

SPEAKOUT

THE MAGAZINE FOR AUSTRALIAN SPEECH PATHOLOGISTS

DECEMBER 2017

**Membership
renewals open**

**SPs making a
difference in
*Ghana***

and...

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National Office

Level 1/114 William Street Melbourne VIC 3000
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Chief Executive Officer

Gail Mulcair
T 03 9642 4899 E execassist@speechpathologyaustralia.org.au

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Letters can be sent to pubs@speechpathologyaustralia.org.au
Letters may or may not be published in future issues of *Speak Out* magazine at SPA's discretion.

Advertisements

Please refer to the "Publications" menu at www.speechpathologyaustralia.org.au to view the 2017 *Speak Out* ad kit.

Any queries may be directed to SPA's Publications Officer
T 1300 368 835 E pubs@speechpathologyaustralia.org.au

Advertising booking dates for February 2018 *Speak Out*.
The official booking form must be received at National Office by COB 15 Jan 2018.

Speak Out Branch Editors

- ACT – via pubs@speechpathologyaustralia.org.au
- New South Wales – Edward Johnson and Arabella Ludemann
- Northern Territory – Christina Spinella
- Queensland – Leanne Sorbello, Catherine Hicks, Erika Campbell and Rebecca Sexton
- South Australia – Barbara Lyndon
- Tasmania – Rachael Zeeman
- Victoria – Shane Erickson
- Western Australia – Jade Sumner

Please see the website for Branch Editor contact details.

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December 2017

in focus...

Communication milestone poster



Understanding and speaking "between the flags"
Children learn to communicate by interacting with early childhood educators, family and friends. This poster shows when and how children develop communication skills. Early childhood educators and speech pathologists can support children to build their communication and language development "between the flags".
We can work together to:
• find out which children are understanding and speaking "between the flags"
• create communication-supporting learning spaces
• help children with a range of communication needs.
Speech pathologists can also provide therapy to help children with:
• understanding and using pictures, symbols, signs, gestures, speech sounds, words and sentences
• taking turns and making eye contact
• building skills for later reading and spelling
• mastering voice and feeding difficulties.
Don't wait and see!
Please speak to parents about their child's communication as soon as you have any concerns. Get advice from Speech Pathology Australia by phoning 1300 368 835. Work together with a speech pathologist in your area. You can contact speech pathologists:
• through local community health centres and non-for-profit organisations
• by calling or emailing private practices.
By searching for speech pathology services online, or at www.speechpathologyaustralia.org.au (click on 'Find a Speech Pathologist').
Language and cultural differences
Children from different backgrounds, including Aboriginal and Torres Strait Islander backgrounds, may experience differently when learning English. This may not be a problem. Always encourage families to use the language(s) in which they are comfortable speaking. Children who are learning English need meaningful language experiences through stories, music, nursery rhymes, play and LOTS of repetition. If you're unsure about their progress, talk with a speech pathologist.

Communication milestones

At 12 months children can usually:
• understand about 10 words
• respond to their name
• recognise greetings and gestures, such as 'hi' and 'bye-bye'
• recognise a few familiar people and objects (e.g. 'mummy, daddy, teddy')
• make eye contact
When you talk to me, WAIT for me to respond before you say more.

At 18 months children can usually:
• understand up to 50 words and some short phrases
• follow simple instructions (e.g. 'Where the ball?')
• point to familiar objects when named
• point to some pictures in familiar books.
Get face-to-face with me when we communicate.

At 2 years children can usually:
• follow simple two-part instructions (e.g. 'Give me the ball and then sit')
• respond to simple wh-questions, such as 'what' and 'where'
• point to several body parts and pictures in books when named
• understand when an object is 'in' and 'out' something.
• say more than 50 single words
• put two words together (e.g. 'The teddy', 'No ball')
• use their voice to ask a question (e.g. 'Teddy go?')
• say 'no' when they do not want something
• use most vowel sounds and a variety of consonants (m, n, h, k, g, w, c, d)
• start to use 'and' and 'by'.

At 3 years children can usually:
• follow more complex two-part instructions (e.g. 'Give me the teddy and show the ball')
• understand simple wh-questions, such as 'what', 'where' and 'how'
• understand the concepts of 'same' and 'different'
• sort items into groups when asked (e.g. toys vs. food)
• recognise some basic colours.
Figure out what I want to say and put it into words for me.

At 4 years children can usually:
• use words such as 'and', 'but' and 'because' in much longer sentences
• describe recent events, such as morning routines
• ask lots of questions
• use personal pronouns (e.g. 'he/she/they') and negatives (e.g. 'don't/less')
• count to five and name a few colours.
No need to always read the whole book. Talk about pictures that interest me.

At 5 years children can usually:
• follow three-part instructions (e.g. put on your shoes, get your backpack and line up outside)
• understand time related words (e.g. 'before', 'after', 'near' and 'later')
• start thinking about the meaning of words when learning
• understand instructions without stopping to learn
• begin to recognise some letters, sounds and numbers.
• use well formed sentences to be understood by most people
• take turns in increasingly longer conversations
• tell simple, short stories with a beginning, middle and end
• use past and future verbs correctly (e.g. 'went', 'will go')
• use most speech sounds, but still may have difficulties with 'r', 'l' and 'v'.

Speech Pathology Australia
www.speechpathologyaustralia.org.au

To download this poster as handy information sheets visit www.speechpathologyaustralia.org.au/milestones

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Cover image - Bron Davidson with Masters of Speech and Language Therapy Students and faculty at the University of Ghana. Read their story on page 18.

From the President



Gaenor Dixon

WITH THE END of the year approaching, I don't know about you, but it always feels like a bit of a sprint to the finish line. Trying to complete activities that I wanted to tie up in 2017, starting to unwrap the activities for 2018, and then of course there are those activities that last more than just this year. I hope that in the busyness of this time of year you can find a few minutes to sit down and enjoy this edition of *Speak Out*. This edition will showcase some of the activities that your Association has been involved with over the last year; through both our paid positions and our volunteers.

As I reflect on the successes of the Association this year, I would like to thank Gail Mulcair, our CEO, and the very hard-working, dedicated National Office team for their commitment and effort this year. It is exciting to see the Association's opinion sought in media and policy, and to see our steps on the road towards achieving our 2030 aspirations. I would like to particularly note the contributions of Chris Lyons, Ronelle Hutchinson and Rebecca Faltyn, who have left the Association this year to pursue other opportunities. The work of these three staff members in advocacy, professional advice and publications, together with the current staff, has set the Association on a strong path.

I would also like to thank all the member volunteers across the Association for their contributions this year; the Branch Chairs and the Branch executives. I would particularly like to thank outgoing chairs Alison Smith (Queensland) and Rosie Martin (Tasmania) for your service for a number of years – and I look forward to continuing to work with you in other capacities! Thanks to our Ethics

Board Chair, Suze Leitão; and the Ethics Board, for their strategic proactive work supporting our members to maintain their ethical practices. Thanks to the 2017, 2018 and 2019 conference planning committees. Thank you to our newly formed Aboriginal and Torres Strait Islander Advisory Committee members, Tara Lewis, Eddie Ong and Alice Robbins. Thank you to all the reference groups that provide us with advice; the Aged Care Reference Group, the Early Career Reference Group, the members who are linked as representatives on their Primary Health Network committees, rural and remote representatives, the school-aged expert reference group; and the members who have provided us with advice on the many activities that the Association is engaged with; whether that is providing feedback on the NDIS, or input to a clinical guideline or other documents. And, I would like to thank the Directors of the Association (Chyrisse Heine, Belinda Hill, Tim Kittel, Lee McGovern, Brooke Sanderson, and Marleen Westerveld) for their work in steering the direction of the organisation.

2018 promises to be another busy but successful year – don't forget to renew your membership! As you budget for 2018, don't forget to include the conference in Adelaide. The program is looking to be thought-provoking and cutting-edge. I hope that I can meet you there!

In the meantime, I hope that you have a safe and restorative holiday period, and I look forward to continuing to work with and for you next year.

Gaenor Dixon
National President



Speech Pathology Australia would like to wish you all a merry festive season and a safe and Happy New Year.

Please note that the Speech Pathology Australia National Office will be closed from 22 December 2017 until 2 January 2018.

Association news

Editorial Committee for the Journal of Clinical Practice in Speech-Language Pathology (JCPSLP)

Expressions of interest are invited for Editorial Committee Members for the Journal of Clinical Practice in Speech-Language Pathology (JCPSLP).

Editorial Committee members work in collaboration with the Editor to strengthen the Journal of Clinical Practice in Speech-Language Pathology (JCPSLP) as a significant publication for Speech Pathology Australia and the profession.

Committee members may be involved in a broad range of tasks, under the direction of the Editor, including:

- solicitation of material;
- managing specific sections of the journal;
- supporting the implementation of editorial policy;
- editing of articles in accordance with established editorial policy, guidelines to contributors: 'Writing and Style Guidelines' and the 'Corporate Image Guide'; and
- acknowledging receipt of submissions.

Previous experience in reviewing, editing, writing and/or publishing of manuscripts is highly desirable, as is the possession of a postgraduate degree. Appointment to the Editorial Committee is for a two year term.

Please direct enquiries to: Leigha Dark PhD, Editor, Journal of Clinical Practice in Speech-Language Pathology (JCPSLP) at jcpslpeditor@gmail.com.

Please forward your expression of interest, curriculum vitae and two referees to Gail Mulcair, Chief Executive Officer, Speech Pathology Australia at execassist@speechpathologyaustralia.org.au by close of business, Friday 12 January 2018.



Milestone poster enclosed

Enclosed with this edition of *Speak Out* you will find a copy of the Communication Milestones Poster.

The poster is part of a resource kit developed by the SPA Queensland Branch and National Office staff.

The kit includes individual fact sheets based around the age groupings, and also a downloadable A3 version of the poster.

You can find the full resource kit at: www.speechpathologyaustralia.org.au/milestones



Call for Board nominations

SPEECH PATHOLOGY AUSTRALIA'S Board of Directors is responsible for the strategic development, implementation and evaluation of the Association's policies and procedures within the rules of the Constitution.

Under the Association's Constitution Board nominations are currently being sought for four positions.

Directors hold major responsibility within the Association and as such, many Directors have never previously undertaken a role with similar legal, financial and strategic management responsibilities.

Every possible support and assistance is provided by experienced Directors, especially members of Board Executive Subcommittee, the Chief Executive Officer and National Office staff.

This key leadership role offers a wonderful opportunity to develop new skills and contribute significantly to the strategic direction of the Association and the speech pathology profession. Directors are required to attend four Board meetings each year.

From the incoming Board four Directors are then elected to the

office bearer positions of President, Vice President Operations (VPO) and Vice President Communication (VPC), who form the Board Executive Subcommittee (BES).

Board nomination forms for the four vacant Director and an information package are available on our website. Each nomination must address key selection criteria and completed nomination forms must be received at National Office by Wednesday, 31 January 2018.

The appointments will be effective from the 2018 Annual General Meeting in May for a period of two years.

Any voting member is encouraged to nominate, while retiring Directors are eligible to renominate. Elections will be held if more than four nominations meeting the selection criteria are received.

For further information, please see the Director Position Description, contained within the Policy and Procedures Manual, available on the Speech Pathology Australia website or contact a current Director, or Gail Mulcair (Chief Executive Officer).

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Gail Mulcair
Chief Executive Officer



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- oral cancer screening
- oral mechanism examinations
- articulation therapy
- oral cavity examinations

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Membership renewals 2018 now open!

How to renew...

MEMBERS SHOULD BY now have received their membership renewal information by email.

To renew your membership simply go to www.speechpathologyaustralia.org.au/2018 and sign in.

If you require your login and password please contact us at membership@speechpathologyaustralia.org.au or 1300 368 835.

Payments can be made online in full by credit card (VISA or MasterCard) or you can provide your bank account details and elect to pay by direct debit on a monthly, quarterly or yearly basis.

www.speechpathologyaustralia.org.au/renew2018



Medicare Provider Status

MEDICARE AUSTRALIA will be conducting an audit of speech pathologists with a provider number early in 2018 to ensure they are current financial members of Speech Pathology Australia. This is a requirement for speech pathologists to maintain a Medicare provider number.

Medicare will be checking whether or not SPA members with a provider number have renewed their membership by the due date 1 January 2018 and hold Certified Practising (CPSP) status. Please renew early to avoid any potential disruption to your Medicare provider status. We look forward to your continued membership and support throughout 2018.

TOP TIP: Renew your membership to Speech Pathology Australia by the due date to avoid any potential disruption to your Medicare provider status.

Updating your details

YOUR EMPLOYER/PRACTICE details will show during your renewal.

It is important for advocacy, policy and lobbying activities that we have accurate and comprehensive information about speech pathologists in Australia.

For those who wish to appear on the Find a Speech Pathologist Search, this provides the public with accurate information.

We therefore ask you to complete as many details as possible during your renewal.

Remember you can also log in at any time and update your details.

To update and add to these go to:

- ➔ www.speechpathologyaustralia.org.au
- ➔ Sign in
- ➔ Go to Members
- ➔ From the drop down menu go to Update Member Details
- ➔ My Employer/Practice details

To view, edit or delete an existing practice click edit or delete next to practice type.

To add a new practice, click on the + sign.

For more information and assistance contact the SPA Membership team on 1300 368 835.

What you need to know about your PSR points when renewing for 2018...

With the change from the calendar to financial year membership there is some important information you need to know about submitting your PSR points when you renew for 2018. All 2017 members have two options when renewing in 2018.

Option 1

OR

Option 2

18 month renewal

Step 1

Renew for 18 months

Renew by 1 January 2018
Renewal period 1 January 2018 to 30 June 2019

What about PSR?

You need to submit PSR activities from 1 Jan 2017 to 31 December 2017 to meet the requirements (minimum of 20 points across at least two activity types) to be able to renew as a Certified Practising member.

If you are eligible for an extension, this will cover PSR activities from 1 Jan 2017 to 30 June 2019.

Step 2

Renew for 12 months

Renew by 1 July 2019
Renewal period 1 July 2019 to 30 June 2020

What about PSR?

You need to submit PSR activities for the 18 month period from 1 January 2018 to 30 June 2019 but there will not be a change in requirements; that is, the normal annual minimum of 20 points across at least two activity types will still apply for this transition period.

If you are eligible for an extension, this will cover PSR activities from 1 July 2018 to 30 June 2020.

6 month renewal

Step 1

Renew for 6 months

Renew by 1 January 2018
Renewal period 1 January 2018 to 30 June 2018

What about PSR?

You need to submit PSR activities from 1 January 2017 to 31 December 2017 to meet the requirements (minimum of 20 points across at least two activity types) to be able to renew as a Certified Practising member.

If you are eligible for an extension, this will cover PSR activities from 1 January 2017 to 30 June 2018.

Step 2

Renew for 12 months

Renew by 1 July 2018
Renewal period 1 July 2018 to 30 June 2019

What about PSR?

You need to submit PSR activities from 1 July 2017 to 30 June 2018 to meet the requirements (minimum of 20 points across at least two activity types) to be able to renew as a Certified Practising member. Please note: for this transition period, activities from 1 July 2017 to 31 December 2017 will be captured again in this extended period but with the usual annual requirements.

If you are eligible for an extension, this will cover PSR activities from 1 July 2017 to 30 June 2019.

Step 3

Renew for 12 months

Renew by 1 July 2019
Renewal period 1 July 2019 to 30 June 2020

What about PSR?

You need to submit PSR activities from 1/7/2018 to 30/6/2019 to meet the requirements (minimum of 20 points across at least two activity types) to be able to renew as a Certified Practising member.

If you are eligible for an extension, this will cover PSR activities from 1 July 2018 to 30 June 2020.

By 1 July 2020, all members will be renewing for 1 July 2020 to 30 June 2021 and submitting PSR activities for 1 July 2019 to 30 June 2020

Association news

SPA Aboriginal and Torres Strait Islander Advisory Committee

SPEECH PATHOLOGY AUSTRALIA has formed an Aboriginal and Torres Strait Islander Advisory Committee. Aboriginal and Torres Strait Islander values in relation to culture, land and history are embedded in the values and business of the Association. This initiative aligns with the aspiration Clients and Communities driving service delivery of the Strategic Plan 2017 – 2019.

Membership of the committee is as follows:

- Two speech pathologists with Aboriginal or Torres Strait Islander background; Tara Lewis (Qld) and Edward Ong (Qld)
- One speech pathology student (or recent graduate) from Aboriginal and Torres Strait Islander background Alice Robins (Vic)
- One representative from Indigenous Allied Health Australia (IAHA) Donna Murray, CEO
- Two indigenous leaders/academics with policy and/or social health expertise
- Shane Mohor, President, CATSINaM, CEO Aboriginal Health Council of SA
- VACANT
- One Aboriginal and Torres Strait Islander consumer Peter Palancio, NT
- Chair, SPA ATSI Curriculum Committee Professor Beth Armstrong (WA)
- Board Representative Chyrisse Heine (Vic)
- SPA CEO or delegate Gail Mulcair, Cori Williams.



The inaugural meeting of the committee was held at National Office on October 20. National President, Gaenor Dixon, welcomed all members, and noted the formation of the committee as a significant development for the Association. Discussions covered a range of topics, including the SPA Strategic Plan, the ATSI Advisory Committee Terms of Reference (including the functions of the committee), development of a Reconciliation Action Plan, the role of the committee in developing partnerships between the Association and Aboriginal and Torres Strait Islander peoples and matters for discussion at future meetings. Terms of reference for the committee are currently being finalised, and will be made available to members once ratified by the Board.

The Committee will meet quarterly, and will report to the Board via the Board representative.

Cori Williams

Senior Advisor, Evidence Based Practice and Research
ebp@speechpathologyaustralia.org.au



Farewell Chris, hello Nichola

The Association said farewell to Christine Lyons, who recently left the role of Senior Advisor Professional Practice.

Christine was at SPA since June 2009. The role initially required one day per week and, over time, it gradually grew to 4 days per week. During this time Christine provided support and advice to many, many SPA members. Her professional manner combined with her personal interest in supporting members meant that she was a trusted “go to” for many individuals. Christine has been involved in a wide variety of projects and submissions and was a key force behind SPA’s 2016 *Speech Pathology 2030 Project*. She has also represented the Association on a number of national committees and reference groups and has developed resources and organised professional practice seminars.

Christine will be greatly missed by all staff at National Office and we wish her all the very best in her new ventures!!

Nichola Harris, who has been working at SPA as the Practice and Clinical Support Advisor has been appointed to the Senior Advisor Professional Practice role. Nichola is excited about this position and is looking forward to engaging with members in the role. Speech Pathology Australia is delighted to welcome Nichola to the position.

Professional Practice Senior Advisor Christine Lyons (pictured right) with SPA’s new incumbent Nichola Harris.

BOOK OF THE YEAR

awards 2017

Speech Pathology Australia



The BOOK OF THE YEAR AWARDS ceremony in November was a resounding success. The ceremony was again held in Brisbane and hosted and supported by the State Library of Queensland. The event was professionally facilitated by Jo Hayes, radio journalist and newsreader from Brisbane Radio Station 4KQ. Ms Hayes is a former speech pathologist.

The ceremony was opened by the Association's National President Gaenor Dixon, who also presented the awards.

The highlight of this year's ceremony was the playing of the Didgeridoo by Gregg Dreise, the winner of the Indigenous Children category. An activity that the school children present enjoyed immensely. Gregg also opened proceedings with an Acknowledgement of Country. Gregg is a teacher, author and illustrator and grew up in St George, South West Queensland. His mother is Lyla Knox, daughter of Ted Knox (Toomelah) and Lulu Simpson (Brewarina). The Knoxes are proud Kamilaroi Murris, and Gregg's grandma's family are Yuwaalaraay people.

There were a number of winners in 2017 who were returning after success in earlier years. Gregg Dreise is a previous winner of the Indigenous children category, while Gus Gordon was an earlier winner in the Five to 9 years children category as an illustrator! Similarly, illustrator Karen Blair is a previous winner of the Speech Pathology Book of the Year awards for her drawings.

As announced in the October edition of *Speak Out*, five deserving books were awarded for their contribution to language and literacy development.

Birth to 3 years – *Noisy Nature*, written by Mandy A Kuhne; Illustrated by Alex Kuhne

Three to 5 years – *Me and You*, written by Deborah Kelly; Illustrated by Karen Blair

Five to 8 years – *Somewhere Else*, written and illustrated by Gus Gordon

Eight to 10 years – *Artie and the Grime Wave*, written and illustrated by Richard Roxburgh

Indigenous children – *Mad Magpie*, written and illustrated by Gregg Dreise

Thank you to everyone involved with the Book of the Year Awards in 2017. A special thanks to the staff at the State Library of Queensland for helping to make the event such a success.

Speech Pathology Australia remains a proud supporter of the library's First 5 Forever program to improve the outcomes for children aged 0-5 years by supporting confidence around communication and learning through simple, everyday experiences. First 5 Forever directly supports parents and primary caregivers as their child's first and most important educator, and provides families with increased access to the resources they need through public libraries and online

Michael Kerrisk
Communications and Marketing Manager



FROM TOP: The winners of the SPA Book of the Year with National President Gaenor Dixon (pictured right). Authors Gus Gordon, Gregg Dreise, Deborah Kelly and Mandy Kuhne. Allen and Unwin representative Margaret Lanvizer accepted the award for Richard Roxburgh.



SPA attendance at strategic meetings during the ASHA Congress

TWO IMPORTANT MEETINGS WERE CONVENED TO COINCIDE WITH THE 2017 ASHA CONGRESS, HELD IN LOS ANGELES, WITH SPEECH PATHOLOGY AUSTRALIA CONTRIBUTING STRATEGICALLY TO BOTH EVENTS.



Representatives of the countries who are parties to the MRA at the signing ceremony.

Mutual Recognition Agreement (MRA)

During 2016/17, the countries who are parties to the MRA, which include: ASHA, SAC-OAC, IASLT, NZSTA, RCSLT, and SPA, all reviewed and shared their respective entry-level competencies and certification standards as part of negotiations around specific additional training or experience required to be demonstrated to meet the specific requirements for each Association. This has led to some revisions to requirements and streamlining to the processes involved in application under the Mutual Recognition Agreement. No major changes have occurred to the requirements of SPA members applying to the overseas associations covered under the MRA. To mark the revision of the MRA, a signing ceremony was held to formalise the agreement to the 2017 MRA.



SPA National President, Gaenor Dixon (right) and CEO, Gail Mulcair, were designated signatories for SPA.

International Communication Project

The International Communication Project (ICP) highlights the importance of human communication and how communication disabilities significantly impact every aspect of life. The ICP joins **organisations from around the world** in advocating for people with communication disorders and raising the profile of communication disabilities.

Speech Pathology Australia remains a founding member of ICP alongside ASHA, SAC-OAC, IASLT, NZSTA, and RCSLT, and an active contributor to its Strategic Advisory Committee, the Communications Working Group and a newly formed Data and Policy Group. Monthly teleconferences of each group are held, however the opportunity for a face-face meeting of the Strategic Advisory Committee (SAC) while attending the ASHA Congress provided the forum for more detailed and comprehensive discussion and planning. In particular, the ICP SAC discussed how communication as a human right can be promoted and championed through specific opportunities, including as part of promotions of the special issue of IJSLP which is focussing on the 70th anniversary of the Universal Declaration of Human Rights.

Joining this discussion, was Professor Sharynne McLeod who is the guest editor of this IJSLP special issue. Discussion ensued on hosting possible side events to coincide with the UN Conference of State Parties to the Convention on the Rights of People with Disabilities, and/or a meeting of the UN Human Rights Council during 2018. These meetings would potentially be a forum for bringing together high profile speakers to champion greater recognition of communication as a human right and to support the needs of those with communication disabilities. The group also discussed ways in which we can engage with the World Health Organisation, in our respective regions, and the World Bank. Further exploration on these opportunities is occurring.



Attending the ICP meeting on behalf of SPA was Gaenor Dixon and Gail Mulcair (both members of the ICP SAC) and Cori Williams (member of the Data and Policy Group).

Gail Mulcair
Chief Executive Officer

Australians living with communication disability



Speech Pathology Australia has had its estimate of the number of Australians living with a communication disability endorsed. With the release of the new Australian Bureau of Statistics (ABS) publication, *Australians Living with Communication Disability*, came confirmation that 1.2 million Australians have a communication disability. The release of the new publication follows a prolonged advocacy effort by the Association.

The data for the publication is drawn from the ABS's Survey of Disability, Ageing and Carers. The ABS report outlines the impact of communication limitation on the development and wellbeing of Australians with communication disability. This includes statistics and information about the distribution, gender, age and level of disability, unmet need for formal assistance, labour force participation, household income, social participation, and the impact of communication disability across the lifespan. Australians Living with Communication Disability plus all the relevant data may be accessed via www.speechpathologyaustralia.org.au/abs



Jessica
ACU student



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Speech pathology in schools update



Speech Pathology in Schools Resource

THIS RESOURCE PRODUCED by Speech Pathology Australia was launched at the end of October 2017 and is available on the SPA website. All speech pathologists who work or wish to work in schools are encouraged to use the resource to inform their practice and to assist with professional development and advocacy opportunities. The resource includes information regarding:

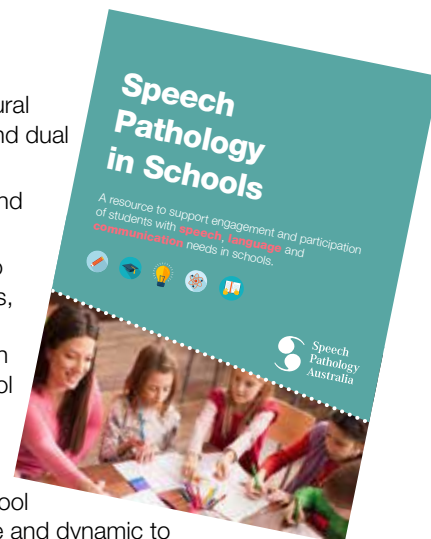
- national and international imperatives;
- prevalence of speech, language and communication needs (SLCN);
- typical speech, language and communication development;
- common SLCN;
- complex communication needs and augmentative and alternative communication;
- the impact of SLCN;
- identifying students with SLCN;
- best practice models and support for students with SLCN in schools, including inclusive education and a whole school approach;
- response to intervention and literacy difficulties;
- the positive impact of providing best practice support to students with SLCN;
- role of teachers and speech pathologists in the educational setting;
- what you need to consider when working in schools: workload management; employment arrangements;
- children from culturally and linguistically diverse backgrounds;

- the different needs of rural and regional schools and dual servicing; and,
- terminology, glossary and references.

The resource now includes video interviews of speech pathologists, principals, teachers and parents discussing the benefits of speech pathologists using a whole school approach in schools. Future additions will include videos of speech pathologists from several states using a whole school approach. This resource is active and dynamic to reflect and demonstrate current best practice.

Speech Pathology Australia was commissioned by the NSW Department of Education to develop the resource for principals, teachers and parents. The resource aims to encourage NSW government school principals to engage speech pathologists to work in their school using a whole school approach with the ultimate goal being improved learning outcomes for all students. The principal, teacher and parent components of this resource were commissioned by the NSW Department of Education and the project was commenced in January 2017. The resource will now be adapted for the NSW Department of Education's website. Details regarding the launch of these components will follow.

Go to www.speechpathologyaustralia.org.au/schools to view the digital version of the schools resource.



Schools kit promoted at conference

SPA set up an exhibitor stand at Macquarie University's Reading and Spelling Workshop which was run by Mary Gornik and Kathryn Thorburn. The NSW Speech Pathology in Schools Kit and the Speech Pathology In Schools Resource were promoted at the workshop via the stand. In addition delegates were informed of the two, one-day workshops SPA facilitated for speech pathologists working or wanting to work in NSW government schools.



Sydney workshops

Speech pathology in schools: a whole school approach

The aim of the NSW Department of Education's Speech Pathology in Schools resource for principals, teachers and parents is to encourage NSW principals to employ speech pathologists within their schools using a whole school approach. Speech Pathology Australia facilitated two, one-day workshops on Friday November 10 and Saturday November 11. Eight presenters shared their experiences using this approach in special, primary and secondary schools. All the presentations were recorded and will be available for viewing via SPA's CPD Events Library in December 2017.



Presenters at the Sydney workshop were Dr Charlotte Forwood, Mary Gornik, Pamela Thuan, Dr Julia Starling, Brooke Butt, Jenny Rayner, Claire Formby and Trish Nicoll. Pre-recorded presentations from Sara Gold and Glenda Lingard were included at the workshops. Thanks to all the presenters for donating their time and for sharing their experience.


Victorian Curriculum Assessment Authority (VCAA) Specific Learning Disorders Advisory Group

Speech Pathology Australia was represented on this group by Mary Gornik, Dr Tanya Serry and Nichola Harris (Acting Senior Advisor Professional Practice). The advisory group met on four occasions to review the Special Provision Policy and procedures. The final recommendations will be used to update the VCAA Special Provision Policy and Procedures. The revised policy will be available on the VCAA website at <http://www.vcaa.vic.edu.au/Pages/vce/exams/specialprovision/specialprovisionreview.aspx> from December 2017.

Victorian School disability funding model development

SPA was invited to send representation to a workshop facilitated by Deloitte Economics to discuss the proposed funding model following the PSD review. Mary Gornik and Nichola Harris attended the workshop and discussion centered on the functional needs-based model for school disability funding. Further updates will be shared as they become available.

Mary Gornik
National Advisor Education, Early Childhood and Projects



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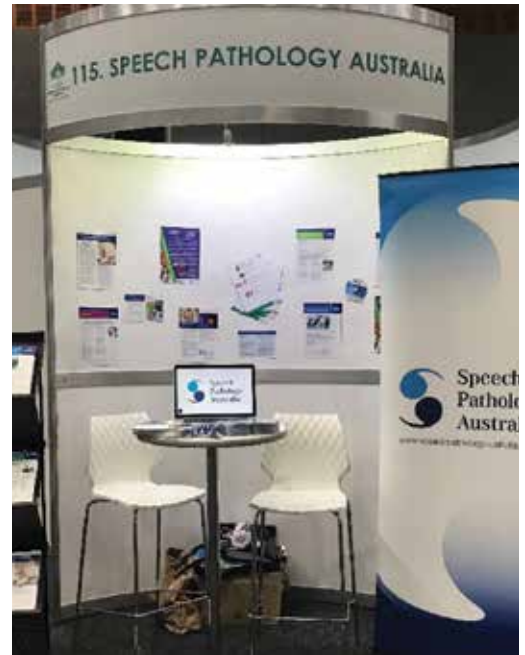
Perth, WA.....	Jan 18-20, 2018	Sydney, NSW	Feb 14-16, 2018
Melbourne, VIC	Feb 5-7, 2018	Brisbane, QLD	Feb 19-21, 2018

See our complete workshop schedule at www.hanen.org/ITTTworkshop



LASA Congress

The Leading Aged Services Association (LASA) Congress was held on the Gold Coast on 15-17 October. Jess Hayward SPA Aged Care Project Officer, and Amanda Dansky SPA Aged Care Working Party, attended to raise awareness about the role of speech pathology in ageing and aged care via a marketing pod. Across the three days, we had several interested service providers, academics and businesses asking questions and taking away flyers about speech pathology. The "Communication Matters" DVD was on loop with lots of chat about the importance of communication assessment and supports in aged care. Overall it was a successful awareness activity. A special thankyou to Amanda Dansky for volunteering her time for the event.



Advocacy in aged care

DVA and Stroke Alliance

In October and November, the SPA aged care team attended National Stroke Coalition and Department Veteran Affairs (DVA) Health Consultative Forum meetings. These meetings provided an opportunity to advocate and highlight the role of speech pathology in older people post stroke or for those who receive care under DVA.

Key updates in the area of stroke include:

- Work is being undertaken to roll out the tele-stroke program nationally. This provides a network of neurologists and stroke specialists to provide assessment and intervention through telemedicine including educating staff and family using scans and images in a "flip around" screen.
- New stroke guidelines were launched during Stroke Week. The guidelines are online via InformMe and summary documents for health care professionals and consumers have been developed with more specific discipline (medical, nursing and allied health) guidelines to follow.

From DVA:

The review of allied health and dental service continues.

The DVA is focused on improving both provider and veteran engagement through DVA transformation projects and co-design of services.

Feedback was provided regarding the delay in approval of DVA services for speech pathologists. Members are encouraged to continue to alert SPA to these issues so as we can continue to give feedback to DVA.

Members are encouraged to sign up to the DVA Provider e-newsletter here: <http://dva.us10.list-manage.com/subscribe?u=3e65ae0f3ef290709f8e2617b&id=f18b81395b>

Aged Care Working Party

The SPA Aged Care Working Party held its last meeting in Melbourne in November. The working party had a day of collaborative brain storming and planning for future activities and advocacy relating to speech pathology in aged care.

Facebook Ageing and Aged Care Member Community

Be sure to join the SPA Ageing and Aged Care Facebook member community page. Latest aged care information, articles and resources are shared regularly and it's a great way to network and share with other speech pathologist's in the aged care sector.



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VALE – JOYCE ALLEY

JOYCE ALLEY WAS A SPEECH PATHOLOGIST WHO EXCELLED IN THE FIELD OF CHILDREN WITH CLEFT LIP AND PALATE, AND WHO GAVE HUGELY OF HERSELF PERSONALLY AS WELL AS PROFESSIONALLY IN THE CARE OF THOUSANDS OF CHILDREN WITH COMMUNICATION DIFFICULTIES.

Joyce was a founding member of Speech Pathology Australia and a member for over 60 years. Joyce passed away in early August, following a brief illness.

Joyce graduated as a speech therapist in Melbourne in 1952 when the earliest training took place in the Department of Psychiatry in the Royal Children's Hospital. Joyce commenced work at the hospital in 1953 when it was still situated in Carlton, and had only just received Royal Assent to change its name to the "Royal Children's Hospital". She continued to work at the hospital for 51 years and became its longest serving employee. This sustained service over almost half a century represents a huge contribution to the life of the hospital and the children and the families that it serves. Her services were recognised by the hospital with the Chairman's Award in 2001.

Joyce became head of Speech Pathology at RCH in 1957, and retained the role for fourteen years, until 1971. In this role, as well as leading the speech pathology team, she also trained successive years of speech pathology students, honing the ability of these future professionals to observe the "whole" child in the context of their family and environment, while conducting specialised assessments in communication.

The plastic surgeons in the hospital saw the importance of quality speech assessment and treatment in the management of cleft conditions, and Joyce became an integral part of a team that pioneered inter-disciplinary practice in this field. She remained a core member of the Plastic Surgery Outpatient Team until her retirement from the hospital in 2005.

In Victoria there are more than 100 children born each year with cleft lip and /or palate. The majority of these attend the Royal Children's Hospital, where, over the years, Joyce saw literally thousands of children with the cleft condition. Over time she began to see the grandchildren of some of her original clients. This extraordinary follow up of generations along with diligent record keeping and a sharp and enquiring mind, provided invaluable insights into the pattern of clefting and associated speech problems.

During her time at the hospital Joyce's expertise in this specialist field was unrivalled in the state of Victoria. Each week she received enquiries and referrals from speech pathologists from around Victoria and interstate, seeking her expert opinion. As well as sharing her knowledge and educating speech pathologists in the community in this way, Joyce also educated students and colleagues from a range of disciplines. Her willingness and ability to share her knowledge and to encourage critical thinking was invaluable in the education of plastic surgeons, otolaryngologists, dentists and other related professionals who work with children with clefts.



Joyce's knowledge, ideas and records inspired and assisted research in a range of areas and across professional boundaries, and she was instrumental in the introduction of many innovative approaches to the assessment and management of children with clefts.

In 1995 Joyce was pivotal in setting up the Melbourne Cleft Lip and Palate Clinic at the hospital. The clinic helped ensure a coordinated plan of management for children with cleft lip and palate, and provided children with coordinated access to all members of the cleft management team on the one day. For the first five years of its operation Joyce coordinated the clinic in her own time, a mammoth task, undertaken willingly because of her commitment to her patients receiving the best possible care. Joyce was also instrumental in beginning the nasendoscopic examination of children with clefts at The Royal Children's Hospital, again a great initiative that has now become standard practice.

Joyce constantly acknowledged the importance of family in the care of the child with cleft lip and palate, and the need for excellent communication between the parents and professionals. She had a close relationship with CleftPals, the organisation for parents of children with clefts and

regularly spoke at their meetings and was always available to provide information and personal support. The members of CleftPals greatly appreciated her ongoing involvement, and in 2000 they presented her with an award to recognise and acknowledge the integral role she played in the early years as a health professional who could communicate with parents and who was instrumental in gaining the support of medical professionals, which was initially not forthcoming.

In addition to her work at the hospital, Joyce began a private practice at a time when there were very few speech pathology private practitioners, and she demonstrated that this was viable, both professionally and financially. She continued to see patients privately until her recent illness.

In 2003 Joyce received The Order of Australia Medal for her services to children with cleft lip and palate. This was a well-deserved community recognition of her remarkable service and enduring legacy.

Joyce had a significant impact on the lives of children and families, her colleagues, the Royal Children's Hospital and the community. She was committed to fairness and equality and made sure that no one was left behind. In her private practice she turned no one away, often asking that families pay only what they could afford. Joyce treated her patients and her colleagues with nothing less than respect and dignity, and her rooms were full of photos, cards and notes from hundreds of grateful patients who appreciated that she listened, stayed with them for the long haul which in some cases was months, years and even generations and worked tirelessly to understand and improve their situation.

Joyce demonstrated courage time and time again and this set her apart. Joyce focussed on doing her best, trying new things and speaking up for what was right without fear or favour. At times this courage meant that Joyce rubbed the establishment up the wrong way. If Joyce considered something unfair or wrong, especially to do with the children in her care, she would do whatever it took to set it right.

Joyce valued inquiry and innovation. She was curious and inquisitive and thought outside the box. Evidence underpinned her work. She constantly questioned, looked for patterns, formed hypotheses and documented her work, particularly in the cleft lip and palate and autism fields. We believe that things we think are relatively recent, such as evidence-based practice, mentoring and client-directed care planning, Joyce had been doing for years and years. She was truly a pioneer.

In conclusion, the feelings that many of Joyce's patients have for her are expressed in the wording of the plaque that was presented to the hospital in 1999. The plaque was presented by Shane Patrick Hammond, whom Joyce treated as a child many years ago. It reads:

"For your lifelong tireless and loving service to speech impaired children. On behalf of us, those countless cleft lip and palate children, who regained much, because of your devotion to duty and to excellence. You have helped to unlock and set free the precious gift of speech and joyful song in many young voices, and your labour of love has changed the course of our lives. Now the words come forth freely, it is only right, just and honourable to say THANK-YOU"

by Sue Burman

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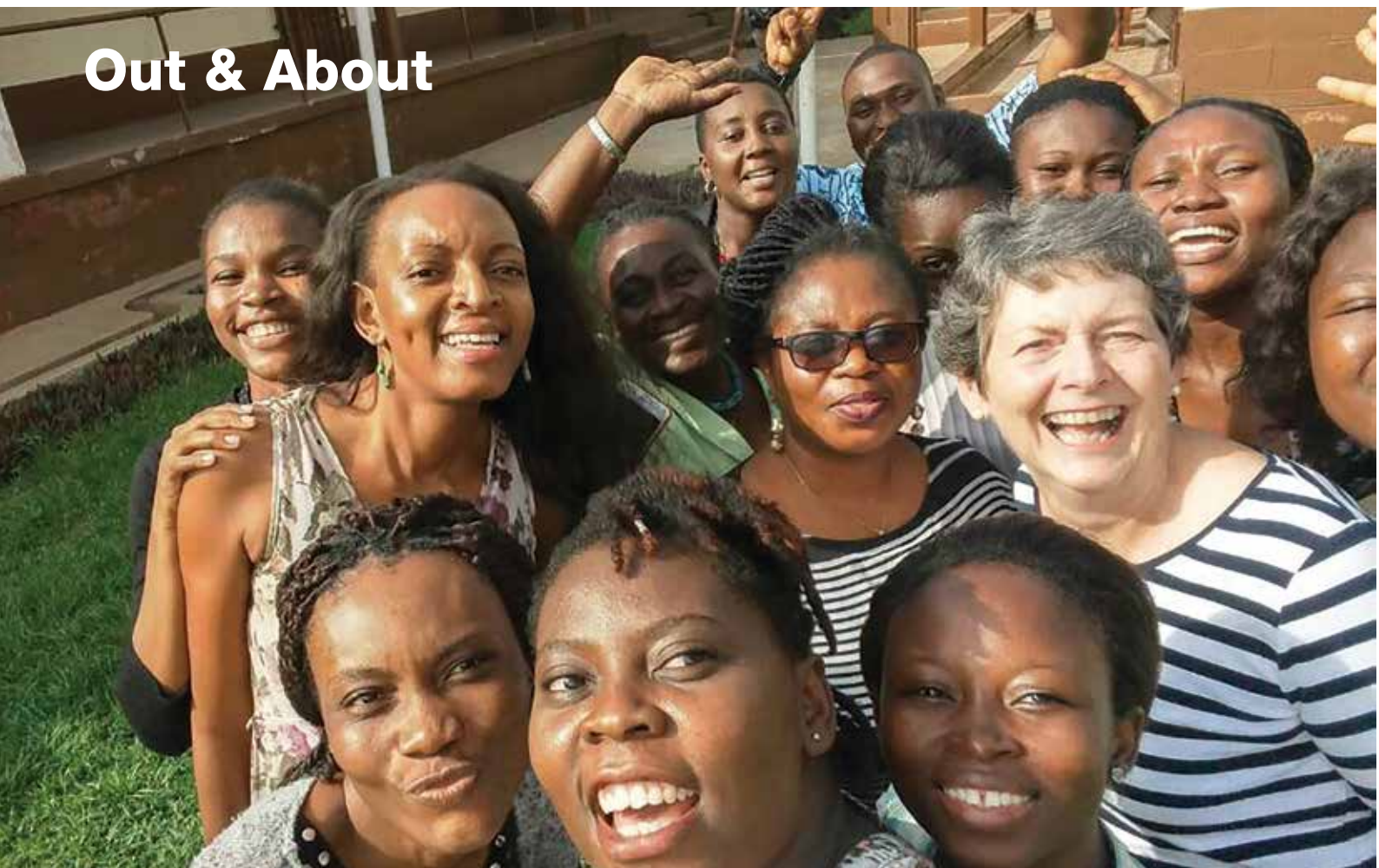
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Developing the speech pathology profession in Ghana

AUSTRALIAN SPEECH PATHOLOGISTS ARE ASSISTING THEIR GHANIAN COUNTER-PARTS TO SHIFT THE LANDSCAPE FOR PEOPLE WITH COMMUNICATION AND SWALLOWING DIFFICULTIES.

COMMUNICATION AND SWALLOWING difficulties present enormous challenges to individuals and their families. These challenges are magnified a thousand-fold in a country such as Ghana, where services for communication and swallowing difficulties are extremely rare. In Ghana, there is a team of speech pathologists working hard to make the needed changes and improve services. The Australian Government and Australian speech pathologists are providing small but meaningful contributions to this change, which will slowly help to shift the landscape for people with communication and swallowing difficulties in Ghana.

Can you imagine having only seven speech pathologists to provide services to the whole population of Australia? For families in Ghana, that is their reality. Finding a speech pathologist, or any type of service for communication difficulties is extremely difficult. Families travel enormous distances for services. At present there are seven speech pathologists in the country, providing services to a population of 25 million people. Only three of these speech pathologists are Ghanaian, trained in London. The remainder are foreigners, living and working in Ghana for various reasons, commonly on short placements of one-year or less.

In response to the need for improved services for communication disability, Ghana has slowly been investing in the development

of the SLT profession. How to best start local training for speech pathology has been the topic of discussion in Ghana for a number of years. The Ministry of Health seeded the profession by providing scholarships for Ghanaians to train as SLTs in London. The return of these graduates (Ms Josephine Bampoe and Mr Clement Amponsah), their employment at the University of Ghana, alongside Ghanaian speech pathologist (Ms Nana Akua Owusu) and the addition of an Australian speech pathologist on the team (Ms Karen Wylie, resident in Ghana) meant that Ghana finally had the potential to consider training speech pathologists. In 2016, after three years in planning, the University of Ghana accepted its first group of Masters of Speech and Language Therapy students. Twelve students are now more than halfway through their degree. The programme at the University of Ghana is locally developed and delivered, and unique to the culture and context in Ghana. It focuses on both meeting the needs of individuals with communication disability, as well as prevention, early intervention, community awareness of communication disability and working with self-help groups.

During the planning phases, the team identified the need for support from outside Ghana for teaching specialised subject matter, and supporting clinical block placements. The team recognised that costs associated with volunteering was a barrier to securing the volunteers they required.



OPPOSITE PAGE: Bron Davidson (right) with Masters of Speech and Language Therapy Students and faculty at the University of Ghana.

ABOVE: Australia's High Commissioner to Ghana Andrew Barnes met with Karen Wylie, Bronwyn Davidson and Vicentia Kotia, DAP Program Manager.

The team at the University of Ghana successfully applied for Direct Aid Program (DAP) funding through the Australian High Commission in Accra. The DAP is a development assistance programme funded from Australia's aid budget and administered by Australian diplomatic missions around the world. Funding was granted to subsidise living expenses of volunteers while in-country.

Associate Professor Bronwyn Davidson, of the University of Melbourne, was the first of a series of DAP funded volunteers to support the programme in Ghana. Professor Davidson came to Ghana for three weeks to work in partnership with faculty, to design curriculum and teach in acquired communication disorders. Professor Davidson left a legacy of teaching and clinical resources that will extend far beyond the first group of speech pathologists. Future DAP funded volunteers include volunteers from the UK, South Africa and the USA. Attracting high quality volunteers has been made substantially easier through the provision of the DAP funding from the Australian Government.

There is no doubt that the Masters in Speech and Language Therapy programme at the University of Ghana is truly Ghanaian – designed for, operated by and relevant to practice in Ghana. Yet the small contributions from Australia and Australians are supporting the team in Ghana to gradually shift the landscape for people with communication and swallowing difficulties. Australia, ye da mo ase paa! (Australia, we thank you)

Karen Wylie, Nana Akua Owusu, Josephine Ohenewa Bampoe and Clement Amponsah
 Department of Audiology, Speech and Language Therapy, University of Ghana



Bronwyn Davidson
 University of Melbourne

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www.fullartonhouse.com.au/join-us



Draft definitions for advanced and extended practice have been developed following a review of national and international sources...

Advanced and extended practice project

The journey so far

In 2016 Speech Pathology Australia initiated a project in response to member and consumer feedback around a Credentialing Framework for speech pathologists (refer to October 2016 edition of *Speak Out*). In the February 2017 edition of *Speak Out*, an update outlined the complexity of this journey and outcomes to date. One of the recommendations was to review the definitions of “advanced” and “extended” practice and to develop a framework to aid identification/classification of advanced and extended skills, roles and practice contexts.

What now

Dr Robyn Saxon has been appointed to lead the project in the review of the definitions and develop the framework. Dr Saxon has experience and interest in allied health models of care,

advanced and extended scope role implementations, workforce redesign and data analysis. She has recently completed her PhD titled *Aged care services: Model of care redesign*. A steering committee has been formed to provide expertise and oversight of the project with representatives from private practice, health organisations, university academics, disability and educational services.

Draft working definitions

Draft definitions for advanced and extended practice have been developed following a review of national and international sources across a number of health professions and consultation with the project steering committee (refer Table 1 and Table 2 for commonalities identified).

Table 1. Advanced Practice Elements – Definition statement commonalities from key source documents (n=16)

Considered to be within scope of practice	15
Depth of knowledge/skills/attitudes	11
Breadth of knowledge/skills/attitudes	6
Significant experience required post-graduation	16
Training required post-graduation (clinical, technical)	14
Includes synthesis of complexity, critical thinking, autonomy	13
Evidence required to be provided	11
Includes elements of research, education, training, leadership, influence	12

Table 2. Extended Scope Practice Elements – Commonalities in definitions from key source documents (n=19)

Considered to be beyond recognised scope of practice	17
Innovative, non-traditional context and or task	10
Experience post-graduation required	10
Training in specific task and or context required	11
Enhancement by breadth or depth	9
Evidence required to be provided	11

Advanced scope of practice

Advanced scope of practice for speech pathologists represents the full breadth, or depth of practice within a clinical practice area or context. Advanced scope of practice requires a significant level of experience, knowledge and technical skill within the defined clinical area(s) and/or context(s). This may be demonstrated by advanced depth or breadth of a clinical area and/or context. Inherent, but maybe not explicit in this definition is a level of clinical practice, experience and time associated between entry level clinicians and those clinicians demonstrating advanced scope of practice.

Extended scope of practice

Extended scope of practice describes undertaking clinical activities not currently recognised as being performed by their own discipline. This requires a clinician to undertake specific additional training and be assessed as competent against a recognised tool by an appropriately qualified health practitioner. Extended scope of practice will additionally require formal workplace credentialing for the clinician to perform the specified extended task/s to ensure adequate legal requirements and professional indemnity requirements are maintained.

Membership feedback on draft definitions

The next phase is to seek and collate feedback from the membership regarding the draft working definitions and what areas of clinical practice may be considered as “advanced” and/ or “extended” based on the draft definitions. Detailed background information on these draft definitions can be found via the survey link.

The draft definitions have been developed with acknowledgement that areas defined as advanced and extended scope of practice now may evolve to become part of entry-level competencies and/or within the scope of practice for speech pathologists in Australia.

Your feedback is vital to ensure the developed definitions will be applicable to your workplace.

Please think broadly across all areas of the speech pathology profession and click on the survey link to participate – your contribution is invaluable.

<https://www.surveymonkey.com/r/AEPP>

Next steps:

Feedback will be collated and synthesised from:

- the member survey;
- State Branch meetings representatives;
- identified content expert advisors; or,
- any additional feedback received from members via direct email.

The next project update is expected early in the new year, with a final report provided to the Board in February 2018.

For further information about the project, or if you wish to provide additional feedback please contact, Dr Robyn Saxon, Project Officer RSaxon@speechpathologyaustralia.org.au

Stacey Baldac
Senior Advisor Professional Standards
sasps@speechpathologyaustralia.org.au

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Advocacy at community affairs inquiry



Senator Carol Brown, Senator Rachel Siewert (Chair), SPA National President Gaenor Dixon and SPA Senior Advisor Ethics and Professional Issues Trish Johnson.

ON 30 OCTOBER 2017, SPEECH PATHOLOGY AUSTRALIA'S NATIONAL PRESIDENT GAENOR DIXON AND SENIOR ADVISOR ETHICS AND PROFESSIONAL ISSUES, TRISH JOHNSON, APPEARED BEFORE THE SENATE STANDING COMMITTEE ON COMMUNITY AFFAIRS INQUIRY INTO THE DELIVERY OF OUTCOMES UNDER THE NATIONAL DISABILITY STRATEGY 2010-2020 TO BUILD INCLUSIVE AND ACCESSIBLE COMMUNITIES.

Their opening statement to the committee representatives is reprinted below:

"Thank you for the invitation to appear before you today. Speech Pathology Australia is the peak body representing over eight thousand speech pathologists. I am the National President of the Association and I am joined today by one of our National Advisors Trish Johnson. We would like to speak with you about the inadequacies of the current National Disability Strategy to develop inclusive and accessible communities for all people with disability – not just those with physical or mobility limitations.

"The National Disability Strategy does refer to communication access as an important component of accessible communities where it talks about inaccessible services and programs—unfortunately any progress made against the Strategy appears to have been confined to improvements in physical access. We have seen almost no attention by governments to improving how accessible our communities are for people with communication problems. There are approximately a million Australians who have speech, language or communication problems and we know from recent ABS data that about a quarter of a million people with disability report to need assistance with communication.

"Communication access is a similar idea to providing 'kerb cuts' for people with physical disability. It is about changing the environment, including people in the environment to enable people with communication disability to access that environment. Communication barriers exist for people to use a range of government and community services that the rest of us take for granted – health services, Centrelink and Medicare, the electoral system, the justice systems, aged care services, the local post office, local council services, and transport systems. Even the best designed physically accessible built environments do not enable inclusive and accessible access for people with communication disability unless a focus is made on what needs to be done in that environment to enable effective two-way communication.

"I'm aware that many of the Senators have excellent understanding of speech, language and communication disorders from the conduct of your 2014 inquiry into communication disorders and speech pathology services. Our profession is profoundly disappointed that the Australian Government has not responded to the Committee's recommendations from

that inquiry. I think that because the issues for people with communication disorders cross sectors and government responsibilities, that it has ended up in no-mans-land of government process, the too-hard basket for any one government or portfolio to take carriage of. I fear that this may also be the way of any achievements for the National Disability Strategy in terms of developing accessible communities for people with communication disability. It doesn't have to be.

"There are some exciting developments in the field of communication access that could be harnessed and world leading. I'd like to mention just a few important developments.

"The Australian Bureau of Statistics is currently preparing a thematic publication about Australians with communication limitation from the data collected through the Survey of Disability and Carers in 2015. This will provide a wealth of desperately needed information about the lives and challenges of these people which can then be used for policy and program development.

"Our Association has convened a forum of peak organisations, professionals and consumers, with an interest in communication access. Our second meeting of these groups was last Thursday. We are working towards a goal of improving community awareness and developing nationally consistent Communication Access Standards- similar to Physical Access Standards which we hope will provide clear guidance and increase understanding of what can be done to improve access and inclusion for people with communication disability in our communities.

"We also refer to the fine work of SCOPE whom I am sure will discuss some of their specific programs aimed to improve communication access of mainstream services.

"Finally, a strong message from governments on the importance of both physical and communication access in public policy, including in the next National Disability Strategy or through an emphasis on this component of the current Strategy would be an important step in having Australia meet its commitments under the UN Convention on the Rights of People with Disability."

"The full transcript of the session is available at: www.aph.gov.au/Parliamentary_Business/Committees/Senate/Community_Affairs/AccessibleCommunities/Public_Hearings



Ms Emma Husar MP, SPA Director Tim Kittel, National Advisor Disability Cathy Olsson, Hon. Jenney Macklin MP, and Senator Rachel Siewert.

Inquiry into transitional arrangements of the NDIS

ON 8 NOVEMBER 2017, SPEECH PATHOLOGY AUSTRALIA'S VICE PRESIDENT TIM KITTEL AND NATIONAL ADVISOR DISABILITY CATHY OLSSON APPEARED BEFORE THE JOINT STANDING COMMITTEE ON THE NDIS'S INQUIRY INTO TRANSITIONAL ARRANGEMENTS OF THE NDIS.

Their opening statement to the Committee representatives is reprinted below:

"Thank you for the invitation to appear before you today. Speech Pathology Australia is the peak body representing over eight thousand speech pathologists. I am Vice President of the Association and I am joined today by our National Disability Advisor Cathy Olsson.

"Speech pathologists are university educated allied health practitioners, specialising in the diagnosis, assessment, treatment and therapy for communication and swallowing disorders.

The most recent NDIS evaluation report and the recent Productivity Commission report acknowledge speech pathology services constitute a significant, unmet demand. Our members, whilst supportive of the aims of the NDIS, are at present, faced by challenges and impediments in registering as NDIS providers, and in being able to provide services through the scheme.

"Like many allied health practitioners, our profession finds itself wedged firmly in a no-mans-land between health and disability in relation to providing services for people with disability and their families. Indeed the introduction of the NDIS has led to a breakdown of many established systems and protocols which provided for coordination and continuity of care and provision of high quality supports across all environments, as well as managed the issues that can arise when the mainstream services intersect and overlap.

"We would like to share with you two exemplars of where we feel the transition to the NDIS has impacted negatively on people with disability, primarily due to underlying problems with the NDIA's decision making process and lack of engagement with participants and expert providers in the sector.

"Firstly, a recent decision by the NDIA to cease funding mealtime supports for people with disability has led to NDIS Participants unable to access any speech pathology supports to help them eat and drink safely. We have consulted extensively with federal,

state and territory Ministers as well as the NDIA for more clarity regarding this issue. We would like to seek clarification that the NDIA will support funding for mealtime modifications for people with disability, and that these modifications will be implemented across home, work and education settings in order to ensure that people with disability can eat safely regardless of location.

"The second transition breakdown relates to the current system for the provision of assistive technology, in particular the provision of communication aids for NDIS Participants with complex communication needs. The provision of communication aids is a complex and specialised area of practice for speech pathologists within the disability sector. The introduction of the NDIS has disrupted previous schemes in place in the jurisdictions, causing a multitude of problems relating to access. We have recently written to the NDIA with the support of the peak body AGOSCI (for people with complex communication needs) to ask for an urgent review and co-design process for fixing the system for AT provision. The current situation is quite literally leaving NDIS Participants without a voice and speech pathologists constrained in terms of how they can best assist them. We would like to discuss with you our thoughts around what we see as a more successful mode of ensuring appropriate AT devices are prescribed.

"We feel that both these issues highlight the need for greater and more formal engagement between the NDIA, providers, professional and peak bodies, participants, and planners.

"These issues are very specific to our profession, and we have therefore prepared written information on these two issues to table today. Our members have also experienced a range of issues which are shared with other providers, and which my colleagues around the table may also be raising to discuss with you today."

The full transcript of the session will be available at: www.aph.gov.au/Parliamentary_Business/Committees/Joint/National_Disability_Insurance_Scheme/Transition/Public_Hearings

“You must read and understand the terms and conditions and understand what you are consenting to...”

Contracts: Do you know what's in yours?

SPEECH PATHOLOGY AUSTRALIA STAFF RECEIVE MANY QUESTIONS ABOUT EMPLOYMENT CONTRACTS FROM POTENTIAL EMPLOYEES AND BUSINESS OWNERS.

A contract is an agreement between two or more parties to perform a service, provide a product or commit to an act and is enforceable by law. There are several types of contracts, and each have specific terms and conditions.

For a contract to be legally binding it must include an offer and acceptance, an intention to create a legally binding relationship and consideration – usually a form of payment. If you are signing a contract you must have legal capacity to enter a contract of your own free will, as well as a proper understanding and consent of what is involved.

There is no specific format that a contract must follow. For speech pathologists a contract usually takes the form of an Employment Agreement or an Independent Contractors Agreement.

If you are producing a contract it is important that these documents are properly developed. Do not be tempted to use a proforma contract that will not protect the needs or interests of either yourself or your staff.

If you are signing any contract you must have read and understand the terms and conditions and understand what you are consenting to. Too often individuals sign contractual agreements only to realise what they have actually agreed to when something changes in their workplace.

If you don't understand any part of the contract it is important you ask questions and/or seek advice before you sign it.

For more information contact Speech Pathology Australia and/or read [SPA's FAQ Employment/contractor Contracts for Private Practice](#)

SPA members can also obtain free initial advice about contracts and other employment issues for both private and public sectors from WorkPlacePLUS. For a fee, WorkPlace PLUS can also develop contracts for your business. Please call Anna Pannuzzo on 0419 533434.

Nichola Harris
Acting Senior Advisor, Professional Practice

The contract should include:

- commencement date of employment;
- the employee's duties;
- how many hours they will work;
- the days they will work;
- where they will work;
- how much they will be paid;
- their employment status;
- their employment conditions, including leave and other entitlements; and,
- whether an industrial award or collective agreement covers the employment. The modern award that covers ALL speech pathologists and outlines the minimum conditions of employment in Australia is the Health Professionals and Support Services Award.

You should also consider:

- the position and duties of the employee;
- the remuneration package, (e.g. use of a vehicle);
- if a trial period or probationary period applies;
- measures to protect the employer's business e.g. confidentiality, intellectual property;
- provision of supervision and performance appraisal (and the frequency of this) – For more details see [SPA's Position Statement on Professional Support and the Supervision Standards](#);
- termination of employment (notice, summary dismissal and redundancy);
- the application of policies and procedures;
- requirement to complete pre-existing injury declaration;
- process for review of contracts and amendments to contracts;
- use of and return of property to the practice post-employment;
- exclusive service clause; and,
- restraint of trade clause post-employment.

NDIS: GST requirements

Did you know that there are specific GST requirements when working under the NDIS?

There has been an amendment to the GST Act specifically concerning the NDIS. Supports provided by speech pathologists under the NDIS are usually stated as GST free as speech pathologists are considered to be an “other health service”. The ATO has also determined that even when speech pathologists are seeing NDIA managed clients, this is still not considered to be government funding.

Nevertheless, if you are seeing any participants under the NDIS (including self-managed, agency managed, or third-party plan managed) there are certain requirements that must be fulfilled.

- The participant must have an approved plan that is current and in effect;
- The supports must be seen as being reasonable and necessary; and,
- There must be a written agreement between the participant/participant’s representative and the provider, or the provider and the managing agency for non NDIA managed clients. This agreement must reference the participant’s plan and that the supplies provided are “reasonable and necessary”.

Specifically the following sentence must be included in this agreement, (please note this sentence must be worded exactly as it is written): “A supply of supports under this Service Agreement is a supply of one or more reasonable and necessary supports specified in the statement of supports included, under subsection 33(2) of the National Disability Insurance Scheme Act 2013 (NDIS Act), in the participant’s NDIS Plan currently in effect under section 37 of the NDIS Act.”

More information is available on the following websites:

- ATO website NDIS: types of accepted written agreement www.ato.gov.au/business/gst/in-detail/your-industry/gst-and-health/?page=8#madeunderawrittenagreement
- From the Example Documents section of the new Provider Toolkit www.providertoolkit.ndis.gov.au/sites/g/files/net3066/f/samplemodelserviceagreementv2.0.pdf
- in SPA’s document “GST and Speech Pathology Services” under Professional Resources, www.speechpathologyaustralia.org.au/SPAweb/Resources_For_Speech_Pathologists/Professional_Resources/SPAweb/Resources_for_Speech_Pathologists/Professional_Resources/Professional_Resources.aspx?hkey=9fb324b7-e92c-43b7-a203-



• in practice

Mobile Services...

Do you and/or your staff conduct therapy off site in people’s homes?

If you do, make sure you have identified potential risks and procedures for managing any safety concerns. A policy and procedure about safety for mobile therapists has been added to SPA’s Policy and Procedure Manual to help private practitioners identify and handle any potential risk. See [SPA’s Private Practice Essential page](#) for the manual and associated templates.

free resources

Free interpreting and translation service

Support for families under Better Start, HCWA, or the NDIS

There is a free nationwide interpreting and translating service available that can be accessed when providing therapy supports under these funding sources. All you need to do is register an account attached to your relevant registration number, and you will be able to book onsite or phone interpreters. This is a free service for DSS and NDIS clients separate to their funding package, but please note that you will need to register an account for each funding stream.

Visit the TIS National website www.tisnational.gov.au or call the client liaison team on 1300 655 820 to find out more and register an account.

Free practice management software resources

Allied Health Professions Australia (AHPA) has developed the following resources.

- A contact list of potential software providers for allied health practitioners.
- A spreadsheet that outlines the range of practice management software packages that are available to provider and the functions they each offer.

See: www.ahpa.com.au/resources

Nichola Harris
Acting Senior Advisor Professional Practice
Erin West
NDIS / Practice and Clinical Support Advisor

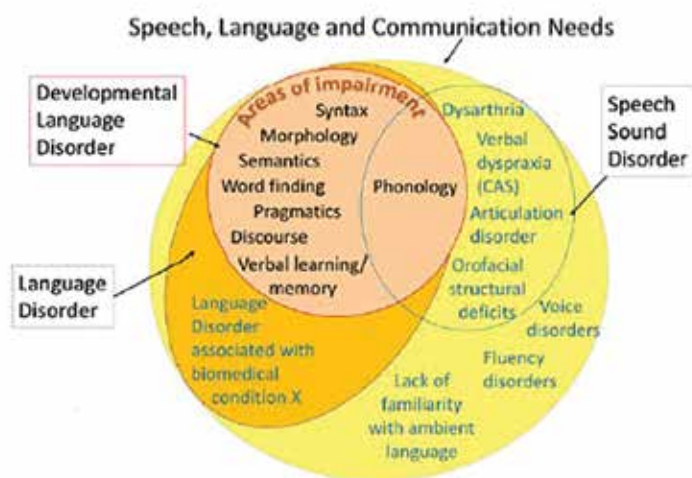
Developmental Language Disorder (DLD)

An update on (inter)national development

DEVELOPMENTAL LANGUAGE DISORDERS AWARENESS DAY was held in September and Speech Pathology Australia joined forces with RADLD (Raising Awareness of Developmental Language Disorders; @RADLDCampaign) to drive a campaign in Australia and raise awareness of this condition that affects approximately two children in every classroom.

The campaign, referred to as DLD123, centred around three key messages, 1) What is DLD? A diagnosis given when a child or adult has difficulties talking and/or understanding language in the absence of an obvious cause such as hearing loss, or brain damage; 2) DLD is hidden but common; and 3) support can make a real difference.

As reported in the February Edition in *Speak Out*, agreeing on a common terminology is important. Referring to DLD with a variety of terms, such as SLI, language difficulties, or speech, language and communication needs (SCLN) is confusing to the public and other stakeholders and may hamper accurate identification of this disorder that significantly impacts literacy, learning, friendships and emotional wellbeing. Furthermore, a lack of consistent terminology might explain why this condition has received far less research funding than other, less common conditions, such as ASD or ADHD (Bishop, 2010). Of course each “label” or diagnostic category will have advantages and disadvantages. It is thus important that we understand that DLD is an umbrella term that includes a wide range of problems often affecting understanding of language as well as production of complex language, across the domains of syntax, morphology, phonology, semantics, and pragmatics. Moreover, the boundaries between DLD and typical language may be blurry. See Figure 1 for an overview of the relationship between different terms (Bishop, Snowling, Thompson, Greenhalgh, & Catalise consortium, 2017).



Source: Bishop et al., 2017. Reprinted with permission.

So why has it been so hard to get consensus? Dorothy Bishop, in one of her latest publications (Bishop, 2017) summarised the responses of the 57 CATALISE members who participated in the online Delphi exercises (Bishop et al. 2017; Bishop, Snowling, Thompson, Greenhalgh, & Catalise consortium, 2016). One issue

related to the use of the term “disorder”, rather than difficulties, needs, impairment or disability. The main reason for deciding on the term disorder is that it aligns with terminology used in the DSM-5 and ICD-11. The term disorder also underlines the seriousness of this condition (DLD) and hopefully ensures it receives the attention (funding, educational support, etc.) it deserves.

Another topic of debate was making the distinction between disorder and delay. In the past, therapists have often diagnosed a child as having a language delay or a language disorder. Typically, children who have shown an even profile of “delayed” development across verbal and non-verbal skills have been described as having a language delay, and children who have an uneven profile of skills with a discrepancy between verbal and non-verbal skills have been diagnosed with a language disorder. Although this distinction may make sense intuitively, there is no evidence that children who show more advanced nonverbal skills, (i.e. there is a gap between verbal and nonverbal skills, previously referred to as Specific Language Impairment or SLI) will respond better to speech pathology intervention than those who demonstrate lower nonverbal skills (see also Reilly et al., 2014). Therefore, it was decided that the term DLD does not exclude those children who show reduced nonverbal skills. However, as Bishop (2017) points out, this does not mean we completely ignore a child’s level of intellectual functioning. If children obtain very low scores on tests of intellectual functioning as well as adaptive deficits (see DSM-5), then the intellectual disability would be the primary diagnosis.

For children whose language problems occur in the context of a biomedical condition, it was decided that the term DLD is not appropriate. For those children we would use the term Language Disorder associated with X. These biomedical causes may include brain damage, Down syndrome, or ASD. We need to be careful however, that this does not result in denying services to those children. Once again, there is lack of evidence to suggest what works best for whom. Until such time we need to focus on each child’s unique language needs and take the aetiology into account when providing services.

A final issue worth mentioning is what criteria for language disorder should be used. The consensus was that obtaining objective test scores is important, but not enough, and that identification of language disorder should include appraisal of the child’s ability to function in daily life activities. However, it was acknowledged that we do not always have suitable assessment protocols for measuring language functioning beyond the impairment level, so may at times need to rely on more subjective judgements. For example, a child may score within the low average range on the CELF-4 (standard score 80), but their teacher report may indicate significant difficulties participating in class activities such as sharing past personal event narratives with peers.

Since the previous article in *Speak Out* there has been an influx of questions from the membership. Find out about some of the most common questions and answers on the next page.

DLD – Q&A

When should members start using the new terminology?

SPA members are encouraged to start using the new terminology straightaway.

What can SPA members do to support the new terminology and what can they do to educate colleagues, other professionals and clients/families about DLD?

By consistently using the new terminology (for example in written reports, when discussing assessment results with families and other professionals), members will not only help raise awareness of DLD but ultimately help avoid some of the confusion that exists among the public and other stakeholders. Members may also want to refer their colleagues to some online materials including the Wikipedia page or the RALLI campaign materials (see full links to follow).

What is the difference between language disorder and developmental language disorder?

The term Developmental Language Disorder refers to cases of language disorder with no known differentiating condition.

How firm is the recommendation for the use of the term language disorder associated with Autism Spectrum Disorder (ASD)?

For consistency, we encourage members to use this term to clearly differentiate it from a Developmental Language Disorder. This term is consistent with DSM-5 and is the term that is referred to as a co-occurring condition in the soon to be released National Guideline: *The diagnostic process for children, adolescents and adults referred for ASD in Australia*.

Is the term DLD to be used with children of all ages?

Yes, the term can be used with children of all ages. The term “Developmental” indicates the language disorder is not “acquired”. Regarding diagnosis, useful flowcharts illustrating pathways to diagnosis are provided in the two Catalise papers (Bishop et al. 2016; 2017).

Can you describe typical features of a child with DLD?

The first Catalise paper (Bishop et al., 2016) provides consensus statements regarding “red flags” for children at different stages of development. For example, for children between 1 and 2 years of age, features of atypical development include no babbling, not responding to speech, language, or communication, or minimal or no attempts to communicate (p.9).

Where can speech pathologists go to find out more information about DLD and who can they contact if they have any further questions?

The resources to follow may provide members with enough information to understand how DLD compares to previously used terms such as SLI. For additional information, feel free to call National Office.

Dr. Marleen Westerveld
Senior Lecturer in Speech Pathology, Griffith University
m.westerveld@griffith.edu.au

Nichola Harris
Acting Senior Advisor, Professional Practice
nharris@speechpathologyaustralia.org.au

For more information, access the following resources for free:

Bishop, D. V. M., Snowling, M. J., Thompson, P. A., Greenhalgh, T., & the Catalise consortium. (2016). CATALISE: A Multinational and Multidisciplinary Delphi Consensus Study. Identifying Language Impairments in Children. *PLoS ONE*, 11(7), e0158753. doi: 10.1371/journal.pone.0158753
Access: <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0158753>

Bishop, D. V. M., Snowling, M. J., Thompson, P. A., Greenhalgh, T., & and the Catalise consortium. (2017). Phase 2 of CATALISE: a multinational and multidisciplinary Delphi consensus study of problems with language development: Terminology. *Journal of Child Psychology and Psychiatry* (Early online). doi: 10.1111/jcpp.12721
Access: <http://onlinelibrary.wiley.com/doi/10.1111/jcpp.12721/abstract>

Bishop, D. V. M. (2017). Why is it so hard to reach agreement on terminology? The case of developmental language disorder (DLD). *International Journal of Language & Communication Disorders* (Early online), 0-11. doi: 10.1111/1460-6984.12335
Access: <http://onlinelibrary.wiley.com/doi/10.1111/1460-6984.12335/epdf>

Bishop, D. V. M. (2010). Which neurodevelopmental disorders get researched and why? *PLOS ONE*, 5 (11), e15112. doi: 10.1371/journal.pone.0015112
Access: <http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0015112>

Wikipedia page – initially created by Dorothy Bishop.
https://en.wikipedia.org/wiki/Developmental_language_disorder

Online resources – Raising Awareness of Developmental Language Disorder - campaign
<https://www.youtube.com/user/RALLIcampaign>

Reilly, S., Tomblin, B., Law, J., McKean, C., Mensah, F. K., Morgan, A., ...Wake, M. (2014). Specific language impairment: a convenient label for whom? *International Journal of Language & Communication Disorders*, 49(4), 416-451. doi: 10.1111/1460-6984.12102
Access: http://eprint.ncl.ac.uk/file_store/production/205977/E76F6D09-5541-4EB2-B922-7C53903BE958.pdf



The 2018 CPC warmly invites practitioners, students, researchers and academics to Adelaide for a conference that will INSpireyou!

The conference will be held at the Adelaide Convention Centre (ACC) which has been completely transformed since our last conference there in 2009. In the heart of the city with an outlook across the River Torrens, the Adelaide Oval is a short walk away across the footbridge where you can check out the Bradman exhibition. The cultural precinct along North Terrace and shopping in Rundle Mall are all within easy walking distance and also readily accessible by public transport that stops right outside the ACC. There are plenty of fabulous and diverse places to eat and relax with your friends and colleagues. You will be spoilt for choice! South Australia's wonderful wine regions such as the Barossa, Adelaide Hills and McLaren Vale are waiting to be explored. Adelaide also celebrates its Aboriginal heritage. You can enjoy several Indigenous experiences, including the Warriparinga Wetlands, Tjilbruke Dreaming Track and Living Kaurna Cultural Centre. If you haven't already, save the dates, **27-30 May**, in your diary now!

Abstract reviews

The CPC together with the Scientific Program Chair would like to thank the reviewers for their thorough process. Each submission was independently rated by two reviewers against a strict set of criteria. With 267 submissions, we are confident this will ensure a program of the highest quality, variety and interest for our profession.

Program development

The CPC spent the first weekend in November considering the reviewer feedback and formulating the program. They are currently putting the finishing touches to the structure of the 2018 conference program and are confident that it offers something for everyone and aligns with the conference theme. When developing the program the CPC has carefully considered and taken on board feedback regarding the density of content in oral presentation sessions and a positive response to the inclusion of some Presented e-Posters (PePs) that will be increased to five minutes and "peppered" (excuse the pun!) through the oral sessions. Also, the 2018 conference will see the return of paper posters. Plenary sessions are scheduled for each day.



The pre-registration and welcome reception will be on the Sunday evening and the conference dinner will be on the Wednesday evening. The Speech Pathology Australia AGM and Presentation of Awards will be held on the Monday. Information will be available to delegates as to options nearby for dining. Stay tuned for more details closer to the opening of registrations in February!

Be inspired in Adelaide in 2018!

27-30 May

Adelaide Convention Centre, South Australia

Keynote and invited speakers update

Presentations by the keynote and invited speakers connect with the 2030 vision for speech pathology in Australia and reflect the **INSPIRE** theme of **INS**piring **P**ractice **I**nnovation, **R**esearch and **E**ngagement.

Professor Marion Kickett (pictured right) will highlight the focus on the area of engagement embedded within the INSPIRE theme. Marion's keynote address will discuss how we engage with Aboriginal people, families and communities and the complex considerations needed when working with them. Her workshop will explore what resilience and success mean for Aboriginal people and challenge our notions of success. Participants will have the opportunity to reflect on the ways their practice may impact on the resilience and success of Aboriginal clients. The workshop, informed by lived experience, will be presented in two parts over consecutive days to facilitate reflection. We know there is more to be done to advance the health and education outcomes of Aboriginal people and that as speech pathologists we have a significant role to play. Marion will engage and inspire us in this important endeavour.



Dr Ron Gillam inspires with his impressive body of research that continues to grow and impact practice in meaningful and beneficial ways. Ron's presentations will link research and practice and offer something practical to take away. In his keynote address Ron will summarise a large scale study and discuss the implications of a new understanding of the factors that moderate and mediate language comprehension for conducting informative language assessments and for selecting interventions that are likely to yield the most functional outcomes for school-aged children and young people. Ron's influential work in the area of narrative will be the focus of his other presentations. His masterclass will focus on narrative assessment and delve into norm referenced and progress monitoring measures and how they can be used to inform an understanding of children's narratives and inform intervention decisions and practices.



The CPC is delighted to announce that Ron will co-present his seminar with **Dr Sandra (Sandi) Gillam**. This seminar will describe a narrative program called Supporting Knowledge in Language and Literacy (SKILL) of which Sandi and Ron are co-authors. The instructional strategies in the program have been



demonstrated, in a series of single-subject, multiple-baseline studies and a small scale RCT, to be beneficial to children with developmental language disorders, children learning English as a second language, and children with Autism Spectrum Disorders. Ron and Sandi are co-primary investigators of a current three-year, multi-site RCT to test the outcomes of the intervention and potential generalisation to reading comprehension and writing. Ron, together with Sandi, will inspire us to connect research and practice and embed research outcomes in practice.

Professor Elizabeth (Liz) Ward invited presenter of the 2018 Elizabeth Usher Memorial Lecture, will inspire us to embrace new practice and service delivery models to ensure a continued strong professional identity and capacity to meaningfully contribute in the modern education and healthcare landscape. In particular, she will discuss the benefits, issues and impacts of extended scope of practice initiatives and new models of care.



Please visit our 2018 National Conference website for more detailed profiles of our keynote and invited speakers and their abstracts, together with all other areas relevant to the conference.

Sponsorship and exhibition

The Sponsorship and Exhibition Invitation is now available from our web site. Please visit [www.speechpathologyaustralia.org.au/Professional Education/ National Conference 2018](http://www.speechpathologyaustralia.org.au/Professional%20Education/National%20Conference%202018) for full details.

The CPC would like to welcome SPC who will sponsor the Conference lanyards.



The following companies/organisations are exhibiting at the 2018 National Conference: Guild Insurance, HICAPS Pty Ltd, IJSLP, IOPI Medical LLC, JCPSLP, Lateral Medical Liberator Pty Ltd, Precise – Entrocal, Pro-Ed Australia, Reading Doctor, Sounds-Write Linguistic Phonics, SPC, speechBITE®, Speech Pathology Australia, SP in Cambodia & Vietnam, The Hanen Centre and Wise Words Australia.

Accommodation

Discounted rooms have been blocked booked for delegates at various hotels within close walking distance to the Adelaide Convention Centre. Please visit the conference web site and the accommodation link to make your booking.

From the airport terminal there is a variety of transport options to the city centre:

- Taxi - There is a designated taxi rank located at the left of the pedestrian plaza as you walk out of the terminal. Concierges provide a safe environment and allocate taxis to passengers. They can also organise taxis with wheelchair access, five-seaters and maxi taxis for larger groups or station wagons for large amounts of baggage. There is a \$3 levy added to fares for taxis leaving the airport.
- Public transport - If you wish to use public transport to/from Adelaide Airport, Adelaide Metro offers an express double decker bus service called JetExpress between the airport and the city. Adelaide Metro also offers a convenient JetBus service to Glenelg, West Beach and the City, servicing all stops en route.
- Both JetExpress and JetBus are Metroticket services. Single trip and daytrip tickets can be purchased from bus drivers.
- Shuttle bus - Booking are not needed, but please follow the instructions. On arrival please make your way to the

Information and Tourism Bookings Booth located on the ground floor of the terminal in a central location. The friendly staff will help you with your booking and inform you of the next shuttle time (approximately every half hour).

City Shuttle Bus operating hours are as follows:
Monday – Friday from 8am – 9pm
Saturday from 8am – 6pm
Sunday from 8am – 5pm
The cost is \$10 per person each way.

Registration brochure and conference registration form

We are currently working through the information needed for inclusion in the online registration brochure and conference registration form. The conference flyer will be included in the February 2018 *Speak Out*, which will have an overview of the program format. Early bird registration will commence on **Wednesday 7 February 2018**, so please ensure you have renewed your membership to avail the cheaper membership rate.

To view all the above information please visit www.speechpathologyaustralia.org.au and the link to the [National Conference 2018](#).

Welcome reception – National Wine Centre (NWC)

The CPC is pleased to announce that the National Wine Centre is the chosen venue for the 2018 Welcome Reception. It is situated alongside the stunning Adelaide Botanical Gardens, the NWC offers Australia's largest tasting room experience, dining, interactive wine education, group tours and wine courses.



The centre's cellar door Wined Bar gives visitors the option to sample up to 120 different wines through a state-of-art enomatic wine preservation and dispensing machines. The significant investment into the 14 machines now means the centre has the largest wine tasting experience in Australia and one of the largest in the world.

The centre's unique architecture, designed to represent a wine barrel, has seen it win numerous awards for its use of natural light, earthy metal and wood textures, including the Royal Australian Institute of Architects Award.

Win a \$100 gift voucher to RBar

Add this to your Christmas "wish list" and when you see Conference eNews in your email inbox, answer the question and go into the draw to win the gift voucher which will be drawn during pre-registration on Sunday 27 May 2018. The winner must be in attendance.



On behalf of the CPC, we wish you a safe and happy festive season and look forward to bringing you more National Conference news in 2018.

Barbara Lyndon
2018 Conference Convenor
Pamela Richards
National Conference Manager



Increase your professional support in 2018

While many early career speech pathologists take up the opportunity of receiving some extra professional support through participating in the mentoring program, more experienced speech pathologists can also benefit from mentoring both as mentees and mentors. Speech pathologists who have worked for several years and are now relocating; changing field of practice; expanding field of practice ; new to a senior role; ; undertaking a research project; or, looking for support to work on some career goals can benefit from the support of a mentor who has skills, experience and local knowledge in the areas the mentee is working in.

It's also important to remember that mentors gain much themselves, through participating in mentoring partnerships including:

- increased confidence;
- reduced professional isolation for sole therapists;

- new knowledge of resources, practices and work places which the mentee shares;
- sense of contribution and giving back to the profession;
- opportunity for reflective practice; and an,
- opportunity to develop leadership skills.

To join the mentoring program, as either a mentee or mentor, please go to:

<http://www.speechpathologyaustralia.org.au/information-for-members/mentoring-program>

For any queries regarding mentoring, supervision, or other professional support contact psa@speechpathologyaustralia.org.au

Meredith Prain
Professional Support Advisor




Professor and Discipline Head SPEECH PATHOLOGY

UC is seeking its inaugural Discipline Head and Professor of Speech Pathology

- Exciting brand-new Speech Pathology program
- \$139m new University of Canberra public teaching hospital funded by ACT Government
- Opportunity for innovation in clinical and community role development
- Named *World's Top 100 Young Universities* (Times)
- Voted no. 3 for *Best Cities in the World*
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Salary \$176,706 | +17% Superannuation

TO APPLY

uctalent.canberra.edu.au/cw/en/job/492388/professor-speech-pathology



**BOOKINGS ARE NOW OPEN
FOR THE 2018 ANNUAL
SPEECH PATHOLOGY
RESOURCE GUIDE!**

The resource guide is the ultimate guide to resources, services, tools and products for the speech pathology profession. Members and not-for-profit organisations can enter a free submission and take advantage of discounted display advertising.

For more information visit the publications page of the SPA website or contact the publications officer at pubs@speechpathologyaustralia.org.au to receive the advertising kit and booking form.

Call for Nominations Speech Pathology Australia Ethics Board

The Association is seeking nominations from current members, who are not members of the Board of Directors, for elected member positions on the Ethics Board.

In 2000 Speech Pathology Australia established the Ethics Board to manage and, when necessary, to enforce the Code of Ethics. The board currently has ten members: the chair, three senior members, three elected members and three community representatives. The three elected member positions will become vacant in May 2018.

The Ethics Board is an integral part of the Association's internal self-regulation processes to ensure that speech pathologists maintain the highest standards of professional practice and conduct. The Ethics Board is responsible for receiving and investigating complaints regarding members of the Association and acts an advisory committee to the Board of Directors in relation to matters of ethical practice.

The board has three teleconferences per year, plus an annual face-to-face meeting and training weekend at the National Office, Melbourne.

Elected member Positions

The elected Member positions are open to any interested member of SPA (other than current members of the Board of Directors). Current members of the Ethics Board may be considered for re-election providing that they have not exceeded the maximum allowable term. Please consider your own interest in sitting on the Association's Ethics Board and/or if you are aware of colleagues who would be suitable.

Nominations will close 28 February 2018

Please complete the nomination form which can be found on the SPA website on the Ethics page and return your form to the Senior Advisor Ethics and Professional Issues at National Office by 28 February 2018.

SPA members will vote for each elected member position by confidential electronic ballot prior to the Annual General Meeting at the SPA conference in May 2018. To assist members in making an informed appointment to the Ethics Board, members will be provided with a statement written by the nominee. The successful nominees will be announced during the AGM.

For further information please contact Trish Johnson, Senior Advisor Ethics and Professional Issues at Speech Pathology Australia, email: tjohnson@speechpathologyaustralia.org.au, or telephone 1300 368 835



The Ethics Board at their annual training weekend.

Ethics Board annual training weekend

The Association's Ethics Board meets four times per year, including an annual face-to-face training weekend which was held Friday 3 November–Sunday 5 November.

The weekend began with a presentation on the Friday night by Dr Arthur Rallis, legal counsel, discussing reasoning and decision making when investigating formal ethics complaints regarding the professional conduct of a member. The evening wrapped up with a delicious dinner together, then the board was back at work early Saturday morning for a workshop to consider the actions undertaken by investigation panels. Discussion topics regarding the work of the board included themes identified in ethical queries and complaints to the Association, planning for ethics education for members and the "soft" launch the first Online Ethics Education Module (see below). The weekend finished with an extended meeting on Sunday morning, before the board farewelled each other at lunchtime to travel back to home states.

The weekend was intense, productive and informative. A big thank you to the Chair, Assoc Prof Suze Leitao for her work in preparation for the weekend, and also the members of the board, whose attendance and enthusiastic participation is a credit to themselves and the profession.

Online Ethics Education Module 1

The first Online Ethics Education module was given a "soft" launch at the Ethics Board training weekend. The Ethics Board has been working diligently on transformation of the paper based Ethics Education Package into two online modules, with significant input from Assoc. Prof Suze Leitao and Dr Belinda Kenny. The modules have been two years in preparation and were piloted with a small number of volunteers before reworking for the final versions.

The first module is titled: Ethics in Professional and Clinical Practice. It is a learning tool available at no charge for all members, presented online through the platform simplyCPD. The module can be accessed through a link on the SPA website, on the Ethics Education page.

The first module is an introductory educational tool, presenting content, videos of reflections and role plays to explore ethical decision making for speech pathologists. Participants will learn about ethical decision making frameworks, complete activities and undertake self-reflection as they progress through each module, to support development of ethical reasoning and decision making in professional practice.

Look out for the major launch of the second module to complete the full release of the Online Ethics Education package at the National Conference in Adelaide, 27-30 May 2018.

Trish Johnson
Senior Advisor, Ethics and Professional Issues

What is appropriate advertising for speech pathology?

ADVERTISING CAN BE a powerful means to engage with stakeholders, educate consumers about particular services and identify expertise held by a clinician, as well as an efficient forum to provide information relating to specific clinical services offered, or clinic procedures such as referrals, bookings and fees. Advertising is a legitimate way for practitioners to provide reliable and useful information to consumers and potential clients in order for them to make informed decisions about accessing health services. However, there can be pressure on businesses to advertise in an eye-catching and competitive way, which can cause uncertainty regarding the appropriate ways to advertise speech pathology.

Why is advertising a health service different to advertising other types of services?

Health services are provided according to assessed need, on an individual basis for each client. Health practitioners have an obligation to assist clients to make informed decisions about their healthcare and not exploit a lack of knowledge by clients, who may be vulnerable because of their difficulties. That means that each client must be fully informed about the results of assessment and the appropriate, evidence based interventions that are available. For this reason, false or misleading claims that create unrealistic expectations about the effectiveness of a service or inappropriately guarantee the success of an intervention or product are not to be used in advertising a health service.

Ratings, reviews and testimonials

What is appropriate for one client may not be appropriate for the next. Any advertising must be mindful of that, i.e. consumers must not be enticed to purchase services based on another person's experience. Although ratings, reviews and testimonials are currently prevalent in advertising for many products and services, they are inappropriate for advertising health services as they describe the subjective experience of the author, which may not have any relevance to the reader's circumstances.

SPA defines a testimonial as: "a third party personal statement making a recommendation about a speech pathologist, speech pathology service or program" and the SPA Code of Ethics – Advertising policy prohibits the use of testimonials in any speech pathology advertising. Similarly, speech pathologists are to hide or remove ratings and reviews of their services if they appear in a form of advertising that the speech pathologist is responsible for, such as a practice's Facebook page.

SPA's position is that members are not responsible for removing (or trying to have removed) unsolicited testimonials or reviews/ratings published on a website or in social media over which they do not have control. Members are not expected to monitor social media for information that may be written about their speech pathology services in forums that are not under their control. It is permissible for members to allow the inclusion of their practice details on an independent third party directory, but members should not solicit testimonials, ratings or reviews on these websites. Any information such as ratings, reviews or testimonials posted by another person on a third party website should not be shared, copied, or re-tweeted, as this could be considered to be advertising under the member's control.

If a member undertakes a formal, commercial arrangement with a third party or independent review website, then the entry for that members' practice will be considered under their control, and must not contain reviews, ratings or testimonials.

Members are also reminded of their ethical obligations to tell the truth and not use misleading ways to promote their services. These obligations prohibit the writing of reviews or ratings on the member's own entry or another speech pathologist's entry on a third party or review website.

The consumer's perspective

Keeping the above in mind, what is appropriate advertising for speech pathology? Consumers want to know if a speech pathologist can provide the service they need, to know what specific knowledge, skills and expertise a speech pathologist possesses that can be of benefit. This information can be provided using objective sources, including the qualifications held by the speech pathologist, courses attended, training undertaken, previous work places or years of experience with a particular caseload.

It is also useful to have clear and accurate information about the way services are delivered, such as if a referral is needed, how to book an appointment, what the fees are for different aspects of service including reports, or the types of rebates that may be applicable.

Accuracy and the truth

Advertising must accurately describe a speech pathologists formal qualifications. As there are currently no recognised specialities in speech pathology in Australia the use of the terms 'specialist' and 'expert' are specifically prohibited. This is consistent with accepted standards across all medical and registered allied health professions. Other terms to indicate the expertise a speech pathologist holds are permissible, such as 'X years' experience working with...', 'expertise in the treatment of...' and many speech pathologist are using other creative and appropriate descriptions to identify the quality of their services and the knowledge and skills offered to clients.

A speech pathologist must provide appropriate information regarding any inducement offered, to ensure consumers have sufficient detail regarding the terms and conditions and to be able to understand the promotion. Additionally there is an obligation to not guarantee results unless this can be reasonably expected based on the best available evidence. Remember, the SPA Code of Ethics states: "We make sure that our clients and the community receive accurate and current information..." (Standard 3.1.2)

Support regarding speech pathology advertising

In 2014 the Board of Directors ratified the [Code of Ethics – Advertising Policy](#), which outlines the obligations of members regarding advertising. SPA has also produced an [Advertising FAQ](#) to assist members to apply the policy to advertising, and members can contact National Office with any queries regarding appropriate advertising.

The Senior Advisor Ethics and Professional Issues may contact a member to request changes to advertising to ensure compliance with the SPA policy, and is available to support members to achieve the changes required. If the request is not complied with in the specified timeframe the matter can progress to become an ethics complaint.

Trish Johnson
Senior Advisor, Ethics and Professional Issues

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of Christmas,
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Top stats for poster post

The recently released Communication Milestones Poster Kit had an unprecedented response across Speech Pathology Australia's social media platforms, reaching a total of 217,000 people.

The kit was developed by a working group of the Queensland Branch and National Office in a project that spanned 18 months from planning to distribution.

The social media posts generated unprecedented stats from data collected between 8-20 November. The post gathered 1,800 likes, 298 comments and 1,256 shares while reaching a total of 217,000 people!

Our Facebook page followers and likes jumped by over 1000 people from the traffic this post created. Clearly, the community and public want this sort of resource. Congratulations to everyone involved in putting it together!

Enclosed with this issue of Speak Out is a copy of the poster. Or to download the resources kit go to: www.speechpathologyaustralia.org.au/milestones



Share your pics

Fancy yourself as a bit of a photographer? We're looking for artistic photos of speechies in action!

Send your shots to Ian at support@speechpathologyaustralia.org.au and we'll post our favourites on the Speech Pathology Australia Instagram account.

Make sure to let us know your Instagram handle too so we can tag your profile and credit you for the picture.

Initiatives showcased at student conference

More than 100 "soon-to-be" speech pathology graduates from Australian Catholic University (ACU) demonstrated how their four years of study would translate to the workplace at the National School of Allied Health student conference on 2 November 2017.

Speech pathology honours research project outcomes and oral presentations were among the wide range of work showcased on the Melbourne, Sydney and Brisbane campuses.

Students presented case study data based on placement at organisations including early intervention agencies, community health centres, and schools.

Tiarnee Iddles in Brisbane presented her honours project on enhancing communication for people with dementia which examined whether communication strategies taught to aged care staff in the MESSAGE Communication Training Dementia University of Queensland Program could support person-centred communication between people with dementia and aged care staff.

"The most enjoyable part of working on the project was adding to the speech pathology evidence base, where project findings suggest that the MESSAGE strategies do support person centred communication behaviours in conversation," said Tiarnee.

Caitlin Pywell's honours presentation in Melbourne on Occupational stress in Speech Pathologists studied the level of self-reported occupational stress in Australian speech pathologists and differences, examining a range of practice areas in addition to age of clientele and location.

"This study is definitely an area for future research," said Caitlin. "It highlighted the importance of ensuring that, as professionals in the field, we have adequate supervision and mentoring."

Sydney student Taneal Norman presented on her honours project titled The Evaluation of the Sounds, Words, Aboriginal language and Yarning (SWAY) which explored the nature and development of SWAY, a school-based oral language and early literacy program based on Aboriginal stories, knowledge, and culture, and the perceptions of teaching staff currently delivering SWAY across four rural NSW schools.

"What is particularly special about this research is that it highlights how Aboriginal perspectives can be embedded in the classroom to create an inclusive learning environment that celebrates culture," said Taneal. "It is great that I can present findings that support and encourage the ongoing provision of a program that has both built the capacity of teaching staff and supported the oral language and literacy development of students."

By School of Allied Health, Faculty of Health Sciences, Australian Catholic University



Student Taneal Norman (centre) with Supervisors Associate Professor Wendy Pearce (left) and Fiona Eastley.

BRANCH NEWS

Achievements celebrated at AGM

On the second weekend in November the Tasmanian Branch held their AGM. Now we know that AGM stands for "Annual General Meeting" and that these tend to be rather dry, stodgy affairs but for the Tassie Branch we always try and make this a fun and sociable occasion where we can celebrate the profession and the achievements of the branch in the past 12 months. With this in mind maybe our AGM should stand for "Astounding Group Merriment"! Under the leadership of our chair Rosie Martin and vice-chair Cat Wood, we met in the Josef Chromy function room just outside Launceston and shared refreshments and stories from the year passed. We also had three interesting, informative presentations from Isobel Lewis, Kate Day and Jessica Marriot on some special projects they have been involved with this year.

Thank you to all the members who attended the AGM and to the members of the executive for 2017. We would like to thank our Chairperson, Rosie Martin, for her luminous promotion of our profession throughout the year in her role as chair and also Tasmanian Australian of the Year. She has represented Speech Pathology with incredible style, grace and wisdom and has been an outstanding spokesperson for the

issues of equity, relationships and communication. Rosie will be stepping down from the executive for 2018, along with Nicole Hatch and Linda Williams so we wish them all well for their future endeavours.

Congratulations to those newly elected members of the executive and we still have a couple of positions available so if this is something you have ever considered being involved in then please contact the branch via email to find out more tasbranch@speechpathologyaustralia.org.au. The full executive will be introduced in the first edition of *Speak Out* in 2018.

To all Tasmanian SPA members we wish you a relaxing, joyful Christmas and holiday period and we look forward to your continued support and contributions in 2018.



TASMANIA



TAS 122 members

as at October 2017

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VICTORIA

Pregnancy, Babies and Children's Expo

Speech Pathology Australia was represented again at the Pregnancy, Babies and Children's Expo in Melbourne this October with more than 400 people visiting the stand to obtain information about speech and language development. We had 29 volunteers who were all Speech Pathology Australia members. In each shift there was at least one practising speech pathologist with either student or non-practising members to assist with engaging visitors with handouts, demonstrating the SPA website or distributing raffle tickets. Book of the Year books were used as a raffle prize.



The main questions asked were about norms and normal communication development, as well as how to support language development in bilingual children. Thanks to Jenny Elliott and the Member Engagement Group, as well as all the members who volunteered their time and expertise in another successful event.

Chrissa Stavrou



VIC 2091 members

as at October 2017

SLP2B – Pathways in speech pathology

The Victorian student member network recently hosted an event titled SLP2B- Pathways in Speech Pathology at the University of Melbourne. A sell-out crowd of 160 students from La Trobe University, Australian Catholic University and The University of Melbourne came together to hear first-hand accounts of the rewards and challenges that a career in speech pathology can offer.

Seven speech pathologists outlined their career journeys, providing advice for budding SPs, demonstrating the diversity of the profession and describing the opportunities available to explore interests in teaching, research and clinical work. Presenters reflected a range of clinical interests that ranged from working in acute hospital settings, private practice, community and indigenous health, education, research and aged care. All speakers were inspiring, evoking responses from awe to peals of laughter, and generously gave of their time after the event to answer many questions from the appreciative audience. The level of student engagement reflected the communication expertise of the panel, the motivational nature of their presentations, and the relevance of their advice to students looking to soon enter the workplace as practising speech pathologists. The student representative group would like to thank our panel of speakers: Rachael Furner, Petrea Cahir, Abby Foster, Leora Benjamin, Deb Mylne, Alice Crook and Martin Checklin.

Thanks must go to all Victorian Branch members, (including portfolio leaders: Alice Crook, Tiyana Jones and Hannah Stark), who have worked to advocate for our clients, promote our profession and engage with our community.

Hannah Stark
Student Member Network Coordinator



Actions speak louder than words

Australian Catholic University students recently ran a bake sale aiming to raise awareness of the role of speech pathology and communication access in our community. With the intention of challenging students to make a purchase at the sale without using any speech we saw the light bulb moment for students as they found it impossible to convey even a simple message! "I didn't think this would be so hard!" "I feel rude just pointing at what I want." "Oops I just spoke!" These were some of the students' experiences at the bake sale, yet others rose to the challenge, with one nursing student taking the time to print a communication chart with some phrases on it and using this to convey his message. Our eyes lit up! The Speech Pathology students on campus were excited to share with students from all disciplines the importance of accessible communication in our communities. The bake sale successfully raised \$253.45 for Scope, who play a vital role in providing support for and empowering people with communication disability.

Aashna Vazirani
Speech Pathology Australia ACU Student Representative

Sharing communication access

To celebrate Speech Pathology Week 2017, the Speech Pathologists at Princess Margaret Hospital documented patient journeys to share with staff and patients.

This gave us the opportunity to reflect on the role SPs have whilst a child is in an acute setting, transitions to outpatient services and back into their community. It also allowed us to hear how our families had been influenced by the work of SPs and where our work had been most important to them.

Ruby's story highlighted the work we play in intervention as well as education to families:

"Ruby is an almost 6 year old girl who has been accessing speech pathology services since her diagnosis of papillary thyroid cancer in October 2016. In December 2016 Ruby had a total thyroidectomy, tracheal reconstruction and required the formation of a tracheostomy. She has had significant difficulties swallowing and achieving voice to communicate.

Ruby had regular speech pathology input for assessment and management of her swallow safety. Ruby also recently had a full laryngeal reconstruction and her swallow has improved to the point that she can safely have normal food and drink again (8months of having nasogastric tube feeding for nutrition and hydration). She continues to have a tracheostomy and now that her vocal cords are cancer free and have been surgically repaired she is able to tolerate a speaking valve

to enable expressive verbal communication. Until this time she relied on a range of assistive communication tools e.g. iPad with touch to speak apps and key word signing plus developed buccal speech which helped family/ regular communication partners interpret Ruby's messages. Ruby and her family have had a stressful year as Ruby accessed necessary treatment and therapy at PMH. She has very regular reviews with a Speech Pathologist and the ENT team to plan for safe decannulation of her tracheostomy.

When Ruby's parents reflected on the role Speech Pathologists have had in Ruby's recovery they commented SP involvement was vital in helping support the family in between medical treatments and surgery. Ruby's mother explained the reassurance and next step information provided by the Speech Pathologists they worked with, were vital in supporting Ruby and her family regain some control during difficult times. Ruby is now participating with her peers at school. They didn't realise that speech pathologist's assisted children with swallowing, tracheostomy's and voice until Ruby was diagnosed and wanted to help educate others of the diverse role speech pathology has for patients like Ruby."

It is sometimes difficult to properly highlight the role Speech Pathologists have in rehabilitation. We found sharing specific patient journeys a nice way to draw attention to our important work.

Princess Margaret Hospital

Welcome to the profession event



Puttanna Mahananda, Mary Woodward, Andrea Vine, Lisa Forbes, Fiona Eastley, Bianca Lyons

On Thursday 9 November five members from ACT/ NSW Branch attended a welcome to the profession event for final ACU, North Sydney students. Branch members discussed their experiences as a speech pathologist and gave advice to the future graduates. There was a Q & A session with questions ranging from working in private

practice, working overseas and how to maintain skills across areas of practice. We were happy to hear that nearly all students and staff were already members of Speech Pathology Australia. A big thank you to Wendy Pearce from ACU and our student representative Bianca Lyons for organising the event.

WA



WA 919 members

as at October 2017

ACT/
NEW SOUTH WALES



**ACT 82
NSW 2535 members**

as at October 2017

QUEENSLAND



QLD 1776 members

as at October 2017

Making communication matter in aged care



The Queensland Branch recently developed, with assistance from the SPA Communications and Marketing team, a flyer highlighting the potential communication needs of aged care residents.

The flyer was distributed to aged care facilities across the state and urged staff to view the communication matters video on Youtube.

About 95% of aged care residence may have a communication impairment and the flyer was geared toward raising awareness for staff to help make communication a priority within their workplaces.

The video was an initiative of the WA branch and continues to be a useful resource for the aged care sector.

View the video at www.speechpathologyaustralia.org.au/communicationmatters

Helping to solve the challenges of community access

GRADUATING SPEECH PATHOLOGY STUDENT, Sarah Flemming came to know Brisbane man, Robert Oakman, while working at a day program in Brisbane. Together, Sarah and Robert have written the following brief article, giving a taste of Robert's life and experience of using AAC. Sarah and Robert have also submitted an abstract to present together at the 2018 ISAAC conference.

"My name is Robert Oakman and I am a 50 year old man who resides on the north side of Brisbane who was born with spastic quadriplegia.

"I need all of my meals modified as I have oropharyngeal dysphagia and rely on communication strategies to communicate as I am non-verbal. I have used numerous communication strategies ranging from head pointers, communication boards, non-verbal communication to now using an eye gaze communication device. Growing up I used to watch TV shows like Sesame Street and Humphrey B Bear to learn basic reading and writing skills. I loved Humphrey B bear because he could not talk and relied on someone else to find out what he was saying. I attended New Farm Special School whilst I was younger which helped me socialise and communicate with other children. I now live in support accommodation with two other men.

Support carers now assist me with day to day living tasks within my home and at the local day service where I explore my passion for art. Sarah Fleming is one of my support carers from Choice, Passion, Life (CPL) who I have known for three short years. Sarah is one of my best friends and support carers who has assisted me within the community, at home and has encouraged me to continue my passion for public speaking while completing her Bachelor of Speech Pathology degree at Southern Cross University. I have presented at Sporting Wheelies, Brisbane City



Council, AGOSCI and at two Queensland Universities to allied health students.

Most recently, Sarah and myself have submitted an abstract to present within the upcoming ISAAC conference on the Gold Coast in July, 2018. Together we will hope to discuss my own personal experiences in accessing the community and gaining employment opportunities with the use my Tobii Eye-Gaze Device. Within this presentation we will explore the challenges I have experienced and the highlights of my career. Sarah will elaborate on my experiences and provide a carer's point of view in regards to challenges experienced while accessing the community."

Robert Oakman
Brisbane resident and AAC User

Sarah Flemming
SCU Speech Pathology Student '17

Speech pathology placement in Darwin

FOR OUR FINAL paediatric placement we flew to Darwin to spend six weeks at Alawa Primary School under the supervision of Francesca Edis (Top End Speech Pathology). It was an eye-opening experience to be a part of the Darwin and the Alawa school community. We were given a warm welcome from the students, parents, teachers and staff at the school. It was hard not to notice the close and tight connection people shared within the community, where everyone looks out for one another. Throughout the placement, our clinical educator and teachers ensured that we enjoyed the NT lifestyle by constantly suggested exciting weekend plans, such as inviting us to go to the local Darwin Festival or visit the Litchfield National Park. Their enthusiasm and support helped us to feel connected to the local community, as well as to be part of the wider NT family within the brief six weeks we spent in Darwin.

Darwin is definitely a change of scenery from what we are used to in Sydney. Having grown up in the “hustle and bustle” of a concrete jungle, Darwin’s relaxed pace and beautiful nature certainly made the placement worthwhile. We spent weekends exploring beautiful waterfalls around Litchfield and Berry Springs, and were tested with outdoor activities such as canoeing and helicopter rides around stunning nature parks. Not to mention the tranquil waters of Katherine Gorge, the gorgeous sunsets from Casuarina beach and getting up close and personal with a saltwater crocodile!

As part of our experience in Darwin, we were immersed in a culturally and linguistically diverse community. During our orientation, we

attended a cultural awareness workshop that was informative and helped in working with our clients. As we learnt during this workshop, approximately 40 per cent of students in the Northern Territory identify themselves as indigenous, and almost 50 per cent of students come from backgrounds other than English. Throughout the program we were challenged to consider cultural factors in order to ensure that intervention is effective. This involved considering culturally appropriate speech patterns, appropriate language to use with parents/carers, and acknowledging different family values and expectations.

The placement helped us to understand the ways in which speech pathologists work with and alongside schools and education staff. During the six weeks, we learned how to implement our services on all three tiers of the response to intervention (RTI) framework (one-on-one, small groups and in consultation with teachers). There have also been great opportunities to be involved in advocacy events for the profession, namely being part of the Speech Pathology Australia stall for the Darwin Careers Expo and events within the school to promote Speech Pathology Week. Like all placements there were challenges and rewards, all of which are vital to our learning experience as students. Through this experience we learned so much about ourselves and the profession and we recommend it to all students who have the opportunity.

Speech pathology students
Elizabeth Grose, Jasmine Lo,
Hafiz Yusoff, Kate Patten



NT 55
members

as at October 2017



The students attended the Darwin Careers Expo to advocate for the profession.

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