






April 28, 2023 SLP COP

- Introductions
- Goals
  - Updates in each service deliveries
    - Health/education/private
  - Sharing areas of expertise.
    - Lee Silverman voice training
    - Bringing other professionals in – e.g. Autism in girls
  - Collaboration and transitioning between services
- To do:
  - Add your name to provider list with contact information
    - Add other contacts – what we could talk to them about
      - E.g. feeding and swallowing at Stollery
    - Update list with schools therapists are covering
      - Call Cheryl as a central contact point for PCS
    - Will be using this list for future emails.
  - Invite Audiologist to a future meeting
  - If you pick up a student – put it into the TEAMS chat what school they are going to (not names)
    - SLP provider for that location will contact
  - Next meeting: September 8<sup>th</sup> at AHS at 9 AM
    - Leave time for collaboration/transitioning.
    - Invite Audiologists
    - Next chair – Sarah Anderson
    - Need volunteer for Notetaker.
- PCS information sharing
  - RCSD disbanded by government in 2020
  - 6 divisions have come together to make one team (Under GPPSD banker board)
  - Population: Turn 3 by December 31 – Highschool, having ASN
  - Responsible to school, time is determined by FTE
    - E.g. .4 to IV Macklin
    - Consultation to teacher (not necessarily student specific)
    - Some direct therapy via trained EAs or SLPAs
    - Assessment
    - High school – often more consultation based with admin and teachers.
- Preschool
  - GPPSD
    - 8 Classes between 2 sites (2 AM class at a site/2 PM classes)
    - 1 Teacher per school
    - 16 kids for each class
    - A few community model kids
    - Mild/mod to severe
    - 4-5 EAs for each classroom

- Served by SLP and OT regularly.
      - Psych once a month
      - Vision, hearing, PT as needed
    - Some Autism assessments (special circumstances)
  - Peace Wapiti/ Surrounding area schools
    - Ages 3- 4 JK programs or private preschools
    - Mostly focusing on universal strategies/staff training
      - General stimulation
    - Resources are limited for 1 on 1
      - Model especially difficult for Apraxia
  - Valleyview
    - Must pay \$300 a month, even for PUF
  - Catholic school district
    - PUFF programs at some schools (not all)
      - Mostly community kids, but will accept PUFF students to these programs
  - Assessments for PUF
    - AHS
      - NOT If parents call saying “we want an assessment for PUFF” and they have no concerns
      - If parents are concerned, they will take the students and do what is needed (which may be PUF)
    - JK in Peace Wapiti
      - Introduction day – mini screens.
      - Community children
      - May talk to parents about going to AHS
    - OAP
      - Cheryl is doing screens
- Sturgeon Lake and Horse Lake
  - Sarah and Sabrina
  - Assistants working
  - Sturgeon lake pulling out next year
    - Previously had SLP, OT, SLPA, counselling, psychology
  - Horse Lake continuing next year
- Private Practice
  - Sarah
    - Mostly FSCD contracts
    - Liz just starting - now on RFQ
    - Taking some private clients
      - Start with 15 minute free virtual client
    - Have assistants doing therapy – more cost effective for family
      - Most have weekly session
      - Observations with SLP after 10 sessions
      - Virtual options

- Assistants not doing FSCD program aids
    - FSCD RFQ list
      - Taking a long time to get on the list
      - Sarah can get us a contact to help expedite the process
  - Sabrina
    - Mostly in FSCD
    - Going on Mat leave soon
    - Valleyview
  - Taylor
    - FSCD as well
    - Going on Mat leave
  - Grande Cache clinicians
    - School providers are not doing FSCD
  - Karen Nash
    - In the home with parents, half hour once a week
    - Some more at the end of the school year (2-3 times)
    - Covered by private insurance or out of pocket
      - No FSCD contracts
- AHS
    - Birth to 18
    - Strict guidelines about what they can see:
      - Speech/artic
      - Feeding
      - Fluency
      - Apraxia (Once it's identified)
      - Voice
      - Language – until they have an ASN
        - Will continue to see them if they decline PUF
      - New AAC – or if there is a new need
      - Issues related to hearing loss
    - Episode of care
      - When a new need is identified
      - Block of therapy
      - 1-8 sessions
      - Then reevaluate.
      - Followed by consolidation break (12 weeks)
        - Parents reach out if they want more (therapists are not chasing down)
        - If parents don't call back, discharged. Go back on full waitlist
    - More coaching of parents (vs. direct therapy)
    - Only one OT
    - Audiology
      - Triage
        - ENT involvement
        - Screened by others –

- Onus on parents to call back and re-book
  - Webinars re: development
    - Not required, but strongly encourages
    - Live therapist presenting
    - PRUT
      - [Pediatric Rehabilitation \(alberta.ca\)](#)
      - [Webinars \(alberta.ca\)](#)
        -  AHS Webinars at a Glance Poster Peds Re
        -  AHS Webinars General Poster Peds R
        -  AHS Webinars Promo Slide Standard
        -  AHS Webinar Flyer Peds Rehab.pdf
        -  AHS Webinar Info Business Card Peds R
- Autism assessment
  - 2 year waitlist at Glenrose
    - Will close a file if there is no SLP assessment with referral
      - Does not need to be formal assessment (current level of functioning)
    - 30 days for parent questionnaire
    - If professionals call to make sure everything is in order after referral has been sent, can be helpful to make sure all documents are in order
      - Call central intake for information
      - May send documents direct to therapists to share with parents
    - Teleconference assessments possibly
  - Attach Private assessment teams
    - Can pay through insurance
  - Specialized grants have been approved for some assessments through private practitioners of school ages children
- Shauna Lee
  - Advocacy group chair
  - Social media campaign
    - Tweet
  - Pre-made letter through SAC link
  - Attach link –
- Katrin COP link -
- FSCD
  - Inclusion Alberta – Will go to meetings with families
  - Laura ? – from Pam
- AADL –
  - PCS is an authorizer site

- Only see PCS students
    - Level 2 (direct access, no mounting)
    - Paper work takes a lot of time, have mostly been getting direct access devices through charities
      - Even some mounting going through charities/schools
  - Referring to ICAN for complex access
- Concurrent Practice
  - Shared clients between AHS/Private/School teams
  - Sometimes students aren't even on our caseloads that are being seen by other teams
  - Parents often don't know who their school team is
  - AHS must get verbal or written consent to share information with other professionals
  - PLAN: If you pick up a school aged child, pop it into the TEAMS Channel
    - Don't use names
    - E.g. "I am picking up an FSCD client in Clairmont, can therapist from that school contact me?"
- Resource Sharing
  - The Valley of the Bird Tail
    - Carolyn's book recommendation
  - PODD – October ?
    - Will send out registration information
    - Great PD for all things AAC, even if PODD isn't the system you end up with.
    - October 26<sup>th</sup> and 27<sup>th</sup>
- The Alphabet Preschool in Clairmont
  - Supposed to have an interdisciplinary team
  - Are they accepting PUF students?
    - Possibly more of a private resource –
  - Wellington Resource Center
  - Karen Chrenek - Not impacting county preschool connected to the school division