

**Assurance of Student Learning  
2018-2019**

College of Health and Human Services

Communication Sciences and Disorders

Communication Disorders – 595

**Use this page to list learning outcomes, measurements, and summarize results for your program. Detailed information must be completed in the subsequent pages.**

**Student Learning Outcome 2:** Students will demonstrate knowledge of the basic processes of clinical intervention (i.e. treatment plan development, session planning, and basic implementation principles, etc.).

**Instrument 1**      **Direct:** CD 495 – Clinical Internship – Evaluation of Undergraduate Internship

**Instrument 2**      **Indirect:** CD 495 – Pre-Clinical Experience and Post-Clinical Semester Reflection

**Instrument 3**

**Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 2.**

**Met**

**Not Met**

**Student Learning Outcome 4:** Students will demonstrate the ability to correctly document clinical information (i.e. including treatment plans, assessment plans, progress reporting (SOAP), final summaries, etc.).

**Instrument 1**      **Direct:** CD 495 – Clinical Internship – Evaluation of Undergraduate Internship

**Instrument 2**      **Direct:** CD 495 – Clinical Internship – SOAP (Progress) Note Sample

**Instrument 3**      **Indirect:** CD 495 – Pre-Clinical Experience and Post-Clinical Semester Reflection

**Met**

**Not Met**

**Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 4.**

**Instrument 1**

**Instrument 2**

**Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 3.**

**Met**

**Not Met**

**Instrument 1**

<b>Instrument 2</b>		
<b>Based on your results, circle or highlight whether the program met the goal Student Learning Outcome .</b>		<b>Met</b>
		<b>Not Met</b>
<b>Program Summary (Briefly summarize the action and follow up items from your detailed responses on subsequent pages.)</b>		
<p>Communication Disorders Program Faculty Met to Review/Confirm Learning Outcomes data and to remain consistent with our plan to review progress on overall Student Learning Outcomes (Even numbered Outcomes 2 and 4 on even years 2018-19 &amp; Odd numbered Outcomes 1 and 3 on odd years 2019-20).</p> <ul style="list-style-type: none"> <li>• Communication amongst supervisors was increased to weekly face-to-face contact and/or email/text messaging. This helped to identify students who needed extra support during the internship experience.</li> <li>• Weekly Blackboard discussion assignments, which covered a variety of clinical topics related to communication sciences and disorders supporting clinical documentation and implementation of objectives (prompting and cueing, behavior supports,) were added to further support areas of need as identified by student self-assessment on pre-clinical experience reflection and/or clinical supervisor ongoing student clinician assessment and weekly feedback amongst supervisors.</li> <li>• Student performance in the internship experience remained high. Clinical Supervisors/Professors were able to provide supports to students in the area of writing appropriate SOAP notes (particularly the A- assessment area) which was noted to be a weakness.</li> <li>• Mid-term Conferences were mandatory in a pilot project in the Fall 2019 in order to allow students the opportunity to self-evaluate strengths and weaknesses and to align those with that of the supervisor.</li> <li>• Regular, consistent feedback between adjunct supervisors and clinical faculty, revealed the need for adjunct supervisors to know more about the curriculum sequence for students. The following decisions were made based on this information:</li> <li>• A clinical faculty member will always attend face to face clinical supervisor (which contains both adjunct and full clinical faculty) meetings each semester in order to answer questions and provide information regarding academic content, and to collect information regarding the assessed areas of strength and weakness based on clinician performance.</li> <li>• All adjunct supervisors were given information regarding course sequencing, including Four Year Plans, and advising sheets used by program advisors to keep them apprised of the curriculum sequence.</li> <li>• Any information requiring a change in curriculum content and/or sequence will be appropriately addressed by faculty through the appropriate curriculum process.</li> </ul>		

<b>Student Learning Outcome 2</b>	
<b>Student Learning Outcome</b>	Students will demonstrate knowledge of the basics of clinical intervention including treatment plan development, session planning, and basic implementation principles.

<b>Measurement Instrument 1</b>	<p><b>NOTE: Each student learning outcome should have at least one direct measure of student learning . Indirect measures are not required.</b></p> <p>DIRECT measures of student learning: CD 495 – Clinical Internship – Evaluation of Undergraduate Internship  Students were assigned a designated client each semester. Each student was required to generate an individual treatment plan, weekly or bi-weekly lesson plans, and SOAP notes for each treatment session. Throughout the internship, students met frequently with supervisor(s) for discussion and feedback regarding student clinician performance. At the end of the semester, WKU clinical supervisors met with each student/supervisee individually for a final conference and to discuss performance in the internship experience. The following sections of the Evaluation of Undergraduate Internship form were completed: Development and Preparation for Therapy, Therapy Implementation, Written Documentation, Interpersonal Skills, and Personal and Professional Qualities. Students are assigned a score between 1 and 12, with 12 being the best score.</p>		
<b>Criteria for Student Success</b>	<p>Scores on the rubric range from 1 to 12 and are divided into the following assessment categories. The program success target is for clinicians to average in the score range of 10-12 on Evaluation of Undergraduate Internship.</p> <p>10-12 – Clear and convincing evidence – can work independently  7-9 – Clear evidence – needs only general direction  4-6 – Partial evidence – needs specific direction/demonstration  1-3 – Little or minimal – no evidence of specified skill/ineffective</p>		
<b>Program Success Target for this Measurement</b>	90% or better	<b>Percent of Program Achieving Target</b>	100%
<b>Methods</b>	<p>DIRECT: Artifacts from the Clinical Internship experience were collected from all students in the course (<math>N = 36</math>). Artifacts were obtained from client binders and supervisor records that contained scores in each competency area assigned by WKU clinical supervisors. All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Evaluation of Undergraduate Internship forms were collected and deidentified. Student progress was discussed and reviewed amongst thirteen clinical supervisors to identify areas of weakness and strength as well as potential needs to be addressed.</p>		
<b>Measurement Instrument 2</b>	<p>INDIRECT Measure of SL: CD 495 – Pre-Clinical Experience and Post-Clinical Semester Reflection  Each student was required to complete a Pre-Clinical Experience document describing positive aspects of clinical assignment, questions/concerns, and clinical growth goals for the semester. Students reviewed this document with clinical supervisors at initial conferences. At the end of the semester, students completed the Post-Clinical Semester Reflection to review at final conferences. Students and supervisors compared the Pre-Clinical Experience and Post-Clinical Semester Reflection to review positive aspects of clinical experience, difficult aspects of clinical experience, and clinical growth goals for future internships.</p>		
<b>Criteria for Student Success</b>	<p>Ability of student to self-evaluate strengths and weaknesses and to self-identify future areas for growth consistently aligned with supervisor feedback.</p>		
<b>Program Success Target for this Measurement</b>	90%	<b>Percent of Program Achieving Target</b>	100%
<b>Methods</b>	<p>Indirect: Pre-Clinical Experience and Post-Clinical Semester Reflections were collected from all students in the course (<math>N = 36</math>). All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Post-Clinical Semester Reflections were compared to the Evaluation of</p>		

	Undergraduate Internship forms completed by supervisors to ensure students' growth goals aligned with supervisor feedback.	
<b>Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 2.</b>	<b>Met</b>	<b>Not Met</b>
<b>Actions</b> (Describe the decision-making process and actions planned for program improvement. The actions should include a timeline.)		
<p>It was decided that in the Fall 2019 semester, that mandatory midterm conferences would be piloted for clinical practicum students to improve student self-assessment abilities and attention as well as to provide a mid-semester check point for each student with their clinic supervisor. In past clinical experiences, mid-term conferences had been scheduled primarily with struggling students only. The individual conferences will be student-led conferences based on a self-evaluation tool developed by the clinic director. In addition, communication amongst supervisors will be increased to weekly face-to-face contact and/or email/text messaging to continually identify and recognize outstanding student performance in a clinical area as described on the rubric and/or to continually communicate about supervisory issues or general information. All identifying information was removed from written communications to remain compliant with HIPAA and FERPA regulations. This helped to identify students who needed extra support during the internship experience. Timeline for completion: Fall 2020</p> <p>Beginning in Fall 2019, Students were to be assigned weekly Blackboard discussion assignments, which covered a variety of clinical topics (assessment, behavior management, prompting and cueing) related to communication sciences and disorders and were hoped to strengthen clinical intervention and course content connections. Timeline for completion: Fall 2020</p>		
<b>Follow-Up</b> (Provide your timeline for follow-up. If follow-up has occurred, describe how the actions above have resulted in program improvement.)		
<p>At the time of this report, review of data insured the quality of the student internship experience remained high. Weekly contact between supervisors and the clinic director with shared information is ongoing and strong and will be continued. The value of the mandatory mid-term conferences and the impact on the program and student learning outcomes will be re-visited after the Fall semester data collection and reported at a later date. Based on further clinical feedback from supervisors and further discussion with program faculty, adjustments to course content may be made if warranted. Also based on feedback from adjunct supervisors, clinical faculty will attend supervisor meetings and be able to answer questions regarding curriculum content, sequence, advising, based on students' assessed strengths and weaknesses. Adjunct Supervisors are learning how the course sequence impacts clinical skills based on how new the knowledge is to the students whether they are learning skills (disorder area) subsequently to the clinical assignment or previous to the clinical assignment. Adjunct supervisors were provided Four Year Plans and Advising Documentation used with students at the Fall 2019 Closing Supervisors Meeting. (Finish in September 2020)</p>		

### Student Learning Outcome 4

<b>Student Learning Outcome</b>	Students will demonstrate the ability to correctly document clinical information (i.e. including treatment plans, assessment plans, progress reporting (SOAP), final summaries, etc.).		
<b>Measurement Instrument 1</b>	<p>DIRECT: CD 495 – Clinical Internship – Evaluation of Undergraduate Internship</p> <p>Students were assigned a designated client each semester. Students attended a clinic orientation meeting and an individual meeting with assigned supervisor. Each student was required to generate an individual treatment plan, weekly or bi-weekly lesson plans, SOAP notes, final summary, and discharge or assessment reports (as indicated) for each assigned session/client. Throughout the internship, students met frequently with supervisor(s) for discussion and feedback regarding student clinician documentation. At the end of the semester, supervisors met with each student individually for a final conference and to discuss performance for the internship experience. The following sections of the Evaluation of Undergraduate Internship form were completed: Development and Preparation for Therapy, Therapy Implementation, Written Documentation, Interpersonal Skills, and Personal and Professional Qualities. Students are assigned a score between 1 and 12. Students should obtain an average of 10-12 in order to meet the program success target for this student learning outcome.</p>		
<b>Criteria for Student Success</b>	<p>Scores on the rubric range from 1 to 12 and are divided into the following assessment categories. The program success target is for clinicians to average in the score range of 10-12 on Evaluation of Undergraduate Internship.</p> <p>10-12 – Clear and convincing evidence – can work independently            7-9 – Clear evidence – needs only general direction            4-6 – Partial evidence – needs specific direction/demonstration            1-3 – Little or minimal – no evidence of specified skill/ineffective</p>		
<b>Program Success Target for this Measurement</b>	90% or better	<b>Program Success Target for this Measurement</b>	100%
<b>Methods</b>	<p>Direct Assessment Measures: Artifacts from the Clinical Internship experience were collected from all students in the course (<math>N = 36</math>). Artifacts were obtained from client binders and supervisor records. All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Evaluation of Undergraduate Internship forms were collected and deidentified. Student documentation was discussed and reviewed amongst thirteen clinical supervisors to identify areas of weakness and strength as well as potential needs to be addressed</p>		
<b>Measurement Instrument 2</b>	<p>DIRECT: CD 495 – Clinical Internship – SOAP (Progress) Note – Students were required to report subjective, objective, assessment, and planning for each treatment session.</p>		
<b>Criteria for Student Success</b>	<p>Student was able to properly report subjective, objective, assessment, and planning information for each session</p>		
<b>Program Success Target for this Measurement</b>	90%	<b>Percent of Program Achieving Target</b>	100%
<b>Methods</b>	<p>Direct: Artifacts from the Clinical Internship experience were collected from all students in the course (<math>N = 36</math>). Artifacts were obtained from client binders and supervisor records. All identifying information was removed from</p>		

	clinical documentation to remain compliant with HIPAA and FERPA regulations. Evaluation of Undergraduate Internship forms were collected and deidentified. Student documentation was discussed and reviewed amongst thirteen clinical supervisors to identify areas of weakness and strength as well as potential needs to be addressed.		
<b>Measurement Instrument 3</b>	INDIRECT: CD 495 – Pre-Clinical Experience and Post-Clinical Semester Reflection Each student was required to complete a Pre-Clinical Experience document describing positive aspects of clinical assignment, questions/concerns, and clinical growth goals for the semester. Students reviewed this document with clinical supervisors at initial conferences. At the end of the semester, students completed the Post-Clinical Semester Reflection to review at final conferences. Students and supervisors compared the Pre-Clinical Experience and Post-Clinical Semester Reflection to review positive aspects of clinical experience, difficult aspects of clinical experience, and clinical growth goals for future internships.		
<b>Criteria for Student Success</b>	Ability of student to identify future areas for growth consistent with supervisor feedback.		
<b>Program Success Target for this Measurement</b>	90%	<b>Percent of Program Achieving Target</b>	100%
<b>Methods</b>	Indirect measures of assessment of student learning: Pre-Clinical Experience and Post-Clinical Semester Reflections were collected from all students in the course ( $N = 36$ ). All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Post-Clinical Semester Reflections were compared to the Evaluation of Undergraduate Internship forms completed by supervisors to ensure students' growth goals aligned with supervisor feedback.		
<b>Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 4.</b>		<b>Met</b>	<b>Not Met</b>
<b>Actions</b> (Describe the decision-making process and actions planned for program improvement. The actions should include a timeline.)			
Communication amongst supervisors was increased to weekly face-to-face contact and/or email/text messaging and that contact encouraged greater support to students. During weekly ongoing assessment of student performance by clinical supervisors (weekly checking of clinical documentation and session performance), supervisors were able to communicate to the clinic director the need for additional supports in the area of documenting the A- Assessment area of the SOAP note. All identifying information was removed from written communications to remain compliant with HIPAA and FERPA regulations. This helped to identify students who needed extra support during the internship experience. Timeline for completion: Fall 2020			
Students were also assigned weekly Blackboard discussion assignments, which covered a variety of clinical topics related to communication sciences and disorders. Timeline for completion: Fall 2020			
<b>Follow-Up</b> (Provide your timeline for follow-up. If follow-up has occurred, describe how the actions above have resulted in program improvement.)			
At the time of this report, review of data insured the quality of the student internship experience remained high. Weekly contact between supervisors and the clinic director with shared information is ongoing and strong and will be continued. The value of the mandatory mid-term conferences and the impact on the program and student learning outcomes will be re-visited after the Fall semester data collection and reported at a later date. Based on further clinical feedback from supervisors and further discussion with program faculty, adjustments to course content may be made if warranted. Also based on feedback from adjunct supervisors, clinical faculty will attend supervisor meetings and be able to answer questions regarding curriculum content, sequence, advising, based on students' assessed strengths and weaknesses. Adjunct Supervisors are learning how the course sequence impacts clinical skills based on how new the knowledge is to the students whether they are learning skills (disorder area) subsequently to the clinical assignment or previous to the clinical assignment. Adjunct supervisors were provided Four Year Plans and Advising Documentation used with students at the Fall 2019 Closing Supervisors Meeting. (Finish in September 2020).			

**Western Kentucky University  
Communication Disorders Clinic  
Evaluation of Undergraduate Internship**

**Clinician:** \_\_\_\_\_ **Supervisor:** \_\_\_\_\_ **Semester:** \_\_\_\_\_

**GRADING RUBRIC**

10-12:	Takes initiative and works toward independence
7-9:	Regularly needs specific direction/demonstration
4-6:	Performs effectively ONLY after specific direction and demonstration
1-3:	Fails to perform regardless of supervision

<b>Profile of Clinical Skills</b>		<b>Final</b>
<b>I. Diagnosis in Therapy Settings</b>	A. Familiarity with, and choice of appropriate diagnostic tools, ensuring use of least biased testing techniques	
	B. Administers and scores according to established procedures	
	C. Observes and identifies relevant behaviors	
	D. Interprets and analyzes diagnostic information accurately	
	E. Establishes appropriate short and long term objectives	
	F. Collects and uses baseline data as appropriate	
	G. Explains results of assessment to clients and caregivers in an effective way	
<b>II. Development &amp; Preparation for Therapy</b>	A. Applies theory and research knowledge in treatment	
	B. Demonstrates creative selection/preparation of treatment techniques and materials, and if applicable, ensuring appropriate accommodations and modifications to support client access to curriculum	
	C. Plans and organizes sessions to meet individual and/or group goals	
<b>III. Therapy Implementation</b>	A. Uses materials and/or equipment proficiently	
	B. Provides clear, concise instruction in a manner appropriate to the age, attention, and developmental level of the client	
	C. Uses appropriate cues and task modifications, as needed, to maintain attention while eliciting/facilitating therapy objectives	
	D. Demonstrates appropriate reinforcement/behavior management	
	E. Responds to/modifies treatment based on changes in client performance	
	F. Uses time in therapy session effectively to maximize learning	
	G. Demonstrates ability to lead session and/or collaborate in group activities	
<b>IV. Written Documentation</b>	A. Includes information that is relevant, accurate, and appropriate	
	B. Writes in a style that is clear, well-balanced, complete, and grammatically correct	
<b>V. Interpersonal Skills</b>	A. Demonstrates sensitivity and responsiveness to the emotional as well as the behavioral needs of clients and caregivers	
	B. Interacts appropriately with family members/other professionals	
<b>VI. Personal &amp; Professional Qualities</b>	A. Professionalism: Oral communication model, dependability, appearance, level of involvement, seeks out help when needed	
	B. Manages time, documentation, and clinic demands with flexibility	
	C. Responds to supervisor's suggestions appropriately	
	D. Takes initiative and works in a self-directed manner	
	E. Trains family/caregivers to enhance therapy, as appropriate by providing transactional support	
<b>CSD 495 – Grading Scale</b>		<b>TOTAL: 0</b>
A = 10-12	B = 7-9	<b>Diagnostic and Therapy Average: 0</b>
C = 4-6	D = 1-3	<b>Therapy Only Average: 0</b>

**Comments:**

**Supervisor Signature:** \_\_\_\_\_

**Clinician Signature:** \_\_\_\_\_

**Comprehensive Learning Check (100 points)**

**Name:** \_\_\_\_\_

**Each video is worth 15 points.**

**Intervention Strategies/Techniques Word Bank – You are not limited to only these strategies/techniques.**

**\*Note: If you select this strategy/technique, you must provide a SPECIFIC example in your response of how it will be used. It is VERY important to note you cannot use ANY prior knowledge of any of the characters – only what you SEE/HEAR in the clips.**

Imitation	Counseling*	Laryngeal Exercises	Thick It
Slow Speech Rate	Syllable Sequencing	Functional Activity*	Positive Reinforcement*
Light Articulatory Contact	Vocal Fold Exercises	Carrier Phrases	Written Reminders*
Hydration	Finding Best Voice	Diet Modification*	Breathing Techniques
Highlighters	Pacing Board	Tactile Feedback*	Vocal Rest
Overarticulation	Alarms*	Standard Precautions*	Syllable Sequencing
Metronome	Visual Schedule	Oral Motor Exercises	Auditory Discrimination

**Diagnosis options: Apraxia, articulation disorder, Broca’s aphasia, cleft lip/palate, cognitive disorder (i.e. TBI, dementia), dysarthria, dysfluency, language disorder, phonological delay/disorder, voice disorder, Wernicke’s Aphasia**  
**Video 1: Christie – Watch the clip and diagnose Christie.**

Diagnosis: \_\_\_\_\_ Provide **two** reasons why you diagnosed Christie with this disorder.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

Provide **one** intervention technique for Christie and tell **how** it would help: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Video 2: Two Women – Watch the clip and diagnose the two women.**

Diagnosis: \_\_\_\_\_ Provide **two** reasons why you diagnosed them with this disorder.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

Provide **one** intervention technique for them and tell **how** it would help: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Video 3: Karl – Watch the clip and diagnose Karl.**

Diagnosis: \_\_\_\_\_ Provide **two** reasons why you diagnosed Karl with this disorder.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

Provide **one** intervention technique for Karl and tell **how** it would help: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Video 4: Iris – Watch the clip and diagnose Iris.**

Diagnosis: \_\_\_\_\_ Provide **two** reasons why you diagnosed Iris with this disorder.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

Provide **one** intervention technique for Iris and tell **how** it would help: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Video 5: Brielle – Watch the clip and diagnose Brielle. She is five years old.**

Diagnosis: \_\_\_\_\_ Provide **two** reasons why you diagnosed Brielle with this disorder.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

Provide **one** intervention technique for Brielle and tell how it would help: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Video 6: Webber – Watch the clip and provide two possible reasons using anatomical terms why Webber might be coughing.**

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

As his SLP, what would you do or recommend? \_\_\_\_\_  
\_\_\_\_\_

**Video 7: Nell – Watch the clip and diagnose Nell.**

Diagnosis: \_\_\_\_\_ Provide **two** reasons why you diagnosed Nell with this disorder.

1. \_\_\_\_\_  
\_\_\_\_\_
2. \_\_\_\_\_  
\_\_\_\_\_

Provide **one** intervention technique for Nell: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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## COMMUNICATION SCIENCES & DISORDERS CLINIC

### Final Semester Reflection

**Student Clinician:** \_\_\_\_\_

**Date:** \_\_\_\_\_

Positive things about my experiences this semester (include what were you good at, what made you feel good, something you learned):

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Difficult aspects of my experiences this semester:

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When I started this semester, I wish I had known...

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In my future internship/externship placements, I hope to grow in the following way(s):

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## COMMUNICATION SCIENCES & DISORDERS CLINIC

Fax: 270-745-3441

### Pre-Clinical Experience

Name: \_\_\_\_\_

Date: \_\_\_\_\_

After receiving my client list, I am most excited about:

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After receiving my client list, I am most nervous about and will need support with:

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During this internship, I hope to grow in the following way(s):

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I think you should know:

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