



Clinical Remediation Processes in Communication Sciences and Disorders

UH Department of Communication Sciences and Disorders

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Communication Sciences and Disorders (CSD)

The UH Department of Communication Sciences and Disorders (CSD) offers a two-year clinical Master's Degree in CSD. The program has been approved on an 8-year accreditation cycle by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) to offer training for speech-language pathologists.

Graduates of the program become certified as speech language pathologists (speech therapists) by the American Speech-Language-Hearing Association (ASHA). Speech language pathologists commonly work in educational and medical settings, with both children and adults who have difficulties with communication and swallowing.



The master's programs runs as a cohort, beginning each fall for 6 sequential semesters, including summers. During the first 4 semesters the students are trained by UH Faculty at the UH Speech and Hearing Clinic. During their final 2 semesters students complete practicum rotations in the community at schools and medial settings.

Clinical Course Sequence

- CSD616 I & II – Advanced Practicum I (Onsite University Clinic)
- CSD716 I & II – Advanced Practicum II (Onsite University Clinic)
- CSD724 I & II - Advanced Practicum III (Offsite Clinical Rotations)

ASHA Requirements for Clinical Competency

To apply for clinical certification in with ASHA, the CSD program must verify that the student;

- Completed a program that includes academic course work and supervised clinical experience sufficient in depth and breadth to achieve the knowledge and skills outcomes. (Std. III)
- Completed a minimum of 400 clock hours of supervised clinical experience in the practice of speech-language pathology (Std. V. C.)
- Was supervised by individuals holding a current ASHA Certificate of Clinical Competence not less than 25% of the student's total contact with each client/patient (Std. V. E.)
- Supervised practicum included experience with individuals from culturally/linguistically diverse backgrounds and with client/patient populations across the life span. (Std. V. F.)
- Demonstrated knowledge of standards of ethical conduct. (Std. IV. E.)
- Demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders. (Std. IV. D.)
- Demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice. (Std. V. A.)

Evaluation of Student Performance

Students are evaluated by each clinical supervisor at midterm and final. Students' skills are rated on a scale of 1-5, which follows a progression towards independence. Students meet with their supervisor to discuss and document feedback at midterm and final. The midterm grades are not averaged into the final but used for feedback purposes.

Students are evaluated upon various skills across **Evaluation, Intervention, and Interaction, Personal Qualities & Professionalism**. Each clinical skill is rated on a 5 point scale, based upon the student's progression towards independence:

- 5: Independent
- 4: Skilled with consultation
- 3: Skilled with instruction
- 2: Emerging skill with instruction
- 1: Imitation with a model

Each course has specific ratings which equate to level of independence on a 5 point scale. Benchmarks increase by semester as the expectation of clinical skills advances.

Grade	CSD 616-I	CSD 616-II	CSD 716-I	CSD 716-II	CSD 724 I & II
A	2.5 <	3 <	3.5 <	4 <	4.5 <
B	2 - 2.49	2.5 - 2.99	3 - 3.49	3.5 - 3.99	4.0 - 4.49
C	1.5 - 1.99	2 - 2.49	2.5 - 2.99	3 - 3.49	3.5 - 3.99
D	1 - 1.49	1.5 - 1.99	2 - 2.49	2.5 - 2.99	3 - 3.49
F	< .99	< 1.49	< 1.99	< 2.49	< 2.99

Table 1. Average of all skills rated on a 1-5 scale across the sequence of clinical practicum classes.

All supervisor evaluations will be averaged for the final grade and weighted upon number of clock hours submitted to the supervisor.

Tracking Student Progression

The department uses an online clinical education management system, CALIPSO. This program allows students to submit, approve and will track their 400 clock hours. It facilitates the midterm and final performance evaluations, and tracks completion of clinical competency.

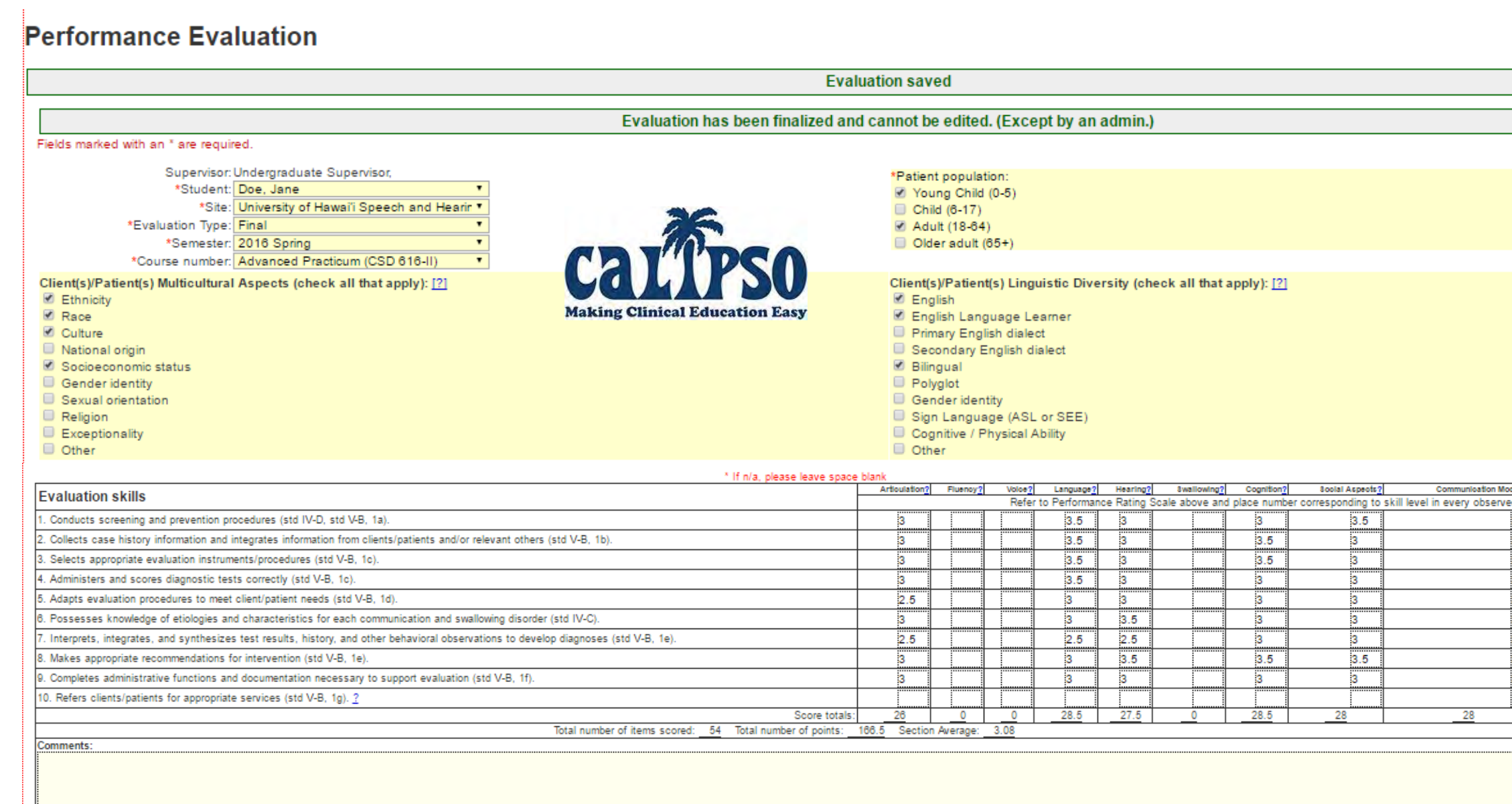


Figure 1. Sample CALIPSO performance evaluation

Identifying Students Requiring Remediation

Remediation plans are implemented for students who do not progress or consistently demonstrate clinical competencies. It is important to document, identify and intervene as early as possible.

A Plan of Action may be instituted if a student receives:

- Scores of 1.0 or below within a clinical competency/ASHA Standard during CSD 616-I and 616-II
- Scores of 2.0 or below within a clinical competency/ASHA Standard during CSD 716-I and 716-II
- Scores of 3.0 or below within a clinical competency/ASHA Standard during CSD 724-I and 724-II
- Scores below 4.0 that do not progress across semesters, on the same ASHA standard

Establishing a Remediation Plan

- Initial meeting is held with the student, academic advisor and clinical coordinator to discuss scores and feedback on performance evaluations. Advisors will connect the student with the CSD Departmental Student Advocate and provide resources for the UH Counseling Center and KOKUA program.
- Academic advisor and clinic coordinator draft remediation plan with input from supervising clinical faculty. The remediation plan specifically connects the students performance to the required competencies and outlines the individual training and accommodations provided to assist the students in developing these skills.
- The Plan is presented to the student, agreed upon and signed by the student, academic advisor and clinical coordinator.

Components of the Remediation Plan

Competency Identified for Remediation	Professional Qualities : Displays effective written communication for all professional correspondence (std V-A). Modifies treatment plans, strategies, materials, or instrumentation to meet individual client/patient needs (std V-B, 2e).
Initial Performance	Time management for documentation is an issue in therapy. Lesson plans are routinely late and often are not updated. The student is slow with her paperwork, even when given plenty of time and advance warning.
Intervention	The student will attend the onsite clinic to complete skilled treatment observations and documentation intervention. The student will observe treatment sessions, write a treatment note immediately following for review and develop a lesson for the next treatment session. Lesson plans must be turned in 24 hours prior to the treatment session for feedback from the supervisor.
Goal and Requirements	The student will display effective and timely written communication for treatment notes. Treatment notes will be written independently without errors.
Monitoring	The student will be evaluated by the supervising clinical faculty who will provide feedback on treatment notes and lesson plans after each session.

Follow Up and Determination

Students who pass remediation will continue on through the sequence of training. Students who do not pass the remediation plan or achieve the required benchmark in the course (B- is the lowest passing grade) will be required to repeat the course. Students who do not pass the subsequent remediation will be ineligible to continue through the program. If in good academic standing, the student may be eligible for a non-clinical Master's in CSD.