Show Me the Model
TACKLING THE TASK OF DEFINING CLINICAL FACULTY WORKLOAD
APRIL 2017

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Crabwalking History
Guinness World Record Holders
494
Our program

5 semester program
  ◦ Fall/Spring = 15 weeks
  ◦ Summer = 10 weeks

52 students

Competitive area in Baltimore-Washington metro
  ◦ 5+ local University programs

Variability with Clinical Faculty Staffing for Workload
  ◦ Full time Clinical
  ◦ Part time Clinical (.25, .5, .8 )
  ◦ Split academic and clinical load
Our program cont'd

Hours balanced: Internship 175 hrs – Externship 200 hrs

Internship: 2 Clinical Sites + off campus school / senior center
  ◦ Individual and Group sessions
  ◦ Variety of student working models
    ◦ individual, paired, group

Externship: 2 different off campus setting types; 15 weeks each
  ◦ Wide area of student travel (up to 60 mile radius)
  ◦ 4-8 out of state placements
    ◦ North East (PA, NJ, DE, NY, VA, ...OH)

Summer
  ◦ 35 Internship: 17 Externship
Our workload challenges

Large class size

Supervision for off-site for internships

Balancing equity of workload

Competitive nature of metro region

Some out-of-state for externships (N=5-8)

Credit based productivity
  ◦ 9 credit academic = 4 credit clinic workload
Our workload challenges cont'd

Class on Monday

◦ 9 credits of the week
◦ All 5 semesters
◦ Concurrent with clinical practicum
  ◦ Clinic = Tues – Fri (4 credit total)
◦ Advantages & disadvantages
Questions that arose

1. **What is your workload model?**
2. How do you compare clinical faculty with academic faculty workload (handbook)
3. What data supports current or newly requested positions?
4. How do you balance full time and part time workloads?
5. How do you explain productivity goals to new clinical faculty?
6. How can you balance the budget with an expensive clinical training program?
Factors to consider...

Business models

Academic models

Other university clinical models

All the variables...

- N of students
- N of clients
- N of credits
- N of sessions
- N of hours/student
Expecting the unexpected demands

- Cancellations/low enrollment
- Severity of client’s disorder
- Weather
- Student ability
- Billing factors/insurance
- Administrative tasks
- Clinical Simulation (CS)
- Alternative Workload Experience/Assignment (AWE or AWA)
- Service
- Research
Considering clinical specialty & ASHA’s "Big 9"

**Supervisor specialty drives caseload**
- Fewer adult neuro supervisors than pediatric supervisors
- Need variety for student experience

**Off site internships**
- Supervisor and student groups traveling outside the clinic for introductory school and adult group experience

**Small student groups get select "high value" specialty placement within LCC**
- Voice
- Audiology
- Fluency
- Interprofessional diagnostic and intervention programs
What about the student needs?

Orientation and observation

Graduated caseload - starting slow and building

Varying levels of independence and ability to integrate

Managing multiple supervisors

Balancing academic coursework

Handling stress

- Grades, competition, new learning, clinical workload demands and the unknown factors and lack of control
Survey of other universities

- Online Qualtrics survey posted to CAPCSD partner universities and the ASHA SIG 11 email group
- 245 responses total
- Display Logic used to target responses for internship vs. externship clinical workloads
- 152 respondents provide Internship supervision
Q9 - Does your university currently use a clear formula to determine staffing for clinical supervision?
Q15 - Total number of full time employee (FTE) clinical staffing that is budgeted for your department?

(e.g. 2 FT faculty each teach .5 and do clinic .5 = 1 FTE clinic staffing)
Q2 - Our SLP Graduate Program typically has the following class size:

- **Mean** = 37
- **Median** = 32
- **Mode** = 25

Range from 12 – 100 students

- 35% \(\geq\) 40 students
- 65% < 40 students
Q3. Primary Job Titles

- Clinic Director
- Clinical Supervisor/ Clinical Faculty
- Instructor Professor
- Grad Program Director
- Department Chair
- Externship Coordinator
- Other

16
Q5. Clinical and Academic Workload Balance (N = 214 Respondents)

- **YES 100% Clinical Supervision Workload**: 32%
- **NO, Workload is Split between Academic and Clinical Teaching**: 68%

- 88% of Respondents Work Full Time or 1.0 FTE

- **Average workload balance for split faculty = 0.52 FTE Clinical vs Academic**
  
  N=138
Q12 - Do you supervise graduate students directly in internship courses or indirectly in off-campus externship courses?

80% = respondents doing some internship
N = 165
Narrowing the focus
Internship Workload Modeling
Q20 - For internship supervision, indicate any of the following types of clinical sessions you supervise.
Q18 – Internship: How many clients (individual + group) do you serve weekly?
(2 individual client sessions + 1 group of 4 participants = 6 clients)

Is using # of clients a key factor in determining workload model?

FTE Internship
Only
Avg Clients = 23
N=26

Average Clients = 16
Median/ Mode = 15
SD = 11
Q19 - Internship: How many graduate students do you directly supervise weekly?

Is using # of students a key factor in determining workload model?

FTE Internship Only
Average Students = 13
N=26

Average Students = 9
SD = 6
N = 149
Q23 - Internship: How many total sessions do you directly supervise weekly? (group=1 session)

Is using # of sessions a key factor in determining workload model?

Average sessions = 14
N = 151

Internship Load
Only
FT = 21
PT = 15
Q.24 Average total clock hours approved by semester

Median/ Mode = 200

SD = 223
Developing a Clinical Model

- Hybrid model from a variety of clinical programs
- Constants:
  - # of goal hours per student
  - # of students
  - Level of supervision – Anderson's Continuum & ASHA
- We used 1:1 ratio for academic to clinical faculty
  - 12 credits academic = 12 credits clinical faculty
Scholarship – Boyer (1990)

- Scholarship of teaching
- Scholarship of discovery
- Scholarship of engagement
- Data Collection
- Data Analysis
- Conceptualisation
- Translation
- Engagement
- Findings
GOAL: 175 hours over 3 semesters

Fall = 50 hours (15 wks)

Spring = 60 hours (15 wks)

Summer = 70 hours (10 wks)

Total first year = 180 hours
## Semester 1 (LCC Fall 2015 = 15 weeks)

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<th># of Students</th>
<th>Hours per semester</th>
<th>Total Hours</th>
<th>% of Direct Supervision</th>
<th>Student Hrs Directly Supervised/ Semester</th>
<th>Direct Supervision Hrs/ Sem FT= 12 hrs / 15wks</th>
<th>Required Faculty F.T.E</th>
<th># of Students Supervised Per Day</th>
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**AVERAGE SURVEY RESPONSE**

Model Calculated By Class Size and Number of Weeks Per Semester
Benefits to clinical faculty

• Clarifies expectations for workload
• Allows for easier adjustments to workload
• Defines the clinical supervisor workload in terms the academic administration can understand – alleviates pressure
• Provides justification for research, scholarship, service and teaching as these apply to academic faculty
Benefits to students

• Clear expectations of hours per semester

• Better balance of clinical work

• Equity of expectations across all supervisors
Benefits to clinic directors

- Quantitative way to measure productivity
  - Data to support requests for new positions
  - Clear expectations across all supervisors

- Efficient model allows for unique learning experiences for students

- Alternative workload assignments
  - Balances workload for all FTE

- Equity across all students related to caseload
Benefits to university

• Provides clear staffing goals
  • Data to support new positions

• Clear understanding of clinical faculty workload

• Data for annual updates
Next Steps?
Questions?