**Syllabus**

**CSD 892 Second-Year Clerkship in Audiology**

**Including Seminar/Discussion: Enhancing Your Clinical & Leadership Skills**

**Fall 2018**

**Instructors**:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Office #** | **Office Phone** | **Home/Cell Phone** |
| Becky Henning, Ph.D. | 050 | 715-346-2351 | 715-342-8837 |
| Tonya Veith, AuD | 048 | 715-346-2851 | 928-551-0050 |
| Jane Elliott, M.S. | 042 | 715-346-3216 | 715-347-3635 |
| Rachel Craig, AuD | 046B | 715-346-4018 | 715-803-5281 |

**Office hours:** Vary with each supervisor. Please check with her/him.

Office hours indicate days and times when we will be in the building, but not necessarily sitting around waiting for you to drop in. To be sure that you see us when you want to, please make an appointment.

**Seminar/Discussion Time**: Arranged with the assigned faculty member. See schedule for topics.

Dates: September 11, 2018 – December 21, 2018; Please note that patient care duties extend through December 14, 2018, and HA repair duties extend through December 21, 2018. You are also responsible for being available for final semester meetings and paperwork until the last day of final exams, or December 21, 2017. Please check with your supervisor *as soon as possible* if you think you may need or want to leave campus before December 21.

**Course Description:**

**Seminar/Discussion Expectations & Outcomes:**

This portion of the course consists of 7 sessions throughout the semester to give second-year students the opportunity to learn about and discuss clinical skills, clinical teamwork, and leadership characteristics, as well as to begin planning (an) outreach activity(ies) for the spring semester. The specific skills and outcomes include:

1. The student will demonstrate knowledge of clinic policies and procedures for the UWSP Speech, Language, and Hearing Clinic.
2. The student will define the roles of the second-year student mentor and the first-year student.
3. The student will identify and discuss communication and other behaviors that lead to successful teamwork, both within the mentor/mentee pair and with other members of the clinical team (such as peers, the clinical supervisor, and clinic administrative associate).
4. The student will identify personal challenges in the student mentor role.
5. The student will reflect on personal clinical strengths and challenges and develop a specific plan for improving a clinical skill or behavior.
6. The student will discuss issues related to professionalism and ethics in the field of audiology.
7. The student will demonstrate the ability to apply core audiological concepts in clinical scenarios.

**Structure/components of seminar/discussion sections:**

* Each student is responsible for selecting one unique, relevant topic and leading a discussion on that topic. See schedule for discussion dates. Each topic should be unique (i.e., different from anyone else’s), and this is the responsibility of the student discussion leader.
* Each student is required to attend and participate in all of the discussions. Attendance and participation are required for a passing grade.
* Portions of each discussion will be led by the faculty supervisors, and will usually cover a different topic than the student-led discussion. Participation in these faculty-led discussions is mandatory.
* Students are responsible for completing assigned readings prior to the relevant discussion.
* See the Discussion Schedule on the last page of this syllabus for dates of the seminar and specific topics for each week.

Attendance at Seminar/Discussion Meetings:

Attendance at and participation in all seminar/discussion sessions is mandatory in order to pass the course. **Unexcused absences will result in a failing grade.** We understand that there may be circumstances in which a student needs to be absent from the discussion. In this case, the student must contact the course instructor by 8:00 am (and earlier if at all possible) on the day of the discussion to discuss an excused absence. The decision whether an absence will be excused is at the discretion of the course instructors and will be made on a case-by-case basis. There may be required make-up assignments for missed classes with excused absences.

**Clinical Clerkship Expectations & Learning Outcomes:**

The broad objectives this semester are for you to: continue improving interviewing/ counseling skills and providing excellent service to meet patients’ needs; fine-tune and improve the speed of hearing evaluations; gain independence on all types of hearing aid appointments; and orient the first-year students to our clinic’s procedures. You will be responsible for the complete evaluation, hearing aid fitting, and follow-up sessions. Toward these broad objectives, you should focus on the following specific expectations for this semester:

1. Hearing Evaluations: The student clinician will be able to competently perform a complete audiological evaluation and counsel the client in a maximum of one hour, with a goal of 45 minutes for re-evaluations. These times do not necessarily include a hearing aid consultation.

2. Hearing Aid Fitting: The student clinician will be able to perform a bilateral fitting of hearing aids, including REARs and counseling, in 1.25 hours. This leaves a 15-minute cushion in case the patient requires extra assistance or unexpected problems arise.

3. Reports: The student clinician will be able to write accurate reports and summaries of client contacts with minimal corrections from the supervisor. Please note that we will be closely evaluating your written reports for spelling and grammatical errors on the first draft. Double-check the spelling of all terms, especially technical terms and medications, before submitting your reports. Be extremely cautious about copying and pasting information from previous reports, as this can result in inaccurate information and breaches of confidentiality!

Any document that contains confidential information for a patient must not leave the clinic. Confidential patient information may not be sent via email or any other form of electronic communication without the patient’s consent. Failure to observe rules regarding patient confidentiality will result in a substantial lowering of the student’s clinic grade.

4. Cerumen Removal: Once training has been completed, each student will be expected to perform cerumen removal during the semester.

5. Counseling: Students will be expected to utilize appropriate questionnaires to document the patient’s attitudes toward his/her hearing loss and/or hearing aids. Students are also expected to demonstrate the ability to closely listen to each patient’s concerns and meet each patient’s needs as fully as possible.

6. You will be expected to appropriately program and adjust hearing aids during the first fitting session. You are expected to set aside time prior to the fitting to learn how the programming software works. One way to do this is to have the aid in the test box and 2 cc coupler while connected to the software. You can change the aid’s programming and observe the effects.

7. Hearing Aid Repairs: Each student will exhibit competence in repair of hearing aids by performing regular hearing aid repairs. The student clinician will be evaluated on correctness of the repair, accuracy of report and paperwork, and timeliness of completing the task.

8. Clean – up: A schedule will be established, and each student is responsible for signing up to share in the clean – up of the hearing aid lab and audiometric test suites at the end of each clinic day. The person who has hearing aid repair duty on non-clinic days is responsible for making sure the lab is left in a neat and orderly condition.

9. Real-World Test Sequences: You should discuss and practice 1-3 “real-world” test sequences throughout the semester. These are patients on whom you will not necessarily follow our clinic’s typical test order and protocol, but on whom you will practice a test sequence that would be more likely in the “real world.” Before the appointment, discuss with your supervisor whether a given patient would be appropriate for this practice, and discuss the test sequence and rationale that you will follow.

10. Professional Demeanor: You should convey a confident, professional demeanor to patients. Patients should feel confident that you can meet their needs. Although you are certainly not expected to know everything, you can still confidently convey that you will find out whatever information you need to know. This may be done by looking something up, consulting with your supervisor, contacting a manufacturer, etc.

**Introductions to Patients:**

Both students must introduce themselves to patients as first- and second-year students. You must also inform patients that a faculty supervisor is monitoring every appointment via video observation, and that the faculty member will introduce him/herself in person early in the appointment.

Your supervisor will be closely watching each appointment via some combination of video and in-room observation, and you may ask your supervisor for consultation at any time during the appointment. Your supervisor will also enter the room any time he/she needs to consult with you.

**Do not bring a patient back or allow a patient to leave without checking in person with your supervisor!**

**Codes of Ethics:**

All students are expected to follow the ASHA and AAA Codes of Ethics, and the links to these are posted on D2L.

**Submitting Reports and Summaries Electronically:**

Summary notesare to be written after **ANY** action related to patient care (including evaluations, hearing aid fittings, follow-ups, hearing aid repairs, phone calls, etc.).

The first draft of summaries and reports should be submitted electronically in the secure audiology share drive within 24 hours of the appointment, and you are to email your supervisor to inform her that the paperwork is ready for her review. **Temporary summaries must also be printed and placed in the file no later than 8 am the day after the appointment.** Any test results (e.g., audiogram, admittance forms, CAPD results, questionnaire results, etc.) must be placed in the accordion file in the locked cabinet in HA lab #2; entire patient files are NOT to be stored in that cabinet. Students should name the initial report/summary with the patient’s last name and date of the appointment, for example, “smith20140906.” Your supervisor will then add any additional edits to the report/summary electronically, save it with their initials (for example, “smith20140906ed1BH”), and email you. You are then responsible for making revisions and notifying your supervisor that the revisions are ready for review.

When writing summaries and reports, edit very carefully for accuracy and do NOT copy and paste information (even non-identifying information) from other patients’ summaries or reports. This can lead to breaches of confidentiality if identifying information is not fully edited, or to inaccurate medical information if results and impressions are not fully edited. If any reports or summaries submitted to your supervisor (on the first version or any revised version submitted) **contain any information copied and pasted from previous reports,** **your final clinic grade will automatically be reduced by one step of a letter grade** (e.g., if your grade would have otherwise been an A-, it will be automatically reduced to a B+). Instead of copying and pasting, you are strongly encouraged to use general templates that do not contain any identifying information or specific results.

The supervisor will email you once a report/summary is ready for printing. All reports/summaries should be printed and ready for mailing **within one week,** unless your supervisor has specifically approved an exception. In order for a supervisor to sign a report, you must bring the printed report AND the patient file to the supervisor so that the address and demographic information can be double-checked before signing. Once the report and all test results have been placed in the file, you must bring the file to the supervisor again for your hours to be signed off. All hours should be signed off within two weeks of the appointment, unless your supervisor has specifically approved an exception.

**General Course Information & Expectations**

ASHA Standards Covered in This Course:

**\*\**Refer to specific skills and expected levels of performance cited in the evaluation form in Calipso.\*\****

1. To develop clinical skill in oral and written communication. *(ASHA Stan. IV-A22)*
2. To develop clinical skill in the evaluation of clients with auditory and/or vestibular disorders. *(ASHA Stan. IV-C)*
3. To develop clinical skill in providing intervention to clients with auditory and/or vestibular disorders. *(ASHA Stan. IV-D)*
4. To develop interaction and personal qualities for effective professional relationships with clients, families, caregivers, and other professionals. *(ASHA Stan. IV-A26, IV-A29, IV-D, IV-E)*
5. To adhere to the ASHA Code of Ethics and behave professionally. *(ASHA Stan. IV-A19, IV-A20, IV-A21, IV-A22, IV-A29)*

**Additional Documents:**

In addition to this syllabus, the following required documents are available on D2L:

1. Clinical Procedures and Practicum Manual. This document provides basic information regarding expectations in the clinic. You are responsible for knowing and following the information provided in this document.
2. Evaluation of Clinical Practicum in Audiology Form (i.e., the grading form). This is the document that will be used (in electronic form within Calipso) in determining your practicum grade for the semester.
3. Expectations for hearing aid duty
4. Dress Code
5. AAA and ASHA Codes of Ethics
6. Calipso student instructions

**Clerkship Attendance:**

You should approach your clinic assignment as your first professional job. It is your responsibility to attend and be prepared for your assigned clinic slots. If you miss clinic, it can create difficulty for the patients, front desk personnel, and the supervisors and other students who have to cover for you.

Illness

You should not attend clinic if you have a fever, bad cough, influenza, or a more serious illness. If you have a common cold and can control your symptoms, you may attend clinic, but you must practice good hygiene and use hand sanitizer before touching the patient or the patient’s belongings. Check (well in advance of the appointments) to see if any of your patients are frail or immune-compromised; if they are, you may not be able to see them if you have a cold. Discuss this situation ASAP with your supervisor.

If you must miss clinic due to illness, try to arrange coverage (i.e., switch slots with another student) in advance if at all possible, and notify your supervisor and the clinic front desk (715-346-3667) of the situation ASAP. If you are unable to arrange coverage, notify your supervisor and the front desk ASAP.

Reasons other than Illness

If you must miss clinic for a reason other than your own illness, you must arrange coverage ahead of time if at all possible (i.e., switch slots with another student) and discuss this with your supervisor. Please keep in mind that you are expected to attend your assigned clinic slot, and you should only arrange coverage if you are absolutely unable to attend. *If you \*repeatedly\* switch clinic slots for reasons other than documented personal illness, your clinic grade may be reduced and/or you may fail clinic.*

General

If you miss *more than one* clinic day *for any reason* and are unable to arrange coverage, you will be required to make up the time by covering at least one clinic day (possibly more days, depending on the amount of time missed) during the following interim (winter, early summer, late summer, or possibly spring break). You will receive a grade of incomplete until you make up the time.

**Unexcused absences from clinic will result in a grade of “0” for your clinic session.**

**Clinic Meetings:**

There may be occasional meetings of all graduate audiology students enrolled in practicum on Tuesdays or Thursdays at 8:00 am. The purpose of these meetings is to convey information to the group as a whole. Attendance is required. Do not schedule work or other activities that conflict with this meeting time. You will be notified no later than Monday at noon if a meeting will be scheduled that week.

**Academic Integrity:**

All students must follow the expectations for academic integrity for the University of Wisconsin System.

(from <http://docs.legis.wisconsin.gov/code/admin_code/uws/14.pdf>)

Academic honesty requires that the course work (drafts, reports, examinations, papers) a student presents to an instructor honestly and accurately reflects the student's own academic efforts.  UWS 14.03 defines academic misconduct as follows:

"Academic misconduct is an act in which a student: (I) Academic misconduct is an act in which a student:

(a) seeks to claim credit for the work or efforts of another without authorization or citation;

(b) uses unauthorized materials or fabricated data in any academic exercise;

(c) forges or falsifies academic documents or records;

(d) intentionally impedes or damages the academic work of others;

(e) engages in conduct aimed at making false representation of a student’s academic performance

(f) assists other students in any of these acts.”

Examples include but are not limited to: cutting and pasting text from the web without quotation marks or proper citation; paraphrasing from the web without crediting the source; using another person's ideas, words, or research and presenting it as one's own by not properly crediting the originator; using materials for assistance on examinations that are not allowed by the instructor; stealing examinations or course materials; signing another person's name to an attendance sheet; hiding a book knowing that another student needs it to prepare an assignment; collaboration that is contrary to the stated rules of the course, or tampering with a lab experiment or computer program of another student.

If academic misconduct has occurred, the student may be subject to one or more of the following penalties:  an oral or written reprimand, a lower grade or a failing grade in the course, university disciplinary probation, suspension, or expulsion.

**Students with Disabilities:**

If you are a student with a documented disability and wish to discuss accommodations, you must contact the instructors within the first two weeks of the semester to discuss your needs.

**Religious Conflicts**:

In accordance with University of Wisconsin policy, any potential conflict between class requirements and religious observance must be made known to an instructor within the first week of class. The student must notify the instructor of the specific day(s) or date(s) of specific religious observances for which the student seeks relief from academic requirements.

**Emergency planning and management statement**:

If an emergency situation occurs or an illness is spread throughout the campus to the extent that it interferes with basic functions, the university, state, and local officials may implement “social distance teaching.”  This means that face-to-face instruction will be restricted.  Instruction of essential courses will continue, but it will be provided via distance methods.  In the event that this course is no longer able to meet face-to-face, students will be contacted with instructions via email. You should also monitor the UWSP homepage for emergency information.

If the emergent situation is a pandemic illness such as the flu, and classes are in session as usual, but you become sick and cannot attend class, you must contact your instructors.

**Grading**

Feedback:

Please see your supervisor(s) and arrange for a required weekly meeting time of 15-30 minutes. You should come to this meeting prepared to receive and discuss feedback from your supervisor, discuss clinical cases, and ask and answer questions.

Evaluation of Clinical Performance:

Your clinical performance will be evaluated using the Evaluation of Clinical Practicum In Audiology within Calipso. There will be two evaluations of performance during the semester. The first evaluation will occur near the 7th week of clinic, or the week of October 15 or 22. The second and final evaluation will occur at the end of the semester.

Earned letter grades indicate the following levels of performance in this course:

|  |  |  |
| --- | --- | --- |
| **Letter** | **Numerical** | **Description** |
| A | 95.51-100 | The clinician is consistently exhibiting extra effort and outstanding clinical skills for his/her level of training. |
| A- | 91.00–95.50 | The clinician is exhibiting clinical skills and effort that meet expectations for his/her level of training in some areas, and exceed expectations in other areas. |
| B+ | 88.00-90.99 | The clinician is exhibiting clinical skills and effort that, overall, meet expectations for his/her level of training. |
| B | 84.00-87.99 | The clinician is exhibiting clinical skills and effort that meet expectations for his/her level of training in many areas, but has a/some limited area(s) of below-standard performance that require improvement. An Improvement Plan may be considered. |
| B- and below | < 83.99 | These are failing grades representing clinical skills and/or effort that are below expectations for the clinician’s level of training. An Improvement Plan will be implemented. |

End of Semester:

Prior to receiving your final grade, all files must be completed and signed by your supervisor. If this is not accomplished by the time grades are due, you will receive an Incomplete and a grade reduction of half a letter.

Counting Clinical Clock Hours:

**Be sure to count all of your clinical clock hours (see guidance below on what can count)**; give yourself credit for all of the work you’re doing and experience you’re gaining! **Even if you are likely to exceed the ASHA-required 1820 hours for the CCC-A, you must document all of your hours in case you need hours or experience beyond the CCC-A requirements** for state licensure, ABA Board Certification, or for any other credential or employment.

ASHA clearly states, on their website that lists the CCC-A requirements (<http://www.asha.org/Certification/2012-Audiology-Certification-Standards/>), that the following activities all can be counted as clinical hours: “Acceptable clinical practicum experience includes clinical and administrative activities directly related to patient care. Clinical practicum is defined as direct patient/client contact, consultation, record keeping, and administrative duties relevant to audiology service delivery. Time spent in clinical practicum experiences should occur throughout the graduate program.”

**Therefore, be sure to count time spent:** writing reports, consulting on a case with your supervisor or other professional, preparing and planning for the care of (a) specific patient(s) (e.g., reviewing the patient’s history, pre-setting a patient’s hearing aids, setting up materials or a test ahead of time for a specific patient, reviewing and evaluating evidence that is directly related to deciding on a particular patient’s treatment plan, etc.), and following up or coordinating a patient’s care (e.g., making a phone call to the patient or to another professional about the patient’s care, etc.). For administrative and consultative activities, you may only count, and your supervisor will only sign off on, a reasonable amount of time for each particular activity. A “reasonable amount of time” is at the discretion of the supervisor, and clinic director if necessary.

Time that is spent on general learning or review of topics related to clinic, general review of evidence/research, general review/preparation of clinical skills, or preparation or practice for exams does not count toward your clinical hours. Activities need to be directly related to the care of (a) patient(s) in order to count. In addition, time that is spent with your supervisor discussing development of your clinical skills (e.g., strengths and areas for improvement) does not count toward your clinical hours.

Observation hours cannot be counted as clinical clock hours. When more than one student is involved in patient care, each student can count the time he/she was involved in direct patient care and consultation, record keeping, and administrative duties, but a student cannot count hours during which he/she only observed.

Discussion Schedule – Fall 2018

Meeting times and locations for each week will be arranged by the faculty supervisor assigned to that week.

|  |  |  |  |
| --- | --- | --- | --- |
| **Week of\*** | **Student Leader** | **Topics** | **Faculty Leader** |
| Tuesday, Sept. 11 8:30 am | None | Introduction; Role of 1st and 2nd years in Fall; Teamwork; Surviving & Thriving in Practicum  | All clinical supervisors |
| September 17 | Jess | Brainstorm outreach ideas for spring semester; discuss feasibility issues | Dr. Veith |
| October 1  | Olivia | Develop a plan for improving a clinical skill; Further develop specific spring outreach ideas (if time) | Dr. Craig |
| October 15 | Amanda | Ethics cases; Spring outreach planning? | Dr. Veith |
| October 29 | Carly | Coding & billing; Questions re: mentors/mentees | Dr. Henning |
| November 12 or 19 | Courtney | Follow up on plan for improving clinical skill; Spring outreach planning | Mrs. Elliott |
| December 11 or 17 | None | Certification and licensure options  | Dr. Henning |

\*Most meeting days/times are TBD and will be scheduled by the supervisor assigned to that week. The Sept. 11 meeting is already scheduled for that date and time.

Student Leaders:
1. The student leader is assigned to bring a “problem,” learning issue or case to discuss to one meeting. The assigned dates are listed above.

2. The student leader will formally present the issue and present some possible ideas and lead the discussion on solutions/ideas for managing the issue. The student leader must choose a unique topic for discussion. The topics listed above are for a separate discussion facilitated by the assigned faculty member.

Note: Performance of any specific first-year students will not be discussed. If questions about the mentoring process arise, names will not be discussed, and the emphasis will be on discussing the issue in general terms. Questions or issues that are specific to your or your mentee’s situation should first be discussed with your supervisor. You may share it during the seminar if your supervisor agrees that it is an appropriate topic to share.