Department of Communication Sciences and Disorders  
California State University, Sacramento  

Spring 2017  

CSAD 243A – PRACTICUM IN LANGUAGE DISORDERS I  
SYLLABUS & COURSE OUTLINE  

Methods Instructor:  
Heather Thompson, PhD CCC-SLP  
Email: heather.thompson@csus.edu  
Office Hours:  
Thursdays 11:30-2:30pm  
Office Location: Shasta Hall Room 263  
916/278-6654

Date, Time and Location:  
As scheduled, Maryjane Rees Language Speech and Hearing Clinic

Number of Weeks:  
15 week course; 12-13 week clinical semester

Clinical Instructors:  
Elizabeth Posner  
Kathryn Vigil  
James Chuchas  
Kelly Dodge  
Sandy Kaul  
Karen Oakley  
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Email: james.chuchas@csus.edu  
Email: kelly.dodge@csus.edu  
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Email: karen.oakley@csus.edu

PLACE OF THE COURSE IN THE PROGRAM

This course will generally be taken by students during their first semester of the graduate program and is considered to be the entry practicum course in language disorders, aural rehabilitation and auditory processing. The methods course (CSAD 242A) is a co-requisite to this practicum course. Each clinician/graduate student will be assigned one client for whom they are responsible for an approximately 12 week clinical semester. While the practicum’s focus will be auditory processing disorders (AP), aural rehabilitation (AR), and language and/or phonologically-based speech sound disorders (PD), the focus may be modified to meet the needs of the client.

PREREQUISITES

1. Acceptance to graduate program with completion of prerequisite courses in Speech Pathology and Audiology especially CSAD 130, 131, 133 and 146.
2. GPA in prerequisite speech pathology courses of 3.00 or better.
3. Grades of C or better in all courses taken in the major.
4. Be concurrently enrolled in CSAD 242A.
5. Passing of speech and language screening required by department.
6. Department Background Check (if not already done).
7. Purchase of student professional liability insurance.
8. Completion of a TB test and the 3 shot Hepatitis (HBV) series of vaccinations.

**LEARNING OUTCOMES COMPETENCIES (CSAD 243A):**

Mastery of each student learning outcome listed below is indicated by a grade of B or better on each component of the corresponding measures listed in the table. Students are required to track their progress towards meeting each learning outcome and must make an appointment with the instructor for any grade equal or less than a B. The instructor will suggest strategies to help you establish competence and knowledge in these areas.

**SPECIFIC STUDENT LEARNING OUTCOMES**

Upon completion of this course the student will be able to:

1. Design, plan and carry out individualized AR, AP and PD client assessments using standardized tests, informal measures and observations, interviews and conferences, and review of client records.
2. Create a set of pertinent history/interview questions.
3. Complete a client/caregiver interview, utilizing a question set, but be able to listen to the client/caregiver and be able to add and/or revise questions as necessary during the interview.
4. Interpret assessment results and design and individualized and appropriate treatment plans for client with AR, AP and/or PD. This treatment plan should be sequenced hierarchically and written in a behavioral objective format. This includes: a) long term semester goals, b) short term objectives, c) treatment methods/procedures and d) baseline and final data.
5. Discuss with the client the assessment findings and the treatment plan in a proactive, yet compassionate manner.
6. Implement the treatment plan in a time efficient and effective manner, yet making the plan and treatment methods with client engagement in mind.
7. Competently complete a total of 22-48 clock hours of client contact with at least one client. A minimum of two hours in assessment is required.
8. Integrate research principles into evidence-based clinical practice.
9. Update the client on a regular basis about the progress being made under the treatment plan.
10. Take effective data in a structured and organized manner.
11. Write a Final Case Report for each client that contains a plan for clinical intervention that is tailored specifically for that individual client and that is written to professional standards.
12. Attend weekly conferences with the assigned clinical instructor and assist her/him in the planning and implementation of goals for that conference.
13. Develop and implement professional and ethical behaviors as required, with the client, caregiver, and clinical instructor.

The above learning outcomes will be assessed through weekly written lesson plans and/or SOAP notes, draft and final reports (ICR and FCR), skill with client assessment, the design and implementation of therapy techniques, and the use of professional behavior. A midterm and final competency evaluation will be completed by the clinical instructor in writing and presented in a verbal discussion with the graduate clinician.

The following ASHA Standards are met by successful completion of this course:

**Standard III-D.** The applicant must possess knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates of the following disorders:

- Hearing, including the impact on speech and language
- Voice and Resonance of the hearing impaired
• Social aspects of communication
• Cognitive aspects of communication
• Communication modalities (including oral, manual, augmentative and alternative communication techniques, and assistive technologies)

COURSE POLICIES:

Attendance: Prompt attendance at clinic treatment sessions is required at all times. Any missed assessment or treatment sessions must be made up during the week between the end of clinic and finals week and with the approval of your clinical instructor. A clinical instructor must be supervising your sessions at all times.

Clinical Instructors: Your clinical instructor and your therapy times have been assigned to you based upon the schedule that you provided to the scheduling office. No change to your schedule may be made without the approval of the Clinic Coordinator. Your Clinical Instructors are required to meet with you on a weekly basis. Those meetings may be individual or group conferences to discuss clients and assessment/treatment plans. Attendance at these conferences is mandatory. If you have concerns that your clinical issues are not being adequately addressed, you should first talk with your clinical instructor. If you continue to remain concerned, speak with the Clinic Coordinator.

CLINIC POLICIES:

Clinic Handbook: A Clinic Handbook will be provided to you at the start of the semester. You are responsible for following the policies and procedures described in the Clinic Handbook.

Video Recordings: Video Recordings of clients MUST remain in the clinic. All video recordings may be downloaded to a flash drive and must be immediately deleted after the student has reviewed the recorded session. They can be viewed in an available therapy room or the Student Clinician’s room. They can also be used for classroom presentations, then deleted. These recordings may not be taken home. A violation of this policy will result in the student receiving a failing grade in the clinic.

Grading Policy: A passing grade for clinic performance is based on the Final Clinical Competencies. You should review competencies BEFORE clinic starts so that you aware of all items that will become part of your formative and summative assessment for this clinic. The Clinical Competencies will be completed by your clinical instructor at midterm and at final, but it is the final Clinical Competency Report on which your clinic grade is based. The Clinical Competencies are separated into four (4) general categories: Writing, Assessment, Treatment, and Professional Behavior. Each general competency area consists of numerous individual line items.

A passing grade for each clinic is a B- or higher. A passing grade is obtained by achieving a rating of 4.0 or better on the average combined score of the 4 general competency categories, provided that the student achieves; (a) an average rating of 4.0 or better for each of the 4 general competency categories and (b) a minimum score of 3.0 on all individual competency line items. Therefore, any student receiving (a) a rating of 2.99 or less on any one (or more) specific line item or (b) a rating of 3.99 or less for a competency category will not pass the clinic, even if their average combined score of the 4 general competency categories is a B- or higher. In such cases, a grade of C+ will be given for the clinic.
Letter grades will be based upon the following:

<table>
<thead>
<tr>
<th>SCORE</th>
<th>GRADE</th>
<th>DESCRIPTION</th>
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<tbody>
<tr>
<td>4.65 - 5.00</td>
<td>A</td>
<td><strong>Exceeds Performance Expectations</strong>&lt;br&gt;(Minimum assistance required)&lt;br&gt;• Clinical skill/behavior well-developed, consistently demonstrated, and effectively implemented&lt;br&gt;• Demonstrates creative problem solving&lt;br&gt;• Clinical Instructor consults and provides guidance on ideas initiated by student</td>
</tr>
<tr>
<td>4.50 - 4.64</td>
<td>A-</td>
<td></td>
</tr>
<tr>
<td>4.35 – 4.49</td>
<td>B+</td>
<td><strong>Meets Performance Expectations</strong>&lt;br&gt;(Minimum to moderate assistance required)&lt;br&gt;• Clinical skill/behavior is developed/implemented most of the time, but needs continued refinement or consistency&lt;br&gt;• Student can problem solve and self-evaluate adequately in-session&lt;br&gt;• Clinical Instructor acts as a collaborator to plan and suggest possible alternatives</td>
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<tr>
<td>4.15 – 4.34</td>
<td>B</td>
<td></td>
</tr>
<tr>
<td>4.00 – 4.14</td>
<td>B-</td>
<td></td>
</tr>
<tr>
<td>3.85 – 3.99</td>
<td>C+</td>
<td><strong>Needs Improvement in Performance</strong>&lt;br&gt;(Moderate assistance required)&lt;br&gt;• Inconsistently demonstrates clinical skill/behavior&lt;br&gt;• Student’s efforts to modify performance result in varying degrees of success&lt;br&gt;• Moderate and ongoing direction and/or support from Clinical Instructor required to perform effectively</td>
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<tr>
<td>3.65 – 3.84</td>
<td>C</td>
<td></td>
</tr>
<tr>
<td>3.50 – 3.64</td>
<td>C-</td>
<td></td>
</tr>
<tr>
<td>3.35 – 3.49</td>
<td>D+</td>
<td><strong>Needs Significant Improvement in Performance</strong>&lt;br&gt;(Maximum assistance required)&lt;br&gt;• Clinical skill/behavior is beginning to emerge, but is inconsistent or inadequate&lt;br&gt;• Student is aware of need to modify behavior, but is unsure of how to do so&lt;br&gt;• Maximum amount of direction and support from clinical Supervisor required to perform effectively</td>
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<tr>
<td>3.15 – 3.34</td>
<td>D</td>
<td></td>
</tr>
<tr>
<td>3.00 – 3.14</td>
<td>D-</td>
<td></td>
</tr>
<tr>
<td>0 – 2.99</td>
<td>F</td>
<td><strong>Unacceptable Performance</strong>&lt;br&gt;(Maximum assistance is not effective)&lt;br&gt;• Clinical skill/behavior is not evident most of the time&lt;br&gt;• Student is unaware of need to modify behavior and requires ongoing direct instruction from Clinical Instructor to do so&lt;br&gt;• Specific direction from Clinical Instructor does not alter unsatisfactory performance</td>
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SCHEDULE

Week 1  Clients are assigned. Read client files. Make appointment with Clinical Instructor (CI) to plan first sessions. Write a summary of client information to take to your first meeting with CI.

Week 2  Interview questions due to clinical instructors, if required. Review tests and prerequisite course notes. Decide on tests and practice prior to initiation of therapy. Start writing the Pertinent History section of the Initial Case Report with information contained in the client’s file.

Week 3  First week of clinic for most clients. Have client sign Client Permission form and complete first session paperwork. Review clinic policies and procedures, including the Notice of Privacy Practice form. Conduct interviews. Play with child clients and obtain a language & speech sample. Obtain a speech & language sample from adult clients by chatting; maybe begin testing with adult clients. Revise Pertinent History section of the Initial Case Report to include a summary of the interview information. **Bring speech sample analysis (with summary of client’s speech errors) to methods class.**

Week 4  Conduct evaluations. Complete informal probing to determine candidate goals, narrow down candidate goals to 3-4 with CI approval. Chart baseline behaviors/collect baseline data on candidate goals. Summary of interview due to clinical instructor if required. Score all formal/informal tests administered to date. Finalize the Pertinent History section of the Initial Case Report. Score your assessment protocols on the same day as you complete the assessment.

Week 5  Continue assessment, score tests, analyze test results and write the assessment section of your **Initial Case Report, which is due in the CSAD 242A class this week.** A required report format has been supplied to the clinical instructor and provided to you in CSAD 242A (template available on SacCT under “report format”). Make revisions to your ICR following peer feedback. You may begin treatment objectives, especially with your adult client. At the end of this week or the beginning of the next week meet with your client/caregiver to discuss your assessment findings and your semester treatment plan.

Week 6  Make revisions to your ICR after receiving feedback from your Methods instructor. Continue your treatment plan.

Week 7  Finalize ICR. Give completed ICR packet and grading rubrics to CI. Continue treatment plan. Update your client/caregiver about progress in therapy. Midterm performance evaluations/conferences occur in this week or next week. **For Language 1 clients starting 02/13/17 or later, ICR with peer editing due to methods instructor in class.**

Week 8  Make revisions to ICR following CI feedback. Midterm performance evaluations/conferences occur in this week or in the previous week. Provide CI with a copy of your treatment plan.

Week 9  Spring Break.

Weeks 10-11  Continue with treatment plan. Prepare first draft of Final Case Report.

Week 12  Continue with treatment plan. Finalize first draft of FCR for CSAD 242A. Complete FCR peer-review.

Week 13  Make revisions to FCR following Methods Instructor feedback. Finalize FCR and assemble End of Semester Packet, and turn into CI as per their due date. Hand in final writing rubric to CI.

Weeks 14-15  Last week of Clinic: Conduct Final Conference with Client/Caregiver. All final reports must be completed, signed and ready to go into the client’s file. Release forms for exchange of information should be included with report. Submit client contact hours form to clinical instructor.