
The F-Words

Life Wheel



CHARLES, HAMILL & REYNOLDS

Published by Paediatric OT Ltd., Auckland, New Zealand
ISBN 978-0-473-52135-6
First published 2020
© 2020 Paediatric OT Ltd

Cover Photo by Steve Douglas on Unsplash

The moral rights of the authors have been asserted.
This book is copyright. Except for the purposes of fair reviewing, no part of this publication may be reproduced or transmitted in any form or by any means, electronic or mechanical, including photocopying, recording or any information storage and retrieval system, without written permission in writing from the publisher.

The F-Words Life Wheel

Lucy Charles, Arul Hamill, Kelly Reynolds

An Interviewing and coaching approach to facilitate connection, conversations and meaningful goal setting for children and their families, caregivers and educators.



Paediatric OT NZ

Acknowledgements

This work builds on the inspirational work by Dr. Rosenbaum and Dr. Gauter of CanChild, Canada. Their original article, "The 'F-words' in Childhood Disability: I swear this is how we should think!", presented six F-words that the authors state should be the focus in childhood disability - Function, Family, Fitness, Fun, Friends, and Future¹. We would like to thank Professor Peter Rosenbaum, Rachel Teplicky, Dr. Andrea Cross and Alice Soper from CanChild, Dr Fi Graham from Otago University, Carolyn Simmons, Occupational Therapist, and Sarah Foley from Kids Plus Foundation for their support in developing this tool.

About the Authors

Lucy Charles is an Occupational Therapist with over 25 years of paediatric experience in the United Kingdom and New Zealand. Lucy is a founder and director of Paediatric OT Ltd, New Zealand.

Arul Hamill is an Occupational Therapist with over 25 years of paediatric experience. Arul is a founder and director of Paediatric OT Ltd, New Zealand.

Kelly Reynolds is a Physiotherapist with many years of experience in paediatric disability and rehabilitation. Kelly is the Clinical Director of Kids Plus Foundation in Geelong, Australia.²

¹ Rosenbaum, P., & Gorter, J. W. (2012). The 'F-words' in childhood disability: I swear this is how we should think! *Child: care, health and development*, 38(4), 457-463

Available at <https://onlinelibrary.wiley.com/doi/full/10.1111/j.1365-2214.2011.01338.x>

² Lucy Charles and Arul Hamill, Paediatric OT Ltd, New Zealand, www.paediatricot.nz. Kelly Reynolds, Kids Plus Foundation, www.kidsplus.org.au



Contents

Acknowledgements	5
About the Authors	5
Contents	6
Chapter 1	
Introduction	9
Preparation	10
Table 1. Aims of the F-Words Life Wheel	11
Figure 1. The F-Words Life Wheel	11
Chapter 2	
Using the F-Words Life Wheel	13
Figure 2. How the F-Words fit in with the International Classification of Functioning, Disability and Health (ICF) framework	14
2.1. Introducing the F-Words Life Wheel	15
Detailed Explanation of the F-Words Life Wheel	15
Function	15
Function at Home	15
Function at School/Kindergarten	15
Function in the Community	16
Family	16
Fitness	17
Fun	17
Friends	17

Future	18
2.2. Process for Completing the F-Words Life Wheel	19
Preparation: Connect with Yourself	19
Clarify Who is Completing the F-Words Live Wheel	19
Rate Each Sector	19
2.3. Coaching Conversations	21
The Stages of the Coaching Conversation	21
Choose Where to Start	21
What is Happening Now?	22
Listening: Empathise, Validate, Connect, Show Understanding, Reframe, Ask Open Questions	22
Vision: How Would You Like it to Look?	23
Next Steps: Moving Towards that Vision	23
Looking at options	23
Goal Setting/Action Plan	24
Goal Setting	24
Participation Goals	25
Table 2. Characteristics of Participation Goals	25
Table 3. Examples of Participation Goals	26
2.4. Making a Collaborative Action Plan	27
Ask First	27
Implement the plan	27
Table 4. Steps for Making and Implementing an Action Plan	28
Review of the Plan	28
Review of the Goal	28

Chapter 3

Conclusion and Reflections 29

Appendices 30

List of Appendices	30
Summary Form	31
Examples	32
Example From a 13-year-old Girl with Cerebral Palsy	32
Example From a 11-year-old Girl with ADHD	33
Te Reo Māori, Aotearoa Version	34
English Version	35
Cook Islands Māori Version	36
Further Reading	37



Chapter 1

Introduction

The F-Words Life Wheel was developed by Occupational Therapists Lucy Charles and Arul Hamill (Paediatric OT, New Zealand) and Physiotherapist Kelly Reynolds (Kids Plus Foundation, Australia) for use as an interviewing and coaching tool. In 2011, Rosenbaum and Gorter developed CanChild's six F-Words that focus on childhood development domains: Function, Family, Fitness, Fun, Friends, and Future³. The F-Words build upon the World Health Organization's (WHO) International Classification of Functioning, Disability and Health (ICF) framework. CanChild hoped to encourage people in the childhood development field to adopt a more inclusive, strengths-based way of thinking and to apply these concepts in their work with children with disabilities and their families.

Building on the work done by Rosenbaum and Gorter and CanChild's F-words research group, and utilising coaching tools and techniques, Lucy, Arul and Kelly developed the F-Words Life Wheel. They have found this an invaluable tool for facilitating rich and meaningful conversations and enabling meaningful goal setting,

³ Rosenbaum, P., & Gorter, J. W. (2012). The 'F-words' in childhood disability: I swear this is how we should think! *Child: care, health and development*, 38(4), 457-463

based on what is important to children and families in their given contexts and situations.

Preparation

We highly recommend therapists undergo training in coaching or family interview techniques to ensure the use of open-ended questions, non-judgemental/non-leading language, and positive/strengths-based interactions.

When using the F-Words Life Wheel, the focus is on what is important 'right now'. It can also be a helpful tool when measuring progress or reflecting a change in goal priorities, if used in combination with the Canadian Occupational Performance Measure (COPM) or a specific Goal Attainment Scale (GAS goal).

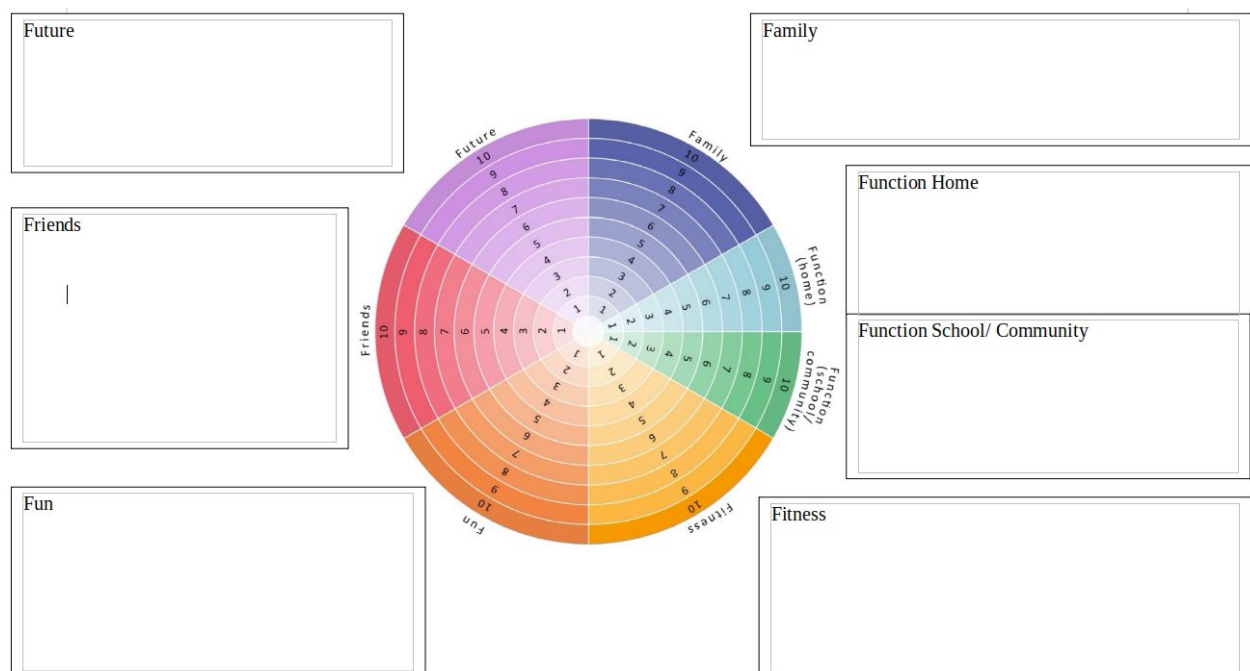
It is important to prepare the child/family for the process by clearly explaining the process and purpose of the conversation and the F-Words Life Wheel framework. Ensure that you have a quiet, uninterrupted meeting place and time with the family in a comfortable and practical location. It is important to view the child/family as the expert in their life and to support them to take the lead in the conversation. Therapists also need to be prepared for any challenging and potentially emotive conversations with families. Some topics may reveal feelings of grief, sadness, anxiety or stress and it is therefore important to be competent in supporting families through difficult or distressing conversations that may arise when using the F-Words Life Wheel.

The F-Words Life Wheel can be translated to reflect different languages, values and cultures. Additional information or sections can be added to reflect spiritual or cultural needs. Be mindful to focus on connection between child and family rather than the process. The F-Words Life Wheel can also be completed over a series of sessions, in sections, or as a visual to prompt meaningful conversations.

Table 1. Aims of the F-Words Life Wheel

To give children and families a voice and a framework to express their hopes, dreams and goals.
To prompt families/caregivers/teachers/children to think about all areas.
To measure current satisfaction across all dimensions of life domains in different settings.
To help identify what is going well and develop a vision for the future, including what they would like to see more of in their lives.
To be a mechanism to help identify steps towards a future vision through meaningful goal setting and intervention planning.

Figure 1. The F-Words Life Wheel





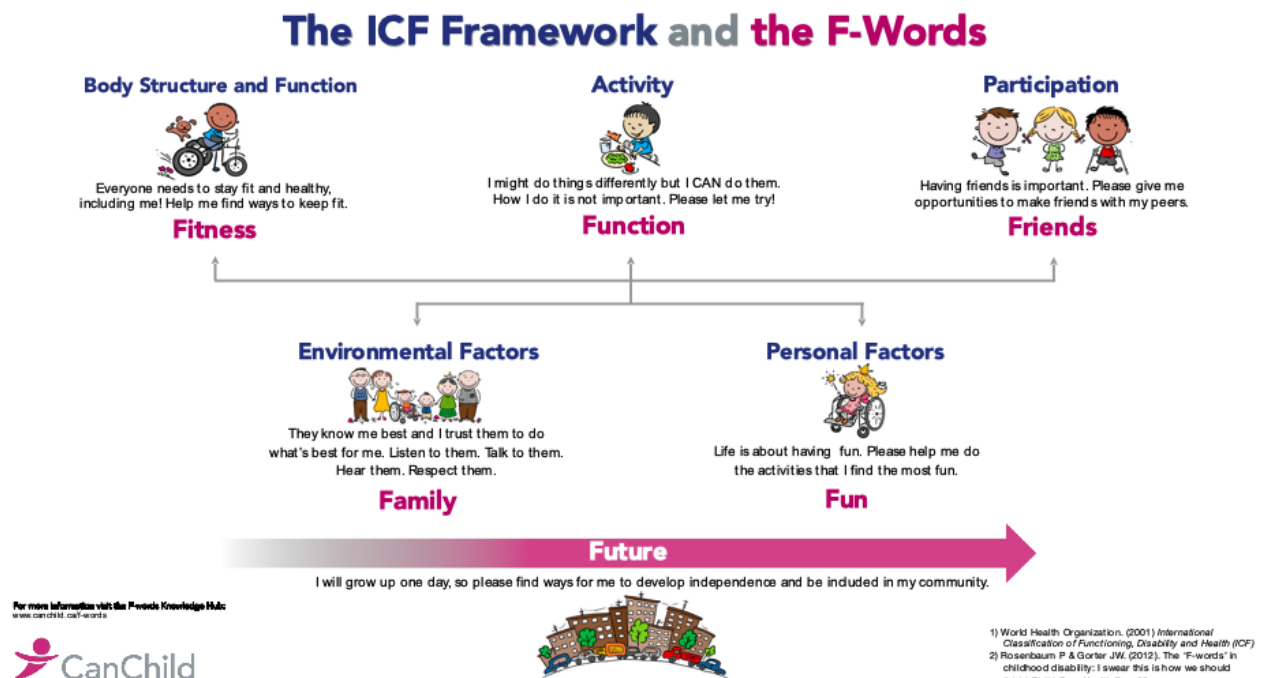
Chapter 2

Using the F-Words Life Wheel

Coaching aligns with a Family-Centred approach to service delivery. It focuses on capacity-building, empowerment, enablement, appreciation, strengths, a focus on possibility, curiosity, creation and invention, championing and, action-reflection-learning processes. Caregivers are viewed as self-directed adult learners and given choice, involvement and engagement throughout.

The questions used in the coaching approach will help guide the discussion (see the section on [Coaching Conversations](#)). Be mindful that actively listening and being present with the child or caregiver, connecting, empathising, acknowledging emotions, reframing, guiding and encouraging are all essential. The questions are a useful guide. The conversation should be led by the client. They should feel like they are in the driver's seat as the expert on their child and family values, as opposed to deferring to the therapist. Therapists should feel comfortable to take off the expert hat to support more active listening and connection. One parent expressed this as: "You have textbooks, we have the storybooks!"

Figure 2. How the F-Words fit in with the International Classification of Functioning, Disability and Health (ICF) framework⁴



⁴ For more information, go to F-Words Knowledge Hub:
<https://www.canchild.ca/en/research-in-practice/f-words-in-childhood-disability>

2.1. Introducing the F-Words Life Wheel

Detailed Explanation of the F-Words Life Wheel

When introducing the F-Words Life Wheel therapists need to explain that the F-Words represent all dimensions of the child's life. They are defined as follows:

Function

Function refers to **what** people do. **How** things are done is not what is important. Synonyms include 'role', 'job', 'task', etc. (for children, 'play' is their 'work'). Within the F-Words Wheel, function has been divided into (i) home and (ii) school/community to allow children and families to think about different roles and tasks in different settings.

Function at Home

Think about a 24-hour period and the things that their child needs or wants to do at home.

For example

Self-care tasks such as dressing, eating meals with family, sleeping, doing chores, playing, getting ready in the morning.

Function at School/Kindergarten

Think about the child's roles at school or Kindergarten and the tasks they need to do there: play, learn, self-manage, participate and contribute.

For example

Getting to school or kindergarten, access, participating in class, going to the toilet, eating lunch, relating to others, communication, listening and contributing in class, academics, writing, play.

Function in the Community

This is specific to the child and family's community, culture and environment.

For example

Church, local community, scouts, after school activities, cultural groups. In New Zealand, consider Marae.

Family

Family represents the essential 'environment' of all children.

For example

Family unit and extended family (In NZ consider whakapapa-based whānau and kaupapa-based whanau). Whāngai (foster children), carers, nannies, grandparents, siblings, cousins or important people in the child's life.

Fitness

Fitness refers to how children stay physically active, including exercise and other recreational opportunities.

For example

Health and fitness, exercise, fresh air, biking, walking, swimming, sports, team games, jumping on trampoline etc.

Fun

Fun includes particular activities in which children are involved or enjoy participating in.

For example

Things that make your child laugh, smile or have fun: at home, afterschool, at weekends, with friends, family, extended family, clubs. Their interests, passions or favourite things.

Friends

Friends refers to the friendships established with peers; social development is an essential aspect of personhood.

For example

Friends at school/ Kindergarten, family friends, bullying, local friends, friends through activities. Interest in friendships, availability of friends. Any issues with bullying can be raised here.

Future

The future is what child development is all about; it refers to parents and children's expectations and dreams for their future.

For example

Future into adult life or near future: Hope and dreams, independence, future school/ classes.

2.2. Process for Completing the F-Words Life Wheel

Preparation: Connect with Yourself

Before starting, clear your mind, be present in this moment. Slow down, be comfortable with silences, focus on the person not the process.

Clarify Who is Completing the F-Words Live Wheel

Once you have explained the F-Words to your client/s. The child, caregiver or teacher can complete a wheel together or multiple wheels can be completed by each stakeholder involved in the child's well-being. Stress to a caregiver or teacher that their rating is based on their perception of what life is like for the child. Check whether there are other categories in the F-Words Life Wheel that they would like to include - for example culture or spirituality may be highly relevant to different families. Ask whether there are any other areas that they would like to include in the wheel?

Rate Each Sector

Ask your clients to use the scale of 1 – 10, where 1 represents dissatisfied and 10 is fully satisfied, and put a circle on the number in each sector to rate how satisfied they are in that particular domain of the F-Words Life Wheel. **IMPORTANT:** Tell them to use the FIRST number (score) that pops into their head, not the number they think it *should* be!

There is **no judgement about the scores** assigned to the F-words Life Wheel (a low score does not mean a poor quality of life, or similarly a high score does not mean improvements cannot be made in that area).

Your client may like to take time to complete all the numbers on the form on their own or they may prefer to go through each area with you. Let them decide. Once they have completed the scores, go through each sector on the F-words Life Wheel individually.

Note: Some children or families may choose to only focus on one or two areas of the F-Words Life Wheel. Be guided by what is important for them at that time.

2.3. Coaching Conversations

A coaching conversation is a relationship that empowers the client. It gives them a sense of competence, confidence and control and a space for them to choose what they talk about. The conversation involves listening, validating and acknowledging what is important. It provides clarity, and through curiosity and powerful questioning, enables the client to explore possibilities and make goals for themselves or their child.

The Stages of the Coaching Conversation

1. Choose where to start.
2. What is happening now?
3. Listening.
4. Vision—how would you like it to look?
5. Next steps—moving towards that vision.
6. Goal setting, action plan.

Choose Where to Start

Once each area is completed. Ask which area they would like to look at first?

Prompts

Which area would you like to look at first?

Which area stands out to you the most?

Which of these categories are the most important to you?

Were there any surprises for you?

Which area is easiest to talk about first?

What is Happening Now?

Looking at each area separately, ask the client to talk about what is happening now from their child's perspective and the client's reality. Even if the score is low (2 or below) ask what is going well.

Prompts

Tell me about what is happening now? What do you notice?

Tell me more about ? From your child's perspective, how do you feel it is going?

The score in this area was aout of 10. Tell me more about this?

Tell me what is going well?

Listening: Empathise, Validate, Connect, Show Understanding, Reframe, Ask Open Questions

Listening is one of the key elements of coaching. Focus on being present and actively listening, showing empathy and validating what is happening for the child and the family. Listen without judgement or without thinking about solutions. Use techniques like reflecting back, reframing, summarising, asking open ended questions, as well as acknowledging areas of difficulty and celebrating successes.

Prompts

Reflect back in *their* words. "It's busy?" "It sounds like the mornings are a busy time for you"

Reframe: "Are you saying that ..."

Acknowledge: "I can see you light up when you talk about this?"

Show understanding: "I am hearing that this is having an impact on your whole family".

Vision: How Would You Like it to Look?

By asking the client “How would you like it to look?” you are encouraging them to explore possibilities, to look forward, to envisage and to think about their hopes and dreams for the future? Encourage them to imagine “if this was nearer to 10/10 what would it look like?” You are wanting them to express what they would like to see more of in their child’s life.

Prompts

What would a score of 10 look like for you and your child?

What would you like to see more of in your life /your child’s life?

If you could change anything what would it be?

What would you like to see your child doing more of?

What would you like to be doing more of?

Which of these categories would you *most* like to improve?

Which one are you most satisfied with?

Next Steps: Moving Towards that Vision

This part of the conversation enables you to move the client towards a strengths based or solution focussed plan and next steps towards their vision.

Looking at options

What might help?

What needs to be put in place to improve life in this area?

Prompts

What would make your score move towards the 10?

What would make that score increase?

What would make that score improve by 1?

What have you tried already?

What are your thoughts?

What would help?

Goal Setting/Action Plan

Having explored what is happening now and a vision for the future, this part of the coaching conversation focuses on the client making an action plan. Prioritising and thinking about what would have the biggest impact if it were to change. Consider the areas that are important or most doable to the family or child now.

Setting a meaningful goal that is the client's goal and not yours.

Prompts

Is this something that you would like to prioritise as a goal to focus on right now?

What is most important for you now?

What would you like to work on first?

What would have the biggest impact?

What impact would it have on you if it were to change?

What would you need to be put in place to improve the score?

Goal Setting

When making specific goals use the words of the family and/or child. Services may choose to move to a goal measurement tool, for example, the COPM⁵ or GAS⁶ goal, SMART⁷ or SCRUFFY⁸ goal. However, the overall goal is set as the parent and child

⁵ Canadian Occupational Performance Measure

⁶ Goal Attainment Scale

⁷ Specific, Measurable, Achievable, Realistic, Time frame

⁸ Simple, Creative, Reasonable, Unspecific, Flexible, Fuzzy, Yearly

identify it. Consider putting the participation component into the goal to demonstrate changes that will happen in this domain.

Participation Goals

Participation goals pertain to and involve what one is doing in the lived environment, day to day life routines and tasks at home, school, amongst friends, and meaningful occupations.

Table 2. Characteristics of Participation Goals

Align to the personal values.
Are meaningful and enable participation in life roles and situations for the child.
Enable increased function, happier family life, more fun, friends, fitness and progress towards the child and family's future.
Reflect changes in the child and family's daily life. They do not describe improvements in therapy or in body structures or function. They reflect changes in their daily life.
Are the child's or family's choice. They have autonomy and choice as to whether they engage in the goal. Achievement of the goal or progress toward the goal are not in the control of the therapist.
May change from week to week, day to day.

Table 3. Examples of Participation Goals

To be able to ride my bike to the shop with my neighbour on the bike lane.
To win the cup stacking contest in Auckland in June.
To be able to get into the car on my own with no one helping.
To be able to eat my porridge with a spoon at breakfast time on my own.
I want to be able to eat my food by myself, so that I can be more independent at mealtimes.
Sarah would like to hold her sandwich so that she can eat all the fillings without it falling out at school.
Jenna sits up at the table on her Tripp Trapp chair. Her mum helps her to get into her chair. She would like to get up to sit by herself.
Claire enjoys her bedtime routine of reading and looking at books with her parents and on her own. She would like to be able to turn the pages of books so that she can look at them herself.
Sarah is using the toilet with help. She is now trying to say toilet and sign T so that when she goes to school, she will be able to request in a way that others will understand her needs.

2.4. Making a Collaborative Action Plan

A Collaborative Action Plan is a plan determined by the client.

Ask First

To formulate an action plan, start by exploring a few options. Ask first. Be curious. Ask about:

“What has been tried before?”

“What worked?”

“What did not work?”

“What can you put in place?”

“What are your thoughts?”

Ask about bridges and barriers, i.e., what will help put the plan in place.

Ask about what supports are needed linked to their personal, environmental and task orientated needs.

Implement the plan

To implement the action plan, agree on the timeframe, by whom, where, how often.

Always check in:

“Does this seem doable?”

“How confident do you feel that the plan can be put in place?”

Discuss what could get in the way. Talk about service options, resources, supports or other agencies that could be called on to help. Agree to review the plan in a few weeks' or months' time.

Table 4. Steps for Making and Implementing an Action Plan

Explore options.
Information exchange “Ask first” What they know, What they have tried, What their thoughts are.
Supports needed: personal, environmental, task orientated.
Service options/resources.
Barriers and bridges. What will help put the plan in place, what could get in the way.
Agree on a timeframe.
Intervention plan.
This may include other services or family resources.

Review of the Plan

After the plan has been in place for a specified time, determined by the client, make time to review the plan. It might be a good idea to plan this review right from the outset. Look at the **progress** made. Listing successes made can be really encouraging, even if the plan was not fully successful. Take a look at any **barriers** that have arisen along the way and work out ways around these. Are there any more **supports** that would help out now? Try to make the conversation solutions focussed.

Review of the Goal

We also need to review the primary goal from time to time. Is this goal still important? What impact will it have to continue pursuing this goal, or is it time to make a new goal, and what impact could this have?



Chapter 3

Conclusion and Reflections

Connection, empathy and validation underpins coaching conversations. We enhance learning when we validate the client's own competence. The F-Words Life Wheel supports "a way of thinking". It is intended to be used as a tool and as an approach. Importantly, we focus more on "connections" than the "process" of the tool, thus supporting and empowering children and families to have a voice about what is happening for them now, how they feel, and what their vision is for the future. In this way, we journey alongside children and families to match and meet them where they are at in life at any given moment.

To finish, picture the family as a flowing river, with all that a river brings. Imagine how we can join in with their journey at different times. There may be interruptions; sometimes there is a rhythm; at other times there are rocks or barriers. We journey alongside to help build a bridge, guide flow, and offer encouragement in their journey.



Appendices

List of Appendices

1. Summary form
2. Examples of completed Life Wheels
3. Translations of the Life Wheel
4. Further reading

Summary Form

This form template can be used to summarise the F-Words assessment and next steps.

	What is happening now?	Next steps
Function at home		
Function at school/ community		
Family		
Fitness		
Fun		
Friends		
Future		

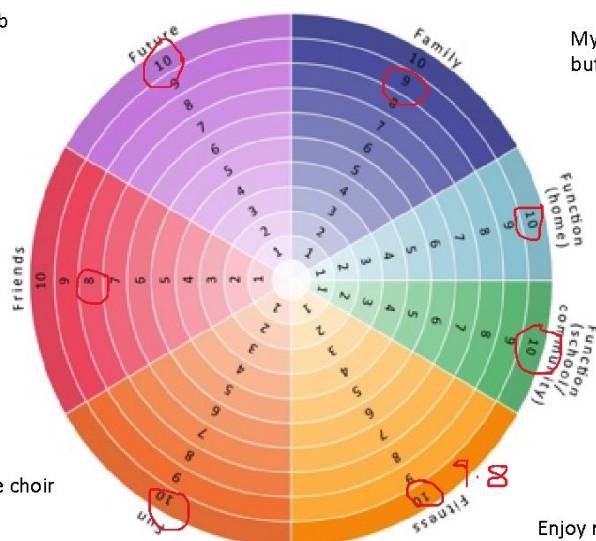
Examples

Example From a 13-year-old Girl with Cerebral Palsy

Want to be in the para-Olympics. Want to get a job babysitting.

I want to have more friends. I feel like my friends talk about me behind my back. I feel like I am being bullied

Love reading and love choir



My sister pushes my buttons

Want to be able to cut my own food.

Want to be able to use a ruler in maths I want to use my laptop for my writing and have a reader writer for exams

Enjoy my running and training. Need to do more stretches so I can run faster.

Goals

To find a way to rule straight lines on my own in maths.

To be able to apply for a reader writer for my exams.

To be able to beat my running time on the track by 10 seconds.

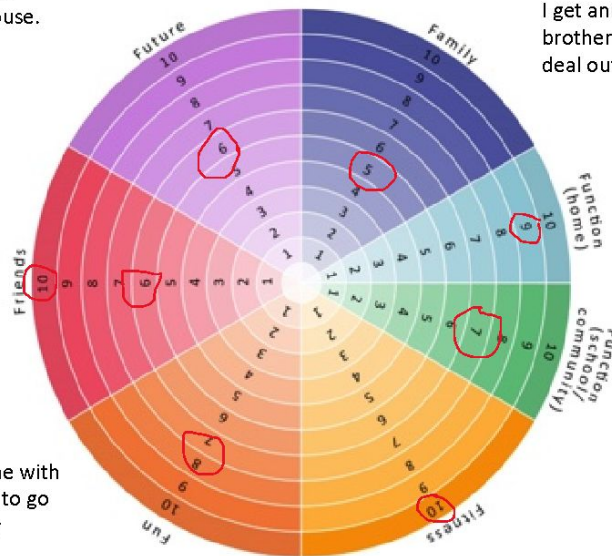
To have friends that make me feel comfortable and who I enjoy being with and to have some tools that help me cope when I feel others are not being kind to me.

Example From a 11-year-old Girl with ADHD

I am worried about going to high school and moving house. I cant wait to get a phone

6/10 for quantity of friends 10/10 for Grace. My friends at school spend too much time on social media.

I want to have more time with my friend Grace. I want to go camping with my family



I get annoyed with my brother and I make a big deal out of small things

If I fed the dog it would be a 10/10

I feel like the teacher has to tell my 5 times what to do. I learn differently and I want my new teacher to understand this.

I feel proud that I stood up in front of everyone and did a speech

I like gymnastics. I don't like team sports

Goals

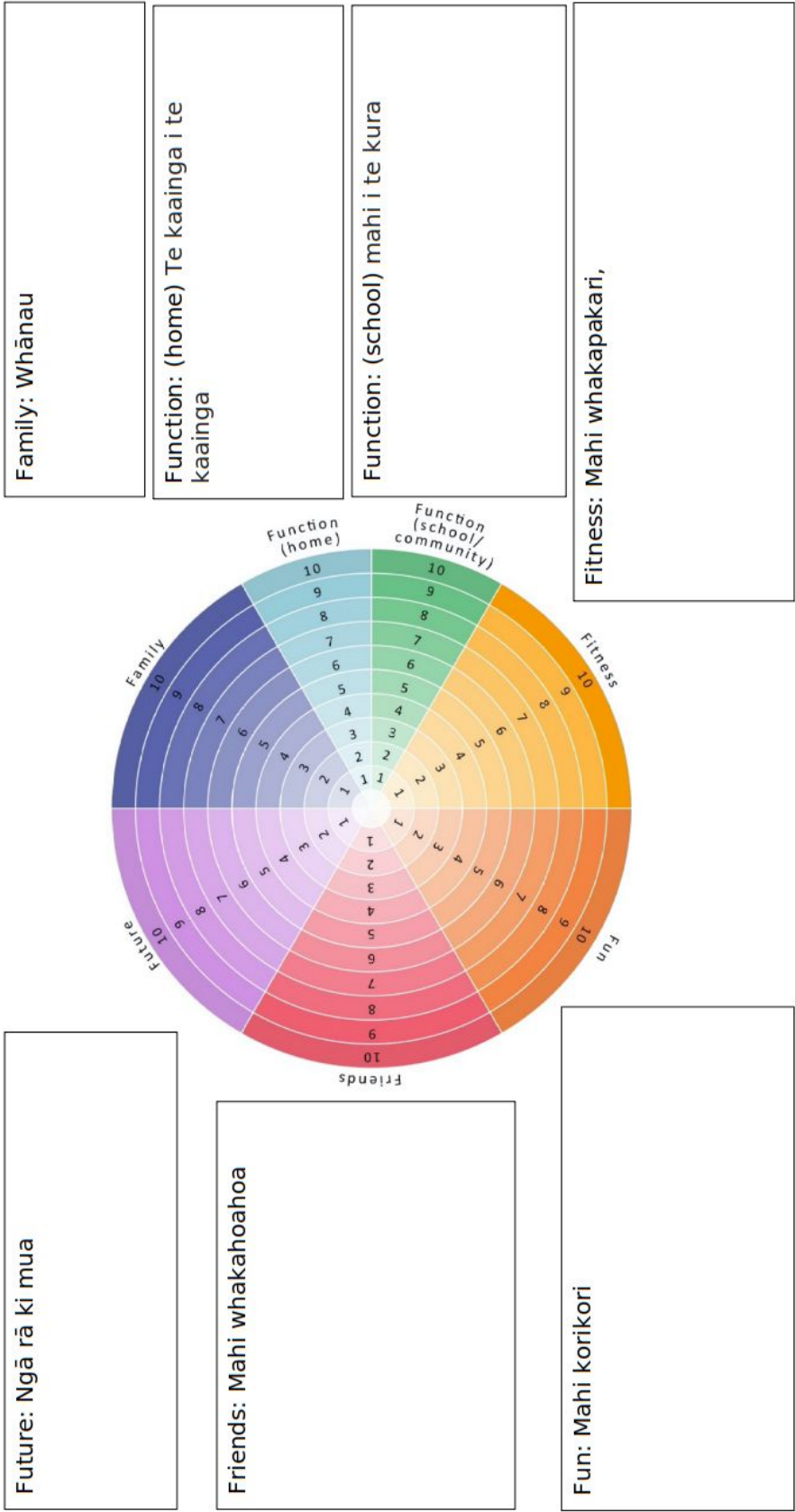
To feel confident going to school on the bus.

To remember all my belongings for school without Mum prompting me.

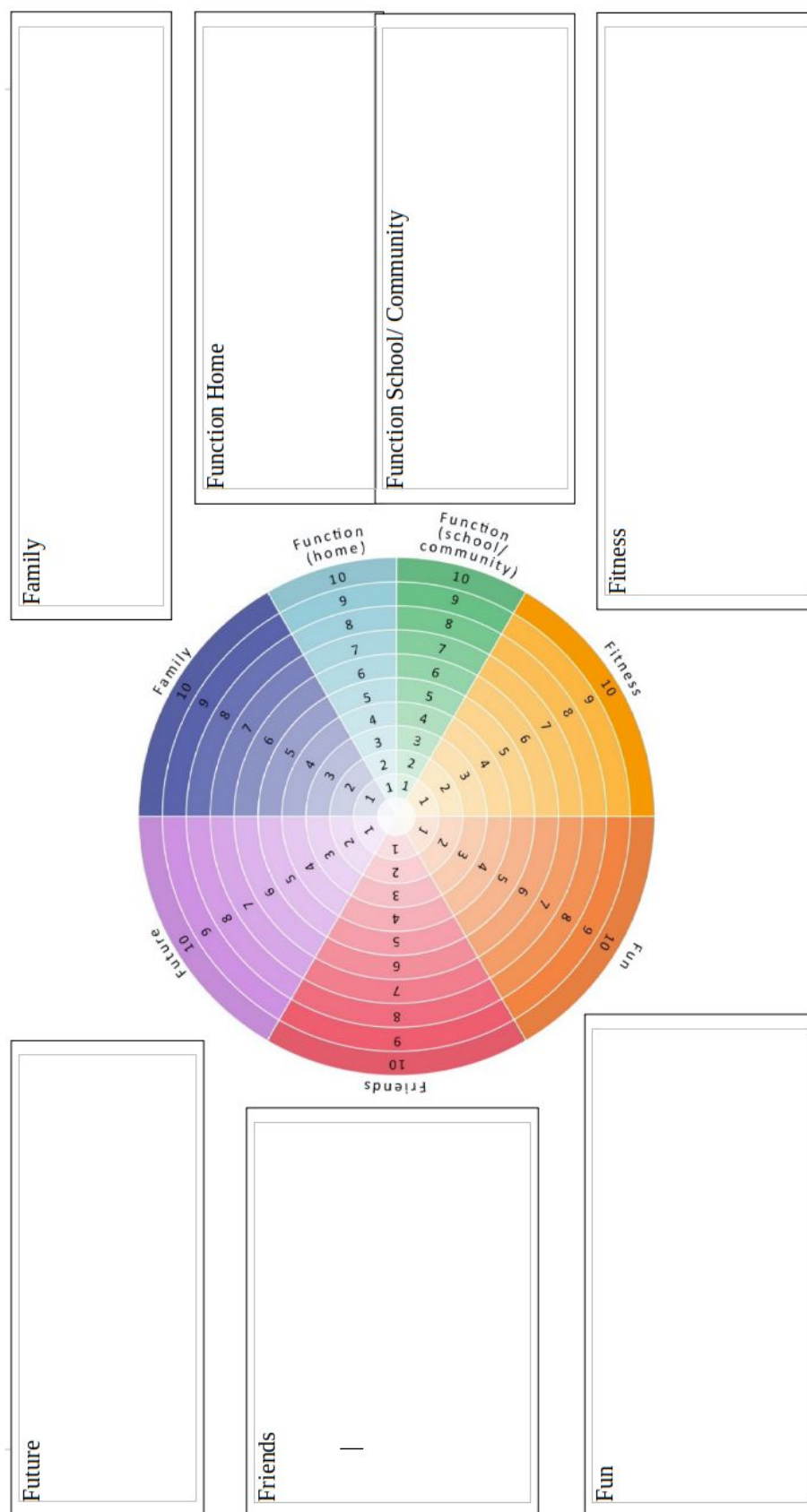
For me to be able to explain to my teacher what would help me in my student lead interview.

To remember to feed the dog without being reminded by Mum or Dad.

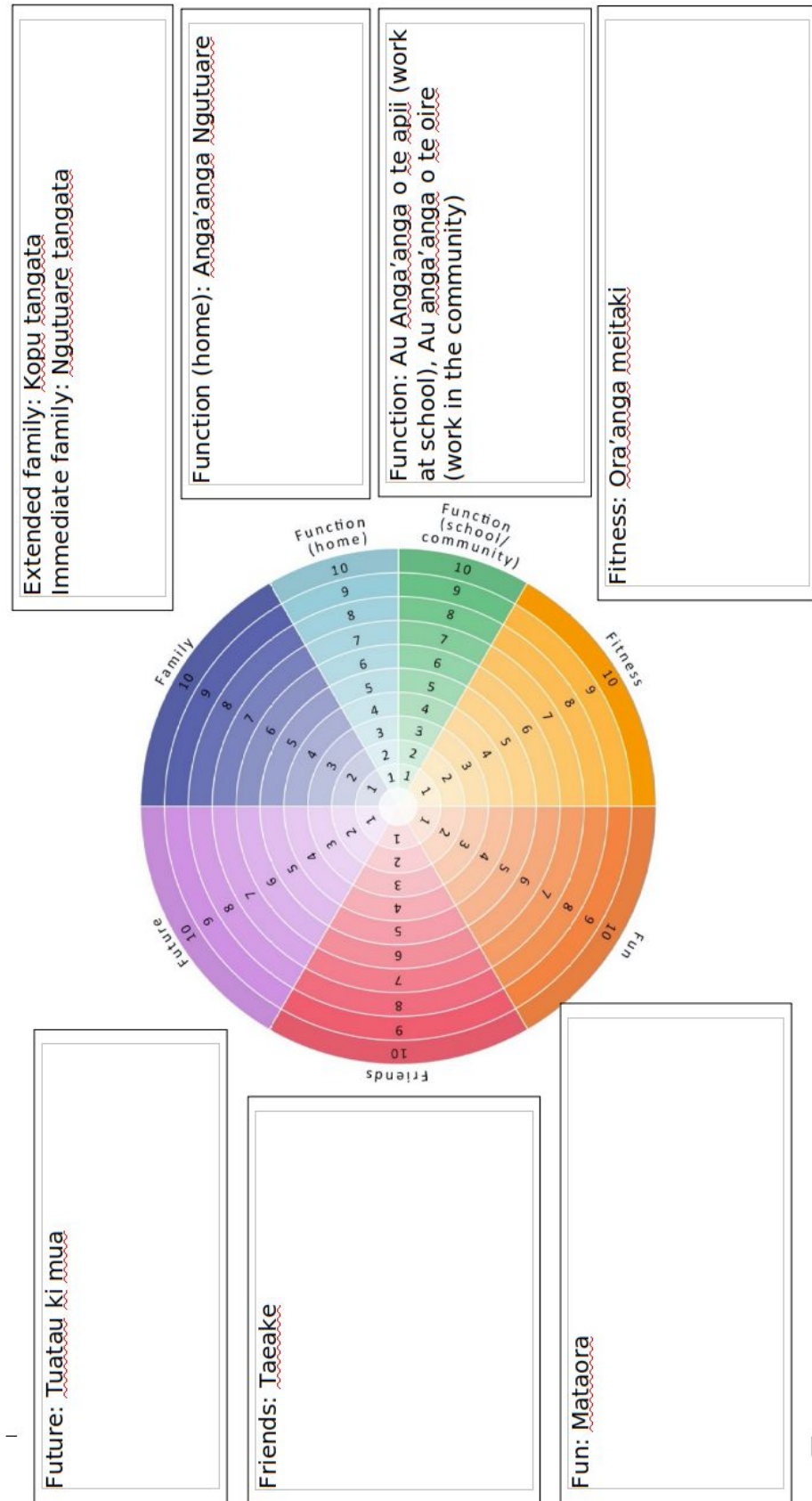
Te Reo Māori, Aotearoa Version



English Version



Cook Islands Māori Version



Further Reading

ICF - F words and participation frameworks

www.canchild.ca/f-words

F-Word Knowledge Hub

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

Canadian Occupational Performance Measure (COPM) <http://www.thecopm.ca>.

Goal Attainment Scale (GAS)

http://elearning.canchild.ca/dcd_pt_workshop/assets/planning-interventions-goals/goal-attainment-scaling.pdf

Occupational performance coaching Dr Fiona (Fi) Graham University of Otago
Wellington NZ

<https://www.otago.ac.nz/wellington/departments/medicine/postgraduate/rehabilitation/otago695265.html>

OT Coach Jen Gash: Coaching by OTs, Coaching for OTs

<https://otcoach.com>

Sylvia Rodger, Dr. Jenny Ziviani. (Eds.). (2008). Occupational Therapy with Children: Understanding Children's Occupations and Enabling Participation. Oxford, UK: Blackwell Publishing Ltd.

Sylvia Rodger, Ann Kennedy-Behr (Eds.). (2017). Occupation-Centred Practice with Children: A Practical Guide for Occupational Therapists (2nd Edition). Wiley-Blackwell

Jenny Ziviani, Anne Poulsen, Monica Cuskelly. (2015). Goal Setting and Motivation in Therapy: Engaging Children and Parents. Jessica Kingsley Publishers