

Aiming For Greater Recovery Outcomes - Marabeth Quin & Danielle Stoller

Marabeth Quin & Daniele Stoller created Expanded Practice to teach physical, occupational, and speech therapists how to start utilizing the power of positive mindsets in the recovery process so they can help them reach greater recovery outcomes.

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Transcription

Danielle Stoller 0:00

I authentically believe that your brain is amazing, I can continue to heal with the right input. I know that I have gone to extensive continuing Ed and I know how to treat a stroke patient very well.

Danielle Stoller 0:13

And I believe that I can set up the environment, both external and as much

internal as I can affect to help you optimize your healing potential. And so when I start talking and doing things and watching my patients.

Danielle Stoller 0:29

And really observe their emotional responses to what I'm doing their physical responses to what I'm doing, they start to feel differently. And they oftentimes will say, why hasn't anyone done this before?

Intro 0:47

This is the recovery after stroke podcast, with Bill Gasiamis, helping you navigate recovery after stroke.

Bill Gasiamis 0:59

Hello, and welcome to another episode of the recovery after stroke podcast. Recently, Spotify released a new feature that allows people to now rate their favorite shows in the same way that the apple podcast app allows it.

Bill Gasiamis 1:14

So if you're an Apple podcast app, kind of person or a Spotify kind of person, please go along and leave the show a five-star review. If you think it deserves that. That is, I'd love it if you left the show review because this will help the show rank better on search engines.

Bill Gasiamis 1:31

And it'll help newly diagnosed stroke survivors find the show better, quicker, easier, and it could make a massive difference in their recovery. So go to your favorite podcast app now and share what the podcast means for you. It really will make a huge difference, and it will help people in their stroke recovery.

Introduction - Expanded Practice

EXPANDED PRACTICE



Bill Gasiamis 1:48

Now, this is episode 192. And my guests today are Marybeth Quinn, whose daughter had a stroke when she was 1910 years ago, and who decided that there was more that could be done to support her daughter's recovery that other therapists were not doing.

Bill Gasiamis 2:07

And my other guest today is Danielle Stoller, who was an occupational therapist who almost walked away from the profession. Until the fateful day when Marabeth walked into her practice.

Bill Gasiamis 2:21

Ages later, together, they created [expanded practice.com](http://expandedpractice.com), an organization that teaches physical, occupational and speech therapists to start utilizing the power of positive mindsets and expectations in the recovery process so that they can connect with their patients on a more significant level and help them reach greater recovery potential.

Bill Gasiamis 2:47

Expanded practice is passionate about improving the rehab experience for patients and therapists that both thrive and achieve the highest possible outcome. Now, if you're in therapy right now, and listening to this, or your loved one is in therapy right now, and listening to this.

Bill Gasiamis 3:06

This would be a great episode to share with their therapists right now. They are

probably looking for new ways to expand their skills and achieve a better work-life balance to become better therapists, better mothers, better fathers better human beings at home, and also to become better at helping their patients achieve greater outcomes.

Bill Gasiamis 3:33

So just listen to this episode, and you'll know exactly what I mean and why I think that you should share this episode. So please do I hope you love the episode as much as I do. And without further ado, let's get on with the show. Marabeth Quni, and Danielle Stoller, welcome to the podcast.

Marabeth Quinn 3:55

Thanks. We're so glad to be here.

Danielle Stoller 3:56

Thanks for having us.

Bill Gasiamis 3:57

Thank you for being here. Firstly, let me just ask Marabeth to introduce yourself and then we'll go with Danielle.

Marabeth Quinn 4:06

Hi, I'm Marabeth Quin, and I am a mother of a stroke survivor. So I'm really glad to be here today, because we have a lot in common.

Bill Gasiamis 4:18

Well, we certainly do. And Danielle?

Danielle Stoller 4:22

I am a physical therapist. I've been a physical therapist for 21 years, and for the last 10 years I have treated predominantly stroke survivors.

Bill Gasiamis 4:32

Fantastic. So tell me Danielle, why are you predominantly treating stroke survivors? What's so special about us?

Danielle Stoller 4:40

Oh, stroke. Rehab is challenging. It's fascinating. I love working with the brain. I love watching people transform and I love knowing that the brain can continue to get better with good input and practice.

Danielle Stoller 4:58

And being part of that and helping a patient through that has really been a great joy for me. So the more I learned about it, and the better I got at it, the more I wanted to learn more and get better, because I think there are so many patients that have potential that is untapped. So that's why I like doing this.

Never Say Never

Bill Gasiamis 5:22

You need to speak to some of those doctors that tell stroke survivors that, hang on a sec, you've had a stroke, your left side doesn't work, you're probably not going to walk ever again.

Danielle Stoller 5:33

Yes, those health care providers are quite frustrating. And I think it's both Marabeth and I that's one of our missions is to do what we do. And maybe more people will hear that those kinds of predictions are just not accurate.

Danielle Stoller 5:54

And even studies are showing that they're not accurate. So hopefully, these doctors that are saying those things will catch on, because it's just not true. And it's not helpful for the patient at all, to hear that.

Bill Gasiamis 6:07

No, not helpful at all, and it could put some people in a real tailspin. And can create a lot of setbacks early on in the process, when the last thing you need, because you've had all the setbacks already, you're in hospital, and you can't feel one of your sides or it's not working.

Bill Gasiamis 6:25

Or both sides for some people. And then the last thing you need is a doctor to come in, and superimpose the negativity on already a situation that it's not that bright and positive. And it's just really challenging.

Bill Gasiamis 6:43

And I thought when I had my first brain hemorrhage 10 years ago, and then I had a second one and then had a third one. But when I had that happen, I thought that doctors were saying that then, you know long time ago when it was like back in the day?

Bill Gasiamis 7:01

Well they're not they're still saying it now I get comments from people regularly who tell me that the doctor said this, and the doctor said that and they're reaching out for support to find out is it possible to get better and overcome that even though I've just started this process, or I'm 12 months in or 18 months in?

Marabeth Quinn 7:21

Yeah, it's crazy. I don't understand at all, why doctors are saying that. Now I understand that they don't get maybe out in the field a lot. But there is research. And the thing about that is so much of the research shows that when people believe that they've run out of time, then they don't act in ways that can change that.

Marabeth Quinn 7:50

And so in a way, those predictions that they're handing out based on statistics are actually self fulfilling. They're perpetuating people not getting better. And there is nothing at all to that time limit they give people that has not been our experience in the least. So I'm sure we're not special in that, you know?

Marabeth Quin

Bill Gasiamis 8:15

No, not at all. Tell me about your daughter Marabeth, was it your daughter or your son? I forgot to ask.

Marabeth Quinn 8:22

Daughter.

Bill Gasiamis 8:23

Yes. What happened?

Marabeth Quinn 8:26

Well, it was in 2012. She was just a few weeks shy of her 19th birthday. Her name is Sophie, she was away at college. And we got a call late one night that she had fallen on a treadmill.

Marabeth Quinn 8:43

So thinking that it was nothing too big. We sent her brother who was also living in the city where she was in Chicago. And we sent him to the hospital and said go

check on Sophie. And he called us and said, well, I'm here, I think she knows who I am but mom, she's not talking.

Marabeth Quinn 9:06

And in that moment, I think I realized, well, this is something, something has happened. And during our drive to Chicago, we definitely got the call, you know your daughter's had a massive stroke. And there it was, you know, I didn't know anything about stroke at that time.

Marabeth Quinn 9:29

I didn't know young people could have a stroke. I didn't know what it meant for your life when you have a stroke was completely a blank slate. But I decided that I was not going to listen to anyone. I was just going to believe in possibilities and believe in my daughter.

Marabeth Quinn 9:54

And when we got to the hospital, we had the experience that you just described exactly where the neurologist came in with all of these residents, because it was a teaching hospital, and they all asked us all these questions, tons and tons of questions.

Marabeth Quinn 10:15

And then when they were done, he stepped up and he said, your daughter has had a massive stroke that's damaged over 80% of the left hemisphere of her brain. And then he looked at her and he sort of shook his head and he said, she might walk again, with a cane.

Marabeth Quinn 10:34

And then he left the room. We were absolutely stunned. I just couldn't believe 1 that he was saying something like that to us and 2 I was thinking, how can you possibly know that? Why would you say that? You cannot predict the future, why would you say something like that? That's so dismal.

Marabeth Quinn 10:57

And right behind him, the nurse her name was Jessica, I wish I knew her last name, so I could find her. But she walked behind him, closed the door, pull the blinds and then came back over to us. And she said, Do not listen to a word of that, she is young. I have seen miracles.

Bill Gasiamis 11:19

I'm cringing like it's making my blood boil. It really is. And it happened ages ago. But it still makes my blood boil. So I had 18 months after my brain surgery, I had thyroid surgery.

Bill Gasiamis 11:35

And the lead up to the thyroid surgery was I had the endocrinologist surgeon was going through the whole process of trying to diagnose me and etc. And they did exactly what you said she walked in the room where there was a resident who was asking me some questions.

Bill Gasiamis 11:53

She said, we did the biopsy, it could be cancer, she closed the door, and she walked out. And the resident the poor resident saw the steam start coming out of my ears, she started to defend her. And I said don't defend her. I will sort her out when she comes back.

Bill Gasiamis 12:15

And she came back and I had to pull her aside. And I said to her listen, we need to have a conversation about what you said and what you did. When you came into that room before. It's not appropriate for you to walk in and speak to me like that and close the door after you've dropped the C bomb.

Bill Gasiamis 12:39

And then she started to apologize and backpedal. And we kind of reset the whole consultation, but it was so terrible. Now I knew I never had cancer. So it was not an issue for me. I'd been through the wringer already, even if it was cancer, it wasn't going to be something that I was going to be concerned about with.

Bill Gasiamis 12:58

But that whole approach, and then she said to me, what happened to your head and I said, I had brain surgery, she goes well, that's pretty serious. I said, That's not as serious as what you did when you walked in the room and spoke to me like that.

Bill Gasiamis 13:13

So imagine, you know, that Hippocratic Oath, amongst other things, there's a part in it that says do no harm. Oh, my gosh, those statements are so harmful. And then I imagined Danielle, that you would have been seeing patients like that

regularly. And now you have to undo all the stuff that's been done to them apart from the stroke that they've had.

Danielle Stoller 13:42

Yes. And that really brings us into, what we do is that we work with therapists to really make them master communicators so that you can navigate the psychological and emotional elements that come into play in rehab.

Danielle Stoller 14:00

Because a healthcare provider is seen as an expert to that patient, and what you say carries a lot of weight. And so, you know, I can undo that very quickly. I've found with just saying a few of the things that they've been longing to hear that I believe authentically are true.

The Right Kind of Tool



Danielle Stoller 14:24

I authentically believe that your brain is amazing and can continue to heal with the right input. I know that I have gone to extensive continuing Ed and I know how to treat a stroke patient very well.

Danielle Stoller 14:39

And I believe that I can set up the environment both external and as much internal as I can affect to help you optimize your healing potential. And so when I start talking and doing things and watching my patients and really observe their emotional responses to what I'm doing, physical responses to what I'm doing,

they start to feel differently.

Danielle Stoller 15:04

And they oftentimes will say, why hasn't anyone done this before? Or, you know, they'll tell me a story like yours. And, then you just have to say to them something like, Well, I don't know what your ultimate outcome will be, but I know I have something that I can help you right now. And that's what they need, they just need a little hope they need you to nurture that hope, and foster it with what you do.

Bill Gasiamis 15:32

That's amazing. See that's exactly what I needed. And the first hospital I was in, I had to actually gather all my goods and leave that hospital and go to another hospital. Because I had, again, the neurologists would come around with all the residents, they would talk about me at the edge of my bed as if I wasn't there.

Bill Gasiamis 15:51

And I wouldn't be involved in the conversation. And then I left. And I, I would imagine marbeth that you experienced that whole same thing. But as a parent, I would have been livid as a patient I was still unwell and a little bit kind of nicer, because they were caring for me.

Bill Gasiamis 16:14

But as a parent, I would have been livid. Did you have that experience? Did you have the whole conversation, watching them talking about your daughter, and then trying to reconcile what was happening?

Marabeth Quinn 16:29

I was livid for the moment. But honestly, since I didn't know much about stroke, I was mostly just bewildered. Like, I honestly could not figure out why someone could think that would be helpful. Just logically, I could not figure out why. And also how he was getting it confused with facts, and that is something that I think is an actual problem.

Bill Gasiamis 17:03

Opinion instead of facts of the case in front of you. Wow.

Marabeth Quinn 17:07

Exactly. I think a lot of us confuse the facts. And then the story we have around

the facts where we're extrapolating what we think will happen, those are not facts. And those are also not helpful, if what you're extrapolating is really dismal.

Marabeth Quinn 17:32

Now, if what you're extrapolating is hopeful, then it's helpful. So that is another thing that we really try to teach therapists that we have storytelling brains, like, we can look at a fact. But our brain immediately tells a story about it, and tries to predict what will happen in the future and why it's happening and what it means.

Marabeth Quinn 17:56

We have meaning-making machines in our head. And so you know, patients are always trying to figure out, they're writing a story about what they think their chances are, how far they're going to get an every person that comes into contact with them is playing into that story is giving them bits and pieces that they will make meaning out of.

Marabeth Quinn 18:26

And so what we really try to teach therapists is you got to take this seriously, every word that comes out of your mouth, it either needs to be just not only factual, but what's necessary. There are 1000s of things that are true. But only some of those things are necessary to know in the moment, and only some of them are actually serving the patient.

Marabeth Quinn 18:51

And so we really just we sort through all that stuff, because that can get I think, very confusing for medical professionals, you know, they, they think, Well, I don't want to do harm. I don't want to set somebody up to be disappointed, not realizing because they've never been in those shoes.

Marabeth Quinn 19:07

No, no, no, that is not the danger here is that you're going to be hope and be disappointed. The danger is that you're going to get hopeless and you're never going to try at all. That's what the real danger is. And so we just try to really sort that out for them. And you know, just to I don't want it to be left unsaid.

Marabeth Quinn 19:27

Here we are. 10 years later, they we were told by people that Sophie had six to 18 months in which she would see some recovery and that was it and like everybody else who's been told that talk about a stressful experience.

Marabeth Quinn 19:44

That is your you've got a ticking clock in your head all the time. But here she is 10 years later and she is still gaining ground in all areas. She walks beautifully without cane and you know, she had global aphasia and was completely paralyzed on her right side.

Marabeth Quinn 20:09

And you know, she's got great movement in her arm again, she's still working on hand function. But like I said, she works beautifully. And she couldn't talk for years. Like, I mean literally, like, couldn't tell you a thought.

Marabeth Quinn 20:27

And now she is talking in mostly complete sentences. And she's read like 140 books in the last two years. So this time limit business needs to go away, there is no time limit. It's all about just continuing to give your brain good input and repetition. You can keep getting better.

Bill Gasiamis 20:52

I just realized I forgot to ask how you guys came together? We're going to do that next, Danielle will tell us that next. But before we do that, I'm going to offer some rules, I'm sure that most of the people that you're teaching have seen Fight Club.

Bill Gasiamis 21:06

And the first rule of fight club is we don't talk about fight club. The second rule of fight club is we don't talk about fight club. The first rule of occupational therapist school should be, make no meaning in your head.

How Marabeth Quin And Danielle Stoller Met



Bill Gasiamis 21:22

And the second one should be, do not offer that meaning should you make it against our advice, do not offer that meaning that you've made in your head to the other person that you're supposed to be helping. So that you're starting from a fresh, blank slate, and you're allowing the recovery to emerge, rather than setting parameters on how the recovery should look. Danielle, how did you guys meet?

Danielle Stoller 21:54

We met because Sophie needed physical therapy. And I think what might be kind of interesting to talk about is that when we met, I was actually quite burned out and thinking about quitting my job. In fact, I was looking for ways to quit the profession altogether. Because, you know, the healthcare system can be quite demanding.

Danielle Stoller 22:24

There are productivity expectations, there are insurance restrictions, there are all these things that make doing patient care, quite difficult. And also, at the time, I was approaching patients with a very biomedical mindset, like just going out with a physical therapist that was going to do physical things to their physical body.

Danielle Stoller 22:47

And I really wasn't paying that much attention to the emotional psychological parts. I wasn't trying to affect their mindset. I realized it was at play, but I was like, that's not really my job. And then Marabeth walks through the door with her daughter and Marabeth had this attitude. Actually, it's not even an attitude, it was a way of being an energy.

Danielle Stoller 23:14

And that energy was very clear. It was full of well-being. And I felt it immediately. And I thought, wait a minute. This is affecting me. I know it's affecting her daughter, I can see how well her daughter is doing in this environment. Now, I have something I can work with how do I take what this woman has figured out how to do because she loves her daughter, and put that into my sessions with all of my patients.

Danielle Stoller 23:48

So we started having these conversations that started as very typical family education. And then I would hear her responses and she would tell me things that she was observing and I would go to the research and say what can I learn more about what she's seen? And over the course of several years, but we ended up creating a class and a accompany.

Bill Gasiamis 24:15

Unbelievable, Marabeth. Did you know, what not Did you know, but did you find Danielle easily it? Was she the first port of call? What happened? How did you guys, how did you get there?

Marabeth Quinn 24:28

Well, it was totally serendipitous. We were we we did inpatient rehab in Chicago, where Sophie had her stroke. And the OT that Sophie worked with, in inpatient wanted her to use a particular device which in you know, big picture she never wound up actually using.

Marabeth Quinn 24:51

But at the time, she said, I found one therapist in Nashville that certified for this device. I said, Okay, great. Give me her name. So we contacted that therapist, she became Sophie's OT. And of course, she immediately said, you know, I would never use this device.

Marabeth Quinn 25:09

I was certified just, you know, continuing education, but I would never use this device. But, I will treat your daughter and I'll love treating her and she's a fabulous therapist. And so it was through her that we met Danielle, because we were seeing another PT for just a little bit of time.

Marabeth Quinn 25:32

And it was this OT that said, Oh, no, you need to use her, you need to use Danielle Stoller, for PT. And it was the best decision ever, because they wound up actually treating Sophie together like they conferred with each other a lot. And it was so clear, both of them saw Sophie's body, not as an arm or a leg that they treated.

Marabeth Quinn 25:58

But as a person, like she's a person, she needs to move like a person, she needs to express like a person. And they were just wonderful. They had amazing influence on Sophie at the time, like I said, for years, she couldn't talk.

Marabeth Quinn 26:19

So obviously, all of her friendships were gone. You know, when you can't have a conversation, and you're so physically altered, she was really sick for a long time. So they were not only the people that were putting her body back together, but they were her friends, like other than us.

Marabeth Quinn 26:43

They were her social network, they were the people she laughed with, they were the people that sometimes she confided in. They were completely and utterly necessary in this way to her recovery. And, you know, that's the other thing that when I saw the influence, they had, you know, therapists are with patients, more than any other medical professional, those patients have.

Marabeth Quinn 27:12

Like, exponentially more hours and hours more, they get to actually create a relationship, like an actual friendship sort of I get to know you, you get to know me sort of relationship, there's incredible influence in that. They're also viewed as the experts. So everything that comes out of that therapist mouth, that patient is going to be greatly influenced by.

Marabeth Quinn 27:40

So if that person has a really good outlook on what their chances are and what their future is, they can influence that patient in that way. And so when I saw that, about therapists, I thought, if there is one thing I could do, like make beauty out, if something painful in the world, it would be to let every therapist know the incredible position that they're in.

Marabeth Quinn 28:10

Because what I mostly saw is that they didn't realize they had that power, they

didn't realize that that's the role they could play. Some of them played it here and there in a natural way. But a lot of it I just saw, you know, they don't get most therapists get hardly any education in like, the psychological component or the emotional component of what their patients are going through. And as you know, mindset in a long recovery, that's where it happens, that's what keeps you going.

Mindset Chapter One By Bill Gasiamis

Bill Gasiamis 28:47

Mindset is number one, the book I'm writing is going to be mindset chapter one. And everything else comes after that. And the reality is if I could actually make the emotional recovery, number one, I would, but you can't reach people at the emotional level, in the Western world, you have to reach them, and convince them at the head level, and then bring them to have the emotional recovery and convince the head that it's okay to have any emotional recovery as well.

Bill Gasiamis 29:17

So, unfortunately, mindset is first because of the way that we treat the head being the intelligence that has been given the most credibility out there in the Western world. So we've got to start there and then lead them to the emotional recovery and then bring them back and convince the head to do all the other holistic part of the recovery.

Bill Gasiamis 29:44

So I love how you guys spoke about holistic Danielle, I imagined in my head that as Marabeth was talking about her experience meeting you and vice-versa. I imagined that you were at that point. The way you were ready to leave your work, because you didn't realize that you had the capacity to really make such a massive difference.

Bill Gasiamis 30:10

And that you played so many roles for these people that you were actually their friend, when they were spending so much time with you because they had lost friendships and all that kind of stuff. Is that accurate? Did you not see yourself as playing that important role?

Danielle Stoller 30:28

It's partially accurate, you know, I've always been a kind and compassionate

therapist, right, I've always cared deeply about my patients and wanted the best for them. And, I did know that that I was some sort of social support for them.

Danielle Stoller 30:49

What changed in me was, I didn't know that I could intentionally affect these things to help their physical body recover. That was the missing piece. It was like I did this physical stuff. And I was nice. But what I didn't realize was, because we believe and expect certain things, our bodies respond in certain ways.

Danielle Stoller 31:15

And I didn't realize how stress was contagious, and how emotions were contagious, and how I could impact my patient's physiology by my state of being. So when I started recognizing that, then I realized there's two ways I affect my patients is with my clinical skill, and it's with human presence and connection, and both are going to affect their bodies. And that just made my job that much more meaningful, and it made my connection stronger with them.

Bill Gasiamis 31:46

And influence greater, and your job easier.

Danielle Stoller 31:51

Yes. All of that. And when that started to happen, I thought, I can't be the only one that knows about this. Other therapists need to know about this. And, and so I just wanted to share it and Marabeth is the perfect person to partner with. Because when we blend our two perspectives, you get this whole picture of a patient.

Danielle Stoller 32:13

You get what happens outside of the clinic, and you get this perspective from a caregiver. And you know, Marabeth is very wise. And she's very intuitive and insightful. And so it really takes a clinician's mind and kind of goes, whoosh, let's look at this other part too. And, and it just it benefits everybody.

Bill Gasiamis 32:37

First, a couple of horror stories from my perspective, because you're describing the gold standard, the real gold standard of how people should be cared for, and how you need to approach caring for people.

Bill Gasiamis 32:52

So I'm in rehabilitation, and I'm in there for a month and nobody has realized that I am there, they need to connect with me, I have no social contacts, I'm only seeing my family when they come as often as they come all that type of thing, and I'm stuck with them.

Bill Gasiamis 33:10

So my communication my attempt to as you can tell them very chatty, I love a chat. My attempt to be this way with those people who I imagined were inundated and overworked, wasn't working. And I was feeling lonely and on my own, and all the usual things that people feel when they're isolated, especially after stroke.

Bill Gasiamis 33:38

Not that I was too upset or distressed or depressed about the fact that I couldn't walk I was just after, you know, it was just a week out of surgery. So I wasn't my best self. Nonetheless, there was a situation where there was another lady who had come in, and I imagined that she was completely unable to move any of her body and she was there for rehab.

Bill Gasiamis 34:02

I suspect now that she probably had locked in syndrome or something like that. So she was soiling herself. And they were going through the process of cleaning her a couple of times a day at least. But the thing they were doing is they were not moving the bin that they were putting all the soiled goods in from the corridor outside of her room and outside of my room.

Bill Gasiamis 34:30

And all they had to do was take it out to the area that was allocated for that outside of the actual hospital. And I would ask them to please remove that there because I've got to smell the soiled goods all day, every day when I'm in my room and therefore I'm not staying in my room. They couldn't move it they wouldn't understand.

Bill Gasiamis 34:56

And I had to get to the point where I had to go to reception at lunchtime, and invite them into my room to have lunch with me. And they wouldn't come, and they said well we can't do that I said, well you need to come because you need to come and understand how I'm having to experience lunchtime in my room with that bin outside my door.

Bill Gasiamis 35:25

Anyhow, that was kind of the last straw. And that made that happen. And I got that over the line. And it was days of arguing and fussing when what I should be doing is learning how to walk again. Not telling them how to do their job. So there was that, then another time, this is a better story.

The Power Positivity

Bill Gasiamis 35:46

We're in rehab. And I've got my hand in the rice, trying to find the pen lid and you know the ball bearing and all the different things and label them and tell them what it is before I pull it out and identify it. And while I'm doing that there's a gentleman in a wheelchair who also had a stroke.

Bill Gasiamis 36:06

I've named him Ivan, I don't know if it was his real name or not, but I don't know his name. And I did a whole presentation on this for a group. And Ivan was looking at his hand and saying, come on, you bastard move. And it wouldn't move. And he had a toilet roll and empty toilet roll.

Bill Gasiamis 36:30

And he was supposed to pick it up, and then put it on the other side and settle it down without falling over. And he was calling it a bastard. And his hand wouldn't move. Now I'm a coach, I've been a coach before I had the stroke. I'm a coach now. And the coach in me with my hand in the box of rice said, Hey, Ivan, if your hand moved, what would it be?

Bill Gasiamis 36:54

He goes it'd be my friend. I said alright, so call your hand your friend now. Pretend that it has done what you wanted it to do and see what happens. And sure enough, Ivan goes, come on friend move within one second. After he picked up the toilet roll. He put it on the other side and then let it down without it falling.

Bill Gasiamis 37:21

And everyone went nuts. Everyone did that Oooh, I did that, everyone did that. But I think the therapists missed the real thing that just happened. They missed it and of course, I wasn't in education mode beyond that thing with Ivan, I was just, we got a result, call it your friend from now on Ivan, and hopefully things get

better.

Bill Gasiamis 37:53

And then I didn't get to see him because I left a month earlier than I was meant to leave. I was booked in for two months. I was only there for a month. Hopefully I had done enough for Ivan to take the mantle and to take the baton and run with it right? So I'm very passionate about this topic. As you can see, like I'm fully aware of how you're impacting my recovery, how Ivan's impacting his own recovery, how I'm impacting my own recovery.

Bill Gasiamis 38:28

And I'm going through this process of trying to affect change in this way. And one of the most amazing things to come out of my stroke is that I get a phone call from one of the local universities, Australian Catholic University, and I'm asked to do a presentation every single year to the third year occupational therapist students about my experience with occupational therapists, and what they could do better.

Marabeth Quinn 38:59

Oh how wonderful.

Bill Gasiamis 39:00

Right? So you can see how this episode for me is going to be the most necessary episode. We don't get enough to get it out there to share these stories, because I know that people are watching and listening now and going, oh my gosh, I wish I found these ladies.

Bill Gasiamis 39:19

I wish I went through this therapy. I wish the therapists that I was with learnt the things that these guys are talking about. And I hope that this episode gets shared through to occupational therapists all over the place. That's how passionate I am about it.

Marabeth Quinn 39:36

Yes, I totally agree.

Intro 39:36

If you've had a stroke, and you're in recovery, you'll know what a scary and confusing time it can be. You're likely to have a lot of questions going through

your mind. Like how long will it take to recover? Will I actually recover? What things should I avoid in case I make matters worse.

Intro 39:55

Doctors will explain things but obviously you've never had a stroke before. You probably don't didn't know what questions to ask. If this is you, you may be missing out on doing things that could help speed up your recovery.

Intro 40:07

If you're finding yourself in that situation, stop worrying, and head to recoveryafterstroke.com, where you can download a guide that will help you. It's called seven questions to ask your doctor about your stroke.

Intro 40:21

These seven questions are the ones Bill wished he'd asked when he was recovering from a stroke, they'll not only help you better understand your condition, and they'll help you take a more active role in your recovery. Head to the website now, recoveryafterstroke.com and download the guide. It's free.

Bill Gasiamis 40:40

So tell me about that first course that you guys developed, and then started teaching. How did that happen?

Marabeth Quinn 40:50

Well, it was actually just the evolution of so many conversations that we had had. And it wasn't, it wasn't like either of us started out going, You know what, it's my dream to have a company. And let's teach this stuff like it literally just happened organically to the point where our conversations were such that we were like, we've got to do something with this.

Marabeth Quinn 41:18

And so it really is an introduction into a new way of looking at what's happening in the rehab experience. We talk about all sorts of different things, we talk about much of what we've talked about here, how our brains are storytelling, meaning making machines and how hope is actually a medical necessity, like you cannot make this journey without hope.

Marabeth Quinn 41:51

And so hope, therefore, is something that is not well, first, you have to make sure

you don't trample it, but then figure out responsible ways to nurture nurture hope in your patients, because it seems to be even part of the, the emotional side of a physical healing process.

Marabeth Quinn 42:18

And then, you know, we go on, and we talk about, you know, how therapists can sort of branch into it following their intuition more, like really paying attention to how their patients are feeling, using those emotions as sort of messages or, you know, ways to know which way to go and just tried to give them a whole new look at what is actually happening in that patient, and what their role could be in it. What would you add Danielle?

Danielle Stoller 42:55

I would say the first course we did it was a three hour continuing ed course. And, each one of the things that we've developed since then we have something that we keep in common. And what it is, is we give the therapist, a framework that they can use so that they can repeat things. You know, this is accessible, it's easy to use, and it's repeatable.

Danielle Stoller 43:18

So that moment, like you had with Ivan is something that I could do with the next patient too, because that's what we want. So you know, the framework were used in that first class called writing the rehab story was for this therapist ask themselves four questions.

The Four Questions - Danielle Stoller

Danielle Stoller 43:38

And we get into this, but if you could just ask yourself these four questions. What am I thinking? What am I conveying? What am I feeling? And then how am I stabilizing? Because it all has to start with you. Your true feelings and emotions are going to leak out through your body language, it's going to reflect the exact story you're telling.

Danielle Stoller 43:58

Emotions are contagious, what you feel they are going to feel. So you have to learn how to stabilize. So that's where we started in. And then we've just developed from there, you know, when COVID hit, there were no live classes

anymore.

Danielle Stoller 44:14

So we pivoted and now we have an online program. And that's, you know, we've been talking about mindset mindset is the lens through which you see the world it's important for the patient, it's important for the therapist, so it's called clearing the lens. And there's a there's a structure for that one as well.

Danielle Stoller 44:33

But, you know, just like when when you had that interaction with Ivan, I can imagine when he was successful, you felt great to you know, you felt great when you gave him the key to success right there. You gave him that little nugget that made him change his performance.

Danielle Stoller 44:53

So this is you know, as a therapist, you're looking for that all the time. You're looking for that win and that's why it's, it just makes you feel better about your job. Not only is your patient improving, but your job satisfaction is going up.

Bill Gasiamis 45:10

And your home life is improving because you're doing that unconsciously, at home as well, you haven't realized that you've taken those skills that you've learned in that occupational therapy additional training room, you're taking it home, because everything is a loop, because it worked at work, it's going to work at home with your children.

Marabeth Quinn 45:33

Yeah, yes, exactly. And I was going to add that the story you told about Ivan, it just reminded me so much, one of the concepts that we teach therapists is you're not just rehabbing a body, you're rehabbing a relationship.

Marabeth Quinn 45:50

You're rehabbing the relationship that person has with their body. And one of the things that a lot of people don't understand about when something like this happens to your body, the relationship that you're required to have with your body.

Marabeth Quinn 46:09

So you can move forward is deeper and more full of self-compassion than you ever

had to before this happened like it, it forces you into those places. And if you don't go, then you're just left with what sort of happens naturally in the body, right, and all of those conflicts and the understandable frustration, and even maybe just anger at your own body, that actually fuels what's happening physically in a negative way.

Marabeth Quinn 46:47

And it's easy to see, you know how that happens. And it's easy to see how when someone can learn how to relax, and have a little bit of compassion, see their body as their friend or their brain. As, as doing its best for you actually doing miraculous things by rewiring. When you have those feelings. You see those played out in the body physically as well.

Marabeth Quinn 47:16

And so they're paired, the emotion and the physical, they're paired up, they're linked up, always. And so when therapists know this, and they're looking what emotion is getting linked up with what we're trying to do here physically, then it is a huge Impactor.

Bill Gasiamis 47:40

For the people watching and listening, we glossed over Ivan. Danielle did the whole woohoo I did the woohoo. That was me, like in the room, you know, that's exactly what happened. But what people don't realize what Ivan did, by changing his words, is he decreased his blood pressure, had decreased his cortisol levels, he decreased the tone in his muscles, he increased increased serotonin, oxytocin, and he did all of those things, just by changing that one word.

Bill Gasiamis 48:20

In the song that Cher sings on a big ship, to a whole bunch of sailors. The words go, words are like weapons, they wound sometimes, if I could turn back time, right? And it's really important. That's what it is, words are like weapons and that doesn't make me perfect. The fact that I know that doesn't make me perfect.

Bill Gasiamis 48:44

That doesn't mean that I speak properly to my spouse and my kids all the time. But it means that I'm aware of that. And I can go back and undo the harm that I've done at the time, I can undo that, because I'm aware of that. And I can go and apologize. And I could try and make it better next time by not speaking that way.

Bill Gasiamis 49:03

But then also, so many stroke survivors that I coach, I'll say to them, would you speak to your best friend the way that you just described yourself? Honestly, would you say that to somebody else? And they would say no.

Bill Gasiamis 49:19

Why wouldn't you say that to that person? Because if I said that to that person, they would feel like this. And this would be that experience. And so well, how do you think you're making yourself feel by speaking to yourself that way. And by talking to yourself in such a negative way that your body let you down?

Bill Gasiamis 49:40

Your body didn't let you down? Nobody let you down. This is life, life happens. And what you have to do is you have to find a way to get back to life or whatever that is going to look like in the future. We don't know but it's your responsibility to take nobody else's responsibility. It's not your body's responsibility.

Bill Gasiamis 50:00

It's your responsibility to take, you're the one that can take the first next step towards your recovery towards healing towards where you want to be in the future, nobody else can do that. Danielle Marabeth, you guys are just the vehicle for guiding where the path leads, because you guys are on the right path to recovery.

Bill Gasiamis 50:27

And you're supporting occupational therapists and other practitioners to go down the same correct path with their clients, rather than letting them down some garden path that ends up nowhere. So that's the whole, holistic, that's what we talk about when people hear about, you know, that overused word holistic, and they don't even know what it means.

Bill Gasiamis 50:53

It's a holistic recovery heals mind, body, soul. And then in order to do that, we have to change our behavior, we can't just do that, by turning up to the problems that we have, in the same way that we created those problems, that we're just gonna get more problems Danielle is going like this.

Danielle Stoller 51:18

No, I everything you're saying it just really resonates. You know, that's, that's one

thing that we also share with therapists is that you're not there to fix their problems, you're there to invite them, you know, and I'm gonna make it as easy for you as possible.

Danielle Stoller 51:36

Like, if you were looking for your keys, you know, what I want to do is put those keys in an empty room on a table, so you can just walk there and get those keys like that. And that's how I see my role, I'm going to do everything I can to support this healing.

Danielle Stoller 51:51

But you're right. I mean, that there's so much work that that individual has to do, and they have to take that that little step that's available to them, even if it you know, it's not the one they want, you know, what they really want to do is play golf, they don't really just want to stand. But but you got to stand first, you know, and that's sometimes the hardest work of the whole thing, I think.

Having Good Communication Skills - Marabeth Quinn



Marabeth Quinn 52:17

Well, and having good communication skills, to know how to help them see that playing golf has a bunch of steps in it. And standing is the first of those, like just saying to a patient, well, you can't play golf right now.

Marabeth Quinn 52:18

This is what you have to do right now, that does not really reach in there and

Speak to what they're really wanting. But if you can talk about, find out what it is that they want, and help them see that everything that they're doing. They're on their way. This is part of the path that leads there.

Marabeth Quinn 53:03

They're not just cut off from their life and everything they love. But it's a process. And they have to have that inspiring factor because otherwise it's just too long and arduous. So if you don't have ways of talking to them, that are taking their emotions, and their desires and their dreams into account, then they're going to run out of fuel very quickly.

Bill Gasiamis 53:30

Yeah, that's absolutely right. I mean, one of the best things that happened to me is one of the therapists said to me, what would you like to do? Well, let me tell you what I would like to do. There's a list of things. And then she said, Okay. I said, do you guys have a pool? I didn't realize, when I went there that they had a pool, it took a week to find out that they had a pool.

Bill Gasiamis 53:54

And was like, yeah we have a pool, I said, can I do my therapy in the pool? Because that way, I'm not afraid of falling and I can, you know, be supported and all that stuff. And they're like, Yeah, you can, please let's do that. Like, oh, my gosh, I didn't know that you guys had a pool. So that was a real exciting part of my therapy because I have got to be in the pool completely supported.

Bill Gasiamis 54:17

And therefore for an hour I would forget about the possibility that I might fall over on my legs didn't work properly on my arm didn't work. And I would get a real a real buzz out of that session, and I'll be energized and it's nice and warm and cozy in a heated pool in therapy, you know, so I needed that and it was great.

Bill Gasiamis 54:38

And then I could go and rest and settle down and allow myself to imagine myself walking so I did a lot of that I did a lot of imagining myself walking so is there and that was supporting neuroplasticity, right? Because as you imagine yourself doing something, you're fine firing off the same neurons that you would if you're actually doing that.

Bill Gasiamis 55:04

So that's awesome. The thing that people don't talk about is all the all the negative talk that the doctor does fires off. Positive, negative neuroplasticity because neuroplasticity happens regardless of what you do. If it's a positive outcome you get, that's positive neuroplasticity, if you're doing something negative, that's getting negative neuroplasticity.

Bill Gasiamis 55:29

And if you're rewiring, that, that's staying there for longer and you might not be aware of it, and then you need to change that pattern, and you need to break that pattern need to reset and do a new one. So do you guys have these conversations with the therapists? Do they understand the concept of plasticity and neuroplasticity? And that there's this negative element to it, Danielle?

Danielle Stoller 55:56

Yes, that's definitely something because, you know, the brain is going to change with whatever input it receives. Right? So when we're talking to therapists about how they're interacting with their patient, even something as small as saying to them, boy, your hand's really tight today?

Danielle Stoller 56:21

Is that helping your cause? Now, I don't think the therapist meant to say anything negative there, or they probably weren't even thinking that that could be harmful. They were maybe just making an observation. But when you realize that you have this influence in this impact on your patient, then those kinds of things, you start to train yourself, is this serving them? Is this serving them?

Danielle Stoller 56:48

Because you want everything you do when I come in with a patient, I want every look on my face, every breath I take every touch I do to be serving your recovery and to be pointing you towards that positive neuroplasticity, I only get you for an hour or two hours or three hours a week, whatever it is.

Danielle Stoller 57:11

I want to make the most of that using all of these things. So that's definitely something that we encourage therapists to become more aware of. And again, give them processes things that they can think about on a regular basis. So that you don't have to think about it, every session, it just starts becoming the way you are.

Bill Gasiamis 57:35

It becomes you it becomes part of your being the part of the way that you turn up. You know, there's those people who turn up to a party and bring the mood down. And then, there's the life of the party, the person that walks in the room and the party just goes off to the next level.

Bill Gasiamis 57:54

It's like, I want some of that bottle that sell that and hand it around to all these party poopers. How do you guys go about encouraging therapists to look after themselves? Because therapists do a lot of looking after other people. And I imagine some of them miss the queues to look after themselves.

Marabeth Quinn 58:24

Well, one of the things and I'm sure Danielle has some ideas on this too. But you know, one of the things that we clarify is that the best way to fight something like burnout, let's say is to thrive, figure out what is going to make you thrive in your career.

Marabeth Quinn 58:45

And what we have found that people really begin thriving, when they learn productive ways of thinking about what they don't just take the definition of what their profession has come up with for them, but they make their own.

Marabeth Quinn 59:04

And they make sure it aligns with what their intentions were when they chose this career. And also when they learn how to effectively connect with another human being, like really see them really get to know them really be present and in the moment.

Marabeth Quinn 59:26

Because when you're doing those things, you know, our brains they're designed to connect. We're wired for it. And so when you are really doing that, as you're doing your job, you are automatically going to be happier in your job. You're going to get better ideas. The vibe that you're going to be passing on to your patient is going to be good, it's going to feel good to them, it's going to be healthy.

Marabeth Quinn 1:00:02

And you're going to go home at night, feeling like you know, when you are like

that, you're going to have moments with your patients in which they say something, and you have that perfect opportunity to say something like you did with Ivan, you have that perfect opportunity to say that thing and you see something change in their mind, or their heart.

Marabeth Quinn 1:00:29

And you get to go home that night and think, wow, I did that. Because those pivotal things, and this is what I've realized with Sophie over all these years, she has people that have worked with her body, laboriously for hours and hours, and that is entirely necessary.

Marabeth Quinn 1:00:50

But the pivotal moments, the moments where she was feeling like, I am tapped out like I am, I'm feeling done. You know, this is too hard. Those pivotal moments were when someone connected with her, and said something that helped her change the way she was thinking. And then when her mind opened up a little bit, then everything else happened.

Marabeth Quinn 1:01:17

Like she had more energy, she had the will to go on she had a better connection with her body, and all those things happen naturally. So when you're on the other end of that, and you're the person that gets to save the thing, you do go home at night feeling like you thought you might when you chose that career. But what would you add to that, Danielle, I'm sure there's things you have to.

Danielle Stoller 1:01:43

I would say along with all of that the connection is so important, but you really do have to train yourself to come into the present moment. Because the healthcare world for many people is an environment of chaos. And it's very busy. And you have all of these expectations, and it's so easy to get lost in that. And, you know, now I treat private clients and a cash-based practice.

Danielle Stoller 1:02:10

And so I have much more control of that. But I remember times when I was thinking, oh my gosh, my patient, I really need them to cancel, so I can get something done. You know. And so because I was so behind on paperwork, and that's not what I went into this for, you know. So when you can learn to train yourself to come into the present moment, when you're with your patient.

Danielle Stoller 1:02:34

That makes a huge difference, you're gonna make that connection. And, and then again, like you were saying, Bill, it carries over into other aspects of your life. So whatever that is, if you do yoga, or you run or, like I do Chi Gong, whatever that is to make sure that you're building in times when that happens outside of work too. Because it is a practice, you know, our brains, they go and go and go. So it really is something you have to intentionally do.

Bill Gasiamis 1:03:08

I love what you said that it's a practice. And you can practice it, you can practice every day doing all the wrong things. You can practice every day doing all the supportive and helpful things supportive to you and to everybody else or unsupportive to you or anybody else.

Bill Gasiamis 1:03:24

And if you're going to work every single day, and you're feeling like things are not going well and you're not happy. It's because you've practiced that so much, you're so good at doing things so terribly wrong, or in a way which is not supportive, you just become really good at it.

Bill Gasiamis 1:03:42

That's all. So now you have to learn some new skills, and learn how to become really good at doing amazing things that feel good for you have good outcomes for your clients and make and make it all worth it rather than the opposite.

Bill Gasiamis 1:03:57

And make you want to go to work rather than make you want to have your clients cancel on you. That's a first having to hope that your clients cancel. That's a first I love it. Tell me about a couple of the courses. What are they called? And who are they intended for?

The Indispensable Therapist: Clearing The Lens



Marabeth Quinn 1:04:20

Well, we have sort of our flagship at this point is a 30-day immersive course that we have. It's called the indispensable therapist clearing the lens. I think Daniel mentioned it just a few minutes ago, but it's it's 30 days there. There's digital content. And every week we meet with the therapists and that way it isn't just disseminating information and it remains conceptual.

Marabeth Quinn 1:04:53

And they go on with their life that in this course they actually we hash through the information together. You They experimented or observe it in their practice, they come back to us, they talk about their clinical problems, we, we go through different scenarios with them. And we talk about what worked, what didn't work. And they get to practice these things. So they actually make it into their practice.

Marabeth Quinn 1:05:19

And they get to see the results as well. And by the end of the 30 days, you're in a solidly different place than you are when you began. So that's our main, our main course. And we also have a class called How To Communicate With A Healing Brain like an expert. It's strictly digital. There are CEUs that go with that course.

Marabeth Quinn 1:05:47

And that class is, you just take it online, and it is all about communication. But it's not just about what you say, because, you know, some of the research says that up to 93% of our communication is nonverbal. And so we really go into what is that nonverbal communication? What does it look like? What are the practical applications of changing that or paying attention to that, and it gets very practical in that class, it's an excellent class.

Marabeth Quinn 1:06:24

Even if you don't work in neuro, that's a great class, because as long as you're working with a human being, you're working with the brain. I mean, I don't have a stroke. But um, neuroplasticity is working with me every day, it's working with all of us. And so that's an excellent class as well.

Marabeth Quinn 1:06:44

And we also, and I wanted to be sure and get this in just in case there are therapists listening, we have a monthly therapist meeting that's free. It's just online, it's the last Tuesday of every month. So you can find, you can sign up for it on our website, but it's called Where You Stopped.

Marabeth Quinn 1:07:02

And it's just an hour long, and the therapists of all disciplines come and they get to actually talk about these things, learn a little bit and share their expertise, share their problems, and get feedback from other therapists who are really trying to grow.

Bill Gasiamis 1:07:20

There's nothing like finding like minded individuals, and then sharing what you've just learned, because sharing what you've just learned and speaking about to help cement it and keep it in the front of your mind. And it creates more neural pathways to make sure that it becomes embedded.

Bill Gasiamis 1:07:37

I love the sound of these courses, I love the names of them, you know, The Indispensable Therapist Clearing the lens 30 days to combat burnout, plus build resilience without ever having to quit your job, everything you can possibly want at the end of 30 days.

Marabeth Quinn 1:07:55

You don't have to quit.

Bill Gasiamis 1:07:58

Not at all, how to communicate with the healing brain like an expert. I mean, everybody should be able to communicate with a brain but a healing brain even better, facilitating an optimal healing environment in the mind and body of the patient.

Bill Gasiamis 1:08:15

Oh, my gosh, there's clearly a lot of thought, a lot of effort has gone into A lot of courses B the titles, every aspect of that begins to build those neural pathways for these people, before they've even started the course it's already set them on the right path to achieving being that version of themselves at the end of the course.

Bill Gasiamis 1:08:43

And that is very rare to see. It's very uncommon. And it's very needed and very necessary. And I want to talk about the, if you think you're an individual who can't make a difference in life, because you're only one person, what can one person possibly do? Well, I want to just circle back and talk about the mum, who's 19 year old daughter 10 years ago, experienced a stroke and decided, as an individual to do something about it.

Bill Gasiamis 1:09:20

And find this other amazing therapist who on her own, was doing all this amazing work and feeling like it wasn't working anymore. And was about to walk away from this whole thing. And now two individuals are changing the lives of so many individuals because they're working with the people who are then influencing even more individuals.

Bill Gasiamis 1:09:50

And oh my god, guys, you are the Dream Team, like you're my dream team, that's kind of who I wanted to be involved with and working with and I'm so Glad that we connected this way, because what I hope that will happen from this podcast episode is, every person listening who is a stroke survivor or caregiver of a stroke survivor is going to share this with their therapists.

Bill Gasiamis 1:10:15

And it's going to then go to the rest of the therapy community all throughout the world. But let's start locally in the United States, wherever you guys are. And what I'm going to do is I'm gonna have links to all of these courses in everything in the show notes, so people can find them easily.

Bill Gasiamis 1:10:36

And we'll hopefully get a spike in interest from people who are therapists who are looking for new ways of doing things so that they could feel better about their jobs, better about the work that they're doing, and the importance of the work

that they're doing. And then make a massive difference as an individual to a whole bunch of people that they've never met before. Can you tell them? I'm a fan.

Danielle Stoller 1:11:08

I was just sitting here thinking, all I want to say is thank you. And I don't think we could have received a better endorsement. And it means a lot. It means a lot coming from someone who has been through a stroke, because you have a very unique perspective, I have not been through it. And even though Marabeth has been very close to it, she hasn't either. So we appreciate that coming from you.

Bill Gasiamis 1:11:35

Yes, it's my pleasure, Marabeth. I mean, I wish you'd never been down this road, let's be honest, I wish you'd never experienced your daughter having a stroke. But you did. And instead of becoming all cynical, and critical and negative about it, you did the opposite.

Bill Gasiamis 1:11:57

And it's not what happens to you, it's how you respond, that makes the difference. So thank you for being the kind of mum that decided to lay it all out on the table, and then just go for it, and then doing what you did for your daughter and your family firstly.

Bill Gasiamis 1:12:19

Then thank you for continuing to, to learn things and then realize that that learning that you've have gained is going to be useful for other people. No point learning all that stuff, and keeping it to yourself. What's the point?

Realizing The Gifts - Marabeth Quinn

Marabeth Quinn 1:12:38

Exactly, exactly. And, you know, if we can all figure out how to process the painful things, and maybe make something beautiful that is the redeeming part, right is when you realize the gifts maybe not from the actual event, but from the way it's changed you the way you're you're different the way your life is richer in some ways, and the way you that you've you find that you can do far more than you ever dreamed you could.

Marabeth Quinn 1:13:10

I mean, I witnessed that every day and my daughter, she's amazing, we can all do so much more than we think we can. And you're the richer for it in the end, might be a little beaten up, but you're such an extraordinary human being and stroke survivors to me, I just, you know, I know a lot of people wind up with physical deficits.

Marabeth Quinn 1:13:38

But the humanity and the spiritual side of them what the heights that they are forced to go to, or that many of them choose to go to is off the charts, as far as who they are as a human being. And I always see that part. Because it's just an extraordinary thing.

Bill Gasiamis 1:14:03

I love always referring back stroke survivors back to the main man, who is the epitome of achieving amazing things under the most hostile and difficult conditions. And that's Stephen Hawking, the great late Stephen Hawking, who has lost every capacity to communicate or operate in the world and manage to become one of the most renowned physicists I believe he was in his field most renowned.

Bill Gasiamis 1:14:37

So if it's possible for somebody to exist in life, just by being slumped on a mobility scooter, and makes such a massive difference, then it's possible for everybody to make a massive difference in someway somehow. So on that note, thank you so much for reaching out. And thank you so much for being on the podcast. I really appreciate you both.

Marabeth Quinn 1:15:07

Thank you so much for having us. This was a complete joy and pleasure.

Danielle Stoller 1:15:11

Thank you. Absolutely.

Marabeth Quinn 1:15:12

I can't wait to read your book too.

Bill Gasiamis 1:15:15

I'll be sure to let you know when it's available. It's one of the hardest things I've ever had to do is write a book, oh my gosh, that is such a difficult task. But, I'm

three chapters complete, and I'm halfway completing most of the other chapters. So I'm getting there.

Marabeth Quinn 1:15:33

Good. Can't wait.

Danielle Stoller 1:15:35

Fantastic.

Bill Gasiamis 1:15:35

Thank you so much for joining us on today's episode, you may have worked out that these two ladies would have been my dream team to have with me on the road to recovery would have been amazing. And even if they weren't there directly, but if they had impacted my therapist in a positive way, like they do all the therapists that they support and help, that would have made a massive difference to my recovery.

Bill Gasiamis 1:16:03

So that's why I'm bringing you this episode. Because people out there need to know about these two ladies, they need to know about expanded practice, and they need to learn a better way to go about supporting the people that are doing it tough recovering from serious life threatening illnesses and in rehabilitation to get back to some kind of normal life.

Bill Gasiamis 1:16:32

So also, please comment, like and share this episode. If you're watching on YouTube. Leave a comment, let me know what you think of the episode. Subscribe to the channel and hit the notification bell to get updates of new episodes as they become available.

Bill Gasiamis 1:16:48

For more interactions an episode has, the more the algorithm will push the episode out to the people that need to see it. And the greater impact these two amazing ladies will make in the world. Go to expandedpractice.com to find out more about them.

Bill Gasiamis 1:17:04

Thank you so much for being here. I really, really appreciate it. I will have all their links in the show notes. So just go to recoveryafterstroke.com/episodes to

find this episode. And you'll be able to get all the show notes from there. Thanks again for listening. I really appreciate you.

Intro 1:17:23

Importantly, we present many podcasts designed to give you an insight and understanding into the experiences of other individuals. The opinions and treatment protocols discussed during any podcast are the individual's own experience and we do not necessarily share the same opinion nor do we recommend any treatment protocol discussed.

Intro 1:17:40

All content on this website at any linked blog or podcast or video material controlled this website or content is created and produced for informational purposes only and is largely based on the personal experience of Bill Gasiamis.

Intro 1:17:52

The content is intended to complement your medical treatment and support healing. It is not intended to be a substitute for professional medical advice and should not be relied on as health advice the information is general and may not be suitable for your personal injuries, circumstances or health objectives.

Intro 1:18:08

Do not use our content as a standalone resource to diagnose treat, cure or prevent any disease for therapeutic purposes or as a substitute for the advice of a health professional. Never delay seeking advice or disregard the advice of a medical professional, your doctor or your rehabilitation program based on our content.

Intro 1:18:24

If you have any questions or concerns about your health or medical condition, please seek guidance from a doctor or other medical professional. If you are experiencing a health emergency or think you might be call 000 if in Australia or your local emergency number immediately for emergency assistance or go to the nearest hospital emergency department.

Intro 1:18:42

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