

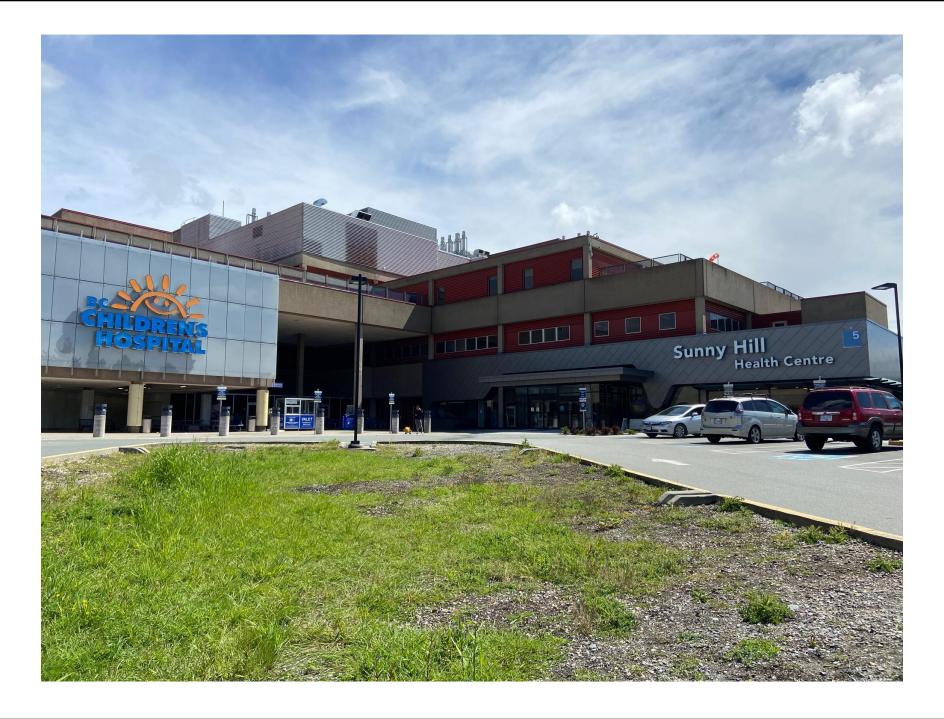
## **Present Day Sunny Hill**

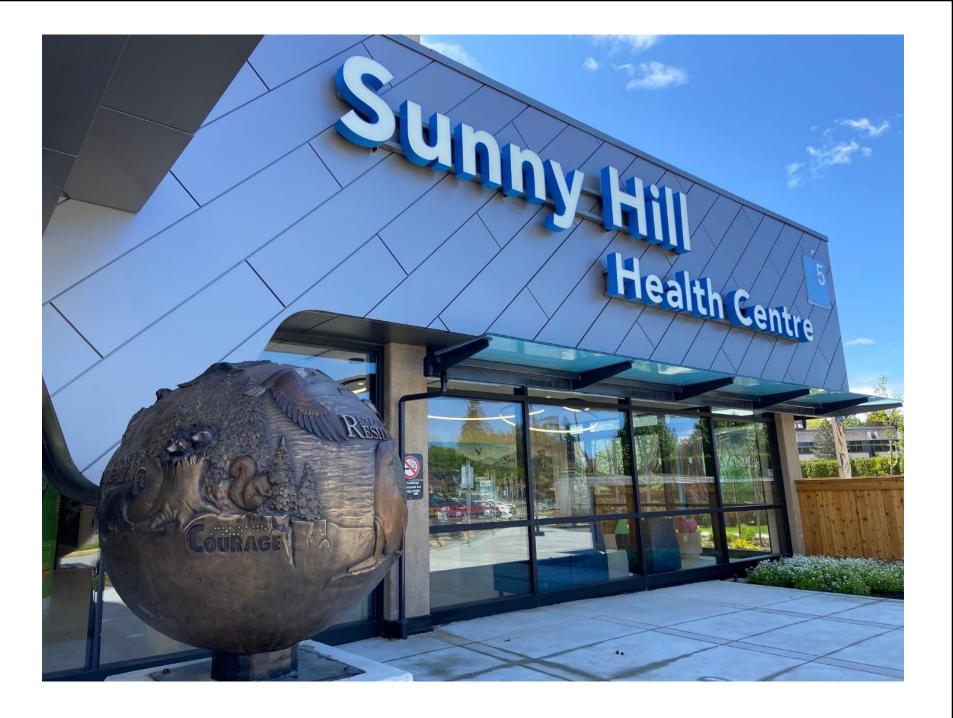
- Consists of 4 programs that focus on the special needs of children with developmental conditions and disabilities province-wide:
  - BC Autism Assessment Network (BCAAN)
  - Complex Developmental Behavioral Conditions (CDBC)
  - Acute Rehabilitation Program (Acute Rehab)
  - Neuromotor Program (NMP)
    - Feeding Team
    - Assistive Technology Team
    - Positioning & Mobility
    - Tone Management
    - The Motion Lab
    - Hearing & Vision

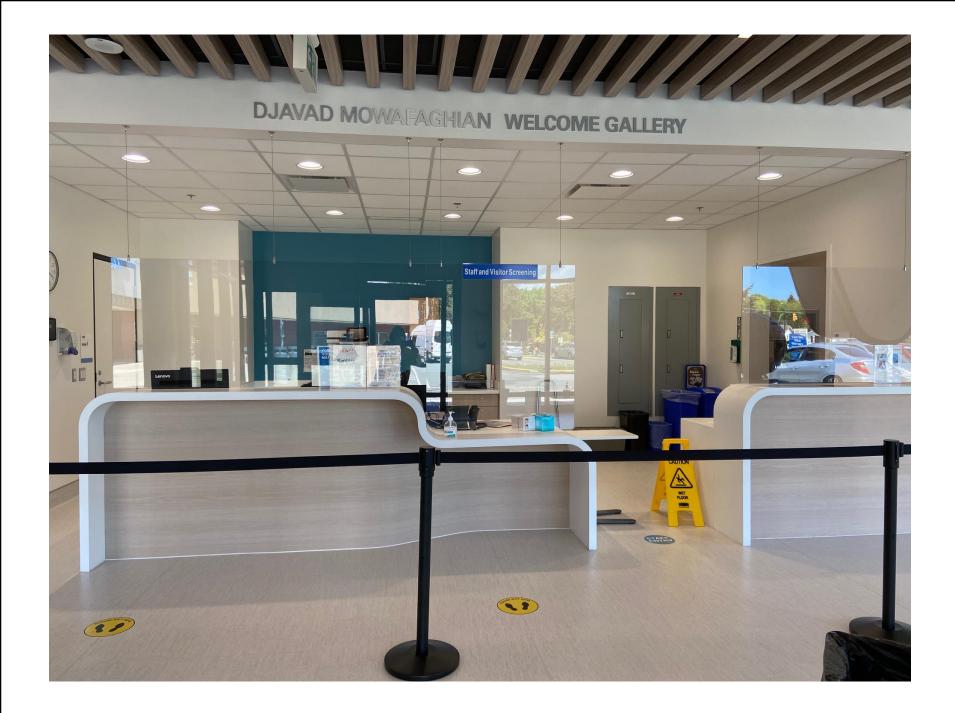
## We've moved!!!

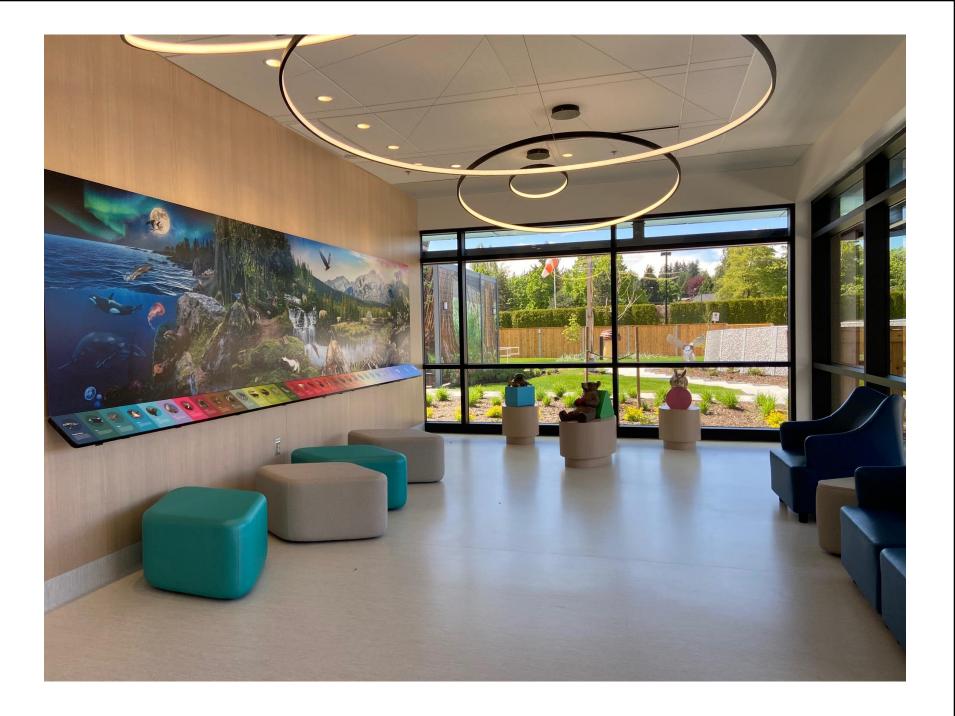
 We are now located at the BC Children's Hospital site as of August 2020

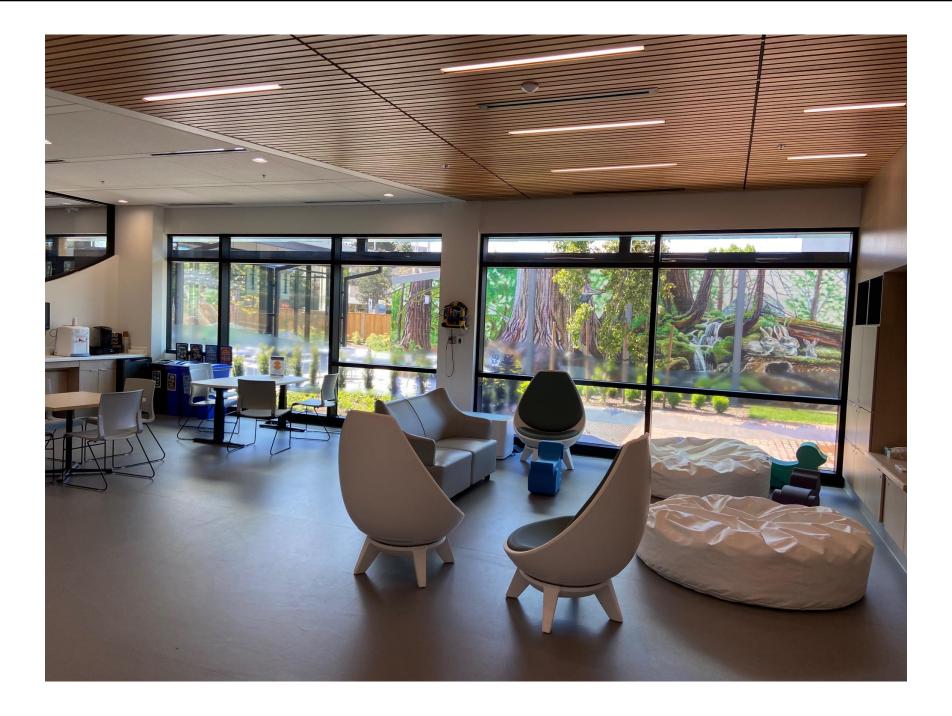
http://www.bcchildrens.ca/our-services/sunny-hill-health-centre/sunny-hills-new-home

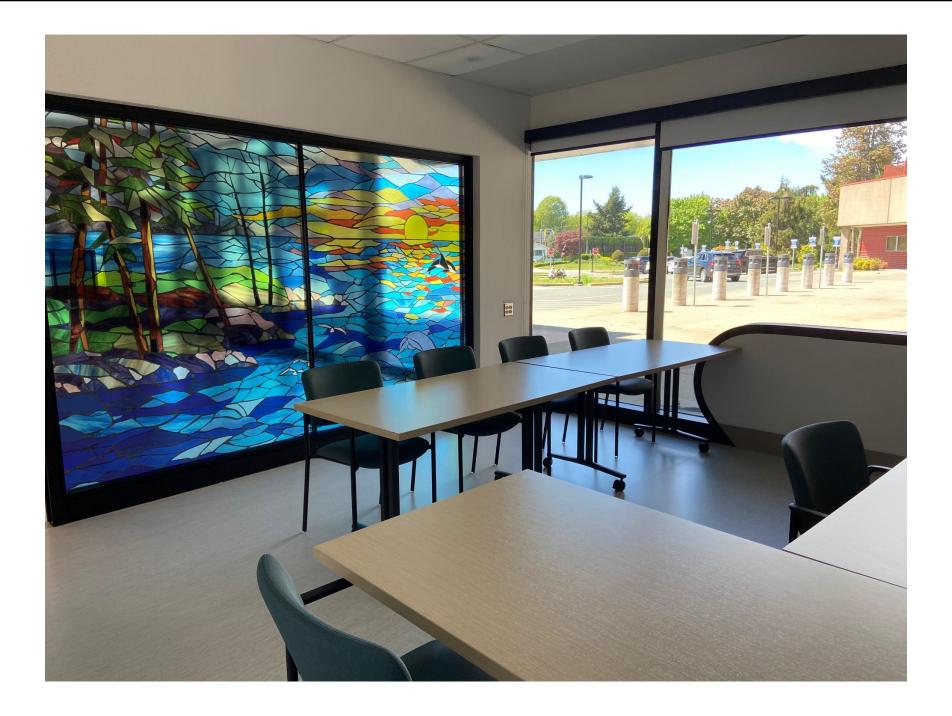




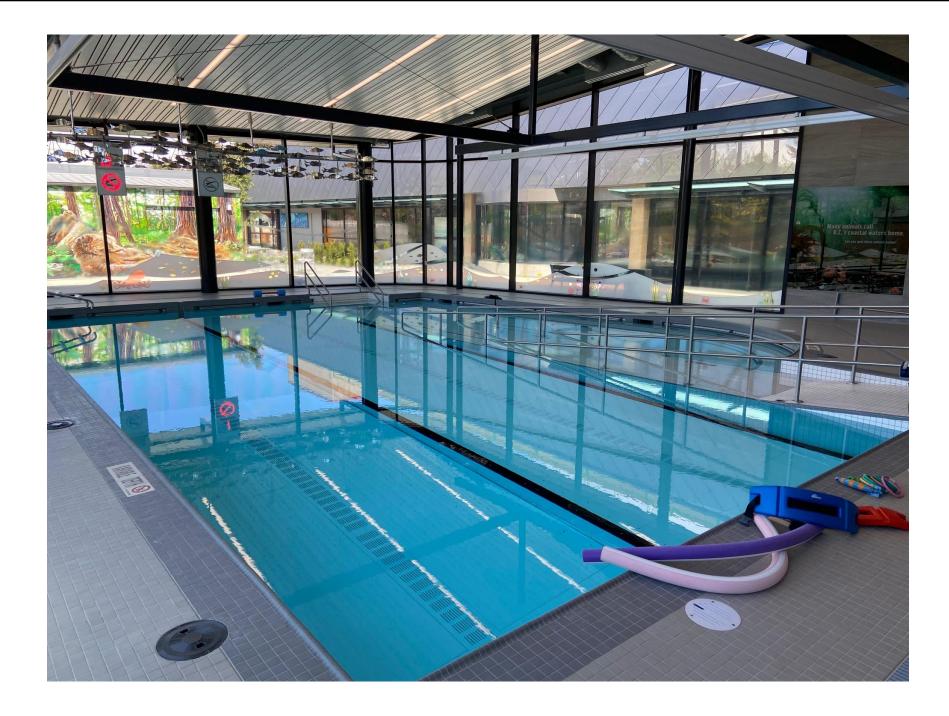












## **Mandate of HLT**

- Interdisciplinary team working in partnership with the family and community professionals to identify the child's developmental strengths and challenges.
- Helping families and community professionals to understand and interpret the developmental progress of their child in relation to his/her hearing loss.
- Assessment, diagnosis and formulation of full range of developmental challenges in children with permanent hearing loss.
- Contributing to the development of strategies to help ensure the child develops to their full potential.
- Partnering with families and professionals to advocate for the needs of the child within their own community.

## **Eligibility**

- Full HLT assessment:
  - Permanent bilateral hearing loss (at least moderate degree)

- Developmental Pediatrician/Nurse Clinician only assessment:
  - ANY permanent hearing loss (ANY type, ANY degree)

## **HLT Waitlist**

- Full assessment ~ 22-30 months, currently we are booking 1 month ahead
- Peds solo ~ 3 months
- Psychology ~ 24 months
- SLP ~ 2-4 months
- RT ~ 5-6 month, willing to shift and address needs as the team sees the children
- SW ~ 2-4 months

### Referral Process

- Referral process starts with the PARENTS
- Referrals accepted from a family physician, pediatrician or specialist
- CI Team can make a direct referral to HLT

http://www.bcchildrens.ca/healthprofessionals/refer-a-patient/sunny-hill-referral

## **Examples of Appropriate**Referrals

- Learning or intellectual disability
- Communication challenges
- Social concerns
- Development concerns related to hearing loss (understanding of a condition over time, genetically complex diagnosis)

## Referral Alternatives

- If autism is the main concern → PARC
- If ADHD is the main concern → community pediatrician or BCCH ADHD clinic

\*\*HLT IS ASSESSMENT ONLY; we do not provide on-going care or therapy over time\*\*

## Process prior to assessment

- Referral from family physician, pediatrician or ENT received
- Referral goes to triage, chart made
- Reviewed by HLT Pediatrician/Nurse Clinician
- Intake phone call to family
- Information gathering from community team
- Book appointment (phone call from Booking Clerk to family)

## **New Intake Forms**

- Fillable PDF document for TDHH to complete!
- We've made it easier for forms to be returned via e-mail - please do complete and return in a timely manner as this is very helpful for our team!



#### Form to be completed by the Teacher of the d/Deaf and Hard of Hearing

#### **Hearing Loss Team**

Child's name:	Birthdate/Age:				
Degree/type of hearing level:	Current grade:				
Age when hearing status first identified:	Date form completed:				
Name and role of person completing the form:					
How long have you know the child:	Frequency of support:				
Special equipment, technology & hearing supports  Please note any challenges with implementation and discuss level of child's independence.					
2. Learning strengths & stretches  Learning style:  Visual  Hands-on  Auditory   Please comment on the child's learning skills (e.g., problem attention, planning & organizational skills).					
3. General academic					
Please discuss the <u>impact of hearing</u> on academic functioning.					

4. Communicat  Please check the  Grully Visual	child's preferre				g language:		
V	V <sub>A</sub>	AV	A <sub>v</sub>	-	Α		
Please check the child's preferred mode of communication for expressive language:    Fully Sign							
Any concerns regarding the child's communication? Please comment on articulation, vocabulary, language, grammar and/or social communication skills.							
5. Socio-emotional & behavioural Social skills, emotional functioning (e.g., anxiety, mood), activity level, aggression, etc.							
6. Fine motor, ş		-	_	l-spatial skills,			
coordination/bal	ance, and mob	ility. Supports n	eeded? Curren	challenges?			

7. Any additional comments					
In order to gain an accurate reflection of the child's functioning, do you think an interpreter					
should be provided for the upcoming Sunny Hill assessments:					
☐ No interpreter necessary ☐ Yes, ASL Interpreter ☐ Yes, Deaf Interpreter					
☐ Yes, Spoken Language Interpreter; primary language					
Please attach the child's current Individual Education Plan (IEP) and any reports (SLP, OT, PT					
TDHH, school progress, etc.) from the past two years.					
Please return form and documents to: Sunny Hill Health Centre for Children, 3644 Slocan					
Street, Vancouver BC V5M 3E8, or confidential fax: 604-453-8360, Attn: HLT Case Manager					

## **An Interdisciplinary Team**

- Developmental Pediatrician
- Nurse Clinician
- Clinic Nurse
- Psychologist
- Speech-Language Pathologist
- Occupational Therapist
- Physiotherapist
- Recreation Therapist
- Social Worker
- Audiologist
- Program Clerk

## Developmental Pediatrician

#### **Dr. Anton Miller**



- Focuses on the overall developmental assessment and diagnostic profile.
- Works with the team to organize relevant recommendations and communicates these with the parents and professionals.

## **Nurse Clinician**

#### **Marie Campbell**



- To assess the overall needs of the family and child and help them connect into the program and link with resources & services available in community.
- To ensure that appropriate, highest level of service is provided to families and community services.
- To Provide follow-up where necessary.
- Facilitate the function of the team.
- Communicates with families and community professionals with regards to proper, timely referrals.

### **Intake Nurse**

#### **Sachpreet Srah**



- To facility intake into the program communicating with families and community professionals.
- To assess the overall needs of the family and child and help them connect into the program and link with resources & services available in community.
- To ensure that appropriate, highest level of service is provided to families and community services.
- To provide follow-up where necessary.

## **Psychologist**

#### **Dr. Tim Johnston**



- To understand how the child's experiences and cognitive development are related to their day to day functioning at school and at home.
- Assessments are used to determine the child's strengths and needs.

## Speech Language Pathologist

#### **Sydelle Murphy**



- To understand the interrelationship of a child's communication strengths and challenges, speech and language acquisition and any impact on overall development.
- Areas of assessment may include language (spoken and/or signed), social communication, speech, voice, fluency, oral motor.

## **Program Team Clerk**

#### **Bonnie Morin**



- Front line communication
- Schedules patient appointments and coordinates team bookings
- Schedules family conferences
- Sends out consent forms and release of information forms
- Schedules Provincial Language Service interpreters, Medical Interpretation ASL/DI interpreters
- In communication with the team, families and outside professionals, teachers, etc. for conferences and needs relating to the patient
- Administrative/Clerical duties for Doctors, Nurses and Management
- Collects and organizes patient documentation/information via fax, mail or email

## **Audiologist**

#### **Beth Brooks**



- Participates as a resource to the team by:
  - Assisting with intake decisions
  - Providing audiological evaluations that supplement existing information
- Sharing knowledge and expertise as related to clinical, educational and public health aspects.

## **Social Worker**

#### **Leonie Adler**



#### **Team Role**

 To complete a psychosocial assessment.

 To refer families to appropriate supports and services in the community.

## **Recreation Therapist**

#### **Christina Duncan**



#### **Team Role**

 Assess the child and family and provide information on recreation resources within their community that interest the child now and in the future.

# Occupational Therapist & Physiotherapist

 These roles exist on our team but we are temporarily operating without them because they've been reassigned to other teams to deal with covid-related backlog

## Process following assessment

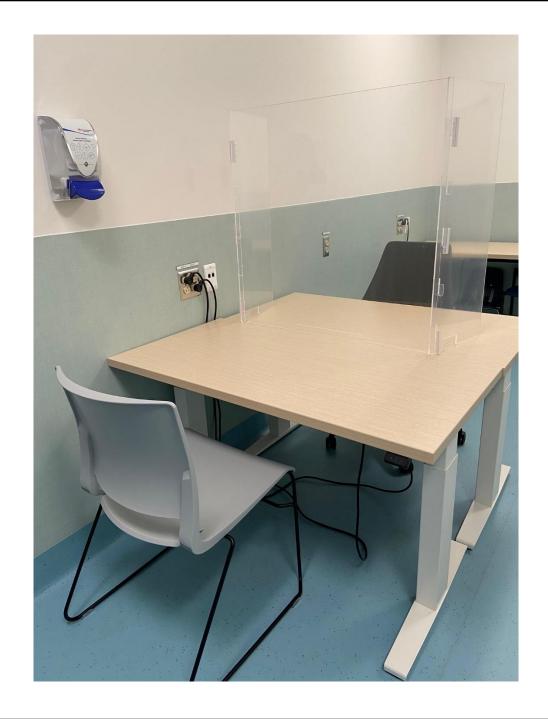
- Assessments take place
  - Ideally all completed within one month
- Pre-team conference with HLT members involved
- Family conference
  - Approximately one hour
  - Family responsible for inviting community professionals
  - Summary sheet provided to the family
- Individual reports released to the family and referring doctor
- Follow up from Nurse Clinician as needed

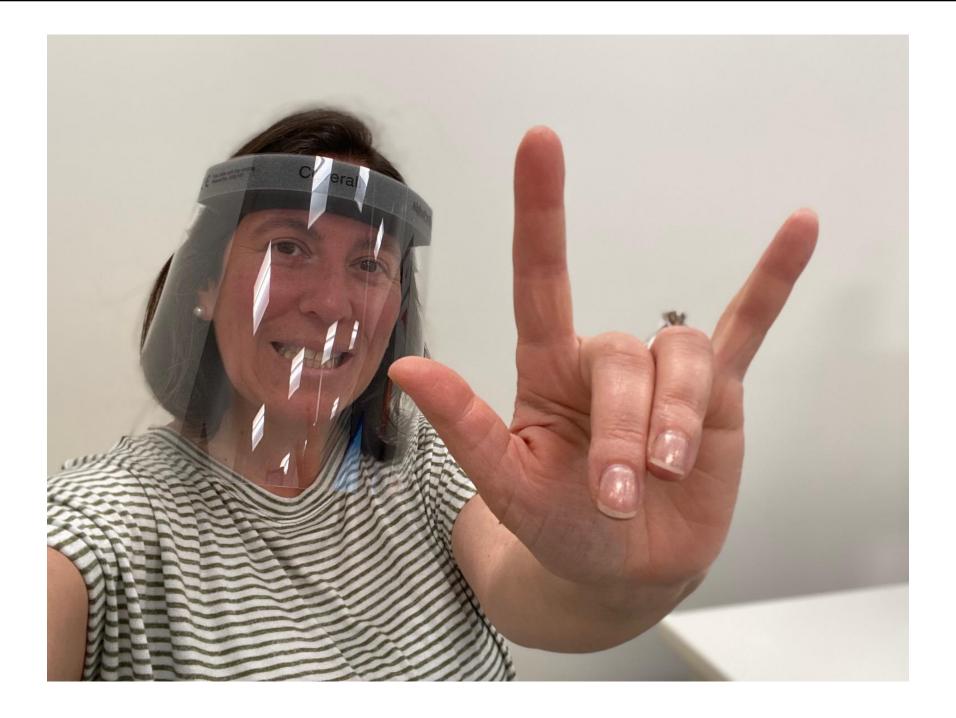
## **Covid Protocols**

- Limiting the number of visitors entering our buildings: ONE adult caregiver/support person for outpatient clinics
- Screening upon arrival: clean hands when entering the hospital and wear a medical mask, which will be offered at the entrance. Children ages three and older are also requested to wear a medical mask if they are medically able
- Reschedule appointments if unwell
- Re-book appointments for 14 days postexposure/when child is back to full health

## **Covid Modifications**

- Physical changes:
  - plexiglass barrier
  - face shield
  - soundfield FM/mini mic
  - clear face masks
- Procedural changes:
  - Zoom case history with family, shortened inperson assessment to 3 hours
  - Virtual community consults
  - Joint peds/SLP for under 5







## QUESTIONS

Do you ever provide consultation to indistrict school psychologists so they can be equipped to administer and interpret a psych-ed assessment on a child with significant hearing loss?

# Is a diagnosis of intellectual disability valid for a child with language deprivation?

# How do you address communication barriers with so many families who don't speak English?

What unique challenges do you find come up often when assessing deaf and hard of hearing children?

Are there things that the school can do to help increase communication and collaboration between our teams?

## **HLT Contact Information**

- Anton amiller@cw.bc.ca
- Beth bbrooks@cw.bc.ca
- Bonnie bmorin@cw.bc.ca
- Christina cduncan@cw.bc.ca
- Marie\*\* MCampbell2@cw.bc.ca
- Leonie ladler@cw.bc.ca
- Sach Sachpreet.Srah@cw.bc.ca
- Sydelle Sydelle.Murphy2@cw.bc.ca
- Tim Timothy.Johnston@cw.bc.ca

<sup>\*\*</sup>point person for HLT referral questions

## Questions

Sunny Hill Health Centre for Children 4500 Oak St Entrance 5, Vancouver, BC Marie Campbell, RN, BScN Nurse Clinician

Phone: 604-875-2345 ext 459226

Email: MCampbell2@cw.bc.ca

Toll free: 1-888-300-3088