

Clinical Education: Are you Ready for the Requirements?


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Disclosures

WE HAVE NO FINANCIAL OR NON-FINANCIAL DISCLOSURES TO SHARE WITH YOU.





Course Objectives

- ✓ 1. Participants will be able to state the mandated requirements for all Clinic Educators/Supervisors.
- 2. Participants will create a plan to ensure compliance with ASHA and CAPCSD requirements.
- 3. Participants will apply basic principles of supervision to their daily practice with supervisees.
- 4. Participants will be introduced to the future webinar series sponsored by the Department of Education.

Seriously though....

Many updates related to supervision

ASHA formed an Ad-Hoc Committee on Supervision Training in 2014


The AHCST completed its work in May 2016

AHCST Charges:

- Develop systematic approach for establishing resources and training for ALL individuals serving as supervisors.
- Identify qualified team to develop the resources
- Contribute to the resources for ASHA's Practice Portal
- Identify supervisory topics and the methods for delivery and implementation

AHCST target groups

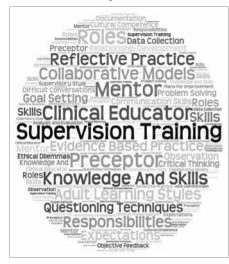
1. Clinical Educators of graduate students in university training programs
2. Preceptors of audiology students
3. Mentors of Clinical Fellows
4. Supervisors of Support Personnel
5. Supervisors of professionals transitioning to a new practice or re-entering the workforce



AHCST Recommendations

1. ASHA develop a brand essence on supervision to increase engagement in supervision training
2. Encourage collaboration between ASHA member and other professional organization with the sharing of resources
3. Develop resources for Clinical Education and Supervision Practice Portal- Topics for Supervisory Training
4. Plan for establishing ASHA Resource and Training Opportunities
5. Develop quality indicators to identify experts in supervision to assist in creating additional training activities and resources
6. Disseminate resources to ASHA members and Academic entities
7. Implementation of the professional development requirements over the next 6 years

Graphic for Supervision Training



What does that mean?

Over the next 3 years there will be increased number of Audiologist and Speech-language Pathologist trained in supervision

THERE MUST BE!!!!



Why is this important to you?

Beginning with supervision hours earned on 1/1/2020 clinical supervisors and clinical fellowship mentors must have **9 months of experience** after being awarded the CCC-SLP and **two hours** of professional development in the area of supervision.

The Council of Clinical Certification in Audiology and Speech – Language Pathology (CFCC) is will be considering implementing a minimum requirement of two continuing education hours, every 3 years for any professional who provides clinical supervision.

What will you see in the future?

1. Increased awareness of the need for training for anyone engaged in supervision
2. Expansion of professional development on the topic of clinical education and supervision
3. Expansion of publications related to clinical education and supervision
4. Development of a Clinical Education and Supervision theme in The ASHA Leader

Timeline for Requirement for Supervisory Training

PHASE I: (2016-2018)

PHASE II: (2019-2021)

- Encourage all to consider this at your own facility: The impact it may have on hiring new graduates and supervising Clinical Fellows – not to mention graduate students at Marshall and WVU.

PHASE I: (2016-2018)


- ASHA expanded access to training
- ASHA expanded dissemination of information and resources on the topic of supervision
- ASHA members voluntarily completed supervision training

PHASE I: (2016-2018)

- CAA
 - incorporated supervision knowledge in the accreditation standards (3.0 Curriculum)
 - on and off-site supervisors must meet qualifications related to supervision training (2.0 Faculty)
- CFCC
 - Graduate students and CF must be supervised by individuals who have completed formal training in supervision
 - Graduate students must be provided education to prepare them to supervise support personnel
- SIG 11 proposed specialty certification in supervision

PHASE II: (2019-2021)

- ASHA continues to offer professional development
- ASHA members continue to voluntarily complete supervisory training
- CFCC will require a minimum of 2 hours of CEUs by 1/1/20**
- CFCC establishes operational Specialty Certification in Supervision




Marshall and West Virginia University

Each of you will have access to the first two training modules at the end of this one hour session.

All supervisors for Marshall and WVU will be provided the access codes if they have not already received them.

CAPCSD Online Training Modules

- Foundations of Clinical Education –AAA/ASHA
- Effective Student – Clinical Educator Relationships AAA/ASHA



Resources

- Resource # 1: (FREE) CAPCSD Online Training Modules
Contact Karen, Pam and Leslie for access codes
- Resource # 2: (FREE) Nine Building Blocks for Supervision
<https://learninacenter.asha.org/diweb/catalog/item/id/1930127>
- Resource #3: WVDOE- (FREE) Coming Soon

Moving Forward in West Virginia

- The WV DOE is developing a web-based training for all SLPS working in the schools to ensure this requirement is being met.

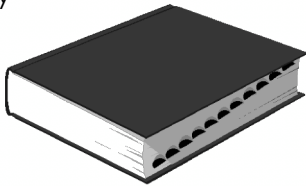
WVDOE Clinical Supervisor Training Module

- The program will consist of three web-based learning modules to educate practicing school-based Speech-Language Pathologists about the requirements of supervising for a variety of mentorship scenarios.

Modules Overview

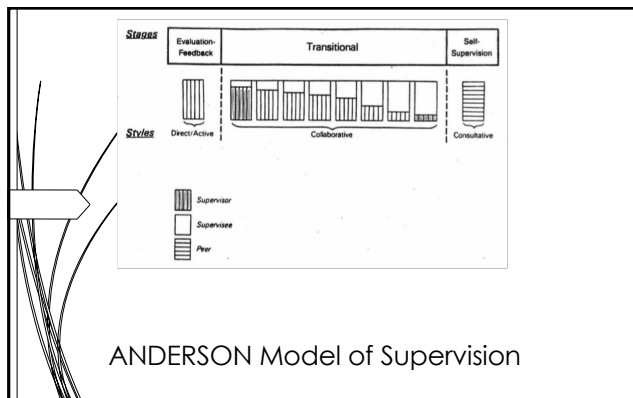
- **Module 1:** This module will provide information to enhance clinical education supervisors' knowledge on how their role aligns with that of the traditional educator in terms of providing supervision in consideration of the supervisees' needs. Speakers for this session will be Pam Holland and Karen Haines.
- **Module 2:** This module will provide information to enhance clinical education supervisors' knowledge on educational strategies to enhance student learning and promote critical thinking in Speech-Language Pathology graduate students. Speakers for this session will be Leslie Graebe and Pam Holland.
- **Module 3:** This module will focus on the ethical components of supervision to promote awareness of the obligation and responsibility a clinical education supervisor holds when taking on graduate student clinicians or SLP-As. Speakers for this session will be Karen Haines and Leslie Graebe.

Basic Terminology



Continuum of Supervision

A model of supervisory methods which illustrates that the type of supervisory practice most appropriate will depend on the students' level of knowledge, experience and competence.



Modeling

A method of supervision in which the preceptor demonstrates the skills with patients as the student observes.

FEEDBACK

Constructive and timely evaluation response to an action that allows an individual to improve and/or change their method for greater effectiveness.

Peer Coaching

A model of supervision in which the clinical educator has responsibility for two students who are working together in a collaborative fashion with one another and with their clinical educator.

Collaborative Practice

Occurs when multiple health workers from different professional backgrounds provide comprehensive services by working with patients, their families, caregivers and communities to deliver highest quality of care across settings.

Supervision

"Clinical supervisors teach specific skills, clarify concepts, assist with critical thinking, conduct performance evaluations, mentor, advise, and model professional behavior. Speech-language pathologists and audiologists engaged in supervising include: preceptors who supervise graduate students, mentors who supervise clinical fellows, clinical instructors/educators who supervise graduate students and supervisors who supervise support personnel or professionals in transition."

Something New at Marshall and WVU Interprofessional Education

- According to the World Health Organization (WHO; 2010), "Interprofessional education (IPE) occurs when two or more professions learn about, from, and with each other to enable effective collaboration and improve... outcomes" (p. 7).
- IPE is an essential first step in preparing professionals to work collaboratively in response to client/student/patient needs.
- Interprofessional practice (IPP)** allows workers from a variety of professional backgrounds to work together with clients/students/patients, families, caregivers, and communities to provide the highest quality and most comprehensive services possible (WHO, 2010).
- Interprofessional education and collaborative practice align with national efforts toward a more interprofessional and collaborative service delivery model that centers on the individual and family with the aim of educating populations, improving health and safety, and enhancing the overall cost effectiveness of educational and health care services.

Something New at WVU Telepractice

- Telesupervision** of student clinicians occurs when a qualified professional observes, from a distance, the delivery of services by the student and provides feedback or assistance as needed.
- Telesupervision offers the potential to expand students' access to clinical placements and to reduce travel and scheduling conflicts for clinical educators.

The 5 Types of Supervision

1	2	3	4	5
ABSENT Adult not in room with dog and baby/booster	PASSIVE Adult in same location but distracted and not watching	REACTIVE Responding after dog or child is too close	PROACTIVE Planning and preparing safe separation	ACTIVE Full awake adult supervision
☆☆☆☆	☆☆☆☆	☆☆☆☆	☆☆☆☆	☆☆☆☆

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Consider the following

- Relationships: family, peers, professionals, colleagues, students
- Interpersonal skills – student/supervisor, supervisor/client, student/client, supervisor/administrator
- Communication – spoken words, written words, body language, texts, emails, etc.
- Interpersonal relationships – THE KEY TO IT ALL

Power of **Positive** Words:

- I want...you to read the orientation handbook
- I can...answer questions you have about our facility, our expectations and our patients/students
- I will...assist you in achieving our expectations and facilitate your own self evaluation skills to use now and in the future.

Student perspective #1

" Being 31 and having spent grade school, high school and college thinking of teachers as judges – of both my work and of me as a person – I realized that I approached graduate school and supervision the same way. Thus my first misconception of supervisors: that they are judges!"

Student Perspective #2

In the beginning, my supervisory interactions were frustrating because I did not know what to expect. Once I realized what the expectations were, I had a sense of what to do."

Student Perspective #3

"I feel that I have learned about myself and my abilities through her guidance. She has allowed me to stand on my own and has offered me suggestions, generally she has let me grow and has shared many of her own experiences as well. My experience has been a positive one and I hope everyone is as lucky."

Supervisory Voice #1

"Doing supervision challenges me because I need to be accountable for my knowledge and for my feelings. I can't expect a student to do things I couldn't or wouldn't feel comfortable doing myself. I am part friend, part mom, part record-keeper, part drill sergeant, part caring listener. I try to push students to work to their potential but to be supportive and instill confidence a the same time."

Supervisory Voice # 2

-I have always thought it important for me to be more professionally secure, more knowledgeable for the most part, wiser, more mature, more flexible, more accommodating and more dependable than those persons, whether staff or students who I have supervised. And, of course, that always been burdensome. I think this kind of self-imposed standard is unrealistic and certainly too high, but its in me nonetheless."

Best Practices

- Use a system for sharing feedback immediately - iPad, texts, emails, paper- document and refer back to frequently
- Ask your student about their learning style
- Consider joining SIG 11

Best Practices

- Educate yourself on ASHAs policies related to Knowledge, skills and training for Supervisors
- If you don't already have a Formal Orientation Handbook for students, create one
- Present your supervisees with a clear set of expectations. (daily, weekly, midterm, final)

Moving Forward

- Inform all of your colleagues about this change
- Have them contact us for access code
- Discuss formal plan to implement this training at your facility
- Develop a schedule for module completion
- Implement changes in your supervision



Best Practices

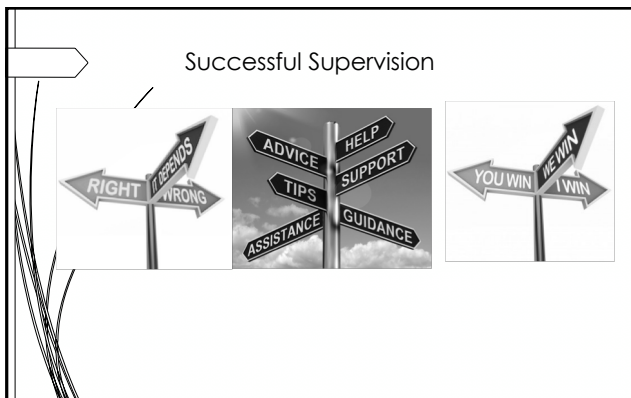
- Encourage open dialogue with your supervisees
- Ask questions and encourage supervisees to ask questions
- Share your experiences – successes and failures with your supervisees

Audience thoughts?

Supervisors?

Personal examples of challenges and successes?





References and Resources	<hr/> <hr/> http://www.asha.org/Practice-Portal/Professional-Issues/Clinical-Education-and-Supervision/ <hr/> <hr/>
	http://www.capsd.org/ <hr/> National Student Speech Language Hearing Association. (1990). <i>The Supervisory Process: An experience of Interpersonal Relationships and Personal Growth</i> . <i>National Student Speech language hearing Association Journal</i> , Volume 17, 17-28, 1989-1990. <hr/>
	Ward, Louise M., Webster, Elizabeth J. (1965). <i>The Training of Clinical Personnel: A Concept o Clinical Preparation</i> , ASHA, Volume 7, No 4 103-015. <hr/>
	Hale, Sue, Ad Hoc Committee Chair et al. (2013) <i>Knowledge, Skills and Training Consideration for Individuals Serving as Supervisors</i> . ASHA
