

Communication Sciences and Disorders 791-794

University of Wisconsin – Stevens Point

Communication Sciences and Disorders

Summer Semester – 2018

Instructor: James Barge M.S. CCC-SLP

Office: 42B

Phone: (715) 346-3085

Email: jbarge@uwsp.edu

(920) 475-7191 (cell)

Office hours: please see schedule on door

Outcomes:

1. Acquire skills and knowledge required to assess and treat patients with communication disorders.
2. Develop and advance skills in the areas of:
 - Therapy planning
 - Goal writing
 - Data collection
 - Written documentation
 - Interpretation of data
 - Ongoing development of self-evaluation skills
3. Develop skills of interaction with supervisory staff, patients/clients, other students.
4. The knowledge, skills and disposition criteria for this course are consistent with the following Department of Public Instruction PI 34 standards for certification:
 - The clinician understands the central concepts, tools of inquiry, and structures of the discipline(s) he or she teaches, and can create learning experiences that make these aspects of subject matter meaningful for students.
 - The clinician understands how children with broad ranges of ability learn, and provides instruction that supports their intellectual, social and personal development.
 - The clinician organizes and plans systematic instruction based upon knowledge of subject matter, pupils, the community and curriculum goals.
 - The Clinician understands and uses formal and informal assessment strategies to evaluate and ensure the continuous intellectual, social, and physical development of the learner.
 - The clinician is a reflective practitioner who continually evaluates the effects of his or her choices and actions on pupils, parents, professionalism in the learning community, and who actively seeks out opportunities to grow professionally.

Students will: (ASHA Standards)

1. Develop clinical skill in oral and written communication sufficient for entry into professional practice
2. Develop clinical skill in the evaluation of clients with communicative disorders and/or swallowing disorders.
3. Develop clinical skill in providing intervention to clients with communicative and/or swallowing disorders.
4. Develop interaction and personal qualities for effective professional relationships with clients, families, caregivers and other professionals.
5. Adhere to the ASHA code of Ethics and behave professionally.
6. Participate in formative assessments (ongoing measurement) for the purposes of improving student learning.

Pre-Therapy Information

1. Client Information – Review the information available on your client. Be prepared to discuss the following issues at our first clinical meeting:
 - a. Questions you may have regarding the client's disorder and therapy
 - b. Questions pertaining to our clinician/supervisor roles.
 - c. Questions related to the client and/or disorder to assist in treatment planning.
 - d. Ideas for lesson planning for the first two sessions.
2. Scheduling Therapy – You are encouraged to review the master therapy schedule on my office door and begin scheduling your patient.
3. Complete Clinic Card

Requirements

1. Please provide therapy treatment plans for the initial week following our pre-therapy meeting. Ongoing therapy treatment plans will be required per the supervisor.
2. SOAP notes are required following each treatment. Please let me know when you have placed the completed note in the /s/ drive.
3. Reflection/Review. Please complete reflection form following each session or contact the supervisor for discussion as needed.
4. Data Collection – You are required to acquire data throughout your sessions. As appropriate, data can be either quantitative and/or qualitative. Your data will be the support of your SOAP note.
5. Weekly supervisory meetings: Weekly meetings are optional and at the discretion of the supervisor. If required, meetings will be scheduled each week to discuss the topics related to your client's care.
6. Video Self-assessment: We will select a therapy session to review together.

7. Observation – It is my goal to observe as much of your sessions as possible. You will receive feedback on the findings of my observation. More detailed assessment will be provided during the weekly meeting.
8. Demonstration of therapy – Please let me know if you would like me to demonstrate therapy. At times, I may enter your session to assist, clarify or provide some other service as needed.
9. Caregiver communication – It is expected that the caregiver be provided with information regarding the objectives of your session and, upon conclusion, a brief review of the session.
10. Evaluation of Clinical Performance – A formal evaluation will be provided at the end of the semester.
11. Final Reports – All corrected copies should be submitted. All clinic forms (test protocols, etc) should be included.
12. Infection Control and Universal Precautions – Please refer to the Center’s infection control Policy and Procedures.
13. Confidentiality – Please refer to the Center’s policies and procedures regarding electronic information, client records and audio/video recording.
14. Accommodations: Please discuss during the first week any accommodations required for a documented disability.
15. Grades –

A	95% - 100%	C	74 – 77.99%
A-	91 – 95.49%	C-	71 – 73.99%
B+	88-90.99%	D+	66.5 – 70.99%
B	84-87.99%	D-	61 – 66.99%
B-	81-83.99%	F	Below 61%
16. Professionalism – Your conduct, attitude displayed, your attire directly and significantly affect the degree the client and family members assess your professional credibility. Your clients and caregivers deserve a well prepared, organized and respectful clinician. The clinic dress code will be followed.
17. Partnership – I believe we both are seeking the same objectives, your growth and development as a clinician and the provision of excellent care to people with communicative deficits. The keys to these goals are candid discussion, refining of skills, broadening of insights and respect for all parties involved.

Therapy self – evaluation

jbarge

Clinician initials

date of therapy session

time of session

Client diagnosis

1. Concepts/Tasks/Activities that I was comfortable or uncomfortable with:

2. I would like more information about the following:

3. Please list any other questions or concerns.

**University of Wisconsin Stevens Point
Summer Semester 2018
Clinical Practicum - CSD 793**

Instructor: Alyssa Koth, M.S., CCC-SLP

Office: 046C

Office Hours: TBA

Cell: (262) 613-8651

Email: astaehle@uwsp.edu (office)

alyssakoth@gmail.com (home)

MEETINGS

- **INITIAL MEETING-** This is an optional (but encouraged) meeting. If you have any questions, comments or concerns regarding your clients, or expectations for this semester, we can discuss it as a group at this time. We may also discuss: goal writing, data collection, plan of care, final therapy report, and/or SOAP notes, along with any other questions, comments or concerns you may have. There is always an option to meet one on one as to discuss this as well.
- **END-TERM MEETING-** You will participate in a final grade meeting. You will be expected to discuss what you have learned, your strengths, and potential areas for improvement.
- **WEEKLY SUPERVISORY MEETINGS-** Weekly meetings are required to begin the semester. As the semester progresses meetings are optional. This does not preclude popping by my office to discuss your client when needed. We can meet informally on an as needed basis.

PRE-THERAPY INFORMATION

- **CLIENT INFORMATION** - Review the information available on your client, including background information and past therapy history. Be sure to write down the client's contact phone # (e-mail) for your records
- **SCHEDULING THERAPY-** If you have not already scheduled therapy sessions with your client, please come to our meeting with a list of potential therapy times that you have available for therapy sessions so we can contact the client as soon as possible.
- **SCHEDULING ROOMS-** After you schedule therapy with the client or parent, schedule a room for therapy. BE SURE to notify me of this room number and the time of therapy. Complete the CLINIC CARD and submit it to the desk. Let me know when you have submitted this information.
- **CMC-** Be aware of the policies and procedures for the CMC. Please reserve your materials in advance of your sessions if you anticipate difficulties obtaining any items.

PAPERWORK

- **THERAPY PLANS-** Please have your treatment plan to me prior to each session. You can submit these electronically (just remember to use the client's initials) just let me know when it is ready for my review in your /s/ drive. You may complete lesson plans in your own style and they may not be required all semester. You can find a template for lesson plans in my /s/ drive if you would like to use this. Lesson plans should include: skills you are targeting, therapy techniques you will implement.
- **SOAP NOTES-** It is expected that you will record daily SOAP notes for your client. Please let me know when your note is in your /s/ drive so I can review it. You will receive a template for the SOAP note (you can continue to add your daily SOAP notes onto this same document). This template can also be found in my /s/ drive. Please let me know when your note is in your /s/ drive so I can review it. If you are in a co-clinician team it is expected that you will take turns writing the SOAP notes. Please put your initials at the end of the SOAP notes
- **SELF-REFLECTIONS-** Self-reflections should be completed each session. You may complete the self-reflections in your own style and may not be required all semester. There is a template (if you would

like) on the bottom portion of the lesson plan template. Please let me know when your reflection is in your /s/ drive so I can review it. Summarize what you felt went well & why, what didn't go well & why, and things you plan on changing for the following week's sessions. This information allows me a window into your therapy-thought process.

- **FINAL THERAPY REPORTS-** The first four sections of the Final Therapy Report are due on **07/23/2018**. Please let me know when it is ready in your /s/ drive for my review. If you have questions or concerns about the report let me know. You can email me when you have this document or portions of this document ready to review for feedback. You will receive written feedback in your mailbox once it is reviewed. When you have made changes, you will place that edited paper document back into my mailbox to indicate the next review is ready. The completed Final Therapy Report is due by **08/06/2018**. Please include all corrected copies, as well as all tests and/or data analyses that were used.
- **PLAN OF CARE-** You can find the plan of care form on the /s/ drive. This needs to be completed by the end of the second week of therapy. We will discuss how to complete this form in a clinic meeting.
- **BILLING-** You are responsible for documenting session dates your client attended. At the end of the semester you will turn in a completed billing form that documents each session attended.

GRADING

- **EVALUATION OF CLINICAL PERFORMANCE-** At the beginning of the semester we will discuss clinical expectations (yours and mine). One formal evaluation will occur this semester, your final evaluation. Please schedule a time for us to go over your final evaluation during the week of August 6th. I ask that you come to the grading conferences with your completed assessment of your performance. I will give you the assessment forms to fill out prior to the conference. At these meetings we will discuss your performance along with your and my evaluation of your performance. Please review the provided grading form and scale for more specific information.

ADDITIONAL INFORMATION

- **CAREGIVER CONTACT-** At all times keep the caregivers informed of what you plan on working on that day; at the end of the session give that parent information about the session. Typically, this involves any new communication skills that were achieved, a general idea of progress, etc. Do not assume that just because the parent watched the session that they have a good grasp of what happened. If the caregiver is not able to observe, you will need to come up with a method of communication (e.g., notes sent home, phone calls, e-mail, etc.)
- **PROFESSIONALISM-** Your conduct, the attitude you display, and your attire influence your credibility as a professional. Being prepared, being organized, being respectful of individuals you interact with during the course of your clinical experience (client, client's family, supervisors, other student clinicians, other associated professionals, etc.), and showing confidence and respect for others is important qualities. Students will have to follow the Clinic Dress Code and dress professionally, if not you will be asked to go home and change your clothes.
- **INFECTION CONTROL AND UNIVERSAL PRECAUTIONS-** Please refer to the Center's infection control policies and procedures as described in the "Guidebook on Infection Control Policy and Procedures" to maintain a clean environment for treatment purposes.
- **CONFIDENTIALITY-** Please refer to the Center's policies and procedures regarding electronic information, client records and audio/video recording.
- **ACCOMMODATIONS-** Reasonable accommodations are available for students who have a documented disability. Please notify your supervisor and the Clinical Director during the first week of classes of any needs based on a disability that may require a reasonable modification in order for you to participate fully in this course. All accommodations should be approved through the Office for Students with Disabilities in the Student Services Center.

- **PARTNERSHIP-** You and I are entering into a form of partnership. We share several common goals including, but not limited to: to improve the client's communication status; to increase your clinical expertise; to develop your ability to problem-solve clinical situations; to develop your ability to accurately assess your own clinical performance; to learn how make therapy a truly enjoyable experience for the client and yourself; etc. We can meet these goals through mutual cooperation, trust and consistent communication. I will assume an evaluative role with you when it's necessary, but it is my intent that, for the most part, our relationship of supervisor/supervisee will be one that is more collaborative in nature.

Please refer to the attachment entitled *Standardized Syllabus* for additional information regarding this clinical course

Dates	Assignment
<p align="center">Week 1 06/18/2018</p>	<ul style="list-style-type: none"> • Receive clinical assignments • Review the client file • Complete the initial supervisory meeting • Schedule clients
<p align="center">Week 2 06/25/2018</p>	<ul style="list-style-type: none"> • Therapy begins • Remember to email me a copy of the therapy plan before your session • Turn in SOAP notes and weekly Self-Evaluation forms
<p align="center">Week 3 07/02/2018</p>	<ul style="list-style-type: none"> • Therapy
<p align="center">Week 4 07/09/2018</p>	<ul style="list-style-type: none"> • Therapy
<p align="center">Week 5 07/16/2018</p>	<ul style="list-style-type: none"> • Therapy • Start working on your FTR if you have not already
<p align="center">Week 6 07/23/2018</p>	<ul style="list-style-type: none"> • Therapy
<p align="center">Week 7 07/30/2018</p>	<ul style="list-style-type: none"> • Final therapy sessions (parent conferences are usually scheduled for the last day of therapy) • Schedule final supervisory conference
<p align="center">Week 8 08/06/2018</p>	<ul style="list-style-type: none"> • Final supervisory conferences • Final therapy report (completed copy) due on Monday 08/06/2018 • Clock hours are due to Ms. Reynolds • Therapy Schedule Form due • Return all borrowed materials to the resource room

Students will: (Refer to specific skills cited on the Evaluation of Therapy Skills form)

ASHA Standards

1. Develop clinical skill in oral and written communication sufficient for entry into professional practice (ASHA Stan. IV-B)(DPI Stan. 6 & 10)
2. Develop clinical skill in the evaluation of clients with communicative disorders and/or swallowing disorders (ASHA Stan. IV-G-1)(DPI Stan. 8)
3. Develop clinical skill in providing intervention to clients with communicative and/or swallowing disorders (ASHA Stan. IV-G-2) (DPI Stan. 1,2,3,4,5,6 & 7)
4. Develop interaction and personal qualities for effective professional relationships with clients, families, caregivers, and other professionals (ASHA Stan. IV-G-3)(DPI Stan. 10)
5. Adhere to the ASHA Code of Ethics and behave professionally (ASHA Stan. IV-G-3d)(DPI Stan. 10)
6. Participate in formative assessments (ongoing measurement) for the purpose of improving student learning (ASHA Stan. V-A)(DPI Stan. 9)

DPI Standards

For those students who are interested in obtaining a license to teach in Wisconsin, students must demonstrate proficient performance in the knowledge, skills, and dispositions under all of the following Wisconsin Teacher Standards (PI 34.02).

- Content: The teacher understands the central concepts, tool of inquiry, and structures of the disciplines he or she teaches and can create learning experiences that make these aspects of subject matter meaningful for pupils.
- Methods: The teacher understands how children with broad ranges of ability learn and provides instruction that supports their intellectual, social, and personal development.
- Diversity: The teacher understands how pupils differ in their approaches to learning and the barriers that impede learning and can adapt instruction to meet the diverse needs of pupils, including those with disabilities and exceptionalities.
- Instruction: The teacher understands and uses a variety of instructional strategies, including the use of technology to encourage children's development of critical thinking, problem solving, and performance skills.
- Management: The teacher uses an understanding of individual and group motivation and behavior to create a learning environment that encourages positive social interaction, active engagement in learning, and self-motivation.
- Communications: The teacher uses effective verbal and nonverbal communication techniques as well as instructional media and technology to foster active inquiry, collaboration, and supportive interaction in the classroom.
- Curriculum: The teacher organizes and plans systematic instruction based upon knowledge of subject matter, pupils, the community, and curriculum goals.
- Assessment: The teacher understands and uses formal and informal assessment strategies to evaluate and ensure the continuous intellectual, social, and physical development of the pupil.
- Reflection: The teacher is a reflective practitioner who continually evaluates the effect of his or her choices and actions on pupils, parents, professionals in the learning community and others and who actively seeks out opportunities to grow professionally.
- Professionalism: The teacher fosters relationships with school colleagues, parents, and agencies in the larger community to support pupil learning and well-being and acts with integrity, fairness and in an ethical manner.

**Diagnostic Team CD 793 Syllabus
Summer 2018
Diagnostic Time: Thursday 1:00 – 3:00 PM**

Instructor: Charlie Osborne
Office Hours: TBA
Email: cosborne@uwsp.edu

Office: 44B
Phone: (715) 346-4960 (office)

Course Description

This course provides you with the opportunity to progress towards the development of *Skills and Knowledge* as specified by ASHA, for acquiring clinical competence in speech-language pathology. *Skills and knowledge* are acquired across a continuum, with increasing levels of independence, consistency, and problem-solving occurring over time. This practicum experience allows us to work closely, and with a variety of clients, to accomplish the objectives cited below.

Course Objectives

1. To develop clinical skill in oral and written communication sufficient for entry into professional practices (*ASHA Stan. III-A*)
2. To develop clinical skill in the evaluation of clients with communicative disorders and/or swallowing disorders (*ASHA Stan. IV-E-1*)
3. To develop interaction and personal qualities for effective professional relationships with clients, families, caregivers, and other professionals (*ASHA Stan. IV-E-3*)
4. To adhere to the ASHA Code of Ethics and behave professionally (*ASHA Stan. IV-E-3d*)
5. To participate in formative assessments (ongoing measurement) for the purpose of improving student learning (*ASHA Stan. V-A*)

Before Diagnostics Begin

1. Schedule: We will meet to discuss the upcoming diagnostic each week. One of the first things on the agenda will be to establish a time to do this.
2. Scheduling Diagnostics: Our diagnostic evaluations will usually take place on Thursday afternoons from 1:00 – 3:00 PM in room TBA. Keep your schedules free during those times.

Once Diagnostics Begin

1. Diagnostic Team Organization: Each team member is responsible for reviewing the client's file prior to our weekly meeting. Additionally, each team member needs to complete and bring in written remarks about the client, disorder, and assessment to the weekly meeting. (See attached **Diagnostic Questions and Ideas**). Your remarks will provide a spring board for our planning discussion. Please bring the client's file to the weekly meeting and be prepared to provide a verbal overview of significant points from the case history and/or referral. As the semester progresses, you will gradually assume responsibility for conducting the client initial and exit interviews.
2. Diagnostic Reports: Report formats for various disorders will be provided to assist you in the content and organization of your report. The following schedule indicates when diagnostic reports are due. We will typically spend time at the end of each diagnostic session discussing options for writing the diagnostic report. The goal will be to have a completed report, turned in to the office before the next diagnostic. Deadlines for when the rough draft is to be in, etc. will be determined by us when we have our initial team meeting. Here are several helpful guidelines to follow:
 - a.) With each rough draft, turn in **ALL previous drafts and ALL test forms**.
 - b.) Be sure to let me know which /s/ drive has the rough draft.
The final draft is to be single spaced and printed on a high quality printer. You are welcome to use my office printer for final drafts.
 - c.) Each member of the team is responsible for scoring and interpreting the tests that they administer.

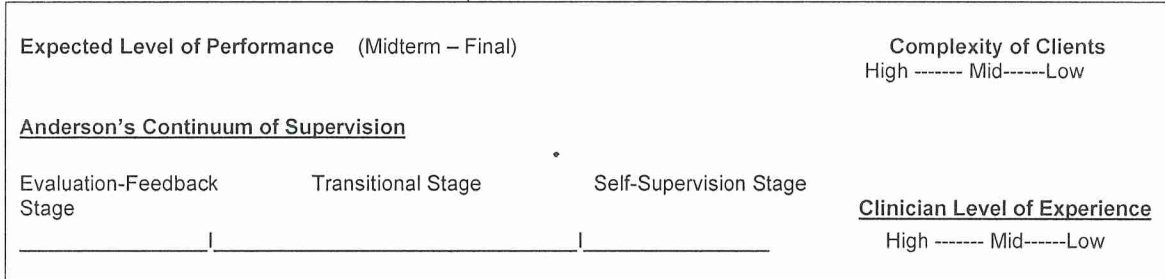
3. Weekly Team Meetings: We will meet for 30-60 minutes each week. The purpose of this meeting will be to plan the upcoming diagnostic. In addition, we will review and evaluate the previous diagnostic session if we did not have an opportunity to do so the day it was conducted. Your self-evaluation, as well as of the team as a whole, is an important component of our meeting, as it prepares you for independence as a professional. If you feel the need to discuss any issues with me beyond the weekly meeting, you may see me during designated practicum office hours as posted on my door, or contact me by email or phone.

4. Clock Hours: Please keep track of the number and type of clock hours earned using the appropriate **clock hour log** form. ASHA is now looking for documentation of time spent in "staffing." This means participation in meetings during which evaluation, treatment, and/or recommendations are discussed or formulated, with or without the client present. IEP meetings and exit meetings with clients and/or parents would be considered staffing time. Preparing for diagnostics, scoring tests, transcribing language samples, and meeting with the supervisor or team may not be counted as staffing hours.

5. Professionalism: Your preparedness, organization, conduct, attire, and grooming influence your credibility as professionals. In addition, respect for your client, family members, co-clinicians, and supervisor, and demonstrating pleasure in what you are doing, greatly contribute to an air of professionalism. Notable attention will be given to the trait of professionalism.

6. Additional Responsibilities: The team is responsible for setting up and cleaning up the diagnostic room, and reserving and obtaining equipment and supplies. Following the session, please sanitize the table, supplies and instruments used.

7. **Evaluation of Clinical Performance** – Formal evaluations will occur at midterm (optional) and at the end of the semester. At the beginning of the semester we will discuss clinical expectations (yours and mine). Our collective decision on what is reasonable (where you hope to be on Anderson's Continuum) will serve as the measure for the midterm evaluation. Also, at the midterm conference we will determine the performance level you hope to be at by the end of the semester (this too, will be the "expected level of performance" you will use when performing your self-evaluation at the final conference).



I ask that you come to the grading conferences with your completed assessment of your performance and the grade you feel you deserve. At these meetings we will discuss your performance along with **your** and my evaluation of your performance. An appropriate letter grade will be determined. Please review the provided grading form and scale for more specific information.

And remember, no matter where you go, there you are.

■ Unknown, Buckaroo Banzai, from the film

Clinician Name: _____

Date of Dx: _____ Disorder/Age: _____

DIAGNOSTIC QUESTIONS AND IDEAS

1.) Questions about the client that need to be answered by the assessment.

2.) Questions I have about the suspected disorder area or assessment.

3.) Suggestions for diagnostic procedures.

**University of Wisconsin Stevens Point
Summer Semester 2018
Clinical Practicum - CSD 793**

Instructor: Charlie Osborne
Office Hours: Monday & Wednesday
Email: cosborne@uwsp.edu (office)

Office: 44B
Phone: (715) 346-4960 (office)

General Information

Therapy Plans – Please have your treatment plan to me prior to each session if requested. For fluency clients I have a specific lesson plan and data collection form that I ask you to use (please keep all sessions copies and return all of them to me at the end of the semester). These forms are available to you just outside my office.

SOAP Notes & Self Reflection – It is expected that you will record daily SOAP notes for your client. Please let me know when your note is in your /s/ drive so I can review it. Self-reflections should be completed each session on the backside of page one on the session data sheet for fluency clients). Summarize what you felt went well & why, what didn't go well & why, and things you plan on changing for the following week's sessions. This information allows me a window into your therapy-thought process.

1. **Data Collection** – You are required to collect data during each therapy session. The data collected will support the content of your SOAP note. Data may be quantitative and/or qualitative, whatever is appropriate.
2. **Weekly Supervisory Meetings** – Weekly meetings are required to begin the semester. As the semester progresses meetings are optional. This does not preclude popping by my office to discuss your client when needed. We can meet informally on an as needed basis.
3. **Written Reports:** The first four sections of the Final Therapy Report are due on **7/12/18**. Please let me know when it is ready in your /s/ drive for my review. If you have questions or concerns about the report let me know. The completed Final Therapy Report is due by **08/06/18**. Please include all corrected copies, as well as all tests and/or data analyses that were used.
4. **Demonstration Therapy** – It is often helpful to observe your supervisor doing management. If you would like me to do some demonstration therapy, I'd be happy to oblige! I may volunteer to do so, don't be surprised.
5. **Evaluation of Clinical Performance** – A formal evaluation will occur at the end of the semester. If you would like a midterm evaluation, please let me know. Due to the shortened semester, midterm conferences are optional. At the beginning of the semester we will discuss clinical expectations (yours and mine). Our collective decision on what is reasonable (where you hope to be on Anderson's Continuum) will serve as the measure for your evaluation(s). You will use the following information to determine "expected level of performance" so you have a point of reference when performing your self-evaluation at the evaluative conference.

<u>Expected Level of Performance</u> (Midterm – Final)			<u>Complexity of Client</u> High ----- Mid-----Low
<u>Anderson's Continuum of Supervision</u>			
Evaluation-Feedback Stage	Transitional Stage	Self-Supervision Stage	<u>Clinician Level of Experience</u> High ----- Mid-----Low
_____ _____ _____			

I ask that you come to the grading conferences with your completed assessment of your performance and the grade you feel you deserve. At these meetings we will discuss your performance along with **your** and my evaluation of your performance. An appropriate letter grade will be determined. Please review the provided grading form and scale for more specific information.

- 6. **Partnership** – You and I are entering into a form of partnership. We share several common goals including, but not limited to: to improve the client's communication status; to increase your clinical expertise; to develop your ability to problem-solve clinical situations; to develop your ability to accurately assess your own clinical performance; to learn how make therapy a truly enjoyable experience for the client and yourself; etc., etc., etc. We can meet these goals through mutual cooperation & trust and consistent communication. I will assume an evaluative role with you when it's necessary, but it is my intent that, for the most part, our relationship of supervisor/supervisee will be one that is more collaborative in nature.

Please refer to the attachment entitled *Standardized Syllabus* for additional information regarding this clinical course

Clinical Practicum Assignment Schedule

<u>Dates</u>	<u>Assignment</u>
Week 1 06/25/18	Receive clinical assignments, review client files, schedule clients, etc.
Week 2 06/25/18	Therapy
Week 3 07/02/18	Therapy <i>No therapy 7/4, Osborne out Thursday 7/5</i>
Week 4 07/09/18	Optional Midterm evaluation 1st draft of final therapy report due on Thursday 7/12/18
Week 5 07/16/18	Therapy
Week 6 07/23/18	Therapy
Week 7 07/30/18	Last day of therapy is 08/02/18 Final therapy sessions (parent conferences are usually scheduled for the last day of therapy), <u>schedule final supervisory conference</u>
Week 8 8/06/18	Final supervisory conferences Final therapy report (completed copy) due on Monday 08/06/18 Clock hours are due to Ms. Reynolds, Therapy Schedule Form due, return all borrowed materials to the resource room

DIAGNOSTIC PRACTICUM

Supervisor: Christie Witt, M.S., CCC-SLP
Office: 044A
Phone: 346-2577

Office Hrs: See office door
email: cwitt@uwsp.edu

This is an addendum to “CD 495 & CD 791-794 Clinical Therapy Practicum” syllabus that can be found on D2L.

Our Schedule

Our diagnostic evaluations will take place on **Tuesdays from 10:30 – 12:30**. Keep your schedules free during those times every week during the semester. **Each week you will need to check the diagnostic schedule at the front desk. All diagnostics are on the calendar in the red diagnostic folder.**

Once diagnostics begin

1. **Team organization:** All clinicians will be active in every diagnostic appointment.

All team members are responsible for file review, preparing diagnostic, taking data, interpreting data, scoring tests, analyzing results, making recommendations, and writing the report.
2. **Weekly Meeting:** We will discuss the up-coming diagnostic and any past diagnostics.
3. **Diagnostic reports:** Reports will be written as a team and need to be complete before the next diagnostic appointment. You are writing a professional report that will represent you as professionals and this clinic. Your first draft should be your best work. Subsequent drafts will occur as needed and determined by Ms. Witt.
4. **Clock hours:** Please keep track of the number and type of clock hours earned. You will also document “staffing” hours (meetings to discuss evaluation, treatment and/or recommendations, or exit meetings with parents, caregivers). You should keep track of your hours on a weekly basis. It is not the supervisor’s responsibility to keep track of your hours. Staffing hours DO NOT include preparing for diagnostics, scoring tests, transcribing language sample, or meeting with the supervisor or team. However, supervisors have the discretion for exceptions. Clockhours are to be submitted via Calipso at the end of the semester.
5. **Professionalism:** Your preparedness, organization, confidence, conduct, attire, and grooming influence your credibility as professionals. In addition, respect for your client, family members, co-clinicians, and supervisor, and demonstrating enthusiasm.
6. **Additional responsibilities:** The team is responsible for video recording the diagnostic session, reserving any equipment and supplies prior to the evaluation, as well as cleaning up the diagnostic room after the session. This includes sanitizing the table, supplies, and equipment used and putting them back where they belong.
7. **Evaluation:** We will meet as a “Diagnostic Team” at mid semester and use *Calipso* to discuss your progress and development. At the end of the semester we will meet again to discuss your semester progress. You will be graded on clinical competence, clinical writing, professional conduct, increased independence in your diagnostic decision-making, and diagnostic skills.

Witt Clinical Practicum Syllabus

Supervisor: Christie Witt, M.S., CCC- SLP
Phone: (715) 346-2577-office

Office: CPS 044A
Email: Christie.Witt@uwsp.edu

Objectives:

Refer to the standard CSD 495 & CSD 791-794 Clinical Therapy Practicum Syllabus on D2L.

Course Requirements:

This course involves working at the UWSP-Speech Language and Hearing Clinic. You will be completing course requirements while working at the clinic. This clinic provides services to the public. You are required to adhere to the guidelines and policies written in the clinic handbook which can be found in D2L.

Paperwork:

1. Weekly Lesson plans
 - a. Due on Fridays at noon.
 - b. You may complete lesson plans in your own style. There is no template.
 - c. Lesson plans should include:
 - i. The skill you are targeting.
 - ii. The therapy techniques you will implement (example: aided language stimulation, expansion, modeling, etc.)
2. SOAPs
 - a. Due weekly by noon on Fridays.
 - b. You will save it on your s-drive using the template provided on the s-drive.
 - c. If you are working on a team, the author of the SOAP must alternate and you must indicate who the writer is on the SOAP form.
 - d. If you are working on a team the SOAP note will be saved on the p-drive.

Here is an example of what I will be looking for in a SOAP notes:

S: *Subjective*. Any subjective information that is relevant to the session.

O: *Objective*. Provide data for each goal (you do not need to state the goal in the note, just results of the session pertaining to the goals. For example, Sam requested an item using a 2 button sequence in 2 out of 4 opportunities.

A: *Assessment*. Write what occurred to result in the success/not success of performance for goals. For example, Minimal visual prompts were needed for 2 button requests.

P: *Plan*. Continue plan of care.

Please note: You can combine the O/A sections if that fits your style.

3. Plan of Care: (some client's need one)
 - a. Find the plan of care form on the s-drive.
 - b. This needs to be completed by the end of the second week of therapy.
 - c. We will discuss how to complete this form in a clinic meeting.
4. Written reflections: These need to be completed and turned in by Friday at noon.
5. Data: We will discuss data collection in our meetings.
6. Session feedback: You will receive written and/or face to face feedback regarding your sessions.

7. Visual Summary of the results of therapy (at the end of the semester).
 - a. It needs to be a visual representation (graphs, charts, etc).
 - b. This document will be shared with your client/client's family at the final therapy meeting.
8. Final Therapy Report.
 - a. There is no template – you need to determine the information that is pertinent to your client.
 - b. You will follow this plan for turning in your document:
 - i. You are responsible for having this document in the final form at the time of “checkout” at the end of the semester.
 - ii. Email Ms. Witt when you have this document or portions of this document ready to review for feedback.
 - iii. Editing remarks and suggestions will be saved in your s-drive as separate document. You will make changes and email Ms. Witt when the next draft is ready for review. Each draft should be saved as a new document.
 - iv. You will submit it for review until Ms. Witt determines that it is complete.
9. Billing:
 - a. You are responsible for documenting session dates your client attended.
 - b. At the end of the semester you will turn in a completed billing form that documents each session attended.

Meetings

1. We will discuss and schedule clinic meetings at our initial clinical meeting. You will be expected to participate in discussions regarding clinic which may include but is not limited to goal writing, data collection, plan of care, final therapy report, SOAP notes.
2. Mid-term meeting: You will participate in a mid-term meeting. You will be expected to discuss what you have learned during your clinic experience (not done in summer semester).
3. End-term meeting: You will participate in a final grade meeting. You will be expected to discuss what you have learned, your strengths, and potential areas for improvement.
4. Additional Meetings: You are responsible for initiating meetings at your discretion. These meetings may be used to address clinic specific questions, paperwork, other questions, or for general support. To initiate a meeting, you can:
 - a. Sign up on Ms. Witt's door
 - b. Stop by to see if Ms. Witt is available – if Ms. Witt's door is closed, decide whether or not your reason to see her is an emergency; if not sign up for a time to meet. If it is an emergency, knock on the door. If she is in her office and available (not on the phone) she will direct you to enter.

Grading

1. Ms. Witt will assign grades at mid-term (unless it is summer) and end-term meetings using the form on Calipso.
2. You will be graded on clinical competence, clinical writing, professional conduct, increased independence in clinical decision making, and improvement of clinical skills.