

## **THE DEVELOPMENT OF A FORM FOR CLINIC USE IN COMPLIANCE WITH NEW ASHA STANDARDS**

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### **Introduction**

Good morning, my name is Hindy Lubinsky and I am the new guy on the block. Touro College's Master's degree in Speech Pathology is a new program, just two years old. We are in candidacy status, approaching the final accreditation application. We opened in the fall of 2000 and are graduating our first class in the fall of 2002.

Just by way of background, so that you know where I am coming from, let me briefly tell you about our program. We have a very diverse student body. They are multicultural. All the students speak at least two languages with some speaking up to four. Some examples are Spanish, French, Farsi, Yiddish, Arabic, Hebrew, Russian, Flemish, English, "New Yawk." This diversity offers us both challenges and opportunities. Some unique challenges are that some students have poor writing skills and some individuals, in particular those from the former Soviet Union, have difficulties with phonetic transcriptions.

It has been a unique and exciting challenge to work with these students, making sure that their education is in no way compromised while honoring their cultural sensitivities. It has been a learning experience and an eye opener for many of our students and the staff. This situation has created unique benefits as well. The client population reflects many of these cultures. The students are sensitive to the various issues and needs.

## **The Development and Evolution of the New Assessment Tools for Clinical Use**

When deciding to change or revise our forms for clinical use in compliance with the new ASHA standards, reflecting formative and summative assessments, I recalled some comments made to me when I was the director of the undergraduate program.

*Myth number 1:* It is not the education that makes the difference - you learn it all on the job.

*Myth number 2:* A student repeated something that was said at an orientation at one university. We all teach the same things. It is our placements that make us better.

*Myth number 3:* The next scenario is one that I heard from a faculty member from another university. A student was an A+ student in the program. The university set up a project with the area school system. The student was totally miffed about what had to be done for this project. She just could not get it. Her knowledge was at the A+ level, but she could not apply or use critical thinking skills at all. It was either black or white. Students too often do not have the ability to see that what is right for one situation may not be right in another. There is an inability to apply critical thinking, which will then result in decision making and problem solving skills.

When deciding what should be included in the forms that were needed for formal evaluation of competencies, we had numerous meetings with the staff to discuss the issues of concern. The major discussion revolved around the issues raised by Rassi; namely, are our students getting the skills they need for the workplace in the program before they go out on the job market, and exactly what are those skills?

At the same time that we were brainstorming these issues, the lead story on the news was whether David Letterman would stay at CBS or move to NBC. Will he accept a position for 3 million, or 4.5 million dollars (such tough decisions)? This brought to mind one of the key elements of his show: The top tens.

We decided to conduct an informal survey or two, and see what the top ten issues were in our scenario. Our survey was conducted on several individuals, who were representative of various boroughs and suburbs of New York, and who were from both academia and private practice. We asked them to list the top ten things that they would look for when hiring an individual. The results were the following:

10. ACCEPTS CRITICISM AND DIRECTION
  9. ESTABLISHES PROPER GOALS
  8. SHOWS CREATIVITY AND FLEXIBILITY
  7. KNOWLEDGE OF DISORDERS
  6. KNOWLEDGE OF TESTS
  5. PROFESSIONALISM.
  4. ORGANIZATION AND TIME MANAGEMENT SKILLS
  3. ABILITY TO RELATE WELL WITH CLIENTS AND CO WORKERS
  2. GOOD VERBAL SKILLS
- AND THE NUMBER ONE TRAIT THAT EMPLOYERS LOOK FOR IS
1. ABILITY TO WRITE PROFESSIONAL REPORTS.

We then proceeded to ask them to change hats and write the 10 most important things or outcomes they expected in an instructor.

### *THE TEN COMMANDMENTS*

1. KNOWLEDGE OF SUBJECT MATTER
2. ABILITY TO RESEARCH THE TOPIC INDEPENDENTLY
3. SELF EVALUATE LEVEL OF KNOWLEDGE OR ACKNOWLEDGE LIMITATIONS
4. ABILITY TO FIND RESOURCES
5. ABILITY TO APPLY
6. ABILITY TO CRITIQUEE
7. INTEGRATE THE INFORMATION
8. ABILITY TO ACCEPT DIRECTION AND CRITICISM
9. REPORT WRITING SKILLS
10. AURAL/ORAL SKILLS

As you can see there are some interesting differences:

TEACHING	EMPLOYEE
Report writing is #9	#1
Verbal skills is #10	#2
Knowledge is #1	#6 and 7
Accepts criticism was close in both	

So much for background. Now let us talk about the forms themselves.

The majority and the essence of our work was on the mid- and end-term form to be used. We wanted to test competencies and see where and how the three essential components outlined in the new ASHA regulations and standards, namely critical thinking, decision making and problem solving skills come into play.

We developed a form that addresses four areas: Diagnostic skills, Treatment Planning, Treatment Sessions and Professional Skills. We based it on a competency rating of 1-3 (Appendix A). We then did an analysis of all the tasks to see which categories they fell into, namely the categories put forth by ASHA in the new regulations: Critical Thinking, Decision Making and Problem Solving. As was to be expected, many tasks appeared in more than one category. (See the breakdown of tasks into categories, Appendix B.) Please note that although our breakdown is one that was agreed upon by our group, we realize there is room for discussion here. With this system we were able to indicate, by circling the appropriate letters, the areas in which the students reached competencies. We then had a clear picture by viewing those not circled where work was still needed. In some cases we found that the student had a strong deficiency in one area (e.g., problem solving skills), which was the underlying cause for his/her inability to achieve competency in this area. We then proceeded to work on problem solving skills, in general, with the student. In general, we found that the circles indicating student competencies were not random, but they gave us a clear picture of what is going on with each student.

It was crucial, in this undertaking, to make sure that we did accomplish what we set out to do ( i.e., cover all the essential areas). We went back to our top ten lists of employers and instructors to see if we had incorporated them into the tasks. (See results, Appendix C and Appendix D.)

The question then arose: What would happen if we plotted the skills Critical Thinking, Decision Making and Problem Solving into a grid for each of the four sections of our form? What would we find? Using the circled letters denoting student competencies, we proceeded to do just that. (See Appendix E, Appendix F, Appendix G, Appendix H.)

The results were interesting and led to a lot of discussion. As was expected, Critical Thinking came out on top. We discussed these findings at length and were left with new questions, and ideas for research.

One never knows where this will lead us. Perhaps to new findings that will prompt new investigations, and heaven forbid, new regulations!

Good Luck and thank you for your time.

## APPENDIX A

**RATING SCALE: 1 NOT COMPETENT 2 NEARING COMPETENCY  
3 COMPETENT**

### CLINICAL COMPETENCIES FORM:

**Observed**

**Competency**

#### A: DIAGNOSTIC SKILLS

<b>A. Establishes good rapport with patient and family</b>	
<b>B. Collects case history information from family, client and professionals</b>	
<b>C. Chooses appropriate tests based on clients age, culture and functional level</b>	
<b>D. Administers test in an organized and appropriate fashion and uses informal assessment for further information</b>	
<b>E. Appropriate analysis of test results</b>	
<b>F. Integrates diagnostic information into a professionally written report (grammar, spelling)</b>	
<b>G. Identifies appropriate referrals</b>	

**B: TREATMENT PLANNING**

<b>A. Utilizes reports and information available</b>	
<b>B. Develops and distinguished long term versus short-term goals</b>	
<b>C. Written goals are appropriate to clients needs</b>	
<b>D. Applies academic knowledge to goal planning via written rationale</b>	
<b>E. Prepares appropriate materials</b>	
<b>F. Actual therapy reflects written goal</b>	
<b>G. Alters treatment goals when criteria has not been met</b>	

**C: TREATMENT SESSION**

<b>A. Establishes rapport</b>	
<b>B. Demonstrates good behavior management</b>	
<b>C. Utilizes appropriate materials based on written goal criteria</b>	
<b>D. Utilizes and applies therapeutic techniques as outline in related coursework</b>	
<b>E. Modifies session plan according to client's needs</b>	
<b>F. Collects data appropriately</b>	
<b>G. Able to identify/analyze success or failure of lesson goals and reason for such</b>	

**D: PROFESSIONAL SKILLS**

<b>A. Maintains professional appearance in regards to conduct, dress and voice</b>	
<b>B. Shows an ability to be creative and initiate</b>	
<b>C. Accepts and implements supervisor's constructive criticisms</b>	
<b>D. Identifies own supervisory needs</b>	
<b>E. Completes reports in a timely fashion</b>	
<b>F. Maintains good records</b>	
<b>G. Adheres to all ASHA code of ethics at all times</b>	
<b>H. Identifies and respects cultural differences</b>	
<b>I. Maintains patient confidentiality</b>	

<b>J. Ability to research information about disorders and treatment</b>	
<b>K. Shows good time management skills (punctuality, begins and ends sessions in a timely fashion)</b>	

## APPENDIX B

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**Skills Observed: circle those achieved**

**Critical Thinking:**

AB	BB	CD	DF
AC	BC	CE	DG
AD	BD	CF	DH
AE	BE	CG	DI
AF	BF	DA	DJ
AG	BG	DB	DK
BA	CC	DE	

**Problem Solving:**

AB	BG	DB
AE	CB	DC
AG	CC	DD
BC	CE	DH
BD	CG	DJ

**Decision Making:**

AA	BB	BG	CF	DI
AC	BC	CA	CG	DK
AD	BD	CB	DB	
AE	BE	CD	DD	
AG	BF	CE	DH	

## APPENDIX C

## TEACHING AT THE GRADUATE LEVEL

1. Knowledge of subject matter	A BD CD
2. Likely to research the topic independently	DK
3. Self evaluates level of knowledge or acknowledges limitations	CG DJ DG DD
4. Ability to find resources	DK
5. Ability to apply	A BD CD
6. Does not accept things at face value – critiques research	DJ
7. Integrates the information	BD CD
8. Ability to accept direction and criticism	DC
9. Report writing skills	AF DE DF
10. Aural/Oral skills	DA AA

**APPENDIX D***WHAT YOU LOOK FOR IN AN EMPLOYEE*

1. Report writing skills (diagnostic and progress)	AF DF
2. Verbal skills	DA AA CA
3. Ability to relate well with clients and co-workers	AA CA AB
4. Organized / time management skills	DE
5. Professionalism	DK D
6. Diagnostic skills (include knowledge of tests)	A
7. Knowledge of disorders	A BD
8. Creativity / flexibility	B BD CD
9. Establishes appropriate goals	B BD CD
10. Can accept criticism and direction	DC CG

## APPENDIX E

***CRITICAL THINKING    PROBLEM SOLVING    DECISION MAKING***

NO	NO	YES
YES	NO	NO
YES	NO	YES
YES	NO	YES
YES	YES	YES
YES	NO	NO
YES	YES	YES

DIAGNOSTIC SKILLS OUTCOME: PRIORITY

1. CRITICAL THINKING
2. PROBLEM SOLVING
3. DECISION MAKING

**APPENDIX F**  
**CRITICAL THINKING    PROBLEM SOLVING    DECISION MAKING**

YES	NO	NO
YES	YES	YES
NO	YES	NO
NO	YES	YES
YES	NO	NO
YES	NO	NO
YES	NO	NO

TREATMENT PLANNING

PRIORITY 1. CRITICAL THINKING  
 2. PROBLEM SOLVING  
 3. DECISION MAKING

**APPENDIX G**  
**CRITICAL THINKING    PROBLEM SOLVING    DECISION MAKING**

NO	NO	YES
NO	YES	YES
YES	YES	NO
YES	NO	YES
YES	YES	YES
YES	NO	NO
YES	YES	YES

TREATMENT SESSION

PRIORITY

1. CRITICAL THINKING
2. PROBLEM SOLVING
3. DECISION MAKING

*APPENDIX H*  
**CRITICAL THINKING    PROBLEM SOLVING    DECISION MAKING**

YES	NO	NO
YES	YES	YES
NO	YES	NO
NO	YES	YES
YES	NO	NO
YES	NO	NO
YES	NO	NO

PROFESSIONAL SKILLS

PRIORITY

1. CRITICAL THINKING
2. PROBLEM SOLVING
3. DECISION MAKING