

# Sydney

**Track 1:** [00:00:00] Okay, let's get started. Today we are talking all about hearing loss in the schools, the auditory hierarchy of listening, classroom modification, speech, and language goals, and much more. I am so excited to introduce today's guest speaker, Sydney Beard. Hi there, Sydney.

**Sydney Bassard:** Hi. Thank you so much for having me today, Michelle.

**Track 1:** You are welcome. I'm so excited to hear from you, Sydney. Go ahead and tell me a little bit more about yourself and just how you got into learning all, all about, uh, hearing loss.

**Sydney Bassard:** Yeah, so it's been a really cool journey. Learning about hearing loss. So I actually was originally interested in literacy and dyslexia work, uh, because I have a brother who's dyslexic. So that was like my first introduction into the field. I was a little bit of a late bloomer, um, found out about speech language pathology my junior year of undergrad and ended up switching my major to public health. Because my, where I went to school didn't have an undergrad in speech language pathology. [00:01:00] Um, so I ended up connecting with a professor that, like, they did a little bit of work looking at like literacy outcomes, but it was specifically for children who have hearing loss that use listening and spoken language as their primary modality. So I ended up connecting with them. I worked with them, uh, all throughout my graduate experience. And then we've maintained a good working relationship since then. Uh, so that was really like what kind of . Sparked my interest in hearing loss and the more I went for grad school actually had a track, an auditory verbal therapy track that was specifically geared for people that were interested in learning more about listening and spoken language.

**Track 1:** Awesome. I love hearing about everyone's path to kind of their, their niche and what they're really passionate about. That's awesome. Um, okay, so. Let's first give kind of a, even a general rundown of the SLPs role when it comes to a child who has hearing loss in a school, and also those other professionals involved in the child's team, kind of what makes [00:02:00] up that team, and then the SLPs role.

**Sydney Bassard:** Yeah, so it's really, um, it's really cool when you're working with kids who are deaf and hard of hearing or have hearing loss because there're generally a lot of people that are involved in their care. So from like the school

side of things, we are probably gonna have a. School-based speech language pathologist.

There's generally gonna be a teacher of the deaf involved. Uh, depending on where you live. There might be an educational audiologist. And then thinking about like outside of school, there might be a private Ss l p involved an E N T if they, uh, got cochlear implants and Private audiologists as well. Uh, there might be some nurses involved. Social work really just kind of depends on the makeup of that team, depending on where you live and kind of the resources that are available. Um, but when we're thinking about the roles, specifically thinking about in the school, we have a lot of different roles. We have to know about the technology. At least have a basic understanding about like if a child's [00:03:00] technology is working, meaning like, is it on, is it charged? Um, what that like FM system might look like for them. So some kids have like the Roger pins that we might wear around our necks. Uh, other times there might be like what we call a Sound field fm, meaning that it's like within the classroom and it's broadcasting for everybody's kind of benefit. thinking too about, uh, just monitoring those speech and language goals that we're working on, thinking about how we wanna incorporate those skills into academics. Uh, thinking of the social, emotional skills and wellness of the kids that we're working with. I mean, the, uh, range of the things that we can work on really are vast, especially in the educational setting.

**Track 1:** Right. And then it sounds like it's gonna be very different from kid to kid, what their needs are, what, what devices they have. Um, so it might involve, it might involve a lot of like, okay, this kid has. This equipment, this, this team, and then [00:04:00] probably doing a lot of research on making sure you are very familiar with those, with that technology and everything.

Are there any specific trainings or, um, like where, like, say there's a device or equipment that you're not familiar with, um, what would be a first step for an S L P?

**Sydney Bassard:** Yeah, so I think tapping into your educational audiologist, if you have one available is going to be key because they're generally gonna have a lot of that information about the specific device that the child is using. Um, If you don't have one available, which sometimes happens, right? The, I have found that like the cochlear implant companies, the hearing aid companies have really good resources on their website about the different devices. But even then, if you're like, um, I don't have the time for that, or like, that's a lot of work. I'm not even sure what I'm really supposed to be looking for. You can generally send like a question to the reps. Uh, and they have reps based on like the

different regions and I have found that they are always really excited to kind [00:05:00] of help SLPs where they can. Uh, but then also too, they're like a plethora of knowledge. And then parents are our best resource. The parents are a lot more familiar with the devices

that their kids have sometimes than we are. Uh, so making sure, like kind of at the beginning of the year, something that I always kind of encourage parents to do. is to make sure that they, uh, provide like a slip for like the general rundown of their child's device, but then also too for the professional, making sure that you kind of request that information as well.. like, when it comes to parents, like, something that I encourage is when we're kind of getting started with the school year, like, you know a lot about your child, you know a lot about your child's devices, but because we know that the knowledge that SLPs have to have is so vast, like the school-based SLP may not know as much about your child's device.

Uh, so just kind of giving them like a good guide rundown about

Like what it looks like when the

batteries are

low, um, [00:06:00] how they can change the

batteries. Anything in particular about like how your kid might like to wear their devices if like, you know, there's a certain sensitivity, like just kind of helping the professional a little bit to get to know like

About your child's device. Also how your child wears their device. Um, and then two, I feel like you're the SLP, like feeling comfortable asking parents for that information because they are going to know, uh, sometimes a lot better than we are, especially if we don't necessarily have some of the resources that we previously talked about.

**Michelle Andrews-1:** Right. That's so helpful. Very true. Just reaching out to the parents to, to get all that information and sooner rather than later, you probably wanna ask them right away and not, oh, I've been working with your child for a year. What is their device? Um, very good information. Okay, so I know we wanna get into the auditory hierarchy of listening. Can you, um, describe what that is for me?

**Sydney Bassard:** Yeah, so it's Herbers listening or auditory hierarchy. Um, and [00:07:00] so it has like four kind of . Like domains that we think about. So the first one going from, we're gonna start going from like basic into more complex. So first one is just detection. Like do you have an awareness that there is a sound present?

Often times, like babies do that pretty naturally. Uh, that's why most times if you have a newborn, people might say like, please don't ring our doorbell. Or they try to keep their dogs from barking because the minute that a child hears it, they're looking, they're having some awareness of that sound. Then we get into discrimination, and that's the ability to determine, uh, two sounds that are the same or whether they're different.

And so once kids like start producing words, um, we, we tend to see that like production wise, but even just like understanding wise, right. If you have the word cat and you have the word hat, like are we hearing that there's a difference between the and the, at the beginning of those? Then thinking about identification, that's the ability, uh, to identify what's being named or labeled.

And then finally, like the most complex is gonna be comprehension. That ability to understand the meaning [00:08:00] of spoken language.

**Michelle Andrews-1:** Okay, so this is important when you're figuring out speech and language goals, I assume for the, for the child, you're trying to figure out where they fall on this hierarchy. Is that right?

**Sydney Bassard:** Yeah, absolutely. So sometimes we might jump in, um, and automatically be at like the identification or the comprehension stage, but sometimes we have to scale it all the way back. Uh, generally like when someone just gets their listening devices or they're kind of a little bit new on that journey, we have to start at just like the detection.

Do you understand that there's even a sound present? Um, and then eventually we work our way to like being able to distinguish between the different sounds, being able to identify the difference between, uh, your doorbell versus vacuum versus the cell phone ring, and then comprehension. We're looking at what spoken language.

I always like encourage people to think about, um, where exactly is a child on this listening hierarchy? And are our expectations appropriate if we have a kid that we know has been struggling with [00:09:00] language, like maybe they're still at that identification of sound stage, or maybe they're just at the

discrimination between the different sounds that they're hearing, but we're trying to work on comprehension.

So kind of thinking about that as you're developing goals, but also too as you're, um, working on activities and planning things for the therapy room.

**Michelle Andrews-1:** Are there specific assessments that you would recommend for figuring out their level?

**Sydney Bassard:** Oh, that's a good one. So there's not any that are really out there that are like, this is a go-to when looking at like,

**Michelle Andrews-1:** Mm-hmm.

**Sydney Bassard:** uh, auditory hierarchy. They do have the castles, which is like the cottage acquisitions, uh, skills for listening and spoken language. Those have . Uh, been pretty good and they kind of look at like kids' linguistic levels.

Uh, so you can look at that for that kind of information. They have a couple of parent reports that are out there as well. Uh, but there's nothing that's like standardized or norm referenced, uh, that I can think of that really looks at those particular [00:10:00] skills.

**Michelle Andrews-1:** Okay. Okay. That's helpful. Um, So what would some goals look like? Um, if you're gonna write some goals for their I e P, say they're, maybe I'm kind of putting you on the spot to think of a goal, but maybe say they're on each of these levels. What would a kind of a generic, I know it's gonna need to be more specific to the child, but what would be kind of a generic goal that you could write for one of these

**Sydney Bassard:** Oh, , that's definitely putting me on the spot. And tough. Um, just thinking about goals. So like a deduction goal would just be just that, you know, like will detect presence of sound. Like, you know, seven outta 10 times, eight outta 10 times. 10 outta 10 times. Um, Really just kind of depending on where they're at generally, like with those I might start smaller.

Um, like do you just understand and then like the goal is [00:11:00] always that we're gonna be able to detect sound, especially if we are using devices. Uh, because not even just thinking academics, like for safety. Um, that would be really important that you understand that there's kind of sound going on. Um, discrimination.

I dunno, I think it would just kind of depend on like what exactly we're working on with that.

Um, you know, child will

**Michelle Andrews-1:** or we could change the question

**Sydney Bassard:** yeah.

**Michelle Andrews-1:** um,

let's change the question because I know you don't actually work at a school.

Uh, let's change the question to, um, an activity that you would do with each one of these

**Sydney Bassard:** Yeah. There we go.

**Michelle Andrews-1:** Yeah, that's better

**Sydney Bassard:** Uh, okay. Um, so when thinking about activities, I think that's where like functionality is really key and kind of fun. So if we're thinking of detection goals, especially if we're in a school setting, think about um, the things that like they might need to be able to hear. In order to kind of operate within a school, so like the bell, you know, we'll be able [00:12:00] to, um, detect the presence of sound so you can keep your goal general, but like your activity could be like being able to detect like the school bell ringing, uh, being able to detect the fire alarm, being able to detect the teacher's voice and be able to hear that most times by the times the kids are at school age though realistically, um, detection goals aren't necessarily like at the forefront unless.

They are new to wearing devices or unless they like got implanted, uh, a little bit later. Then thinking about discrimination, um, cool activities that I like to do with that kind of along, like align around the same thing, like if we're just thinking about like discrimination of. Sound at the sound level.

Um, you could do the same thing, like you could have the telephone and have the telephone ringing versus like a school bell. Have them identify an object that kind of goes along with each, or like, you know, if we're having the school bus, like you could have a bus, you could have a play phone, [00:13:00] you could have a bell, and then you could give them the sound and they have to kind of, um, like let us know like, which one is this?

Uh, them being able to identify kind of falls along like within discrimination. So with discrimination, like we're hearing the differences, identification, maybe we're starting to identify a little bit more of like, this is the sound that's associated with this object. Or like, they hear beep beep and they grab the bus.

Um, they hear, bring, bring, and they're grabbing the bell. So they're able to kind of easily pick out those. And then comprehension based ones are generally what most people are doing in speech therapy, um, or therapy settings in general. Uh, that . You know, maybe some following directions type stuff. Um, engaging in conversation, building vocabulary, but it's really more so still dealing with like the auditory component and not necessarily the spoken output.

**Michelle Andrews-1:** Okay. Those were great examples. Thank you. Okay, let's get into classroom modifications.[00:14:00] all should we be aware of, um, when thinking of classroom modifications? What is helpful to know?

**Sydney Bassard:** Yeah. So the classroom is where, um, all the learning, a lot of the learning in the school happens. So thinking about how we can best set kids up to be successful is what's gonna be helpful. So if we're thinking about the classroom, the one thing that we wanna think about is the configuration of how that class is set up.

And one thing that I often see recommended is where people say like, preferential seating. And that's a great recommendation, but what exactly does that mean? Uh, . It means like where the child is gonna have the best access to, uh, sound, but also to learning in general, right? So for some teachers in some classrooms, that is going to be front and in the center because that's where the board is, that's where the teacher stands.

Um, all of those kinds of things are things that we might wanna think about in other classrooms, you might have a teacher that tends to walk around as [00:15:00] they're teaching, um, or they tend to engage kids in like . A different type of way when they're providing instruction. So maybe for that particular classroom it might be best that they're sitting maybe off to the side and in the back.

It really just depends based on, um, the kind of that person and their teaching style that they kind of have. And there's nothing wrong with that. So thinking about preferential seating, but if we're thinking about in the, uh, therapy room, it's the same type of principle. We know that like, generally how a therapy room might be structured, especially if we have kids in groups.

So you would want your kid that has, um, some type of listening device to be sitting like closest to you, kind of like towards the side. And then we would wanna make sure that we're sitting, uh, closest to their best, like listening ear, like which ear has the best, um, support based on whatever their configuration is.

So that's something we can think about. Um, we can also think about too, like how we provide instructions. [00:16:00] Are, we tend to be like me sometimes a little long-winded and like you give like three or four things or like it's maybe not always simple. We might be using complex language. What we know about a lot of kids with hearing loss is that they tend to have some difficulty with complex syntax.

That doesn't mean that we don't introduce it to 'em. That doesn't mean that we don't use it, but when we're providing instruction, that's something we wanna be mindful of. , having visual supports is definitely great. Um, it's not just beneficial for our kids with hearing loss. It's beneficial for all kids.

So just having that kind of there to help guide their expectations and understanding, watching our rate that we speak at, we don't wanna go too fast to where, uh, everything that we're saying is going in one ear and right back out the other. They're not having enough time to process it and then allowing them that processing time.

Uh, we don't want to get into the habit of like, . It's quiz time, essentially, where it's like rapid fire question, question, question, [00:17:00] uh, allowing them that time to respond. So like we give them a question, we look to see that they're kind of processing it. We don't wanna just constantly keep inundating them with questions, because what actually has ended up happening in the brain is like, once I heard it, once it starts going through my processing loop, you say it again, my processing loop is restarting and that's gonna keep happening.

So thinking about those things as well. And then I think anything that you know about kids with hearing loss in the school, share this with teachers. Like anytime that I've interacted with teachers, they are always so thankful, uh, because the incidents of hearing loss is low. Uh, so it's not necessarily like they're gonna end up with a lot of kids with hearing loss within their classroom.

So kind of sharing that with them, telling them about the knowledge that you have, letting them into, uh, some of the things that could help that child be more successful is gonna be key as well.



**Michelle Andrews-1:** Yeah. Yeah. Right before you said that, I was just thinking that as [00:18:00] the S L P, you know, we're gonna make sure we know how to use their device and all the technology that they might have, and that just to make sure that the teacher, you know, is right there on the same page and understands. Everything that the child needs.

I know teachers are great at that usually, but, um, I think that can, just making sure that the teacher kind of knows what we know about, about everything that's so important. Um, okay, so now more into, uh, let's talk therapy, scheduling and type. So, you know, in the schools there's pushin, there's Groups, there's one-on-one. Um, I know this can really vary and sometimes it depends on everyone's schedule and what can even be possible. Um, but let's kind of touch on each one of those and how it, you can make it work, because sometimes you're just gonna have to, you can't always do one-on-one, right.

**Sydney Bassard:** Right, like, I mean, one-on-one is nice, but we know that realistically like that is . Not possible for [00:19:00] a lot of the kids that we're kind of working with. So I think being creative with it, there's nothing wrong with groups, um, and kind of like working these kids in with groups. But as we mentioned before, just thinking about how your group is kind of set up, thinking about like their seating within that group, um, and what kind of goals we're working on is always going to be something that you think about when you're pulling kids for groups anyway.

I think Pushin is really kind of good with this particular population in general, um, because a lot of the learning that happens like has to be direct and explicit. Uh, and that's kind of based on research too. Uh, even thinking about like vocabulary instruction for kids with hearing loss, like they need a lot of that.

Uh, direct like definition, multiple opportunities to kind of work on these things. So if we are doing some, a little bit of pushin, then not only are we able to provide the support as the SS l p, but we're kind of able to see what's going on in the classroom. We're able to kind of make sure that what we're focusing on, [00:20:00] uh, is directly applicable and more functional.

And so we're helping them to get in more of those repetitions, uh, but also kind of supporting them in that classroom-based setting. And we know that incidental learning, uh, Especially for our kids that are using listening and spoken language doesn't necessarily occur as naturally as it does for some of our kids that have, um, like normal hearing.

So we wanna make sure that we're kind of . Guiding that learning and that aspect as well. So I think that's where pushing comes in really handy. Um, and then in, even like within groups though, like incorporating as much of you can, like as much as you can of what's going on in the academic setting. And I know that that can be hard, um, and sometimes requires a little bit more work, uh, especially if you have kids that are like in different classrooms or they're not all on the same thing.

But if you can as much as possible, tie whatever you're in, Tie, whatever you're doing in the therapy room back to what's going on in the classroom [00:21:00] is gonna help these kids be so much more successful.

**Michelle Andrews-1:** Right. Yeah. I think, and that can be true for, yeah, all kids, not even just children with hearing loss. Very, very true. Um, okay, so for my next question, this is kind of broad, kind of just letting you loose here. I know, I know this is, Oh, topic that you love to talk on, but you know, how really can we implement speech and language goals for children with hearing loss in the school?

So with that, you know, we can kind of talk about, um, just lots of examples. Um, just really kind of anything that involves that, I guess.

**Sydney Bassard:** Yeah. So I think the one thing that I

love talking about is functionality of our goals. So we don't wanna necessarily do, um, the goals where we're just writing, like we'll follow one or two step directions, like that's. Great and nice. Um, but thinking about like how that is applicable for our kids with hearing loss.

So a lot of times, uh, I think of critical elements [00:22:00] as a part of that. So for anybody that's listening, that's not really sure like what a critical element is. Like we're talking about, uh, things that add to a message. So whether you're adding like a color concept, location, a. Spatial concept, uh, that might be there, a quantity that we're kind of adding to a direction that adds to the complexity.

So even if I have a one step direction, um, such as like, go get your water bottle . That's one step, right? But if I could say, go get your pink water bottle, or go get your pink water bottle that's on top of the refrigerator, uh, before you go get your pink water bottle, make sure that you wash your hands. I mean, those are still following all under that like one step category.

But I've added a subordinate clause at one point. I've added. Spatial concepts, I've added color. And so that can tend to be really complex. But think about the language that's used in the classroom. Oftentimes that's how people are talking and discussing, um, things with kids. So I think when [00:23:00] we're thinking about like goal writing and implementation of goals, that's something that we wanna think about too.

This is where I think language sampling comes in really handy, uh, because you're able to get a nice snapshot and see how that child's functional language is. We know that standardized tests can give us information in the school setting. We can't get around giving standardized tests, but we know there's a lot of bias in them.

Uh, there was a study that, uh, I wanna say that it got published in 2020, uh, that I was a part of from, um, like running, doing the analysis of the data, and then also it got, uh, helping with the publication of it. But what we found is that like our kids with hearing loss that had above average IQ on standardized measures were kind of pairing nicely with their, uh, normal hearing peers, meaning that there wasn't really a differentiation in their scores.

But when we were looking at language sampling, um, that's where we saw like kind of the differences come [00:24:00] in. So what is that telling us? As SLPs, we don't wanna just make sure that we're doing these standardized measures alone because it's not gonna necessarily tell us the whole picture. We wanna make sure that we're getting these language samples because that's where we tend to see a lot of our kids with.

Hearing loss struggle. Uh, so going back to your question a little bit about like what that looks like

in the school settings, I think that's where the functionality comes in, is we can't just look at like, how are you doing on a test? How are you doing on like these specific tasks in these isolated, uh, moments, but like providing them multiple opportunities to kind of demonstrate that knowledge.

And then we know that the school. System is a team. Uh, we have so many resources that we have available in our school and we have to use them. So this is when, like, you as the s l P can work really nicely with the teacher of the deaf who, um, is probably most likely gonna be itinerant, meaning that they're traveling, they're not seeing the kid as often, but they can report back to you as well about how that child is doing, [00:25:00] uh, specifically with maybe some of the things that you're working on, especially if there is some overlap.

Um, working with the teacher, uh, to kind of figure out the things that they're seeing as well. And then we know that in schools, like parents are a little bit more removed, but as much as possible, kind of getting that input, uh, from the outside providers too, about how exactly the child is doing.

**Michelle Andrews-1:** Okay. Yeah. It sounds like, yeah, Working with the team is really important. Which kind of leads into my next question that what are some tips that you can give us for collaborating with teachers and with teachers and other professionals?

**Sydney Bassard:** Yes. Okay. So, um, I think like the biggest thing is . We have to all come to the table having an understanding, um, that everybody has knowledge and then everybody has limitations in their knowledge. So I think having that baseline is always a really good thing because then you can draw on the strengths from each [00:26:00] person.

I think sometimes we come into these situations for collaboration. Um, . Really wanting to collaborate, but then two, also feeling a little like defensive of I need to prove that I know what I'm doing instead of realizing that like, it's okay if you actually don't know what you're doing, um, to a certain extent, like it's fine because there's other people that you can draw on their strength.

So, uh, working closely with the teacher of the deaf, I think it's going to be really, really key with these kids because like I said, sometimes there's not an educational audiologist available in a school district. Most districts are gonna have a teacher of the deaf in some capacity, and so being able to kind of tap in their knowledge, they generally have a lot of knowledge about devices.

They have knowledge about troubleshooting devices. Um, they have knowledge about . Okay, like self-advocacy and helping kids work on those types of things. Even some of like the language based goals and supports that kids might need. Uh, they're gonna have those knowledge how to even work the FM systems. So tapping [00:27:00] into them for those things, finding out more about, you know, what could you be doing, what modifications, accommodations could be going on within your therapy sessions to help these kids be more successful.

thinking about the classroom teacher, as we talked about before, as much as you can, tying in what you're doing aca um, in the therapy session with academic goals as much as possible and what, what's going on in the classroom? Uh, one thing that I constantly encourage people to do is do like what we call pre-teaching.

Uh, so since we know that some of our kids with hearing loss tend to have more difficulty with like learning vocabulary and new concepts, . Sometimes they don't pick up on it as quickly. Like if you can get that stuff a week ahead of time, and so then you're introducing them to those concepts, you're introducing them to those vocabulary words within your therapy session, that's gonna make, by the time they're introduced to it in the classroom, they've already been exposed.

And so we're adding those additional opportunities for learning, uh, but tying them back into what [00:28:00] we're doing as an SS I P.

**Michelle Andrews-1:** That sounds so helpful. So does, I guess that would involve a lot of communication with the teacher, not just at the ARD meeting, you really almost weekly. Like, Hey, what are y'all gonna be talking about next week or in, in a couple weeks? Can I get your lesson plan? Type of situations? Are you, do you recommend kind of just having a routine where you're asking the teacher for her lessons?

**Sydney Bassard:** Yeah, and I think, um, so I think that . You can maybe batch how much you ask for stuff, right? Because like nobody wants to be the

person that like, they feel like is annoying, the other professional. Um, and then also too, being realistic, we know that SLPs are super busy. And so generally when, like, unless you're working in a school that specializes in, uh, working on like listening and spoken language or working with, uh, the deaf and hard of hearing population, this may be like one, maybe two kids on your caseload at most.[00:29:00]

But the things we're talking about today are really beneficial for all the kids that are on our caseload. So like if you, um, can ask like, Hey, if you could just kind of tell me generally, like what are some of the things that you're gonna be discussing for the next, um, Two or three weeks or like, can you just provide me an update?

I know sometimes too, there's some teachers who, like, they email the parents and say, um, this is what we're working on in class. You know, make sure that so and so is kind of following along with these concepts. Ask if you can just be included on that, that email that they send to the parents. I think the one thing that we have to think about is when people feel as though we're asking them to do more work, automatically we're met with resistance, uh, because

People are like, my plate's already full and you're asking me to do more SLPs feel the same way. If they feel as though someone is asking them to do more, like they feel a little bit resistant. Um, so even with us, like thinking about how we can make this simple [00:30:00] and make it almost like a hey, like, I'm not, I don't wanna add to what you're doing, I just wanna be included.

Just like, let me know. Um, and then I think you find way more buy-in than if it feels like more work.

**Michelle Andrews-1:** Yeah. That makes a lot of sense to kind of just to be included in that email. I know, I, I bet a lot of teachers do send that out. I know my, I have, my oldest is in kindergarten and I get an email as her parent, um, what they're working on and stuff. So I'm sure most grades hopefully maybe do that. Uh, that's great advice. Um, okay, so. let's, let's also talk about collaborating with outside providers. I know that's even your specialty as well.

You're an an outside provider that would you do a lot of collaborating with the schools. Um, tell me how that relationship works.

**Sydney Bassard:** Yeah, I think that that's one of the most enjoyable parts is . Being able to work on a team. Uh, so how that can work is obviously we wanna make sure we have permissions from the parents to kind of [00:31:00] talk to everybody, but it helps to make sure that our care is holistic. Um, The private providers as well as the people that are working with the kid inside the school, we're really all on the same team and that team is on behalf of the child

So I think when we center everything around of like we want what's best for them, it tends to work a lot better. And by having that free flow and share of information, we're able to see like how are they performing in this one environment versus how they're performing in another. Are we seeing that there's a difference?

What are some of the things that we're doing in the private, um, . Practice setting or like outpatient setting that we aren't doing in school. And then what are some of the things that we're doing in school that, um, we're not doing in these outside settings? I will say that when I worked on a cochlear and plant team, that was probably one of my favorite things to do, was to collaborate with, uh, the people that we're working with my kids directly in the schools because.

Being in, um, like private practice or like a [00:32:00] outpatient setting. I was only seeing the kids for 45 minutes to an hour one time a week. I didn't get to see what things looked like outside of the four walls of my therapy room. But

when people communicated with me of like, Hey, this is how they're doing, or like, wow, they're really making progress with, um, whatever goals we're working on, or, you know, they have really benefited from having some visuals to help support, um, their language growth.

in these areas, that was so beneficial and it really like, uh, not only like kind of made me feel good at times, but it also too let us know what was working and what wasn't working. Uh, so a lot of my kids were in like total communication classroom settings. And so it was really helpful to see how much benefit they kind of had from having, uh, sign support, having visual supports there in addition to having oral unspoken language instruction.

**Michelle Andrews-1:** right? So even as the school SS I P, [00:33:00] uh, I think it'd be great to, yeah, a advocate for getting that permission to talk to an outside S L P. Outside professionals, um, yeah, whether you have, they have to sign a slip or whatever, but really pushing for that and, and helping form that relationship with any outside help for sure.

**Sydney Bassard:** Yeah, and even think about like the outside audiologists. Like there's sometimes those generally are the people that might be programming lit eyes. Um, If you have a kid that might be having difficulty with like listening in school or like we're seeing that, you know, they might have redness at the site of where their implant is attaching or their magnet isn't strong enough.

Like if there are things that you're noticing about how their kind of device is function for them in school, or even if you notice that like, hey, they are easily able to detect, um, . Some of these higher frequency sounds, but man, are we struggling with detecting some of these lower frequency sounds or we're having difficulty with [00:34:00] like words that have a lot of lower frequency in them that are, those are things that audiologists want to know because they might need to go back and do, uh, some updated mapping for cochlear implants, updated programming for hearing aids, uh, but if

You don't communicate those things like they don't know and so they think like, oh, okay, things seem to be going okay. Those are like really good functional examples for them to know what modifications and tweaks they want to make as well.

**Michelle Andrews-1:** Oh yeah. That's great information to, to keep in mind that you can really be there to support, um, yeah, the audiologists and just having that piece that, you know, they're not seeing them in their school day and they're not sitting down there and working on all these words. So, um, that's extremely

helpful to know. Um, so imagine that parents can get overwhelmed, um, you know, maybe their, their child's Just starting preschool or kindergarten. what are ways that we can help be an advocate for the parents and for the child, [00:35:00] um, to help smooth the process of, of entering into this

and entering into the school? I.

**Sydney Bassard:** humility. I think that that is the biggest thing that I kind of get back from parents that I, um, have worked with and talked with is . They are already, uh, feeling a little bit defensive sometimes, or a little bit scared of what the outcomes are gonna be. Uh, when we think about like the demographics of, uh, deaf and hard of hearing kids born to hearing parents, like most kids are born to hearing parents.

So for most people, this is really uncharted territory. They're not really sure what to expect. Um, so going with it with like that, you know, . We are working on a team, uh, we are here to support you and your kid telling, being honest as much as you can about, um, what exactly, you know, when it comes to like specifically dealing with kids with hearing loss.

And then also to being [00:36:00] a little bit honest about some of the areas and gaps in knowledge that you have, I think is always helpful. Uh, but then making sure that parents know that . You are comfortable with them asking questions that you are really doing your best with, making sure that their child is getting the best care, uh, and services provided to them.

And then always, always, always asking the questions for the things that you don't have. I know we talked a little bit about like, you know, asking parents about . Devices. Um, but also asking them too about their previous experiences with SLPs, maybe in early intervention or in, um, private settings. Also to finding out as much as you can about the communication modality that the family has chosen to use with their child, whether that be oral, whether that be, um, sign and oral, whether that be sign only, like those are things that you wanna know.

Um, and then just thinking [00:37:00] about like the big picture and kind of having that conversation about what is their goal for their child, you know, what is their goal that they wanna see for their kid in the school setting? I feel like that helps recenter and ground all conversations that I'm having with parents.

**Michelle Andrews-1:** I love that that paints a beautiful picture of that relationship and how to bond with the parents and make them feel heard and



seen, and, um, feel like their child's gonna be taken care of because I'm sure you know, that's A fear, you know, they, they're sending their child off to school. I know. Even just sitting my child off to kindergarten, it's overwhelming and it's scary.

And if there's any kind of barrier with communication that you're worried about, I'm sure their fears could be, you know, skyrocketed. So I think, yeah, having, talking with the parents, making sure they feel like you are on their side, you're advocating for their child, can go a really long way.

**Sydney Bassard:** [00:38:00] So thinking about stories of kids that I've worked with, I have really, really, um, like I said, I've enjoyed my partnerships and working with their schools to have supports with them. So, one kid that I would always, always remember is when I first started my cf, um, this kid came in, they were in kindergarten and still using a lot of jargon.

I mean, Most of their utterances were highly unintelligible, and they actually, in fact, like didn't know, um, any of their family members' names except for like, maybe mom. So that was our goal of therapy. Um, and this family too, like they used . English and Spanish. Uh, and so there was a little bit of confusion between like what was being addressed in school and what was going on.

And so that was my first time that I actually got to like, send an email and just say like, Hey, you know, I know that the family's a little bit confused. I'm new and I just wanna kind of know, um, what exactly is going on, how [00:39:00] can we all work together? And the woman who was the director was so kind and so nice, um, and sent me like all the information about

What exactly they were working on in school, what their plan was for that child, uh, the supports that they kind of had in place, things that, you know, they thought that I could do. They asked, you know, what were we working on and how we could support each other. And it was really beautiful to see. Uh, by the time I left that position, it was after close to

two years, uh, that child was being discharged from my caseload. Uh, they had made such great progress, but also too, it was because like we worked as a team. It wasn't just me doing my own thing in outpatient and the school doing their own thing, but we were really making sure that we were collaborating, we were working together.

Sometimes I would ask like, Hey, what exactly is being worked on in school vocabulary wise? How can we support that in outpatient, uh, making sure that

we incorporated those. [00:40:00] Goals. So that was like the first kind of story that, uh, that one always sticks with me. That kid will probably always have a special place in my heart.

Um, and then the other one, I had another kid that was, they were really tough. They were a tough kid on my caseload. Uh, they had just kind of moved in and it was really, really, um, Tougher the family too. Like it was just a lot of adjustments. This was not something that I think they had seen being on their radar as a family.

And what ended up happening was we had a conversation about school choices, uh, where their kid could probably get best services and go. And that family ended up moving to an area, uh, to where their kid could get some better services. And, uh, access to professionals that knew a little bit more about hearing loss and

That kid was really thriving in that school and that environment. And so even though I didn't, um, get to keep working with them because I had moved, I still stay in touch with that family to this day. Uh, and that mom has always said like, you [00:41:00] know, that was one of, um, . The things that she was just so thankful for was being able to be around a group of professionals within that school environment that like one understood kind of what their child was going through, but two was willing to communicate with all of their team to make sure that everybody was on the same page.

**Michelle Andrews-1:** I love both. Those stories really both show that humility piece that you talked about, like the first one, not being afraid to ask questions, not being afraid to kind of make it known like I'm, I don't know, 200% about this, right? Like, I, I, I need your help. Let's work as a team. Um, and then even with the other one, like, yeah, not being afraid to be like, let's, let's get help even somewhere else. We want what's best for the child. Like, whatever that is, you know? So I, I think that those are beautiful examples. Okay, so what is, what's one last closing statement or pep talk you could leave our listeners with?

**Sydney Bassard:** Yeah, I think remember as an S L P, like you are . [00:42:00] Doing the best you can. Um, when we're thinking about like these kind of specialty areas or specialty populations that we might see, you maybe had a lot of experience with it in grad school. You maybe didn't, this might be the first time you're encountering some of these types of cases.

And so allow yourself, um, opportunities to grow, be kind yourself and your knowledge and realize that there are people that are willing to support you in

that. You have a team. You're not in this by yourself. Uh, and just keep showing up the best way that you can.

**Michelle Andrews-1:** I love that. That's so encouraging. Okay, Sydney, this has been awesome. I, I've loved getting to chat with you today. You've given us so, so much information and I know will be so helpful for school SLPs. And non-school SLPs. Really just a really great picture of the collaboration here between, um, SLPs and, uh, other professionals. , Thank you for listening. We hope you learned something today.

All of the [00:43:00] references and resources throughout the episode are listed in the show notes and also listed on the PEP Talk podcast for SLPs website. If you want to learn more about Sydnee, make sure to check out her Instagram at the listening slp, where she shares awesome information on hearing loss, literacy, and more. Sydney. Thank you again for joining me here today.

**Sydney Bassard:** Thank you.

**Michelle Andrews-1:** Thank you. Bye.