

Meeting Oral & Written Communication Competencies In the New CFCC Certification Requirements

The purposes of this presentation are 1) to describe the procedures and tools that are currently used by Purdue University's Department of Speech, Language, and Hearing Sciences (SLHS) in order to meet ASHA Standard IV-B; 2) to briefly describe the remediation policy that is used for all outcomes, including written and oral communication skills; 3) to briefly describe oral and written communication skills required for admission into the graduate programs as well as the clinical practica; 4) to describe formative assessment and remediation procedures for oral and written communication skills, and 5) to present selected results of a survey of methods and procedures used by other programs.

ASHA Standard IV-B

This standard requires that individuals who have completed all requirements for the Certificate of Clinical Competence (CCC), must possess skill in oral and written or other forms of communication sufficient for entry into professional practice. As stated in the descriptive text of the CCC application:

The applicant must demonstrate communication skills sufficient to achieve effective clinical and professional interaction with clients/patients and relevant others. For oral communication, the applicant must demonstrate speech and language skills in English, which, at a minimum, are consistent with ASHA's most current position statement on students and professionals who speak English with accents and nonstandard dialects.

For written communication the applicant must be able to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence.

In order to fully describe the procedures and tools used to assure that required outcomes are achieved,

Remediation Policy for ASHA SLP & Audiology Standards

For students who have difficulty demonstrating entry-level competencies for the knowledge/skills described in the ASHA 2005 (SLP) certification standards upon initial completion of the assessments associated with these competencies in the various courses in the curriculum, remediation procedures are specified to allow individuals to satisfactorily demonstrate target knowledge/skills competencies.

These remediation procedures can consist of one or more of the following, and must be completed in order to achieve specified standards:

- a. Activities described by course instructors in their course syllabi that must

be completed during the course or soon after course completion (timeline to be determined by the course instructor).

- b. In some courses, comprehensive exam performance on questions designed to assess deficit/questionable knowledge/skills will be identified by various course instructors as the remediation procedure.
- c. Although some ASHA Standards are addressed in multiple courses, MS-SLP students should not defer remediation of competencies as they progress through the coursework, since SLP Comprehensive Exams are given at the end of the fourth semester of the program and a student may fail to demonstrate remediation on the Comprehensive Exams.

Remediation procedures are to be initiated by the student, with the understanding that a target competency in the deficit area must be achieved as defined in the KASA record, before the start of the final semester of their graduate program. Although completion of a remediation procedure does not result in a course grade change, it does serve as demonstration that the target competencies have been achieved. When a standard has been met the course instructor will submit a report to the Graduate Secretary that the student's performance is satisfactory and an "S" will be entered into the student's Knowledge and Skills Assessment (KASA) to indicate achievement of the competency. If a student fails to demonstrate a knowledge or skill competency at the completion of remediation activities, the Course Instructor will submit a report to the Graduate Secretary indicating "Unsatisfactory" as designated by "U." It is the students' responsibility to monitor progress in achieving academic and clinical outcomes.

Communication Competencies as a pre-requisite to graduate school

Oral and written communication competencies are initially considered when a prospective student applies for admission into a graduate program. Applicants to Purdue University's Department of Speech, Language, & Hearing Sciences (SLHS) graduate programs, are required to take the Graduate Record Examinations (GRE), and to submit transcripts, letters of recommendation and a personal statement. The statements are typically two to three pages in length and members of the Graduate Committee informally evaluate written language skills as they review the personal statement for content. The SLHS Graduate Committee considers writing proficiency as a component of admittance qualifications, though no specific criteria are specified. Students for whom English is not their native language are also required to take the Test of English as a Foreign Language (TOEFL), the test of Spoken English (TSE) and the Test of Written Language (TWE). The TWE is part of the TOEFL and is designed to examine American English language skills. The TSE is designed to measure the ability of nonnative speakers to speak in an academic or professional environment. For non-native speakers of English, an adequate score on the TOEFL for English proficiency is 620 (260 for the computerized version). A score of 5 or better (on a scale of 1 - 6) is considered adequate for the TWE and a score of 50 is considered adequate for the TSE.

Written & Oral Communication Requirements for Clinical MS-SLP program

Nearly all courses and clinical experiences within our program contain a content-oriented writing component (e.g., papers, clinical reports, take home examinations, or

projects). In 2003, faculty of the SLHS clinical programs reviewed the entire curricula (audiology and speech-language pathology) to determine whether all new standards were being met, and then identified the key courses in which various skill or knowledge outcomes would be evaluated. For those students who are working toward a clinical degree, writing skills specified in the ASHA standards must be met. In SLHS, there are two levels for identification of a need for further development of written language skills. If a student produces written assignments in either academic or clinical coursework that demonstrate difficulties with written English, the instructors recommend one of the following for the student:

- Refer student to the Purdue University to an on-campus Writing Lab, or to the On-line Writing Lab (OWL), at <http://owl.english.purdue.edu/>
 - The writing lab provides a range of services:
 - consultation with individual departments
 - writing groups
 - individualized instruction
 - Writing lab tutors request information from the instructor regarding the specific concerns surrounding the student's writing.
- Non-native speakers of English may be advised to take an undergraduate English writing course in which grammatical constructions, spelling, organization, and other aspects of written language are addressed.
- Technical writing courses are available which include exercises in writing essays, grant proposals, and personal statements, but are not content specific

When students enter the clinical master's program, ASHA Standards are discussed and it is explained that clinician's must have communication skills sufficient to achieve effective clinical and professional interaction with clients/patients and relevant others. All potential participants in clinical practicum must demonstrate English speech production and English language skills and knowledge at the level necessary to provide appropriate clinical services to their clients/patients. All students entering the speech-language or audiology programs are screened for use of English speech and language before they can be given clinical assignments. For oral communication, the student must demonstrate speech and language skills in English, which, at a minimum, are consistent with ASHA's most current position statement on students and professionals who speak English with accents and nonstandard dialects. For written communication, the student must be able to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence. Inadequate performance will result in a delay in clinical participation until adequate performance can be demonstrated. The clinical faculty who supervise specific clinics will make the decision about adequacy of demonstrated proficiency in English speech and language (spoken and written) for participation in clinical practicum.

Communication Skills: Formative Assessment and Remediation

Student clinicians attend a weekly seminar course in which many clinical skills are demonstrated and discussed. Written language skills are targeted in the first semester of clinical practicum. Clinical instructors work with student clinicians to

improve and develop professional writing style. Activities are designed to give students the opportunity to write sections of reports and to receive evaluations and suggestions to improve the quality of professional writing. Purdue University's clinical instructors have developed their own report writing manual that includes example reports from sites in the Purdue University clinic network. In addition, the following resources have been used in the development of writing activities:

Justice, L.M. & Ezell, H. K. (2000). The syntax handbook: Everything you learned about syntax...but forgot. Eau Claire, WI: Thinking Publications.

Meyer, S. M. (2004). Survival guide for the beginning speech-language clinician, (2nd Ed. Pro-Ed: Austin, TX

Pannbacker, M., Middleton, G., Vekovius, G., & Sanders, K. (2001). Report writing for speech-language pathologists & audiologists, 2nd Ed. Pro-Ed: Austin, TX.

Roth, F. & Worthington, C. (2000). Treatment resource manual for speech-language pathology, 2nd Ed. Singular Press: San Diego, CA.

Shipley, K. & McAfee, J. (2004). Assessment in speech-Language pathology: A resource manual, 3rd Ed. Delmar Publishers: Albany, N.Y.

Classroom activities and homework assignments include formative assessment of clinical writing skills prior to when the student clinicians begin to write case reviews, reports of evaluation or therapy, or end-of-treatment progress reports. Oral communication skills are evaluated in academic and clinical assignments. Course professors have individualized evaluation tools that are specific to the purposes of their assignments. For example, in the School Clinical Methods class, students develop oral presentations (or "in-services") for various different audiences, such as parents, other speech-language pathologists, classroom teachers, or Special Education administrators. One aspect of evaluation for this assignment is "modification of vocabulary and/or style to meet the needs of the audience." Oral communication skills for discussion of clinical topics are assessed when graduate student clinicians present cases in "Clinical Forum" sessions. These forums are attended by all student clinicians and oral communication skills are assessed by one or more clinical supervisors.

Evidence of oral and written communication skills may be assessed in the following areas:

- Chart reviews
- Planning
- Conferences with supervisors/clinical instructors
- Lesson plans
- Session evaluations
- Chart notes
- Evaluation reports
- Clinical Forum presentations
- Progress reports
- Communication with
 - other professionals

- client/patient
- family of a client/patient
- Clinical Instructor/Supervisor
- All other personnel involved in client/patient care

Formative assessment tools that are used in the clinical programs include the following protocols, which are used in addition to the Clinical Skills Competency Form (CSCF) that is used to record skill levels of clinical performance at midterm and end of each semester, or more frequently as needed for individual remediation plans (See Appendix A).

1. Protocol of Professional Behavior (ASHA Standard IVG; 3D).

The Protocol for Professional Behavior form is the tool used to assess professional behavior competencies: Ethical practice, Responsibility, Punctuality, Confidentiality, and Personal appearance. If exhibited behaviors violate these standards of our profession, the Clinical Instructor involved will complete a "Professional Protocol Notice". Failure to meet these standards may result in probationary status to be determined by the Director of Clinical Education in Speech-Language Pathology, the Clinic Director and the Clinical Instructor directly involved. A remediation plan will be developed that provides the student with specific written recommendations for remediation, along with a deadline by which the remediation must be accomplished. Unsatisfactory performance in any of the following areas: 1) ethical practice, 2) responsibility, 3) punctuality, 4) confidentiality, or 5) personal appearance will result in lowering of the clinic grade for the semester, and may also result in termination of clinical privileges. Termination with no remediation option may be warranted for severe ethical violations or threats to safety/welfare of clients.

2. Professional Protocol of Written Communication Skills (ASHA Standard IV-B).

If a student receives an "Unsatisfactory" for any of the written communication skills either at his/her mid-term or end-of-semester evaluation, the supervisor will issue a "Professional Protocol Notice." The student's clinical privileges will be automatically lowered to probationary status, and a remediation plan will be developed by the clinical supervisor(s) in consultation with the Director of SLP Clinic and/or Director of Clinical Education in SLP with notification to the major professor. Additionally, the student's semester grade may be lowered. Development of written communication skills will be evaluated at all subsequent mid and end of semester evaluations. Failure to remediate, as evidenced by not achieving and maintaining a Satisfactory rating ("S") by the end of semester 3 will result in termination of clinical privileges.

3. Professional Protocol of Oral & Nonverbal Communication Skills (ASHA Standard IV-B)

If a student receives an "Unsatisfactory" for any of the oral/nonverbal communication skills, the Clinical Instructor will issue a "Professional Protocol of Oral & Nonverbal Communication Skills Notice." If any unsatisfactory ratings remain at mid-term or end-of-semester evaluations the student's clinical privileges will be automatically lowered to probationary status, and a remediation plan will be developed by the Clinical Instructor(s) in consultation with the Clinic Director and/or Director of Clinical

Education in SLP with notification to the major professor. Additionally, the student's grade for that semester of clinic may be lowered. Failure to remediate, as evidenced by not achieving and maintaining satisfactory performance ('S') by the end of semester 2 may result in termination of clinical privileges.

If at any time during the semester, an SLP Clinical Instructor provides a "Professional Protocol Notice" for "Oral/Nonverbal Communication," "Written Communication," or "Professional Behaviors" to a student, the Director of Clinical Education in SLP is provided with a copy of the completed form, which is then filed in the graduate student's permanent file. At the time of the notice, Clinical Instructors develop a remediation plan with the student, in consultation with either the Director of Clinical Education in Speech-Language Pathology or the Director of SLP Clinics. Further description of the procedure is listed on each of the protocols in Appendix A.

At the end of Semester Three (3) in SLP practicum, Clinical Faculty members review each clinician's progress in the development of skills. Minimum standards for skills at that point should include:

- Over-all ratings on skills within 75 percent of expected levels (total) as indicated on the CSCF.
- Ratings that involve skills in all 4 areas – Approach, Evaluation, Intervention, and Interpersonal domains, with acceptable levels in each area.
- Acceptable skills with a diversity of clinical populations (as specified on the KASA) based on their practica experiences in each of the 4 clinical areas by the end of semester 3. Clinic populations will include any of the following disorder categories: articulation, fluency, voice & resonance, receptive & expressive language, hearing, swallowing, cognitive & social aspects of communication and communication modalities.
- Each clinician's competencies in the areas of Oral/Nonverbal Communication Skills and Written Communication Skills will be reviewed to determine if any unsatisfactory ratings remain.

If ratings of competencies on the CSCF are not at expected levels for all clinical areas and if any unsatisfactory ratings remain in either Oral/Nonverbal Communication or Written Communication Skills, or Professional Behavior at the end of the third semester in SLP Clinical Practica, a determination will be made regarding whether the student will retain clinical privileges for subsequent clinical assignments. The student will meet with the Director of Clinical Education in Speech-Language Pathology, the Graduate Program Director, Clinic Director, and all Clinical Instructors who have supervised the student in clinical practica. Upon review of all factors identified as barriers to progress in clinical work, a determination of one or more of the following may occur: clinical probation, a remediation plan, a grade of C or lower for Semester 3, frequent reviews of progress during semester 4, and termination of clinical practicum privileges. If inadequate progress is made during Semester 4, clinical privileges are terminated and the student will be counseled regarding options to continue in the non-clinical track of the MS-SLP program.

Benchmarking Remediation Activities

Faculty members of Purdue University's Department of Speech, Language and Hearing Sciences (SLHS) were interested in learning more about remediation procedures, including remediation of written and oral communication skills. To address this need a survey was developed and subsequently distributed to ASHA accredited programs throughout the United States. One hundred fifteen (115) responses were returned of the two hundred fifty surveys dispersed. The survey is in Appendix B.

Appendix A

Professional Behaviors Protocol

Indicate satisfactory behavior with an ‘S’ and any unsatisfactory behavior with a ‘U’. Attach a written explanation regarding any unsatisfactory behavior.

	Mid-term	Final
<p>A. Ethical Practice Conducts all clinical work in accordance with Purdue University Professional Protocol and the Code of Ethics and Scope of Practice in Speech-Language Pathology set forth by the American Speech-Language Hearing Association (see Clinic Handbook).</p>		
<p>B. Responsibility Consistently prepares for and completes clinical services, conferences, and other practicum activities. Uses universal safety precautions whenever necessary.</p>		
<p>C. Punctuality Completes all clinical practicum responsibilities in a timely manner and follows prescribed clinical procedures for service delivery (see Clinic Handbook)</p>		
<p>D. Confidentiality Protects and maintains confidentiality of clinical information as prescribed by HIPAA guidelines and clinic protocols (see Clinic Handbook)</p>		
<p>E. Personal Appearance Presents professional image through appropriate personal appearance and dress, identification with professional nametag, and professional demeanor.</p>		

The Protocol for Professional Behavior form is the tool used to assess professional behavior competencies: **Ethical practice, Responsibility, Punctuality, Confidentiality, and Personal appearance**. If exhibited behaviors violate these standards of our profession, the Clinical Instructor involved will complete a “Professional Protocol Notice”. Failure to meet these standards may result in probationary status to be determined by the Director of Clinical Education in Speech-Language Pathology, the Clinic Director and the Clinical Instructor directly involved. A remediation plan will be developed that provides the student with specific written recommendations for remediation, along with a deadline by which the remediation must be accomplished. Unsatisfactory performance in any of the following areas: 1) ethical practice, 2) responsibility, 3) punctuality, 4) confidentiality, or 5) personal appearance will result in lowering of the clinic grade for the semester, and may also result in termination of clinical privileges. Termination with no remediation option may be warranted for severe ethical violations or threats to safety/welfare of clients.

Appendix A

Professional Protocol of Written Communication Skills

ASHA Standard IV-B (2005 Standards): Must possess skills in oral and written or other forms of communication sufficient for entry into professional practice.

Behavioral Objective: Graduate student clinician will consistently use Standard English conventions in oral/nonverbal and written communication skills as measured by the Purdue Protocols for Written and Oral/Nonverbal Communication.

Please indicate satisfactory behavior with an ‘S’; any unsatisfactory behavior with a ‘U’; could not assess with ‘CNA.’ Attach a written explanation regarding any unsatisfactory behavior with recommendations for remediation.

Protocol of Written Communication Skills	Mid-term	Final
---	-----------------	--------------

By End of Semester #3

Consistently and accurately conveys professional information from coursework, supervisory input, clinical activities and other resources.		
---	--	--

Consistently and accurately uses Standard English conventions and style to communicate information in a clear and organized manner.		
---	--	--

Consistently and accurately uses professional writing conventions, terminology and style to clearly communicate information in a manner consistent with audience and/or clinical setting.		
---	--	--

If a student receives an “Unsatisfactory” for any of the written communication skills, the Clinical Instructors will issue a “Professional Protocol Notice.” If unsatisfactory ratings remain at mid-term or end-of-semester evaluations the student’s clinical privileges will be automatically lowered to probationary status, and a remediation plan will be developed by the Clinical Instructor(s) in consultation with the Clinic Director and/or Director of Clinical Education in SLP with notification to the major professor. Additionally, the student’s semester grade may be lowered. Development of written communication skills will be evaluated at all subsequent mid- and end-of-semester evaluations. Failure to remediate, as evidenced by not achieving and maintaining satisfactory performance (‘S’) by the end of semester 3 may result in termination of clinical privileges.

Appendix A

Professional Protocol of Oral & Nonverbal Communication Skills

ASHA Standard IV-B (2005 Standards): Must possess skills in oral and written or other forms of communication sufficient for entry into professional practice.

Behavioral Objective: Graduate student clinician will consistently use Standard English conventions in oral/nonverbal and written communication skills as measured by the Purdue Protocols for Written and Oral/Nonverbal Communication. Indicate satisfactory behavior with an 'S'; any unsatisfactory behavior with a 'U'; could not assess with 'CNA.' Attach a written explanation regarding any unsatisfactory behavior with recommendations for remediation.

Protocol of Oral /Nonverbal Communication	Mid-term	Final
By End of Semester #2:		
Consistently and accurately uses Standard English conventions and style to communicate information in an organized manner with clients, families, supervisors, and other professionals.		
Consistently and accurately conveys correct information from course work, supervisory input, clinical activities and other resources.		
Consistently and accurately describes behaviors of client and patient.		
Nonverbal language, including but not limited to affect, eye contact, tone, or body language, is consistently appropriate for clinical interactions.		
Consistently models appropriate communication in all clinical settings and provides appropriate clarification to clients, family members, or other professionals when needed.		
Oral & nonverbal communications are appropriate for the cultural, socioeconomic, and semantic needs of the audience.		

If a student receives an "Unsatisfactory" for any of the oral/nonverbal communication skills, the Clinical Instructor will issue a "Professional Protocol Notice." If unsatisfactory rating remain at mid-term or end-of-semester evaluations the student's clinical privileges will be automatically lowered to probationary status, and a remediation plan will be developed by the Clinical Instructor(s) in consultation with the Clinic Director and/or Director of Clinical Education in SLP with notification to the major professor. Additionally, the student's grade for that semester of clinic may be lowered. Failure to remediate, as evidenced by not achieving and maintaining satisfactory performance ('S') by the end of semester 2 may result in termination of clinical privileges.

Appendix B

Survey: Remediation Processes & Procedures

Please rate the following statements with the following scale.

- 1 = Strongly disagree
- 2 = Disagree
- 3 = Neutral
- 4 = Agree
- 5 = Strongly agree

1. Remediation procedures are developed individually by course instructors.

(1) (2) (3) (4) (5)

Comments: _____

2. Remediation procedures are included on course syllabi.

(1) (2) (3) (4) (5)

Comments: _____

3. Remediation of clinical skills typically occurs within the class or practicum assignment in which the student clinician has failed to demonstrate mastery.

(1) (2) (3) (4) (5)

Comments: _____

4. Our program has identified higher outcome levels of performance in courses and clinical practica that reflect our relative strengths for specified ASHA Standards.

(1) (2) (3) (4) (5)

Comments: _____

5. Academic/ clinical instructors are responsible for reporting the completion of remediation
 ___ yes ___ no If no, please indicate how this information is entered into KASAs.

Comments: _____

6. Who organizes and records results on KASAs? _____ (ex. Secretary, or student enters own information) Is an electronic data base used? ___ yes ___ no. If yes, what program is used?

7. The name of "remediation activities" varies by program. Please check each term that is used at your institution: Remediation Completion Other: _____
(please list term)
8. Remediation procedures in academic courses may be of several types. Please check all of the following that are used in your program:
- Students may retake a test to demonstrate knowledge acquisition.
- Students may be required to re-take a portion of an exam.
- Students may be required to demonstrate knowledge in a procedure that is different from the original exam or project.
- Students may remediate unmet competencies as addressed in either oral or written comprehensive ("Comps") exams.
- Students may give an oral report to academic or clinical faculty to demonstrate competency.
- Students may demonstrate a clinical procedure to show mastery of a skill.
- When a student has demonstrated mastery via a remediation procedure the grade for the work may be changed.
- Other: _____
9. Does your program use specific tools or protocols to evaluate written communication?
 yes no If no, please indicate how this information is evaluated:.
10. Does your program use specific tools or protocols to evaluate oral communication?
 yes no If no, please indicate how this information is evaluated:
11. Do your students maintain a portfolio of work samples? yes no
12. For a specified outcome, how many remediation opportunities are provided? _____
13. If a student cannot meet specified outcomes after all remediation opportunities are provided, what actions are taken by your program? Is the program ended or clinical privileges denied?
14. Are you seeking additional information about remediation procedures? yes no
15. Are you willing to share examples of your procedures and/or tools used for remediation? *We would greatly appreciate it if you would include examples or samples of your tools/procedures with your survey response.*
 yes no If yes, please send this information with your survey in the stamped/addressed envelope , or e-mail to janeth@purdue.edu
16. Do you wish to have a summary of the information from this survey sent to your program? If you do, please provide the name & address (e-mail addresses are preferred).