ANDREWS UNIVERSITY
DEPARTMENT OF SPEECH-LANGUAGE PATHOLOGY AND AUDIOLOGY

COURSE: SPPA 522 Practicum II Onsite: in Speech-Language Pathology
Spring 2019 2 credits
Clinical location and schedule arranged

SUPERVISORS:

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COURSE DESCRIPTION: Supervised practice in clinical management of persons with communication disorders, including administration of screenings and implementation of therapy programs. Students work on a one-to-one basis with a client, planning and implementing therapy programs. Paperwork related to screenings, planning and treatment of clients is utilized.

PREREQUISITES: SPPA 421/521**,** SPPA 234 Introduction to Speech-Language Pathology and Audiology, 425 Clinical Principles and Practice, and a content course in the area of practicum, as well as 25 hours of observation in speech-language pathology and audiology and permission of the instructor.

COURSE OBJECTIVES: The ultimate objectives of this course are for the student to:

1. Implements and applies theoretical knowledge to practice while articulating significant challenges involved in the field of speech language pathology.
2. Analyzes and integrates clinical knowledge and skills in a variety of settings through direct intervention, written communication, and collaboration with professionals, clients, and families.
3. Distinguishes appropriate ethical perspectives and practices as outlined by the American Speech Language Hearing Association.
4. Demonstrates professionalism through effective self-assessment and reflection, application of constructive criticism, and personal responsibility for professional performance.
5. Demonstrates logical and appropriate applications of quantitative methods in order to administer, score, and interpret speech and language diagnostic assessment results.

Upon completion of this course, the student will have met the following requirements (per ASHA) and goals towards obtaining their MS degree for certification in speech-language pathology:

	ASHA Standard	**Implementation**	**Course Objective #**
IV-B	The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.	Evaluations Reports Treatment plans SOAP notes Direct therapy	#1, #2
IV-C	The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas: • Articulation • Fluency • Voice and resonance, including respiration and phonation • Receptive and expressive language (phonology, syntax, semantics, pragmatics, pre-linguistic communication and paralinguistic communication) in speaking, listening, reading and writing • Hearing, including the impact on speech and language • Swallowing (oral, pharyngeal, esophageal, and	Evaluations Reports Treatment plans SOAP notes Direct therapy	#1, #2

	related functions, including oral function for feeding, orofacial myology) • Cognitive aspects of communication (attention, memory, sequencing, problem-solving, executive functioning) • Social aspects of communication (including challenging behavior, ineffective social skills, and lack of communication opportunities) • Augmentative and alternative communication modalities		
IV-D	For each of the areas specified in Standard VI-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.	Evaluations Reports Treatment plans SOAP notes Direct therapy	#1, #2
V-A	The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice	Evaluations Reports Treatment plans SOAP notes	#1, #2, #3, #4
IV-F	Student must utilize evidence based therapy techniques and assessment procedures	Evaluations Treatment plan Direct therapy	#1, #2, #3
IV-E	Student will demonstrate an understanding of and apply appropriate ethical conduct in all therapy experiences.	Direct patient therapy	#1, #2, #3
V-B	The applicant for certification must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes: 1. Evaluation a. Conduct evaluation and prevention procedures (including prevention activities). b. Collect case history information and integrate information from clients/patients, family, caregivers, teachers, relevant others, and other professionals. c. Select and administer appropriate evaluation procedures, such as behavioral	Evaluations Reports Treatment plans SOAP notes	#1, #2, #3, #4, #5

	observations, non-standardized and standardized tests, and instrumental procedures. d. Adapt evaluation procedures to meet client/patient needs. e. Interpret, integrate, and synthesize all information to develop diagnoses and make appropriate recommendations for intervention. f. Complete administrative and reporting functions necessary to support evaluation. g. Refer clients/patients for appropriate services. 2. Intervention a. Develop setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborate with clients/patients and relevant others in the planning process. b. Implement intervention plans (involve clients/patients and relevant others in the intervention process). c. Select or develop and use appropriate materials and instrumentation for prevention and intervention. d. Measure and evaluate clients'/patients' performance and progress. e. Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients. f. Complete administrative and reporting functions necessary to support intervention. g. Identify and refer clients/patients for services as appropriate. 3. Interaction and Personal Qualities a. Communicate effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the client/patient, family, caregivers, and relevant others. b. Collaborate with other professionals in case management.		

	c. Provide counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others. d. Adhere to the ASHA Code of Ethics and behave professionally.		
V-C	The applicant for certification in speech-language pathology must complete a minimum of 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Twenty-five hours must be spent in clinical observation, and 375 hours must be spent in direct client/patient contact.		#3, #4, #5

CREDIT HOURS: The 2 hour of credit awarded for completion of this class will be earned in this course by planning for, engaging in treatment sessions, and writing up required paperwork relative to each session. As well as, individual debriefing sessions after each treatment session

COURSE REQUIREMENTS:

1. The student clinician will be required to complete an evaluation of their client, including a hearing screening or in-depth examination of voice, fluency, articulation, and language, as applicable. If an evaluation is completed, a diagnostic report, including background information, results of the evaluation, and recommendations for the client, will be due for the first supervisory review within 48 hours after completion of the evaluation. Two other submissions will be accepted toward your grade for supervisory review of this report. Any rewrites will need to be submitted within 24 hours from the reports return from the Supervisor.

2. A treatment plan for the semester is required (for clients that will not require an evaluation-like the adults at the SNF and ALF) and will include 2 long-term and 2 short term goals. The first draft of this plan is due by noon the Wednesday prior to your first session.

3. An Evaluation Plan will be due by noon on the Friday prior to the start of assessment. An Evaluation Summary is due 24 hours after first contact with client that is being evaluated-even if the evaluation has not been completed. This serves as a temporary plan until the Evaluation report is able to be completed. The Evaluation report's first draft is due to your supervisor within 48 hours after testing has been completed.

4. Therapy plans for each therapy session or each therapy week including long and short term goals, remediation procedures, activities and materials needed, and data collection method, are due by noon on the Friday before the week that the therapy sessions occur.

5. SOAP notes and feedback/reflection forms are due the day after each therapy session by 9am. SOAP notes are to be computer/word processor generated and sent to the specified supervisor's email. After they are reviewed and approved to be printed, obtain signatures and file the SOAP note in client's chart. The notes should contain the following: (see p. 156-159 in Meyer's "Survival Guide")

Subjective: Client's affective state, etc.

Objective: Data collected, include homework data if applicable.

Analysis: Should explain what data means. Your assessment of the client's performance during the session. This analysis should logically lead to the next session's goals.

Plan: Plan of action for the next session, changes you think necessary, other follow-up, etc.

6. All client documentation including, but not limited to, therapy plans, SOAP notes progress and evaluation reports will be completed on the clinic assigned database ClinicNote. Any and all client documentation will be completed on a password protected device.

7. Practicum is a direct professional experience. Student clinicians will attend all assigned therapy sessions, meetings and classes. There is no excuse for tardiness or absence for your assigned therapy session unless you have a doctor's note. If ill, the student clinician must contact the department at 269-471-3469, direct supervisor, and Mrs. Mondak at (269-235-1991) by 8:00 am. Student clinician must be present at the practicum site 30 minutes prior to the therapy appointment. **Failure to attend all scheduled therapy/diagnostic appointments and clinical meetings may result in a failing or incomplete grade.**

8. Perform potential post-testing with the client to discover progress made toward meeting long-term goals.

9. Complete a therapy report/progress report at the end of the semester, which includes the following: (see examples starting on p. 128 in Meyer's "Survival Guide")

- Identifying information
- Background information, including a statement of the problem, client's testing information, and communication status at the beginning of therapy.
- Current therapy goals
- Progress and procedures
- Current status and impressions
- Recommendations

The report is to be completed on the ClinicNote template.

10. Professional dress (AU lab coats, closed toed shoes and dress pants) and professional conduct with clients and their significant others, other clinicians and staff is required at all time. Tattoos must be covered and scarves must not cover the name tag or Andrews University Insignia on the clinic shirt. Student clinicians are now representatives of a chosen profession, as well as of Andrews University and the clinical site hosting practicum.

11. Therapy and diagnostic materials belonging to the department or clinic must be returned in good condition to the area that they were obtained. Items must be returned immediately following therapy session. If you need to materials overnight, they must be signed in /out with the SPLAD administrative assistant or your instructor. Please do not write in the therapy work books, rather ask your **direct Clinical Supervisor** to make copies for you as needed.

12. It is the student clinician's responsibility to keep an accurate record of clinical therapy hours and send them in each day after therapy. The documentation will be entered online into a record management system called CALIPSO. The record keeping is not the primary responsibility of the professor.

13. It is the student clinician's responsibility to be available for unscheduled meetings or clinical opportunities. As much notice as possible will be provided.

14. CONFIDENTIALITY: Utmost confidentiality is to be maintained at all times per HIPPA regulations. Clients are legally entitled to privacy. All student clinicians must be careful to not leave written materials pertaining to clients in areas where they may be viewed by unauthorized individuals. Also close your computer or log off if you will not be working on them so that others do not read anything regarding your client.

15. Following each session, the self-reflection feedback forms in ClinicNote must be completed by the student clinician and then be submitted to the supervisor.

16. Email is the department's primary method of communication between a student and supervisor during non-class/session time. Students will be required to check emails and respond regularly.

GRADING SUMMARY:

Students will be graded on successful achievement of course objectives through the utilization of the CALIPSO evaluation rubric. Students are encouraged to review the rubric periodically as a means of self-evaluation and reflection. Students will be graded on the following 5 point Likert scale. Student's receiving a B- or less will be placed on a remediation plan.

1 – Not Evident – skill is present <25% of the time
2 – Emerging – skill is present 26% - 50% of the time

3 – Present – skill is present 51% - 75% of the time
4 – Adequate – skill is present 76% - 90% of the time
5 – Consistent – skill is present >90% of the time

	CALIPSO Scoring	
A	94-100	4.00 – 5.00
A-	90-93	3.66 – 3.99
B+	87-89	3.35 – 3.65
B	83-86	3.04 – 3.34
B-	80-82	2.73 – 3.03
F	79-below 60	1.00 – 2.72

Schedule/Course Outline

Week		**Clinic Paperwork Due**	**Course Objective**
1/7/19		Provide supervisor with cell phone # and email address. Arrange a time with supervisor to call the client/ client's family by Noon on 1/11/19 (use phone script from first semester) Therapy Plan Due by Friday at Noon	#2, #3, #4

1/14/19		Therapy Begins Evaluate Client	#1 - #5
1/21/19		No Monday therapy – MLK Day . Evaluation Reports due by Friday Therapy Plans and Semester Treatment Plan due	#1 - #5
1/28/19		Weekly Therapy Plan, SOAP Notes and/or Semester Plan due	#1 - #4
2/4/19		Craft for therapy challenge week Weekly Therapy Plan, SOAP Notes due	#1 - #4
2/11/19		Taking data for 2 different goals during 1 activity challenge week Weekly Therapy Plan, SOAP Notes due	#1 - #4
2/18/19		No Monday therapy - President's Day Weekly Therapy Plan, SOAP Notes due	#1 - #4
2/25/19		Using a deficit specific therapy material for an alternate type of therapy challenge week Weekly Therapy Plan, SOAP Notes due	#1 - #4
3/4/19		Using a book for various types of therapy challenge week Weekly Therapy Plan, SOAP Notes due	#1 - #4
3/11/19		Weekly Therapy Plan, SOAP Notes due	#1 - #4
3/18/19		SPRING BREAK WEEK	
3/25/19		Use no therapy materials from AU's therapy material closet challenge week Weekly Therapy Plan, SOAP Notes due	#1 - #4

4/1/19		Therapy exchange day challenge sometime during the month of April- at your supervisor's discretion Weekly Therapy Plan, SOAP Notes due	#1 - #4
4/8/19		Weekly Therapy Plan, SOAP Notes due	#1 - #4
4/15/19		Last Week of Therapy Progress Reports Due	#1 - #4
4/22/19		Make Up Therapy Sessions Progress Reports Mailed to Families	#1 - #4

COURSE POLICIES:

Late work: Assignments and projects will not be accepted unless prearranged with clinical supervisor. If you cannot be at class because of an excused absence, yet you wish to have your assignment/project receive full credit, please be sure your work gets to me by the time class begins. Late work, if accepted, will be discounted 25% each day until a 50% reduction has been reached. No credit will be given for work turned in after that time.

Academic dishonesty: Andrews University is a community of scholars where academic honesty is the expected norm for faculty and students. All members of this community are expected to exhibit academic honesty in keeping with the policy outlined in the University bulletin. In addition, the student is expected to comply with ethical and scientific standards in research as recognized by the US Office of Human Subjects Protection and the US Office of Research Integrity. It is expected that members of the scholarly community will act with integrity at all times, however, should an individual choose to demonstrate dishonesty, it should be understood that acts of academic dishonesty are taken extremely seriously. Acts of dishonesty are classified by level and reported centrally. The consequences of academic dishonesty will be determined by the instructor unless a student's record demonstrates repeated offenses (either three level-one offenses or two level-two offenses, or a level three and any other level violation). In the situation where the student record demonstrates such repeated violations, or where the student is accused of a level-four violation, the case will be referred to an Academic Integrity Panel for resolution. Serious or repeated violations can result in the issuance of an "XF" grade by Academic Integrity Panels, which indicates that the student failed the class for breach of academic integrity. The XF is placed on the student's permanent record and can only be removed under certain circumstances (see the University Bulletin)."

American Disabilities Act: If you qualify for accommodations under this act, please see me or contact Student Success in Nethery Hall 100 (disabilities@andrews.edu or

269-471-6096) as soon as possible for referral and assistance in arranging such accommodations.

Cell Phones: All cell phones are to be turned **off** during therapy sessions. Ringing or vibrating phones are a distraction to the clients and will disrupt the flow of therapy. Picture taking during therapy is not allowed.

Recording devices: are allowed only if pre-approved by clinical supervisor. If approved, under no circumstances are recordings- visual or verbal- to be posted on a public website.

Eating during practicum: Please do not bring food or beverages to the therapy session unless it is to be used as part of the therapeutic process.

Presentation: is important. Your attention to detail, demeanor, timeliness, and attire factor into how you are perceived as a professional.

Active participation: during therapy is mandatory. Without participating and expressing opinions and thoughts, it is impossible to clarify your goals and develop a personal style.

- You will be responsible for reading any articles or text prior to therapy session.
- It may also be necessary for student clinicians to read noted articles and receive additional support if speech and language disorder is in area for which academic instruction has not yet been received. See student handbook for details.
- You will be expected to attend all sessions and meetings and to participate fully in discussions and activities.

Emergency Protocol: Andrews University takes the safety of its students seriously. Signs identifying emergency protocol are posted throughout buildings. Instructors will provide guidance and direction to students in the classroom in the event of an emergency affecting that specific location. It is important that you follow these instructions and stay with your instructor during any evacuation or sheltering emergency.