

# Keeping In Touch

Staying Connected, Growing Together • Fall 2024



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## Welcome

The **Keeping in Touch** (KIT) resource was created to celebrate and support the creativity and dedication of all who participate in the quality education of young children. The resource strives to provide inspiration and knowledge to professionals in the Early Learning and Care Sector through informative articles and resources which promote inclusionary practices, cultural diversity and competence, programming ideas and community information. The KIT committee is comprised of professionals from various agencies within the Toronto Children's Services Every Child Belongs model. We welcome you to share this resource with your colleagues, friends, and family.



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# Speech and Language Services for Children

**JOSIE IANNACCIO**, RECE, ECAS, BASc,  
Resource Consultant, Humber Polytechnic

Speech and language screening can help determine if children are meeting the appropriate communication milestones for their age and if early intervention is required. Did you know that as of April 1, 2022, Toronto Public Health Preschool Speech and Language, Blind-Low Vision and Infant Hearing programs have moved to Surrey Place?

“One in ten children need extra help developing speech and language skills. Without help, it may be harder for these children to listen, talk, read, and play with others. The Preschool Speech and Language Program (PSL) ensures that every child achieves optimal communication development.”

The Preschool Speech and Language Program is appropriate if: The child lives in Toronto, from birth until May 31st of the year they are eligible for full-time kindergarten and the child is experiencing speech and language difficulties.

Speech and Language checklists are available to families and educators in many languages. This checklist can be used from birth to age four to help families decide if their child needs help with their speech and language development. Checklists can be accessed online. <https://www.surreyplace.ca/resources/communication-checklist/>

Referrals can be made by families contacting Surrey Place directly by telephone at Call:1-833-575-KIDS (5437) or online registering online at <https://form.caredove.com/surrey-place/forms/referral>.

Every licensed childcare centre in the City of Toronto has an Every Child Belongs Resource Consultant assigned to support their centre. Childcare centres can reach out to their Resource Consultant for more information or consultation regarding speech and language services for families.



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## References

<https://www.surreyplace.ca/services/preschool-speech-and-language-program/>

<https://www.toronto.ca/community-people/children-parenting/pregnancy-and-parenting/parenting/speech-language-vision-hearing/speech-and-language/>



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# Parents as Partners: Using the F Words in Childhood Disability to create positive and productive partnerships with caregivers.

**ANDREA SEATER**, B.A., RECE, Developmental Consultant

So often when I'm working with childcare staff about challenging behaviours or identifying supports for a child with additional support needs, the educators get 'stuck' when it comes to working with the caregivers. It can be frustrating when a team comes together and puts strategies in place, to have it all fall apart when the child is at home.

As educators we know that child development does not happen in a vacuum. There are contexts, environments, and communities that all affect how a child will grow and learn new skills.

The "F Words in Childhood Disability" is a tool that I use in my everyday work as an early interventionist to not only understand the child's strengths but also the layers of and priorities for the family as a whole.

Working through the F words (Fun, Family, Fitness, Function, Friends, Future, Feelings) we get a wide understanding of what the child can do, and inevitably, what the child is not yet doing that is important to the caregivers.

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## The Early Learning Environment

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### How does working through the F-Words help create positive partnerships?

- You understand the child's skills within their current daily routines.
- You create a positive relationship with the caregivers by having a conversation about their lives and meaningful routines instead of completing a less personal checklist on developmental milestones.
- When providing support or strategies you can personalize them based on the child's current skills and the family's current routines.
- You will get buy-in from the parents when your priorities/strategies line with up their priorities.
- This buy-in will increase the chances to see change in skill development.
- Your 'why' will be easier for families to understand when it is aligned with their 'why'.

### If you are struggling to connect with a family, I want you to think to yourself:

- What do I know about this family and their current routines that might impact the relationship/ability to make change in the home and childcare environments?
- What do I know about the family based on the F-Words that can help put the behaviour or issue into perspective?

Sometimes it's as simple as having a conversation. Ask questions. Listen actively to their answers. Abandon all judgment or pre-conceived notion of what a caregiver should be doing or should already know. As soon as the relationship is one of trust, compassion and understanding, there will be the chance of change.

Through a better understanding of family dynamics and a positive relationship with a child's caregivers, staff will have a greater opportunity to see lasting change in a child's behaviour, creating better outcomes for everyone.



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**Want to know more about the F-Words? The CanChild website has resources, webinars and training opportunities:**

**<https://www.canchild.ca/en/research-in-practice/f-words-in-childhood-disability>**

"There are contexts, environments, and communities that all affect how a child will grow and learn new skills."



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## Learning About Diabetes

**GIFTY BROWN**, Registered Nurse Consultant, RN, BScN, Every Child Belongs, Humber Polytechnic

Carbohydrates play a crucial role in the functionality of the human body. When consumed, carbohydrates are broken down into glucose, a form of sugar that the body uses for energy. This energy is vital for performing daily tasks and is especially essential for the growth and development of children. However, there are times when the body is unable to properly use or store glucose, leading to health issues. This condition is known as diabetes. There are two major types of diabetes: Type 1 and Type 2. Each type requires specific management strategies and lifestyle changes to help control the condition and reduce the risk of complications.

### What is Diabetes?

Diabetes is a lifelong condition that occurs when the body cannot properly store and utilize sugar (glucose) for energy. This problem arises because of issues with insulin, a hormone produced by the pancreas that facilitates the entry of glucose into the body's cells.

In diabetes, insulin is either insufficient or absent. Symptoms of diabetes in children can include frequent urination, unexplained weight loss and extreme thirst. The prevalence and severity of these symptoms vary depending on the type of diabetes the child is diagnosed with.

### Differences between Type 1 and Type 2 Diabetes

To understand the difference in managing type 1 and type 2 diabetes, it's important to recognize their distinct characteristics. Type 1 diabetes often begins in childhood but can occur at any age. In this type, children cannot produce their own insulin because beta cells in the pancreas, which are responsible for insulin production, are destroyed. Without adequate insulin, the body struggles to use glucose for energy, necessitating ongoing medical support. The duration of pancreatic damage before diagnosis can vary from months to years.

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While the precise risk factors are not fully established, research indicates that genetic predisposition and certain environmental factors may play a role.

Type 2 diabetes is more commonly seen in adults, but its prevalence is rising among children in high-risk populations. This type occurs when the pancreas does not produce enough insulin or when the body does not use the insulin effectively (insulin resistance). Type 2 diabetes is associated with a combination of risk factors, including unhealthy eating habits, physical inactivity, genetic predisposition, and obesity. Although insulin supply is insufficient in type 2 diabetes, the condition can often be managed effectively with lifestyle changes and, in some cases, without the intensive medical interventions required for type 1 diabetes.

### Management of diabetes

Management of diabetes involves maintaining a child's blood sugar levels within a healthy range—not too high or too low—and helping the child adapt to living with the condition. For both types of diabetes, it's crucial to monitor blood sugar levels frequently throughout the day. Additionally, proper nutrition and careful carb intake through meal planning are essential to managing the condition overall.

The key difference in managing the two types of diabetes lies in medication. For Type 1 diabetes, children require daily insulin doses, which can be administered through injections or insulin pumps. In contrast, children with Type 2 diabetes may not always need insulin injections; their condition can often be managed with oral medications, such as Metformin.

Effective diabetes management depends on collaboration among patients, healthcare teams, and anyone involved in the child's care. It is crucial that everyone works together to implement and maintain these management strategies effectively.

## References

**NEMOURS KIDS HEALTH. (2021, September).**

**Managing Blood Sugars when child has Type 1 diabetes.**

<https://kidshealth.org/en/parents/diabetes-control.html>

**HEALTH LINK BC. (2023, March 1). Type 1 diabetes in children.**

<https://www.healthlinkbc.ca/health-topics/type-1-diabetes-children>

**SICK KIDS STAFF. (2016, October 17). Management of type 1 diabetes. About Kids Health.**

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**DIABETES CANADA. (N.D). PREVENTING DIABETES.**

[https://www.diabetes.ca/type-2-risks/preventing-diabetes?gad\\_=1&gclid=CjwKCAjwzIK1BhAuEiwAHQmU3mQATbxbJY5gbCz1y91Myuv4F7ifnsLjLb9VTbW2FLU4Y4HEN5pLvBoC6CUQAvD\\_BwE](https://www.diabetes.ca/type-2-risks/preventing-diabetes?gad_=1&gclid=CjwKCAjwzIK1BhAuEiwAHQmU3mQATbxbJY5gbCz1y91Myuv4F7ifnsLjLb9VTbW2FLU4Y4HEN5pLvBoC6CUQAvD_BwE)

**PUBLIC HEALTH AGENCY OF CANADA. (2022, October 5). Framework for diabetes in Canada. Government of Canada.**

<https://www.canada.ca/en/public-health/services/publications/diseases-conditions/framework-diabetes-canada.html#>

**PUBLIC HEALTH AGENCY OF CANADA. (2023, December 28). Diabetes Overview. Government of Canada.**

<https://www.canada.ca/en/public-health/services/chronic-diseases/diabetes.html#a3>



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## Community Spotlight – Toronto Parks and Recreation Programs

**JANET SCOTT**, RT, RECE, Resource Consultant, WoodGreen Community Services

**JENNIFER CLOKE-CAMPBELL**, RT, RECE, Resource Consultant, George Brown College

In Toronto, we have access to a wide range of programs, activities and spaces. Toronto Parks and Recreation Programs provide inclusive programs that people of all ages and abilities can participate in. These programs include cooking classes, swimming, dance, fitness, sports, and many more.

Each recreation location in Toronto offers a variety of programs and activities.

To register you must first set up a family or organization account. This can be done by calling Client Services at 416-396-7378 or visiting the website:

<https://efun.toronto.ca/torontofun/Start/Start.asp>

After you have an account, you can explore programs by visiting the Toronto Fun Guide website at <https://efun.toronto.ca/torontofun/Activities/ActivitiesAdvSearch.asp>

A fee subsidy is available when needed to help Toronto residents access recreation programs. Eligible individuals and families will receive an annual financial credit that can be used towards the cost of all Fitness TO memberships and fitness multi-use passes, in

addition to registered recreation programs. To learn more about the Recreation Fee Subsidy, please see the Welcome Policy link below:

<https://www.toronto.ca/community-people/employment-social-support/child-family-support/welcome-policy-recreation-fee-subsidy/>

Toronto Parks and Recreation has something for all ages, interests and skill levels. Go and check it out at <https://www.toronto.ca/explore-enjoy/parks-recreation/>

## References

### Toronto Parks and Recreation

<https://www.toronto.ca/explore-enjoy/parks-recreation/>

### Welcome Policy – Recreation Fee Subsidy

<https://www.toronto.ca/community-people/employment-social-support/child-family-support/welcome-policy-recreation-fee-subsidy/>



## Educator Wellbeing & the Role it Plays

**BRENDALEE SIMAS**, RT, RECE, Child Care Consultant, CDI

### Want to be a GOOD EDUCATOR? Take care of yourself.

Whether that means taking a mental health day once a month, leaving at your scheduled time, not taking any work home, or eating all of your secret candy stash. Walk away from a negative co-worker, breathe when you need to, ask for help, and if you need to, cry in your classroom at the end of the day. It does not matter what you do or how you do it. The children in your care need YOU to be okay!

There is evidence that early experiences have a momentous impact on the biology of the body and on brain development, with significant implications for lifelong physical and mental health and well-being. (How Does Learning Happen?) Examples of wellness should start at home; however, it would be quite negligent to think that young children are not looking to their educator's to be an example of what this mental, emotional, and physical wellness look like. Educators have chosen a path of impact and impact starts with being the right example. (Education Canada, September 2021) As you read on, I invite you to consider your own wellbeing, and that of others within your workplace, and the role wellbeing plays in your important work with children, families, and colleagues.

“Contemporary research indicates that when educators are well, they can be more responsive, thoughtful, and respectful as they interact and build relationships with every child.”



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The role of an educator providing high quality care is complex and multifaceted. It requires the use of specialized knowledge, a dedication to continuous improvement, and a commitment to take on the many challenges faced each day. Feeling confident and competent is an important factor in educator retention (Anderson, 2013), however the field continues to be undervalued and often viewed as ‘babysitting’ (Ontario Ministry of Education, 2018) resulting in educators feeling unimportant in their work. In recent conversations with some educators, most report feeling worn out and devalued as professionals; professionals, who play an important role in providing quality early childhood education and care. Additionally, they are frequently seeing higher numbers of children with social emotional and behavioural challenges as well as both diagnosed and undiagnosed extra support needs. In short, professionals in early childhood settings are experiencing more stress and demonstrating lack of well-being at rates and levels that could possibly threaten the quality of educator–child interactions and the quality of early childhood settings. Furthermore, when educators are consistently expected to display positive emotions and suppress their authentic feelings without having the opportunity to discuss

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challenges, they can begin to feel alienated in their work. This is believed to contribute to psychological distress which then results in burnout and removal from the field (Cumming & Wong, 2018).

Poor educator well-being threatens the early childhood workforce and limits their potential to offer high-quality care and education. Contemporary research indicates that when educators are well, they can be more responsive, thoughtful, and respectful as they interact and build relationships with every child (Cassidy, King, Wang, Lower & Kinterner-Duffy, 2017).

### What does this all mean?

"You can't pour from an empty cup." "Put on your own oxygen mask first." These dictums are helpful and stirring reminders that if we want to be the best educators we can be, we need to first look at ourselves and our wellness — but how can we put educator wellness into practice?

To answer this question, we first need to understand what influences an educator's sense of wellbeing. The concept itself, involves both psychological and physiological components. To experience a strong state of wellbeing, educators need to be supported to be both mentally and physically healthy. They need to experience a sense of belonging. Hmm, is that not what we are always striving to provide? Let's take a moment and ask ourselves:

- How do we encourage ourselves to take responsibility for ensuring, maintaining, and building our own wellbeing?
- When do we critically reflect on our wellbeing and how can we improve it?
- How do we work collaboratively with our teams to create safe and healthy learning and work environment for our educators?
- What design elements in our learning spaces support educator wellbeing?
- What opportunities exist for our educators and service leaders to discuss the team's wellbeing?

- How do we actively create a positive workplace culture?
- How do we develop a professional learning community that builds educators skills and knowledge?
- What strategies can we develop to retain educators to best meet the needs of children and their families?

### Now, how do we do this?

We need to take a proactive approach to wellness. We need less talk and more action: less saying how important it is and more demonstrating its importance. This starts at the top with leaders making it a priority and demonstrating it to their staff.

We need to be willing to have the hard conversations with each other about how we can improve ourselves through wellness and the steps we are taking to do so. Nothing gets better in darkness and silence.



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## Wellness and Self-Care

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Every early childhood professional, can start to build their own healthy and sustainable habits that demonstrate to the children we care for, what mental and physical wellness look like. Additionally, if you are comfortable doing so, discuss your wellness journey with the children to deepen your connection and their understanding of health.

When we are well, we can be more responsive, thoughtful, and respectful as we interact and build relationships with every child. We are also better positioned to meet the emotional needs of children, supporting them in their self-regulation and developing resilience and better equipped to:

- Be responsive to every child
- Develop rich, respectful relationships with each child
- Encourage children to explore their environment and engage in play and learning
- Develop a deeper understanding of each child, promoting their ability to plan extensions of children's learning and development
- Support children to develop confidence in their ability to express themselves, work through differences, engage in new experiences, and take on challenges in play and learning

**For further reading on wellbeing, please explore the following KIT articles:**

**Spring 2022, Educator Wellness**

**Spring 2023, The Art of Wellness and Self-Care**

**Fall 2023, Maintaining your Wellness**

**Winter 2024, Mindfulness for Children**

## Resources

### **Canadian Mental Health Association**

(<https://cmha.ca/>)

### **College of Early Childhood Educators**

The Importance of Early Childhood Educator Mental Health & Well-Being: A guide to supporting educators ([https://www.college-ece.ca/en/Documents/QCR\\_Importance\\_of\\_ECE\\_Mental\\_Health.pdf](https://www.college-ece.ca/en/Documents/QCR_Importance_of_ECE_Mental_Health.pdf))

### **ConnexOntario**

(<https://connexontario.ca/>)

### **PANORAMA Education**

(<https://www.panoramaed.com/blog/teacher-wellness>)

### **Zero to Three**

(<https://www.zerotothree.org/resource/journal/early-childhood-teachers-well-being-what-we-know-and-why-we-should-care/>)



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# What is a developmental assessment?

**BRENDA WILSON**, RECE.AS, Montessori, Resource Consultant, Terry Tan Child Centre

Families may seek out a referral for a developmental assessment for their children aged 12 months – 4 years due to concerns about their child's development or their behaviours that have been seen at home or outside the home by a relative, caregiver or childcare educator. These concerns may be due to the child not meeting their developmental milestones in the ability to communicate, play, take part in self-help activities or use their motor skills the same way as other children their age.

## An Overview

Developmental assessments can help to better understand a child's strengths, delays or difficulties within the context of their development. When a comprehensive developmental assessment is provided for a child, it will include looking at the child's motor, language, cognitive, social and emotional development. There are stages to the process, which include an initial intake with parent(s)/guardian(s) (and the child), to gather medical and developmental history, and to discuss current concerns with a developmental pediatrician/psychologist/or psychiatrist and their team. Information may also be gathered from other sources connected to the child such as childcare educators, school educators, speech and language therapists, occupational therapists, physiotherapists, and Resource Consulting staff.

Once the process is complete, the clinician and/or other professional(s)\* completing the assessment will meet with the parent(s)/guardian(s) for a feedback session to provide a verbal or written report. This report indicates the child's overall developmental level in comparison to other children of the same age and any diagnosis, if relevant. It will also include recommendations for services and/or interventions/strategies to support the child in all environments (home/school/childcare).

\*Other professionals who may participate in the assessment process:

- Neuro-developmental Physiotherapy

In the GTA, there are several clinics which provide developmental assessments and are covered under OHIP. The family doctor/pediatrician will make the referral based upon home location, to clinics affiliated with hospitals. There are other medical clinics that provide service and private professionals (at a cost). Private health insurance may aid with costs if a family chooses the private sector. An assessment can take anywhere from months to more than a year to be arranged. If you have concerns with a child's development, reach out to the family to discuss the ECB Resource Consultation services that are available to them.





Mango Orange Slush, Photo by peekncook

## Mango Orange Slush Recipe

CONTRIBUTED BY NIKI YEUNG, M.Sc., RECE, Resource Consultant, Strides Toronto

### Ingredients:

- 1 large mango - peeled, seeded, and cut into chunks
- 10 ice cubes
- 1 cup orange juice
- 1 cup sparkling water
- 2 tablespoons lime juice
- 1 tablespoon ginger juice
- 1 tablespoon brown sugar

### Instructions:

Blend mango, ice, orange juice, water, lime juice, ginger juice, and brown sugar together in a blender until slushy, 2 to 3 minutes.

**Prep Time:** 10 mins

**Total Time:** 10 mins

**Servings:** 2

**Yield:** 2 servings

**Mango Orange Slush Recipe** ([allrecipes.com](https://www.allrecipes.com/recipe/237694/mango-orange-slush/))

(<https://www.allrecipes.com/recipe/237694/mango-orange-slush/>)

## Professional Learning and Links

### City Wide Training Calendar

([www.citywidetraining.ca](http://www.citywidetraining.ca))

### Connectability

([www.connectability.ca](http://www.connectability.ca))

### About Kids Health

([www.aboutkidshealth.ca](http://www.aboutkidshealth.ca))

### Zero to Three

([www.zerotothree.org](http://www.zerotothree.org))

### On Track Best Start

([www.beststart.org/OnTrack\\_English](http://www.beststart.org/OnTrack_English))

### Ontario Coalition for Better Child Care

([www.childcareontario.org](http://www.childcareontario.org))

### Infant Mental Health Promotion

(<https://imhpromotion.ca>)

### How Does Learning Happen?

(<https://www.ontario.ca/page/how-does-learning-happen-ontarios-pedagogy-early-years>)

### The Mehrit Institute-Self Reg

(<https://self-reg.ca>)



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## KIT Resource Committee Partners

### CDI

#### Brendalee Simas, Child Care Consultant

(<https://www.childdevelop.ca>)

### George Brown College

#### Jennifer Cloke-Campbell, Resource Consultant

(<https://www.georgebrown.ca/>)

### Humber Polytechnic

#### Josie Iannaccio, Resource Consultant and Larissa

#### Kostevskii, CWT Training Coordinator

(<https://humber.ca/>)

### Lumenus Community Services

#### Diana Burgess and Sheri Robb,

#### Resource Consultants

(<https://lumenus.ca/>)

### Terry Tan Child Centre

#### Brenda Wilson, Resource Consultant

(<https://www.terrytan.ca/>)

### Strides Toronto

#### Niki Yeung, Resource Consultant

(<https://stridestoronto.ca/>)

### WoodGreen Community Services

#### Janet Scott, Resource Consultant

(<https://www.woodgreen.org/>)

### Macaulay Centres for Children

#### Liliana Pineda, Resource Consultant

([www.macaulaycentres.org](http://www.macaulaycentres.org))

### Centennial Infant and Child Centre

#### Lucy Patterson, Resource Consultant

([www.cicc.ca](http://www.cicc.ca))

“The beautiful thing about learning is nobody can take it away from you.”

—B.B King