp@shaw.ca) for more information. Early registration is essential to facilitate funding support.

# ▶ **ROUNDTABLE DISCUSSION HELD FOR SCHOOL SLPs**

I was fortunate to attend the roundtable discussion group facilitated by the Coquitlam School District speech-language pathologists in January. They sent out an invitation which included questions related to caseload management and reporting. The local school district SLPs came prepared to share. Speech-language pathologists attended from 8 school districts.



**These are my takeaway ideas that I was excited to share with my colleagues:**

- Most district SLPs have blocks of time allocated in their schedule for consultation, assessment and meetings. In my district we call it the CAM schedule which is a rotating schedule of three weeks of therapy followed by one week designated for other duties during CAM week. Other districts had different names and different schedules (i.e. four weeks of therapy followed by two weeks of consultation/assessment/meetings). There is research citing the effectiveness of this model and many SLPs find that it helps them complete assessments and consult without cancelling therapy
- Some people have prep time in their weekly schedule, but not all. If you are a BCTF member, you are entitled to this in your contract.
- One district has weekly time allotted to an SLP for mentoring SLPs who are new to the district! What a fabulous idea!!!
- Another district offers a twice-yearly evening training session for parents of children with stimulable articulation errors. It's by invitation only and the SLPs do it on their own time.
- Some districts with resource room programs have designated SLP time attached to that classroom.
- In one district, the SLP is a member of a team that visits at-risk students in their classrooms in September. I love this proactive idea!!! Think about how supported and connected this would make the teacher feel and it could potentially change the whole dynamic for the year.
- Every district had a focus on early intervention, with one district (it's mine) having a 0.6 Language and Literacy Middle School SLP position. This position is specific to assessing students with language-based learning difficulties as well as educating and mentoring the classroom teachers.
- Some districts permit high schools to purchase SLP time from part-time district SLPs who are then paid as a TOC (teacher on-call) for their hours of work.
- A few districts have ultrasound technology + an SLP on staff with time designated to ultrasound use.
- Some districts have an AAC specialist. Mine does, and I must say that having one person adequately trained, attending the workshops, making the boards, training the classroom teachers and staff, offering district pro-d to connect AAC use to the curriculum... allows our most vulnerable students to get a superb level of expertise in their communication programming that I, the generalist, would be unable to provide.
- Every district currently has vacant unfilled positions. We are stretched! Some districts are adding more SLP positions with the newly received money from the Supreme Court Ruling in favour of teachers. My concern is that we advocate and fight for these positions and then cannot fill them so at some point the money is reabsorbed into the system and is not spent on SLP services.

Excellent materials were shared! Coquitlam shared their Severity/Priority Rating scale and Chilliwack shared their Response to Intervention Tier Two brochure. I am hoping they will be posted on the



[Facebook BCASLPA SLP Schools Group](#) by the time you read this.

This was a wonderful opportunity to connect with SLPs from neighbouring districts and share ideas around common areas of concern. Hats off to Coquitlam for organizing this terrific event! It was well attended and it was a wonderful opportunity to meet our peers, share information and ideas, and come away invigorated to make positive changes that will impact our profession as well as our students.

I would love to open a forum for discussion on topics of interest to BCASLPA members. I've offered my opinions and comments here but I'd love to hear the opinions of other professionals. Any ideas regarding how we might facilitate this kind of professional dialogue are welcome!

I am hoping to have some time allocated to school-based SLPs to chat and share during our fall BCASLPA conference. If you have ideas for how we could use that time effectively, please connect with me on the [BCASLPA School SLP page](#), or email me at [SLP.pamwaterhouse@gmail.com](mailto:SLP.pamwaterhouse@gmail.com).

**By Pam Waterhouse**

## **CALL FOR NOMINATIONS: BCASLPA AWARDS 2017**

### **Honours of the Association**

Honours members who have made outstanding contributions to speech-language pathology and/or audiology in areas such as education, research, organizational services, and/or administration.

### **Distinguished Service Award**

Honours individuals who are not speech-language pathologists or audiologists, but who have made outstanding contributions to the professions and the communities they serve.

### **Award in Recognition of Service**

Awards members whose special efforts and contributions, through volunteer service with BCASLPA and related organizations, have contributed to the growth of audiology and speech-language pathology.

### **The Audiologist and Speech Language Pathologist of the Year**

These awards are given to individual members or teams who have been nominated by clients and/or client families and who are members of BCASLPA/registered with SAC/CSHHPBC. These awards are given based on client nomination. These awards will be presented to those individuals or groups that have contributed to the growth of the professions of Audiology and Speech-Language Pathology exemplifying the vision or mission of the professions for client outcomes and care.

Please see link for more information and for the nomination forms: <http://www.bcaslpa.ca/professional/membership/awards/>

Please send in your nominations by August 15, 2017, attention Janet Campbell, to: [contact@bcaslpa.ca](mailto:contact@bcaslpa.ca) or by fax: 604-736-5606.



# ▶ BEST PRACTICES IN LITERACY INSTRUCTION

In 2000, the Report of the National Reading Panel (NRP) was published. The panel was charged with finding the most effective approaches to teaching reading by reviewing the research. The NRP included the following key areas in their report: phonemic awareness, phonics, fluency, vocabulary and text comprehension. This report has guided much of the research and hopefully practice since its publication. Meta-analyses such as this are very important because they over-ride the phonics vs. whole language controversy and ad hoc citing of articles. It is vital to stay abreast of best practices so as not to get stuck in practice patterns that, while successful, may not be optimal.

Below are what are currently known to be some of the best practices in literacy instruction for school age children. As this article is for speech-language pathologists in British Columbia, I am only addressing phonemic awareness, vocabulary, and text comprehension in this article. Response to Intervention tiers 2 and 3 should be using these strategies as needed with consistency and monitoring.

## Phonemic awareness

- Only teach one or two phonological awareness skills: blending and segmenting are the most efficacious. Progress through VC (vowel consonant), CVC, CCVC, and CVCC words and non-words. Rhyme awareness is most appropriate for three and four-year-old children;
- Small groups have the greatest effect size;
- 10-20 minutes, two to four times a week works best;
- Introduce letters, but teach letter sounds not names;
- Teach initial, then final, then middle phonemes. Huge benefit to reading if children know initial and final sounds;
- Vowels are easier to learn if they are at the beginning of words (e.g. in);
- With initial training and ongoing support, education assistants can deliver programs;
- Systematic adherence to a program is essential;
- Older struggling readers benefit from minimal contrast work.

## Vocabulary

- Explicit instruction: definitions and other attributes such as multiple meanings (e.g. volume) should be taught. This may be especially necessary for specific content. Pre-teach words and discuss challenging words as they come up in the text;
- Implicit instruction: frequent exposure to words often through reading or being read to. Ask wh-questions. Talk about stories;
- Expose children to rich contexts and multiple genres;
- Use multimedia, such as graphic text and computer programs;
- Practice to increase automaticity and breadth of vocabulary;
- Use associations with previous knowledge to learn new words;
- Do not teach words in isolation, although for reading, children benefit from flashcards.

## Text Comprehension

- Learn to monitor comprehension. Teachers should model by speaking aloud how they monitor comprehension of a challenging text;
- Discuss with other learners;

- Use graphic organizers;
- Understand and use story structure such as who? what happened? where? and sequence;
- Generate and answer questions about the text;
- Summarize and identify or generate key sentences;
- Reciprocal teaching. The teacher starts off reading the text and summarizes, questions, clarifies, and predicts. Next the student takes a turn and so on;
- Teach inferencing.

## References

National Institute of Child Health and Human Development. (2000). Teaching children to read: An evidence-based assessment of the scientific literature on reading and its implications for reading instruction. National Reading panel report, Washington, DC: US Government Printing Office. Retrieved from ([www.nicdh.nih.gov/publications/nrp/documents/reports.pdf](http://www.nicdh.nih.gov/publications/nrp/documents/reports.pdf)), accessed 21st July 2015. By Stuart, M., & Stainthorp, R. (2016). Reading development and teaching. London: Sage.

by Dr. Melanie Houston, Ph.D, RSLP

# SAVE THE DATE: BCASLPA 60TH ANNIVERSARY CONFERENCE

Burnaby Delta Hotel

October 19-21<sup>st</sup>

**Congratulations BCASLPA, you're 60!**

At an age when most people are thinking about retirement, our association is thriving and striving to provide members what they request most: good quality professional education opportunities and public education resources.

## What to expect for our Diamond Anniversary Conference:

- Networking opportunities through forums, social events and breaks that allow time to talk about what you are learning
- Receptions and displays celebrating the past 60 years, honouring our members and looking forward to the future of our association
- An amazing selection of speakers across the continuum of our professional practice

## Are you an Audiologist? Topics include:

- Dr. Navid Shahnaz (UBC) and Dr. Eytan David (UBC) will focus on medico-legal work in private practice
- Dr. Richard Tyler (University of Iowa) will address tinnitus and hyperacusis in his half day session
- Shannon Osmond (University of Florida, Au.D in progress) will discuss delivering culturally sensitive and relevant services to First Nations people throughout Canada, with a focus on the delivery of audiological services in northern and remote communities. Ms. Osmond is an Indigenous Audiologist (Metis), whose family originates from the Whitefish Lake First Nation in northern Alberta
- Other audiology speakers TBD



### Do you work with children? Do you like practical presentations with videos and case studies?

- Teresa Ukrainetz, (UBC alumnus, currently at Utah State University) will give a full day session on Expository Language Intervention
- Elizabeth Haynes (ISTAR) will present a full day of practical fluency assessment and treatment options for late preschool/early school-aged students
- Kate Ballem Chase (Nurture and Learn) shows how to make the most of the ALL Program
- Michelle Bunny (CAYA) will walk you through using Touch Chat and Core Language
- Sherri Zelazny (Surrey Voice Clinic) will help you to assess and manage cases of Paradoxical Vocal Fold Movement (PVFM)

### Do you work with adults?

- Leora Cherney (Northwestern University) will cover a variety of aphasia topics, including community-based intervention in a full-day session
- Allison Baird (SpeechWorks) will demonstrate her use of telehealth to support clients with aphasia and dysphagia assessment and treatment within the city of Winnipeg and in communities in Northern Manitoba
- Kathy Yoshida and Karen Salamon (Columbia Speech & Language Services) will present their social communication group treatment for young adults with TBI

### Do you work with Aboriginal populations?

- Monique Gray Smith (Songhees Nation) will lay the groundwork Fostering Resiliency with Indigenous Children and Families
- Sharla Peltier (Rainbow School District, Sudbury, Ontario) covers Oral Language Traditions and Resource Selection
- Deanne Zeidler will share her Early Language Parent Program
- Dr. Barbara Purves explores Aphasia Services for Aboriginal Adults: Local and International Practice
- Kate Wishart and Carly Quinlan will discuss Lessons Learned Working in Indigenous Communities
- Shannon Osmond (University of Florida, Au.D in progress) will discuss delivering culturally sensitive and relevant services to First Nations people throughout Canada, with a focus on the delivery of audiological services in northern and remote communities. Ms. Osmond is an Indigenous Audiologist (Metis), whose family originates from the Whitefish Lake First Nation in northern Alberta

Want to gather to make and share therapy materials, discuss implications of the US FDA ruling on OTC Hearing Aids, exchange ideas for stroke recovery communication groups, etc.? Contact the planning committee at [bcaslpa@telus.net](mailto:bcaslpa@telus.net) and we can try to find space for your group.

**Susan Edwards, RSLP**

**Respectfully submitted on behalf of the 2017 Conference Committee**

**Click Here**  
**to let us know if you are coming to the 2017 BCASLPA**  
**Conference by answering our quick two question poll.**

# ▶ BCASLPA IN THE COMMUNITY

I feel fortunate to be able to say that I have loved every second of my career, from my beginning as a general SLP to specializing in voice. Helping people communicate, express themselves, have their wants and needs met, as I am sure you as speech-language pathologists or audiologists know, is incredibly rewarding. I look forward to having the opportunity to spread the good word about communication and communication disorders. During the week of January 9, 2017, I had two opportunities to do just that.

Monday night January 9, 2017, I was invited to be on a panel of professionals for the UBC SALSA Beyond the BA Speaker Series. There were two speech pathologists, a lawyer with an undergraduate degree in linguistics, and a behaviour consultant – and about 30 engaged, motivated, smart students. It was clear that listening to the panelists talking about their careers, how they got there, why they like it, and some of the hurdles along the way, was motivating for the students. The students had great questions: What is your relationship with your patients? How do you manage death in your work environment? What is the difference between public and private practice? How do you identify new best practice? What is it like to transition from school to work? Kudos to our colleagues, Li Qi, audiologist, and Hilary Stahl, speech-language pathologist, for sharing their stories as well.

On Wednesday January 11, 2016, Becca Yu and I (pictured to the right), with the help of BCASLPA Operations Manager, Janet Campbell, staffed the BCASLPA public education table at the Surrey RCMP Health Fair. The fair was from 10-12:30 with a steady flow of RCMP employees. The building staffs 2600 people, 650 of whom came through the fair! Questions included speech and language development, hearing loss in adults and children, use of ear buds, accent reduction, and services for stroke survivors. The tough questions and stories to hear included, “Is it normal to wait a year for a hearing test for my child?”; “My child was assessed to be borderline delayed at age 4 and is now struggling at 11. He never received any services”; “My family was told there were no services for my father after his stroke.” These stories emphasize the need for public education and a BCASLPA presence in the community. Our public education material was well received, especially the speech-language development chart, recommendations for reading with children, and “What to ask your speech-language pathologist and audiologist” brochure. Our most popular query: “Is this chocolate?”



by Sherri K. Zelazny, MA, RSLP, CCC-SLP, BCASLPA Vice President

# ▶ SHARING THE NEWS: WAITING ROOM CHANGES

Sunny Hill Health Centre in Vancouver, BC, provides inpatient and outpatient care to children ages 0 to 19 from all over the province. Family centred care is central to our work at Sunny Hill with many initiatives taking place to improve the family experience and reflect on our own practice.

The Complex Developmental and Behavioural Conditions (CDBC) program is an outpatient clinic at Sunny Hill providing assessments to children and youth with a developmental diagnosis including intellectual disability and fetal alcohol syndrome disorder (FASD).

With the inspiration of a social worker at Sunny Hill and the guidance of Sunny Hill's family engagement advisor, a reflective practice group, called Sharing the News, was formed. The group's intention was to provide a space for clinicians to reflect on how the assessment process affects the family experience in a collaborative interprofessional manner. The members include a range of professionals including social workers, psychologists, occupational therapists, pediatricians, managers, and speech-language pathologists.

Although it was originally intended to discuss the diagnostic process, the group is also an open forum where any family-related feedback or ideas can be shared. A theme that emerged in the first few meetings was the spaces where families spent their time. The waiting space was central to this discussion.

An important part of family-centred care is partnering with families to receive feedback about what works and what doesn't. So, to tackle the room where families made their first impressions, questionnaires were left in the waiting room to get feedback on the state of the room at the time. The questionnaires were short with rating scales of how much they liked the room and open-ended questions on improvements that could be made. Parents gave feedback on the furniture, Wi-Fi, the amount of seating, and the space. Children even became involved with one child writing "the car" as a favorite toy in the waiting room. Following this feedback, the front desk was removed to allow for more space, large comfy couches and chairs were donated, and descriptions of how to use the Wi-Fi were put on the walls. There are now also many new toys for the children to play with.

All members of the group were involved in the whole process, such as putting IKEA furniture together (using the instructions), arranging chairs and couches, designing signs, and continuing to get feedback from families. Recently, we added free snacks for families who need them. The changes have been a success according to family comments.

Our family advisor reminds us that it is the smaller kindnesses, a smile or an offering of coffee or a snack that can make lasting impressions on the family journey through healthcare. These may seem less significant given the weight of some of the challenges families face, but our experience with the Sharing the News group has demonstrated their importance and provides an opportunity to focus on the relationship/human connection in our time with families. In addition, it has shown us the benefit of allowing space for these experiences to be shared interprofessionally.

By **Jamie Hack**

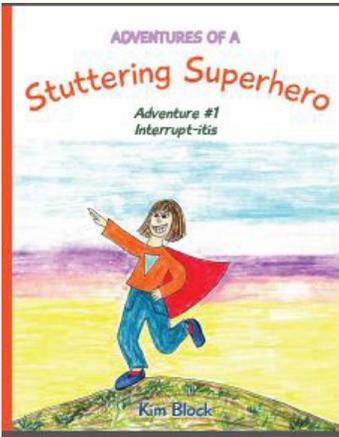


*Before the changes.*



*After the changes.*

# ▶ BOOK REVIEW: ADVENTURES OF A STUTTERING SUPERHERO



The paucity of books about children who stutter in her local library led Kim Block to author and self-publish a series of books herself: *Adventures of a Stuttering Superhero*. The first book in the series features, Melissa, a student who stutters, who sets out to find help for a classmate who has “interrupt-itis”, causing him to interrupt her and finish her sentences. Kim is a person who stutters and knows all too well how this strategy that is often used by listeners and although intended to be helpful, may actually make the situation worse. The person who stutters may begin to feel increased time pressure to finish their words and sentences which is likely to increase stuttering, not decrease it. This story provides a practical suggestion that children can try and hopefully have success, just like Superhero Melissa.

With this book, Kim is contributing to a small but growing collection that provides children who stutter with role models and positively influences how they perceive themselves. When Kim was growing up, she did not know anyone else who stuttered and believes that Melissa’s story would have helped her to feel less isolated and “normal”. Kim hopes that children who stutter will find comfort and support in the “me too” message of her books.

Unfortunately, children who stutter are at risk for being bullied, in fact, are more likely to be bullied than peers (81% vs 58%), and mostly about their stuttering (56%) (1). Educating peers can help reduce the amount of bullying children are likely to experience(2) and Kim’s book is an excellent resource to use in the classroom and at home with siblings.

Kim has revealed that Melissa’s next adventure takes her to a conference for people who stutter where she finds out that she is not at all alone. The importance of connecting with other children who stutter is crucial for their health and self-esteem. Boyle (3) reported on a study comparing adults who stutter with support group experience to those without any. Participants with support group experience demonstrated lower internalized stigma and were less likely to perceive fluent speech as highly or moderately important to being successful in their lives. Helping children to connect early with others who stutter can have important and significant outcomes for the rest of their lives and for choices they may make along the way. I’m excited about Kim’s second book in the series. Just like her first, it will be a welcome addition to my therapy library. And I hope its message will convince parents, teachers, speech-language pathologists, and other health and education professionals of the importance of children meeting others who stutter and of their own role in facilitating these connections for the children.

I encourage you to purchase Kim’s book as a therapy resource and to request your school and public libraries to purchase them, too. Kim’s story has a powerful message, her writing and dialogue from the perspective of a child is so genuine, and the concept of “interupt-itis” is very funny.

*Adventurous of a Superhero* can be purchased through Amazon and Chapters in print or through Ebook. Contact Kim directly through her website, [www.stutteringadventures.com](http://www.stutteringadventures.com), where she has posted other resources to use connected with the book. This story is also available as a free resource for Deaf and Hard of Hearing students in American Sign Language. This [video](#) was produced by the BC School for the Deaf. If you are interested in other books about children who stutter, I recommend [this resource](#).

## References:

(1) Langevin, M., Bortnick, K., Hammer, T., & Wiebe, E. (1998). Teasing/bullying experienced by children who stutter: Toward development of a questionnaire. *Contemporary Issues in Communication Science and Disorders*, 25, 12-24. (2) Craig, W.M. + Pepler, D.J. (1995). Peer processes in bullying + victimization. *Exceptional Education Canada* 4: 81-95. (3) Boyle, M.P. (2013). Psychological characteristics and perceptions of stuttering of adults who stutter with and without support group experience. *Journal of Fluency Disorders*, Vol. 38, Issue 4: 368-361.