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FOCUS ON ALUMNI

This last July I wrote to Dr. Gail Chermak, congratulating her on receiving ASHA’s Honors of the Association. When she wrote me back, she asked if I would be interested in contributing to the next Wavelength. “Of course!” I replied. It’s been a long time since I have written anything for Dr. Chermak, but I do remember her class in the spring of 1988 in which I took my last final in graduate school. As I was ending my time on the Palouse, I was also helping my mentor, Lynn Larrigan (the department’s former internship coordinator), move in to her new office space in the fancy new WSU-EWU Speech Clinic in downtown Spokane. I had taken all of my speech classes in Daggy Hall in Pullman, and now the department was on the brink of big changes. Little did I know how much the department would grow, or how much I would learn and experience in the next 26 years. The twists and turns have been fun!

The first years after WSU were a crazy whirlwind of jobs working with multiple populations in a wide variety of settings: schools, Children’s Hospital in Seattle, birth-to-three programs, private pediatric clinics, Group Health Cooperative outpatient clinic, home health, more schools, and per diem work in hospitals and skilled nursing facilities. During this time, I married Jack (WSU Music Education, 1988), started a family, and eventually was able to just work per diem at Providence St. Peter Hospital in Olympia. It was at this time that I stumbled upon the world of research ethics. An acquaintance of mine, who was a staff MD at the Western Institutional Review Board, suggested I inquire about becoming a board member at WIRB after a conversation we had about informed consent in people with aphasia.

I spent 12 years at WIRB as a board member and panel chair, flanked by some of the smartest and friendliest people I will ever meet, making decisions together involving the protection of human research subjects. WIRB is the world’s largest independent IRB, and we reviewed research from pharmaceutical companies, medical schools at large universities, and  

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It has been another exciting year for Speech and Hearing Sciences. Our affiliation with the College of Medical Sciences continues to provide new opportunities for collaboration, growth, and visibility across the region. As many of you know, Governor Inslee recently signed into law a bill that gives Washington State University the authority to create an independently-accredited medical school in Spokane. We are delighted to be part of the considerable momentum that is sure to advance our work, producing cutting-edge research, innovative educational programs, and responsive intervention programs that meet the needs of our community, our state, and our region.

Our faculty is dedicated to the improvement of patient care through education, research, and practice. They are studying and treating complex disorders, such as autism, childhood apraxia of speech, childhood deafness, and amyotrophic lateral sclerosis (ALS), and taking what they learn to Spokane and beyond. Always placing our students first, faculty explore new ways to deliver the best educational preparation to our academically-talented, highly-engaged, future speech-language pathologists and audiologists.

In this issue of Wavelength you will read about some of the many accomplishments of our faculty, students, and alumni during the past academic year. Once again, a number of our undergraduate and graduate students were recognized for their academic and clinical excellence, as well as for their involvement in the community. Our faculty continued to earn recognition for their exceptional contributions to our professions, education, clinical practice, and research. As measured by a range of metrics—awards, honors, scholarships, grants, publications, presentations, and consultations—our faculty, students, and alumni continue to excel.

As always, I welcome your ideas and your feedback. The joys of leading this vibrant department, powered by intellect and driven by innovation and compassion, are immeasurable and a continuous source of pride. I hope you will find the work cited in this issue of Wavelength as compelling as I do. As I look ahead to the future of our professions, I am filled with optimism for what we can accomplish.

In closing, I wish to thank each of you who has given so generously to the department during the 2015 fiscal year. Your name will be prominently displayed in the 2014-2015 WSU Foundation Annual Report, which will be published in fall 2015. Your gifts will continue to provide new opportunities for our ongoing work. You will find a link to this issue and all prior issues of Wavelength as well. Also, we would like to include news of your professional and personal journeys in our next issue, so please e-mail me at chermak@wsu.edu. As always, I welcome your ideas and your feedback.

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It is my understanding that the diagnostic criteria for autism have changed, and that there is a new label called “Social (Pragmatic) Communication Disorder.” How will these changes impact access to care and the service delivery provided by the SLP? Is Social (Pragmatic) Communication Disorder the same thing as Asperger’s Syndrome?

In 2013, the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, DSM-5 (APA, 2013) reflected changes to the diagnostic criteria for autism, bringing with it both controversy and confusion regarding specific criteria for autism spectrum disorder (ASD)1. The DSM-5 is the tool used by a developmental pediatrician, a clinical psychologist, or a neurologist to diagnose the disorder. Prior to these changes, autism was conceptualized as a “spectrum” disorder, meaning that characteristics of autism varied in degree in terms of severity. The autism spectrum was associated with other diagnostic labels such as “Asperger’s syndrome,” “Rett syndrome,” “pervasive developmental disorder, not otherwise specified” (PDD-NOS), and “childhood disintegrative disorder.” Now, under the DSM-5 criteria, only the term “autism” is used to describe the associated behavioral characteristics, which include repetitive, restricted interests, hypo- or hyper-sensitivity to environmental stimuli, deficits in social reciprocity and communication, with or without intellectual disability. Additional specifications include the identification of comorbid health conditions and the presence or absence of language impairment. While previously discussed as “being somewhere on the spectrum,” these new criteria shape the conversation about deficits associated with autism as subtypes, with varying “levels of support” needed to differentiate degree of severity. This new model for diagnosis incorporates a subtyping framework of “Level 1,” “Level 2,” and “Level 3,” the latter being the most impacted level of severity.

As proposed DSM-5 criteria were released, the omission of “Asperger’s syndrome” was not received positively by those individuals diagnosed with this label, as there was concern that the new criteria did not fit presenting characteristics and there had grown a culture related to what it means to have Asperger’s syndrome. Many of these individuals had begun calling themselves “Aspies” and “Neurotypicals,” all of whom understood exactly what that meant relative to how they engaged in the world. There had been some pride within this group that had celebrated unique traits, emphasizing their positive contributions to society, and it was threatening to potentially lose this identity.

Individuals with Asperger’s syndrome and ASD advocates were not proponents of an additional new category that brought with it even more confusion. This category, similar to ASD, known as social (pragmatic) communication disorder (SCD), includes difficulty with the use of verbal and nonverbal communication, difficulty following rules for conversation and storytelling, understanding what is not explicitly stated, and the inability to match the context or needs of the listener, all in the absence of key characteristics of autism (APA, 2013). The main question about SCD was whether or not individuals with Asperger’s syndrome met these criteria, and if so, many wondered whether that might influence access to services. Now with two years of clinical practice following release of DSM-5 criteria, it appears there is more clarity around our understanding of the criteria for autism and the debate is subsiding. The main discerning criterion between autism and SCD is the presence or absence of restrictive interests and/or repetitive behaviors, which are quite often found in individuals formerly diagnosed with Asperger’s syndrome. Individuals diagnosed with SCD do not display behaviors such as restrictive interests in specific games or fictional characters or shows, repetitive behaviors related to insistence on sameness and routines, and/or compulsive behaviors such as always taking the same way to get somewhere without changing routines. Practitioners have been cautious in using the diagnosis of SCD and many individuals formerly meeting criteria for Asperger’s syndrome are now being identified under autism level 1. It is likely we will begin to see an increase in the use of the SCD diagnosis over the next few years, as the medical community becomes more familiar with these often subtle distinctions.

Whereas the DSM-5 influenced the way we conceptualize autism, recent changes in health care legislation influenced access to services. There has been a celebration in the advocacy for individuals with autism, as legislators work on behalf of this population to ensure access to intervention. In 2013, in Washington State (as in many other states across the nation), new legislation required private and publicly-funded health care insurance plans to provide benefits for intensive, evidence-based neurodevelopmental therapy for autism. Two distinct changes regarding healthcare benefit coverage was the addition of the “ABA Benefit” (i.e., applied behavior analysis) under the Medicaid system and the lifting of the age cap associated with autism, requiring approval of services beyond age 8 years. This change in legislation opened the door for access to intensive behavioral intervention and for services such as speech-language therapy at all ages across the lifespan. Some states are still working out reimbursement issues. Washington State was one of the first to support access to benefits and the use of evidence-based practices set forth by the National Standards Report (National Autism Center, 2009). Specialized clinics and teams focusing on autism and neurodevelopmental disorders are emerging across the state to meet this new demand for services.

Although changes to diagnostic criteria brought about initial challenges, it appears two years out that these criteria are assisting physicians in more clearly specifying the severity and the needs and supporting better access to services. As with evaluation of other neurodevelopmental disorders, there has been a substantial shift toward an interprofessional model to support earlier identification of autism. The speech-language pathologist (SLP) plays a key role in this process (ASHA, 2007), and is skilled at assisting in differential diagnosis of autism from other language-based disorders. The subtle distinction between autism level 1 and level 2 and specificity for SCD necessitates thorough language evaluation, increasing the demand for SLPs with expertise in ASD. As an essential member of the diagnostic and treatment team, the SLP changes quality of life outcomes for individuals with autism, despite diagnostic challenges. We should maintain focus on the exceptional and unique traits of those we serve, and of our contributions as a profession to providing comprehensive care.

1Although autism is now considered a distinct categorical diagnosis based on the DSM-5 called “autism spectrum disorder,” current accepted practice regarding referencing characteristics of autism in the research literature includes use of the terms “autism” and “ASD” interchangeably to describe all individuals at distinct levels of severity. These individuals must also demonstrate restrictive, repetitive, behavior and social communication deficits in order to meet the definition of autism or ASD.
The Speech and Hearing Sciences faculty continue to foster an environment in which education, research, and clinical practice converge to instill a passion in our students to make a difference in the lives of the people we treat. Our faculty’s professional contributions and devotion to our students have once again earned them commendations for their exceptional teaching and mentoring, research, clinical innovation, and outreach. Their efforts ensure that future generations of professionals are prepared to provide the best possible health care.

- Faculty published six refereed articles, two invited articles, eight book chapters and one book; secured two grants; and presented 13 refereed papers and 18 invited papers, seminars and workshops at international, national, regional, and state professional and scientific conferences and institutes (e.g., American Academy of Audiology [AAA], American Speech-Language-Hearing Association [ASHA], the International Child Phonology Conference, the Linguistic Society of America, the Washington State Indian Education Association, and the Washington Speech, Language, Hearing Association [WSHA]). Three faculty received awards from the university, and state and national professional organizations.

- **Associate Professor Ella Inglebret** was admitted to the WSU Teaching Academy in recognition of exceptional teaching and mentoring.

- Inglebret co-authored *Honoring Tribal Legacies: An Epic Journey of Healing, Volume II: Guide to Designing Curriculum*. She presented a poster on the preparation of university students to implement the common core, with a Native American focus. Her poster was conferred the ASHA Meritorious Poster Award for “extraordinary, exceptional, and innovative work.”

- **Clinical Assistant Professor Georgina Lynch and Associate Professor Nancy Potter** secured a WSU Spokane Office of Research seed grant to study facial response to visual stimuli in individuals with autism spectrum disorder (ASD).

- **Lynch** authored a chapter on augmentative and alternative communication for individuals with ASD in *T. Cardon’s Autism and Child Psychopathology: Technology and Treatment of Children with Autism Spectrum Disorders* published by Springer.

- Lynch co-authored an invited article in the *WSHA Communiqué* redefining the speech-language pathologist’s (SLP) role in serving children with ASD.

- Lynch presented an invited session for an ASHA Online Conference, and two co-authored presentations at the ASHA annual convention, one on social language skills in young people with high-functioning ASD, and the second poster co-authored with **Professor Chuck Madison** comparing SLPs’ intervention practices for ASD in the U.S. and Taiwan at the WSHA convention.

- Madison presented two additional posters at ASHA: one on stress laryngeal incompetence and a second on a simulated shopping task in patients with acquired neurological conditions.

- **Clinical Associate Professor Amy Meredith** contributed a chapter on rating speech characteristics and counseling in children’s speech sound disorders to *Children’s Speech Sound Disorders* published by Wiley-Blackwell.

- Meredith co-authored a poster on the effects of a low-tech augmentative and alternative communication device on the functional communication of a child with childhood apraxia of speech at the ASHA convention and a second poster on a closer look at velopharyngeal insufficiency at the WSHA convention.

- For the fourth consecutive year, Meredith led a group of UPCD students to Guatemala as part of the Hearts in Motion mission to assist children and their families before and after cleft palate surgeries.

- Potter co-authored an article on developmental outcomes of school age children with Duarte galactosemia in the *Journal of Inherited Metabolic Disease*.

- **Clinical Professor Leslie Power** served as president of the Washington Speech-Language-Hearing Association.

- **Clinical Assistant Professor Karen Simpson** was awarded the 2014 Honors of the WSHA, the highest honor WSHA confers, in recognition of her outstanding contributions to the profession.

- **Assistant Professor Mark Vandam** published an article on the acoustic characteristics of the clothes used for a wearable recording device in the *Journal of the Acoustical Society of America*.

- VanDam co-authored two papers published in *Ear and Hearing*: one paper focused on the linguistic input, electronic media, and communication outcomes of toddlers with hearing loss; the second paper described an automated vocal analysis of children with hearing loss and their typical and atypical peers.

- VanDam and **Visiting Professor Paul DePalma** published a paper on the fundamental frequency of child-directed speech using automatic speech recognition in the IEEE proceedings of the Joint 7th International Conference on Soft Computing and Intelligent Systems.

- VanDam, Potter, and graduate students Hannah Ahmann and Alyssa Anderson presented a poster on telepractice assessment of receptive language using the Peabody Picture Vocabulary Test at the International Child Phonology Conference.

- VanDam, DePalma, and graduate students **William Strong** and Enna Kelly presented on child-directed speech to preschoolers who are hard-of-hearing at the Linguistic Society of America.

- **Professor Gail Chermak** was awarded the 2014 Honors of the American Speech-Language-Hearing Association (ASHA), the highest honor ASHA confers.

- Chermak co-authored a chapter in G.G. Celesia & G. Hickok’s *Handbook of Clinical Neurology* as well as a co-authored paper comparing temporal resolution tests in the *International Journal of Audiology*.

- Chermak co-presented an industry update on her new web-based auditory training exercises—Sound Auditory Training TM. presented an invited, one-day course on CAPD exercises—Sound Auditory Training TM. at the Children’s Hospital of Saskatchewan in Saskatoon, Canada.

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Faculty engaged in extensive outreach to local, regional, national, and international communities in the areas of: assessment and intervention with multicultural populations, autism spectrum disorder, central auditory processing disorder, hearing disorders in autism spectrum disorder, central auditory intervention with multicultural populations, communities in the areas of: assessment and local, regional, national, and international faculty engaged in extensive outreach to Native Americans.

- Madison and Meredith volunteered their time and expertise to the Spokane Maxillofacial Review Board and the children and families they serve.
- Inglebret served as a consultant to speech-language pathologists across the nation regarding cultural issues in service delivery to Native Americans.
- Lynch continued expanding partnerships with the Northwest Autism Center and the ISAAC Foundation, providing interprofessional clinical training and community outreach.
- Meredith and Potter offered Camp Candoo (which they founded in 2013) in our University Hearing and Speech Clinic, an intensive oral motor and literacy summer camp for children with severe speech sound disorders.
- Potter organized the eight multidisciplinary forums focused on living with amyotrophic lateral sclerosis (ALS) for professionals, students, and individuals and families of individuals with ALS on the Riverpoint campus, served as a consultant for the Galactosemia Foundation, provided a hands-on demonstration of resonant voice therapy to the Dyscoveries Dystonia Support Group at St. Lukes Rehabilitation Institute, and is an advisory board member of the ALS Association-Evergreen Chapter.
- Simpson served as the UPCD lead liaison with the Spokane’s public schools.
- Power served as the UPCD lead liaison to the network of off-site master clinicians who supervise our students placed in clinical rotations across the state, region, and nation.

**TRANSITIONS**

We are delighted to welcome Anna Brown, our new undergraduate academic coordinator/advisor to our team. Anna assumed Katie Smith’s position in September 2014 as Katie began a new chapter with her family in Tennessee. Since earning her master’s degree in teaching English as a second language from Eastern Washington University (EWU), Anna has served as adjunct faculty in the EWU English department and most recently as a writing retention specialist and an Eastern Scholars Coordinator in the Academic Success Center of EWU. Anna has been integral to interprofessional event planning on our health sciences campus. Students truly appreciate her energy and her enthusiasm!

We also welcome Jason Trosine, our new graduate program coordinator, replacing Doug Stephens, who accepted a new challenge in Portland, OR. Following 20 years of service in the US Air Force, Jason earned a dual master’s degree in management and leadership and human resource development from Webster University. For the last three years, Jason has served as the student services representative for Webster University on the Fairchild Air Force Base. Since joining us in September 2014, Jason has recommended and implemented several changes that have streamlined and increased the efficiency of department processes.

We extend a warm welcome to Assistant Professor Lauren Swineford who joins the department in fall 2015. Since earning her PhD from Florida State University in 2011, Dr. Swineford has taught at both Gallaudet University and the University of Maryland. She completed a postdoctoral fellowship and a research fellowship at the National Institute of Mental Health, Pediatrics and Developmental Neuroscience Branch. Dr. Swineford’s research focuses on prelinguistic and early language development and symptoms of autism spectrum disorder (ASD). We look forward to her many contributions to our program, as well as her research that will further our understanding of ASD.

**THIRD ANNUAL CAMP CANDOO SUMMER CLINIC**

Clinical Associate Professor Amy Meredith and Associate Professor Nancy Potter will offer the 3rd annual Camp Candoo this summer. It’s a two-week intensive camp for children ages 4-8 with severe speech sound disorders. Parents of prospective campers are asked to submit short videos of their children engaging in conversational speech.

We have had great interest in this camp and have had to turn away children whose speech was not severely affected. During the first year of our camp, the children attending lived a drivable distance from Spokane. Last year, interest in the camp broadened; we had local children and children from adjoining states and Canada. This year, we have expanded the locations from which campers hail, including Minnesota, Arkansas, and Oklahoma. Several of the campers are returning from previous years.

New to this year’s camp is our expansion to two sessions, a morning session with younger children and an afternoon session with older children. Each camper will be paired one-on-one with a graduate student. We will work on increasing the children’s functional intelligible speech and early literacy skills.

During camp we will also conduct a pilot research study examining the effects of intensive therapy on the conversational intelligibility of children with severe speech sound disorders resulting from identified genetic deletions.
GUATEMALA 2015 UPDATE

Clinical Associate Professor Amy Meredith recently returned from her fifth spring break in Zacapa, Guatemala with the organization, Hearts in Motion (HIM). Joining her from the Spokane campus this year were five SHS students (Martha Cuevas-Ramos, Hector Arriaga, Rosanne Sumalpong, Cora Macy, and Natalie Garza); Vicky Sattler, a nursing faculty with two nursing students; three Nutrition and Exercise Physiology (NEP) students; and Alyson Blum, a WSU pharmacist who will bring three PharmD students with her next year. In addition, a practicing SLP from California joined us this year, giving our SHS students another professional to learn from. (Note to SHS alum, you too can join us on this adventure!)

When returning from Zacapa, we are often asked, “How was it?” Answers typically include words like GREAT, LIFE CHANGING, and AMAZING! The next question is often, “What did you do there?” This one takes a little more time. The Nursing, NEP, and Pharmacy students and faculty spend most of their time in the rural medical clinics providing basic medical care and education on nutrition and lifestyle. The Nursing people also spend some time in the hospital helping children prepare and recover from cleft related surgeries. Meanwhile, the SHS crew splits into two teams to work at a rehabilitation clinic, nutrition center, or the cleft team at the hospital.

The days can get crazy, but we are driven by ASHA’s vision, “Making effective communication a human right, accessible and achievable for all.” How does one do this in a one-week trip, where patients are typically only seen one to two times? In general, we advocate for people with communication, cognitive and feeding disorders by providing assessment, education and materials to the families and teachers who will work with the person the most.

To be more specific, in the rehab clinics and nutrition center, we teach families and caregivers how to:

- use simple communication books with pictures and functional phrases for non-verbal children and parents.
- feed their loved one with dysphagia more safely and modify their diet for easier swallowing.
- provide a more nutrient-rich diet with the food that is most easily accessible and affordable, with the assistance of our NEP students.
- be more informed about the effects of medications with the assistance of our pharmacist.
- use visual schedules for increased independence with ADLs for patients after brain tumor removal.
- increase joint attention and other pre-linguistic skills for children with profound cognitive impairments.
- encourage correct articulatory placement to improve intelligibility.
- show how to use video modeling (yes, they can do this with their smart phones, which many of the families had).
- use Phonic faces, a cued speech system for teaching grapheme-phoneme awareness and early literacy skills.
- provide Guatemalan sign language books for children who are deaf and non-verbal children who are capable of using some signs (we are currently working on a Guatemalan baby sign book for more impaired children).
- at the hospital we:
  - assess speech and hearing and make referrals to the surgeons for secondary cleft repairs.
  - emphasize the need to return for a palate repair when the child arrives for their initial lip repair.
  - educate the families as to how to help their children work on speech, as they typically don’t realize that surgery alone is often not enough.
  - listen to the family’s belief system as to what they think the cause is and try to alleviate guilt when they think it is their fault.
  - listen to the heartaches of parents as they tell us their children have been bullied out of school for the way they look, talk and read.
  - give the parents hope that their children can be taught what other children are taught.
  - read to and play with the children as they anxiously await surgery.
  - sit with parents as they nervously wait for their children while they are in surgery.
  - help nursing explain post-op instructions and answer any questions the families have about surgery, recovery, when to go back to school.
  - these lists are long, but they still don’t fully share what we do in Zacapa and they certainly don’t explain what makes the trip so amazing. What makes the trip life changing are the relationships we build when we are there. We don’t always take the time in our typical daily interactions stateside to be with people like we are when in Guatemala. Perhaps it is the language barrier or the cultural differences that put us on full alert to understand as best as possible and thus we are fully present with that person, listening to their stories, and responding to their emotions and questions with an open mind and an open heart. Hence, rather than returning each night to the hotel exhausted, we return enriched.
Speech and Hearing Sciences students were recognized for outstanding scholarship, leadership, and service in 2014-2015.

Jodey Miller was named the Outstanding Senior in Speech and Hearing Sciences. Seniors Kaitlyn Breazeale and Jessica Jones received Academic Achievement and Diversity Scholarships. Senior Martha Cuevas –Ramos received a WSU Spokane Chancellor’s Award. Senior Laura Gonzales was recognized during commencement ceremonies for her determination and scholarship. Junior Haille Heid was awarded the Maynard Lee Daggy Scholarship in Speech and Hearing Sciences. Junior Brenna Hendrickson was named the Edward Gwin Scholar in Speech and Hearing Sciences. Junior Norman LeTempt was awarded a Muckleshoot Scholarship. Senior Hannah Matalone received a WSU Office of Undergraduate Research Azvil Scholars Fellowship and presented her research poster at the WSU Showcase for Undergraduate Research and Creative Activities (SURCA) and the National Conference on Undergraduate Research (NCUR) in Spokane.

A number of seniors graduated with honors: Mackenzie Mongahan graduated summa cum laude; Hannah Fant, Jessica Jones, Hannah Matalone, and Jodey Miller graduated magna cum laude; and Alicia Aldendorf, Aaron Couture, Leticia Emerson, Laura Gonzales, and Rachel May graduated cum laude.

Graduate students also earned honors and awards. Elizabeth Clark received the Outstanding Speech and Hearing Sciences Graduate Student Commencement Award. Kaitlin Woychick was honored with the Lynn Larrigan Clinical Excellence Award. Emily Anderson was awarded a Blankinsonship Scottish Rite Fellowship and Rachel Bechtolt was awarded the Scottish Rite/ RiteCare Scholarship, both from the Scottish Rite Foundation of Washington. McKenzie Desjarlais received an American Speech-Language- Hearing Association Minority Student Leadership Program Award, a Muckleshoot Scholarship, and a Creighton Scholarship for Native American Students in Allied Health Professions.

In addition to academic achievements, Speech and Hearing Sciences students demonstrated leadership and dedication to the university and profession this past year in various service and recruitment activities. Brenna Hendrickson represented her peers in the Associated Students of Washington State University Spokane (ASWSUS) student senate. Seniors Martha Cuevas-Ramos, Hanna Fant, David Shuren, Jessica Swift and Laura Gonzales provided leadership in the UPCD Multicultural Club, which promotes diversity, supports culturally and linguistically diverse communities locally and abroad, and hosts community fundraisers on the Spokane Campus, such as Talent Night and Parade of Nations. Seniors Rachel May, Jessica Jones, and Hannah Matalone, along with junior Haille Heid answered questions from Pullman students considering certifying in our Spokane-based undergraduate program at our annual Spring Celebration held in Pullman.

NOTES FROM NSSLHA

The UPCD National Student Speech Language and Hearing Association (NSSLHA) enjoyed a productive 2014-2015 academic year. We hosted ‘Education Nights’, engaged in a number of fundraising activities, and participated in several campus activities, as well as community service.

We hosted two Education Nights for students on campus and community members in Spokane. In the fall, we had the pleasure of learning from Jason Young, an attendee from Eastern Washington University’s Successful Stuttering Management Program (SSMP). Kim Kriegar, the SSMP speech-language pathologist (SLP) and a long time service provider for the Mead School District, also gave an eye-opening presentation about stuttering and how to approach it as an SLP. Next in the lecture series, Dr. Jane Pimentel (EWU Professor, Department of Communication Disorders) gave an inspiring lecture on memory and dementia.

FUNDRAISING

Each year, our NSSLHA LOVES Campaign selects an organization for focused fundraising. This year, we selected Hands & Voices, a non-profit, parent-driven organization dedicated to supporting families of children who are deaf or hard of hearing. Hands and Voices provides education, resources, and support for all the different approaches to coping and living with deafness or hearing loss. The UPCD NSSLHA chapter met our goal of raising a minimum of $500.00 through the sale of UPCD water bottles, t-shirts, and sweatshirts. Profits from these sales also allowed us to donate to the Spokane Guilds’ School, which is dedicated to providing neurodevelopmental therapies to children ages birth to three years.

Campus Involvement

NSSLHA worked diligently to promote the NSSLHA organization, the UPCD program, and the professions of speech-language pathology and audiology at all WSU Spokane orientation events. This helped us achieve one of the highest NSSLHA membership rates in recent years. With 96 members, NSSLHA was present at every campus event this year, including the Health Fair and the WSU Career Fair. NSSLHA members also worked with other disciplines on campus during the Fall and Spring Previews to demonstrate how we interface with the other health profession majors on campus.

In the fall, several NSSLHA members traveled to the Washington Speech-Language-Hearing Association Convention to volunteer and connect with professionals in the field, as well as with other NSSLHA chapter members from all over the state. Community Service and Philanthropy

Our NSSLHA group deeply values the importance of giving back to our community. We started off the year at the Annual Walk to Defeat ALS (amyotrophic lateral sclerosis) in Spokane. Together with the generous efforts of NSSLHA chapter members, officers, and faculty, we raised nearly $1,000 for the local ALS chapter. NSSLHA members volunteered at multiple HOPE (Hearing Oral Program of Excellence) School events and we participated in the 2015 March of Dimes to raise awareness and funds to promote care of premature infants.

NSSLHA hosted a campus-wide book drive to benefit the women’s and children’s shelter, Anna Ogden Hall. In each donated book, we placed a pamphlet created by a team of chapter members, which provided helpful tips for parents to promote literacy skills while reading. In only two weeks, we surpassed our donation goal and collected more than 600 books for children and adults. With such a large collection of books, we also were able to donate almost 200 children’s books to the Spokane Guilds’ School.

NSSLHA members also volunteered with the ISAAC Foundation, a local organization which helps families access therapy services for children with autism. We helped set up one of their events, as well as run their silent auction, take photographs, and sell merchandise.

We take great pride in promoting our field while also helping those within our community. These meaningful service opportunities continue to remind us why we are in the caring professions of speech-language pathology and audiology.
It's not easy sitting in a roomful of strangers, talking about how your body is failing you. It's not easy admitting (to yourself and others) you can no longer take care of your own bodily functions. It's no fun talking about how the simple task of eating a meal has become a tiring adventure.

But those details are what made WSU Speech and Hearing Sciences’ eighth annual ALS Forum so enlightening and interesting. The forum was held on the Spokane campus in October 2014.

Six people with various stages of amyotrophic lateral sclerosis, also known as Lou Gehrig’s disease, and their caregivers talked for 90 minutes about the day-to-day challenges of living with the fatal neurodegenerative condition.

“I'm told I speak well and clearly. I'm very careful with my speech and my enunciation,” said Morgan Noesen, whose wife Joni sat to his right. “But it's exhausting, even more so than eating.”

Indeed, fatigue was a common theme for the speakers. As their conditions progress, virtually all of their day-to-day duties take more energy than ever.

The Daily Grind

For most, the daily routine includes visits by home health aides and therapists.

Retired mining engineer Cindy Moore said her caregiver comes in the morning to help with her medicines and breakfast. The aide softens Moore’s food for easier eating, then helps her shower, dress and do range-of-motion exercises. By then, Moore is ready for a rest, so she watches TV, answers her email and eats a lunch prepared by her caregiver. The afternoon brings more of the same, capped by dinner at 6. Five nights a week, the aide then goes home and Moore gets herself ready for bed. She said she’s trying to remain independent for as long as she can.

Jeff Trull no longer has that luxury. He suffers from a rare combination of ALS and multiple sclerosis. His lawyer’s mind is still sharp, but his body doesn’t want to move. A caregiver works at least four hours a day in his home, helping his wife Jennifer tend to his needs.

Trull spends his days in a motorized wheelchair, using a joystick to control its movement. He can speak using a computer with an automated voice. His own voice is barely audible and he can no longer feed himself; a tube pumps nutrients into his stomach. He can’t lie down because that makes breathing and swallowing impossible. His wife says his body is making extra saliva, so to keep him from aspirating, she has to sit him up as much as possible. That includes at bedtime.

Morgan Noesen can no longer work outside the home, but he helps with domestic duties. His daily routine includes exercises to keep his ever-stiffening body from cramping. He finds himself using the grab bars and walls in the shower more often to help keep his balance. And he has to be increasingly careful—and slower—when he eats, drinks and brushes his teeth so as not to inhale what he has in his mouth.

Larry Coombes dubbed himself “the most blessed panelist up here. I can still dance if I want.” He’s also still the main cook at home.

“But it’s not worth the hassle to make what I used to make. It’s just too exhausting,” he said.

Recently, Coombes had a craving for a salami sandwich, which took him 10 minutes to make. By the time he finished, the craving was gone. Now he and his wife settle for simpler meals; peanut butter and jelly sandwiches and chicken nuggets are staples. Coombes says he can still go out to eat occasionally, but there are certain foods (such as chicken on the bone) that he just can’t eat anymore.

Difficult Decisions

As their ALS advances, many patients face difficult decisions. For example, when a person can no longer feed himself, should a tube be inserted to provide nourishment?

Nick Wood from LifeCare Solutions, a company that provides home care for ALS patients, said he counsels families about their feeding options. Some choose liquid formulas, administered through a tube. He said they work well for some, but not for others. The main concern is getting patients enough calories to keep them from losing weight.

Jeff and Jennifer Trull chose a feeding tube for him. But Vernon Westgate’s wife said no, citing her strong evangelical Christian beliefs. He fed her until she died a few years ago.

Cindy Moore is also planning to refuse a feeding tube. But she’s still well enough that she doesn’t have to make that decision yet; when she does, she said she reserves the right to change her mind. (continued to pg.9)
TRUE STORIES

When it All Started

Most of the panelists can point to the day, or at least the month, in which they first noticed their ALS symptoms. Cindy Moore said hers began in the spring of 2009 when she felt twitching in her right side and weakness in her right hand. She initially thought it was a pinched nerve. Her ALS diagnosis came a year later.

Tom Neary remembered the summer of 2011 when he lost a lot of weight. He said his fingers became weak and all he wanted to do was sleep. Doctors checked him for cancer and didn’t find any. Eventually a neurologist diagnosed his ALS and a second neurologist confirmed it.

Larry Coombes cited one particular day, January 2, 2012. He was working in a parts warehouse and his hand went to sleep. He thought he had developed carpal tunnel syndrome, so he went to his doctor. He remembered the physician telling him, “Carpal tunnel? That’s the least of your worries.”

After a round of tests, Coombes said his doctor told him: “Congratulations, you have ALS.”

That was a callous way to break the news, but it wasn’t an isolated case. Others also told stories about providers’ poor bedside manner.

Tom Neary said his doctor gave him a two-year prognosis and urged him to begin putting his affairs in order.

“That was a big shock when what we really wanted was some hope,” Neary said.

The news sent Neary and his wife Joan looking for help. She says they found some at Spokane’s Mann-Grandstaff VA Hospital, where “it was night and day. The support there was wonderful and there was actually some cheerfulness.”

Post-diagnosis life can become very chaotic, said Daniel Bourson, the patient on the panel with the longest battle against ALS, 11 years.

“We have to make lots of appointments with lots of support people,” he said. “We have time to think about what we’re going through. We have lots of questions.”

Nothing is certain with ALS, except the ending. Bourson asked audience members to learn what they could about the disease.

After graduating with my master’s degree in 1994, I worked for 10 years at Sacred Heart Medical Center in Spokane. I then moved to the West side and served for four years in the Longview, WA area (Progress Center; birth-3). I returned to the Pullman, WA area in 2007 and currently I am one of four speech-language pathologists at Summit Therapy and Health Services, a department of Pullman Regional Hospital. I serve both inpatient adults and outpatient pediatric patients. I also coordinate the Pullman Feeding Team for Children, an interdisciplinary team, as well as a new service at the hospital, the Prescription Pets Program (PPP). This new program is part of a larger volunteer effort within the hospital setting to provide comfort and healing through the senses; in this case, through interaction with animals and their human handlers.

One of my PPP patients gave me and my family an unexpected gift when she learned that we had lost our beloved family pet. I was at work at Pullman Regional Hospital and was asked to complete a cognitive evaluation on a patient who’d previously been living alone. The physician was trying to determine her ability to return to her home. As the patient and I were talking, the subject of dogs came up. It turned out she had a black standard poodle named “Lily.” I was excited to tell her our family loved poodles and in fact had just lost our younger one, a 5 year old purebred black standard poodle named “Rico.” Despite buying him from a breeder, he had suffered a number of illnesses that we had been trying to manage but had ultimately wreaked havoc on him. He died slowly and painfully until we finally had him put to sleep. The next day I returned to check on the woman, “Anne.” When I arrived in the room her family asked if I was “the” speech therapist with the poodle. They informed me that they had been talking with Anne, and that she wanted to give our family her poodle, Lily. This dog was the love of her life and it was the dog that had prevented her from moving to California or to a nursing home sooner. She said it “was meant to be” that I was sent there to see her and they were hoping I would say “yes.” Tears erupted and I was no longer a therapist, just a person experiencing nothing like I’ve ever been through. It’s amazing how much animals affect us! I felt so much relief, joy and gratitude all at the same time. Because of their generosity and trust in me, our family now has a loving, active and HEALTHY standard poodle! She is amazing! There are now 10 PPP registered teams serving employees and patients in the capacity of comfort visits in Pullman Regional Hospital.

Probably no surprise to anyone who has heard my story about Lily, I serve on the board of directors for the Whitman County Humane Society. As to the people in my life, my husband, Rod, and our children, Abby (14) and Blake (9) keep me busy with our other hobbies and interests. It is a great life!

Kelly Sebold, ’94 with Lily

ALUMNI NEWS

Vickie Frick (B.A. ’80) continues her long career in public schools and community colleges. After earning her master’s degree in special education, Vickie served as a language consultant in a primary classroom. Subsequently, she has been a classroom teacher, transition specialist, autism specialist, and behavioral/autism consultant for a residential facility. Presently, Vickie is a vocational transition specialist in the Portland (OR) public schools.

Alyssa Hartman (B.A. ’14) is completing the first year of her AuD program at Idaho State University. She has been selected for an internship this summer at the Portland VA Medical Center.

Kevin Liebe (B.A. ’05) has accepted a new position with Bernafon, an international leader in hearing aid instruments. Kevin provides technical assistance and training to other audiologists working with Bernafon products.

Ali Al-Shawwaf (B.A. ’07) lives in Kuwait with his wife and son. He is a product manager with Alghanim Industries, one of the largest, privately-owned companies in the Gulf region, operating in 40 countries, with a strong presence in the Middle East, India and Turkey.