**SYLLABUS**

 **CSD 836 Pediatric Auditory Habilitation/Rehabilitation**

# University of Wisconsin AuD Consortium Program

**Spring 2020**

 **MW 2:00-3:15**

**Professor:** Rebecca Henning, Ph.D., CCC-A

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**E-mail:** rhenning@uwsp.edu

**Office Hours:** Monday & Wednesday 10:30-11:30, Friday 11-noon, & by appointment

**E-mail communication:**You are expected to check your school e-mail account at least once per weekday for any important class announcements. I typically reply to emails within two business days or sooner. I cannot guarantee that I will always check email on evenings and weekends, so please plan ahead to avoid last-minute weekend or late-night “emergencies”.

**You are not permitted to turn in an assignment late because you are waiting for a reply from me.** If you’ve emailed me with reasonable advance notice (see later in this paragraph), but I haven’t replied within the timeframe given above, there is a chance I did not receive your message. Please check your sent-mail to see if it was actually sent, and try re-sending it or calling me. If you are emailing a question within 1-2 days or less of the deadline, I may not have time to reply/answer before the deadline. If I do not reply before the deadline, then you should submit your assignment by the deadline, using your best judgment to answer your question.

**Prerequisites and Co-requisites:**

Hearing Science

Hearing Assessment

Pediatric Audiology

Amplification I and II

Implantable Devices

**Required Textbook:**

* *Comprehensive Handbook of Pediatric Audiology, 2nd ed.,* edited by Tharpe and Seewald and published by Plural Publishing (2017)
* Additional required and supplemental readings to be provided on the course Canvas website.

**Course Description:**

Language and auditory development of children with hearing loss. Principles and techniques of amplification selection and fitting for children with hearing loss. Effect of hearing impairment on speech perception, production, language, literacy, and socio-emotional development. Communication and educational options, and re/habilitation of communication skills.

**Credit Hour Policy Standard:**

This 3-credit class meets for two, 75-minute class periods each week, and carries the expectation that students will work on course learning activities (reading, studying, preparing for in-class activities, working on assignments, etc.) for about 6 hours outside of the classroom per week. The information about class meeting times and expectations for student work are included in this syllabus, in the assignment descriptions, and will also be discussed in class.

Student Requirements:

Personal situations and/or difficulty meeting course requirements:

If you are concerned that a family or personal situation may affect your ability to meet these requirements, please discuss this with me (or with the graduate advisor or another faculty member on your home campus with whom you feel comfortable) so that we can be aware of the situation and determine alternative arrangements if needed. It is far better to be pro-active about discussing possible difficulties than to wait until your performance in the class has already suffered. I will not probe you for in-depth personal information that you are not comfortable sharing; however, you will likely need to provide some type of documentation to at least one faculty member (either myself or the graduate advisor on your home campus) if alternative arrangements, such as extended deadlines or different exam dates, are needed.

**You must complete all of the following in order to pass this course:**

Class Preparation:

I expect you will come to class prepared and ready to contribute to the day’s activities.

Classroom Etiquette, Professionalism, & Attendance

As doctoral students, I expect you to be prepared for class, and to regularly attend class with an attitude of respect, engagement, enjoyment, and professionalism. **I expect you to behave respectfully toward everyone in the class and myself.** **Please be aware that distracting behaviors (chatting, texting, surfing the internet, sharing notes, leaving the room, etc.) are noticed by everyone and disrupt the class.**

If you must miss a class, I will ask you to provide me with documentation of the excused reason for your absence, and you will be required to make up and submit any assignments for that day as soon as reasonably possible for your situation. Excused absences are for reasons such as illness, death in the family, personal or family emergency, etc. *If you miss a class session* *for an unexcused and/or undocumented reason, an improvement plan may be required for lack of professionalism.*

Assignments: You are required to participate in any in-class activities that are related to the assignments, and to complete all assignments on time. See the separate assignment descriptions and general grading information document for more information.

**Students with Disabilities:**

I would like to hear from anyone who has a disability that requires accommodations. Please contact me no later than Wednesday, January 29.

**Religious Observances:**

I will accommodate religious beliefs according to UWS 22.03 if you notify me within the first three weeks of the semester regarding specific dates with which you have religious conflicts.

Academic Misconduct:

Information on the policies that apply to all UW System students and faculty regarding academic misconduct can be found at this UW-Madison website: <https://conduct.students.wisc.edu/misconduct/academic-integrity/>. Also recall that you are responsible for understanding how to avoid plagiarism, especially the information on successful and unsuccessful paraphrases: <https://writing.wisc.edu/handbook/assignments/quotingsources/>. *Plagiarism and/or cheating on any assignment in this class may result in a reduced or failing grade.*

#### Grading:

Your *percent correct* (*not* total number of points) on the assignments will be weighted as follows for your final class grade:

Assignment #1 (speech/language screening): 20%

Assignment #2 (dB HL and SPL calculations): 10%

Assignment #3 (HA and FM verification lab): 20%

Assignment #4 (HA case questions): 20%

Assignment #5 (AR needs and goals): 30%

Grading Scale

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| **UW – SP** Letter Grade | A | A- | B+ | B | B- | C+ | C | C- | D+ | D | F |
| **Percentage** | 100-92 | 91.9-90 | 89.9-88 | 87.9-82 | 81.9-80 | 79.9-78 | 77.9-72 | 71.9-70 | 69.9-68 | 67.9-60 | <60 |
| **UW – Madison** Letter Grade | A | A-B | B | B-C | C | C-D | D | F |

**Objectives for this course:**

The following course objectives line up with the requirements of the American Speech-Language-Hearing Association (ASHA) for certification of audiologists, which also correspond to the expectations of the UW AuD program. The ASHA standards are available at <https://www.asha.org/Certification/2020-Audiology-Certification-Standards/>.

If a student fails to meet any or all ASHA standards for the course, the student will most likely be required to complete an improvement plan and/or re-do some assignments or portions of the course in order to meet the ASHA standards. These revisions/assignments/re-takes will not necessarily result in an improved course grade, but (if completed adequately) they will allow the instructor to sign off on the corresponding ASHA standard(s).

Course grades and ASHA competencies are related, but don’t necessarily exactly correspond to each other. Usually, if a student earns a passing grade on every course assignment, then that student will also meet the ASHA competencies for the course. It is possible, however, for a student to pass the course but not fully meet one or several individual ASHA competencies, especially if the student has not passed every assignment. On the other hand, some ASHA competencies are covered in multiple assignments; if this is the case, then it’s possible that a student may not meet a standard on one assignment, but may meet the standard on a different assignment. The instructor will notify any student who does not meet ASHA competencies. It is also highly recommended that any student who receives a less-than-passing grade on any assignment contact the instructor to discuss how the student can get back on track for passing the course and for meeting ASHA competencies.

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| **The student will demonstrate knowledge of (for items lettered A) and knowledge and skills in (for items lettered B-F):** |
| A3. Language and speech characteristics and their development for individuals with normal and impaired hearing across the life span |
| A7. Applications and limitations of specific audiologic assessments and interventions in the context of overall client/patient management |
| A8. Implications of cultural and linguistic differences, as well as individual preferences and needs, on clinical practice and on families, caregivers, and other interested parties |
| A9. Implications of biopsychosocial factors in the experience of and adjustment to auditory disorders and other chronic health conditions |
| A10. Effects of hearing impairment on educational, vocational, social, and psychological function throughout the life span |
| A11. Manual and visual communication systems and the use of interpreters/transliterators/translators |
| A12. Effective interaction and communication with clients/patients, families, professionals, and other individuals through written, spoken, and nonverbal communication |
| A13. Principles of research and the application of evidence-based practice (i.e., scientific evidence, clinical expertise, and client/patient perspectives) for accurate and effective clinical decision making |
| A14. Assessment of diagnostic efficiency and treatment efficacy through the use of quantitative data (e.g., number of tests, standardized test results) and qualitative data (e.g., standardized outcome measures, client/patient-reported measures)  |
| A16. Principles and practices of client/patient/person/family-centered care, including the role and value of clients’/patients’ narratives, clinician empathy, and shared decision making regarding treatment options and goals |
| A17. Importance, value, and role of interprofessional communication and practice in patient care |
| A18. The role, scope of practice, and responsibilities of audiologists and other related professionals |
| A19. Health care, private practice, and educational service delivery systems |
| A21. Advocacy for individual patient needs and for legislation beneficial to the profession and the individuals served |
| B10. Identifying persons at risk for speech-language and/or cognitive disorders that may interfere with communication, health, education, and/or psychosocial function  |
| B11. Screening for comprehension and production of language, including the cognitive and social aspects of communication  |
| B12. Screening for speech production skills (e.g., articulation, fluency, resonance, and voice characteristics)  |
| B13. Referring persons who fail the screening for appropriate speech-language pathology consults, medical evaluation, and/or services, as appropriate  |
| E1. Engaging clients/patients in the identification of their specific communication and adjustment difficulties by eliciting client/patient narratives and interpreting their and/or caregiver-reported measures  |
| E2. Identifying the need for, and providing for assessment of, concomitant cognitive/developmental concerns, sensory-perceptual and motor skills, and other health/medical conditions, as well as participating in interprofessional collaboration to provide comprehensive management and monitoring of all relevant issues  |
| E3. Responding empathically to clients’/patients’ and their families’ concerns regarding communication and adjustment difficulties to establish a trusting therapeutic relationship  |
| E4. Providing assessments of family members’ perception of and reactions to communication difficulties |
| E5. Identifying the effects of hearing problems and subsequent communication difficulties on marital dyads, family dynamics, and other interpersonal communication functioning   |
| E6. Engaging clients/patients (including, as appropriate, school-aged children/adolescents) and family members in shared decision making regarding treatment goals and options  |
| E7. Developing and implementing individualized intervention plans based on clients’/patients’ preferences, abilities, communication needs and problems, and related adjustment difficulties |
| E8. Selecting and fitting appropriate amplification devices and assistive technologies |
| E9. Defining appropriate electroacoustic characteristics of amplification fittings based on frequency-gain characteristics, maximum output sound-pressure level, and input–output characteristics |
| E11. Conducting real-ear measurements to (a) establish audibility, comfort, and tolerance of speech and sounds in the environment and (b) verify compression, directionality, and automatic noise management performance |
| E15. Counseling cochlear implant candidates and their families regarding the benefits and limitations of cochlear implants to (a) identify and resolve concerns and potential misconceptions and (b) facilitate decision making regarding treatment options |
| E16. Providing programming and fitting adjustments; providing postfitting counseling for cochlear implant clients/patients |
| E17. Identifying the need for—and fitting—electroacoustically appropriate hearing assistive technology systems (HATS) based on clients’/patients’ communication, educational, vocational, and social needs when conventional amplification is not indicated or provides limited benefit |
| E19. Ensuring compatibility of HATS when used in conjunction with hearing aids, cochlear implants, or other devices and in different use environments |
| E21. Providing auditory, visual, and auditory–visual communication training (e.g., speechreading, auditory training, listening skills) to enhance receptive communication |
| F1. Counseling parents to facilitate their acceptance of and adjustment to a child's diagnosis of hearing impairment  |
| F2. Counseling parents to resolve their concerns and facilitate their decision making regarding early intervention, amplification, education, and related intervention options for children with hearing impairment |
| F3. Educating parents regarding the potential effects of hearing impairment on speech-language, cognitive, and social–emotional development and functioning |
| F4. Educating parents regarding optional and optimal modes of communication; educational laws and rights, including 504s, individualized education programs (IEPs), individual family service plans (IFSPs), individual health plans; and so forth |
| F6. Instructing parents and/or child(ren) regarding the daily use, care, and maintenance of amplification devices and HATS |
| F7. Planning and implementing parent education/support programs concerning the management of hearing impairment and subsequent communication and adjustment difficulties |
| F8. Providing for intervention to ensure age/developmentally appropriate speech and language development |
| F9. Administering self-assessment, parental, and educational assessments to monitor treatment benefit and outcome |
| F11. Counseling the child with hearing impairment regarding peer pressure, stigma, and other issues related to psychosocial adjustment, behavioral coping strategies, and self-advocacy skills |
| F13. Providing interprofessional consultation and/or team management with speech-language pathologists, educators, and other related professionals |

**Tentative Course Schedule**

**Required readings from the textbook and other sources will be posted in Canvas for each topic. For the required textbook, only the assigned chapter or page *number(s)* will be posted in Canvas, and you are responsible for having a copy of the textbook. For other readings, the document itself will be posted in Canvas.**

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| **Week** | **Topic** |
| January 22 | Introduce the class; Auditory skill development; speech acoustics; speech perception; speech, language, & auditory development in children with HL |
| **January** 27-**29** | **No class meeting on January 29 due to UWSP IPE activity**Auditory skill development; speech acoustics; speech perception; speech, language, & auditory development in children with HL |
| February 3-5 | Finish auditory and speech/language development?Early intervention, & hearing assessment for fitting HAs on infants & young children; RECD for assessment |
| **February 10**-12 | **Assignment #1: Speech/language screening due by 9 am Feb. 10**HA verification & RECD; DSL/Prescriptive Procedures |
| **February 17**-19 | **Assignment #2: dB HL and dB SPL calculations due by 9 am Feb. 17**FM & ALDs |
| February 24-26 | Choosing amplification technology and features for children |
| March 2-4 | Choosing technology & features for children; troubleshooting; counseling parents on HA use |
| **March 9**-11  | **Assignment #3: HA and FM verification lab due by 9 am March 9**Counseling parents on HA use; Measuring hearing aid outcomes with children |
| **March 16-18** | **Spring break, no class** |
| March 23-25 | Catch up or get ahead |
| March 30-**April 1** | **No class on April 1 due to AAA**Assessing AR needs for different ages, including specific tools; multidisciplinary assessment |
| **April** 6-**8** | **Assignment #4: HA case questions due by 9 am April 8**Finish assessing AR needs; start family-centered AR and coaching  |
| April 13-15 | Family-centered AR & coaching  |
| April 20-22 | Family-centered therapy & coaching at different ages;AR for children with CAPD  |
| April 27-29 | AR for children with CAPD |
| **May 6** | **Assignment #5: AR needs and goals due by 2 pm** |