Assurance of Student Learning Report 2020-2021	
College of Health and Human Services	Communication Sciences and Disorders
Communication Disorders	
Leisa Hutchison, Program Director	

Student Learning Outcome 2: Students will demonstrate knowledge of the basic processes of clinical intervention (i.e. treatment plan development, session planning, and basic implementation principles, etc.)

Instrument 1	Direct: Evaluation of Undergraduate Clinical Internship
Instrument 2	Indirect: CD 495 Pre-Clinical Experience & Post Clinical Reflections
Instrument 3	

Based on your results, check whether the program met the goal Student Learning Outcome 2.	☐ **Met**	☐ Not Met

Student Learning Outcome 4: Students will demonstrate the ability to correctly document clinical information (i.e. including treatment plans, assessment plans, progress reporting (SOAP), final summaries, etc.)

Instrument 1	Direct: Evaluation of Undergraduate Clinical Internship
Instrument 2	Directd: SOAP – Progress Notes
Instrument 3	Direct: Treatment Plans

Based on your results, check whether the program met the goal Student Learning Outcome 4.	☐ **Met**	☐ Not Met

Program Summary

Communication Disorders Program Faculty selected four overall Student Learning Outcomes for the program. These include:

1.) Students will demonstrate knowledge of the signs, symptoms, and identification of communication, swallowing, and cognitive disorders (i.e. speech sound disorders, fluency, voice and resonance, language, hearing, and swallowing disorders and differences, etc.). – Assessed in 2019-20 and subsequent *odd* years using Case Study and/or writing/assessment/treatment planning projects from CD 483 Speech sound disorders (Treatment Plan project, Spring), CD 486 Language Disorders (Individualized Assessment Plan project, Spring) and CD 478 Clinical Issues and Treatments in Speech-language Pathology (Final Project, Spring) as artifacts. 2021-22

2.). Students will demonstrate knowledge of the basic processes of clinical intervention (i.e. treatment plan development, session planning, and basic implementation principles, etc.). – Assessed in 2020-21 and subsequent *even* years using artifacts of Evaluation of Undergraduate Internship; CD 495 – Pre-Clinical Experience and Post-Clinical Semester Reflections (Fall and Spring).

3.). Students will demonstrate knowledge of the basic processes of clinical assessment (i.e. assessment tool selection, assessment administration, assessment scoring, diagnostic report writing, etc.). Assessed in 2019-20 and subsequent *odd* years using artifacts of

Audiogram interpretation in CD 482 Audiology (Fall), Diagnostic Report, SimuCase assignment in CD 485 Introduction to Assessment in Communication Disorders (Spring), and Pre/Post Clinical Reflections and Evaluation of Undergraduate Clinical Internship Rubrics, and Individualized Assessment Plans and Diagnostic Assessment Reports collected for CD 495 (Fall and Spring)

4.). Students will demonstrate the ability to correctly document clinical information (i.e. including treatment plans, assessment plans, progress reporting (SOAP), final summaries, etc.). Assessed in 2020-21 and subsequent *even* years using artifacts of CD 495 – Clinical Internship – Evaluation of Undergraduate Internship and SOAP (Progress) Note, treatment plans.

Based on the assessment of student learning outcomes this year, (2020-21), the following actions occurred:

- After considerable discussion, the decision to pursue the conversion of the undergraduate program to a speech-language pathology assistants certification program was recommended by the Clinical/Undergraduate Faculty. The Speech-language pathology assistant certification has recently been approved by the American Speech-Language Hearing Association (ASHA). This credential will make WKU undergraduate students more marketable with a nationally recognized certification to provide certain speech-language assessment/intervention activities under the supervision of a certified speech-language pathologist. (Begin implementation study Fall 2021)
- Curriculum Map will be revisited this next academic year (Fall 21-22) in light of the faculty decision to convert the undergraduate program to the speech language pathology assistants certification program.
- Program Faculty identified new artifacts and courses to measure outcomes One and Three on odd academic years. (See above summary, to begin Fall 2021).
- Program Faculty specified most appropriate sections of the Rubric: "Evaluation of Undergraduate Clinical Internship" (attached) to assess clinical outcomes to be measured on even academic years. Areas/Sections *II. Development and Preparation for Therapy and III. Therapy Implementation* will be used to assess SLO 2 regarding basic clinical intervention processes; Sections *II. Development and Preparation for Therapy and IV. Written Documentation* will be used to assess SLO 4 regarding the ability to correctly document clinical information. (Began use with this assessment cycle – Fall 2020
- Faculty provided and will continue to provide numerous assignments requiring treatment and session planning during didactic coursework in language disorders, speech sound disorders, non-verbal communication disorders and clinical issues and treatments in speech-language pathology in order to continue preparing students for clinical practicum and graduate school where they are expected to develop & implement treatment and lesson/session plans more independently. (ongoing)
- Student Learning Outcome assessment was added as an ongoing agenda item to be discussed at *every* clinical supervisors meeting and at *each* Clinical Faculty and/or undergraduate faculty meeting to help identify needs, concerns, appropriate assignments, strategies to measure outcomes and to enhance and refine skills. (Ongoing)
- Program faculty identified the need to add an "Essential Functions and Technical Standards" document to the undergraduate application/admissions process to promote students' self-evaluation of abilities to perform and/or learn functions and skills of practice either with or without accomodations. This went through the Curriculum process and passed faculty senate in May 2021.
- Faculty continued a hybrid approach to course implementation, including clinical internship via telepractice and in-person treatment due to the Covid-19 pandemic during the 2020-21 academic year. (Plan to return to in-person instruction in Fall 2021).
- Clinicial and undergraduate faculty continued to develop their expertise and refine course instruction through participation in telepractice assessment and intervention workshops and other workshops offered through the Center for Innovative Teaching and Learning at WKU. (ongoing)

- Clinical faculty developed & recorded Course Content Modules to utilize in the Clinical Internship course for specific content instruction such as conducting clinical assessment/diagnostic evaluation process. (As needed)
- Students were provided specific training in telepractice; both pre-recorded training & other materials & resources were made available to students
- After discussion of the results of For Student Learning Outcome 4, faculty identified a new rubric to be used by the assessment team (beginning 2022-23) to further assess the sampling of artifacts (SOAP notes, Treatment Plans). For more details see Actions for SLO 4. Rubric Citation: Willis, Laura B. and Piazza, Lindsey (2019) "Developing and Using a Rubric to Provide Feedback and Improve CSD Clinical Writing," Teaching and Learning in Communication Sciences & Disorders: Vol. 3 : Iss. 2, Article 4. DOI: https://doi.org/10.30707/TLCSD3.2Willis Available at: https://ir.library.illinoisstate.edu/tlcsd/vol3/iss2/4.
- As a result of the identification and future use of a new rubric for the assessment of student learning outcome 4, faculty recommended: That clinical supervisors and faculty now require students to identify and include evidence based treatment strategies AND the appropriate citations on the actual Initial Treatment Plans both during coursework and in the clinical internship. This practice will further prepare students for graduate practica and externships, as well as their future clinical practice, where they will be expected to be functional consumers of research in clinical application decisions.

Additional program recommendations, not solely based on the measurement of these two outcomes, were:
- Program Faculty will receive course teaching assignments consistent with their clinical expertise.
- Advising will be divided amongst the full-time clinical faculty and/or undergraduate instructors giving students opportunities to connect with a number of program faculty.

Student Learning Outcome 2	
Student Learning Outcome	Students will demonstrate knowledge of the basic processes of clinical intervention (i.e. treatment plan development, session planning, and basic implementation principles, etc.)
Measurement Instrument 1	DIRECT measures of student learning: CD 495 – Clinical Internship – Evaluation of Undergraduate Internship Senior level students in the program were assigned a designated client or group of clients each semester (Fall 2020, Spring 2021). Each student was required to generate either an initial assessment plan or an initial treatment plan & sometimes both, weekly or bi-weekly lesson plans, and SOAP notes for each treatment session. Throughout the internship, students met frequently with supervisor(s) for discussion and feedback regarding student clinician performance (including a mid-term conference). At the end of the semester, WKU clinical supervisors met with each student/supervisee individually for a final conference to discuss performance in the internship experience. The following sections of the Evaluation of Undergraduate Internship form were completed: I. Diagnosis in Therapy Settings, II. Development and Preparation for Therapy, III.Therapy Implementation, IV. Written Documentation, V. Interpersonal Skills, and VI. Personal and Professional Qualities. While all areas are assessed according to the specific client disposition, the areas in sections II and III most appropriately measure this outcome and were specifically analyzed. Students are assigned a score between 1 and 12, with 12 being the best score.
Criteria for Student Success	Scores on the rubric range from 1 to 12 and are divided into the following assessment categories. The program success target is for clinicians to obtain skills in the minimum score range 7-9 on the Evaluation of Undergraduate Internship. 10-12 – Takes initiative and works toward independence 7-9 – Regularly needs specific direction/demonstration 4-6 – Performs effectively ONLY after specific direction/demonstration 1-3 – Fails to perform regardless of supervision

Program Success Target for this Measurement	90% or better	**Percent of Program Achieving Target**	100%

Methods	A sampling of 50% of senior level students who provided clinical services (n=19-Fall 2020 and n=17 Spring 2021) during the CD 495/Clinical Internship were selected to assess Outcome 2. Artifacts were obtained from clinical supervisors following final conferences with their assigned student clinicians. The Evaluation of Undergraduate Internship Rubrics were collected, deidentified and numbered so that the same students could be assessed for growth and development of skills over the two different semesters. Each rubric contained scores in each competency area in Sections II and III of the rubric assigned by WKU clinical supervisors. All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Overall student progress was discussed and reviewed amongst thirteen clinical supervisors to identify areas of weakness and strength as well as potential needs to be addressed.

Measurement Instrument 2	CD 495 – Pre-Clinical Experience and Post-Clinical Semester Reflections		
Criteria for Student Success	The overall goal of the pre and post clinical reflections is to encourage reflection and self-evaluation of the student clinician's own abilities, insights, and concerns. The criteria for success is seeing evidence of self-documented growth in the aspects that they identified as the most concerning in their pre-reflections.		
Program Success Target for this Measurement	**90%**	**Percent of Program Achieving Target**	**100%**
Methods	During the Fall 2020 Semester, 25 pre-clinical reflections were collected from student clinicians in their first semester of clinical practicum. 33 post-clinical reflections were collected at the end of the Spring 2021 semester when all students had completed their second semester of clinical internship. Nine students' pre and post-clinical reflections were randomly selected for assessment of self-evaluation of growth in an area of stated concern at the beginning of the first clinical internship.		
Based on your results, highlight whether the program met the goal Student Learning Outcome 2.		☐ **Met**	☐ Not Met

Actions

- Two sections/areas of the Evaluation of Undergraduate Clinical Internship were selected for analysis that most closely relate to the assessment of this outcome – Areas/Sections II. Development and Preparation for Therapy and III. Therapy Implementation.
- Faculty provided and will continue to provide numerous assignments requiring treatment and session planning during didactic coursework in language disorders, speech sound disorders, non-verbal communication disorders and clinical issues and treatments in speech-language pathology in order to continue preparing students for clinical practicum and graduate school where they are more independently expected to develop & implement treatment and lesson/session plans.
- Student Learning Outcome assessment was added as an ongoing agenda item to be discussed at *every* clinical supervisors meeting and at *each* Clinical Faculty and/or undergraduate faculty meeting to help identify needs, concerns, appropriate assignments, strategies to measure outcomes and to enhance and refine skills.
- Program faculty identified the need to add an "Essential Functions and Technical Standards" document to the undergraduate application/admissions process to promote students' self-evaluation of abilities to perform and/or learn functions and skills of practice either with or without accomodations. This went through the Curriculum process and passed faculty senate in May 2021.
- Faculty continued a hybrid approach to course implementation, including clinical internship via telepractice and in-person treatment due to the Covid-19 pandemic during the 2020-21 academic year.
- Clinical and undergraduate faculty continued to develop their expertise and refine course instruction through participation in telepractice assessment and intervention workshops and other workshops offered through the Center for Innovative Teaching and Learning at WKU.
- Clinical faculty developed & recorded Course Content Modules to utilize in the Clinical Internship course for specific content instruction such as conducting clinical assessment/diagnostic evaluation process.
- Students were provided training in telepractice, recorded trainings & other materials & resources were made available to students

Follow-Up

Program faculty are focusing on two learning outcomes per school year. This outcome, Two: Students will demonstrate knowledge of the basic processes of clinical intervention (i.e. treatment plan development, session planning, and basic implementation principles, etc.) is being assessed during even school years utilizing artifacts: Evaluation of Undergraduate Clinical Internship rubrics and Pre and Post Clinical Reflections. Specifically, sections II (Development and Preparation for Therapy) and III (Implementation of Therapy) of the rubric most appropriately address these aspects of the clinical treatment process and have and will be targeted for analysis.

- Sections of the "Evaluation of Undergraduate Clinical Internship" rubric were immediately used to analyze/assess this outcome. This helped to identify the need to cite evidence-based practice resources on Individualized Treatment Plans.
- Student Learning Outcomes were specifically discussed at the Beginning of the semester and End of the semester supervisors meetings in September, December, February and April meetings.
- Clinical/Undergraduate Faculty Meetings held in March, October, and December 2020 as well as March, April and May, 2021 all discussed specific topics related to assessment of Student Learning Outcomes & how to better align the curriculum to improve course delivery and practice of skills.
- Faculty initiated and completed (through the Curriculum Process) the addition of an Essential Functions and Technical Standards Document/self-appraisal to the undergraduate program application process to better inform potential students of the skillset and technical standards to which they will be expected to perform and/or learn in the program and allow them to self-evaluate to determine if additional supports through SARC or other means would be required for successful completion of the program of studies.
- Faculty participated in faculty development workshops for telepractice implementation, assessment, assignment, supervision, ethics, and online course design - ongoing throughout the year
- Curriculum Map will be revisited this year in light of the faculty decision to convert the undergraduate program to the speech language pathology assistants certification program.

Next Assessment Cycle Plan

This outcome will be reassessed in even years (2022-23) utilizing artifacts of Evaluation of Undergraduate Clinical Internship rubrics and Pre and post clinical reflections from both the Fall and Spring semesters of the school year. The course is CD 495 and all rubrics and pre-post clinical reflections will be collected, de-identified and numbered so that each student's pre and post clinical reflections from both semesters match up and can be compared for analysis of students' self-reported growth. Clinical supervisors will forward all rubrics to the clinical office associate for collection and de-identification of student names/etc. At least 25% of collected data will be analyzed to assess SLO.

Student Learning Outcome 4	
Student Learning Outcome	Students will demonstrate the ability to correctly document clinical information (i.e. including treatment plans, assessment plans, progress reporting (SOAP), final summaries, etc.). Assessed in 2020-21
Measurement Instrument 1	Evaluation of Undergraduate Clinical Internship – Rubric
	Senior level students in the program were assigned a designated client or group of clients each semester (Fall 2019, Spring 2020). Each student was required to generate either an initial assessment plan or an initial treatment plan & sometimes both, weekly or bi-weekly lesson plans, and SOAP notes for each treatment session. Throughout the internship, students met frequently with supervisor(s) for discussion and feedback regarding student clinician

	performance (including midterm conferences.) At the end of the semester, WKU clinical supervisors met with each student/supervisee individually for a final conference to discuss performance in the internship experience. The following sections of the Evaluation of Undergraduate Internship form were completed: I. Diagnosis in Therapy Settings, II. Development and Preparation for Therapy, III.Therapy Implementation, IV. Written Documentation, V. Interpersonal Skills, and VI. Personal and Professional Qualities. While all areas are assessed according to the specific client disposition, the areas in sections II and IV most appropriately measure this outcome and were specifically analyzed. Students are assigned a score between 1 and 12, with 12 being the best score.
Criteria for Student Success	Scores on the rubric range from 1 to 12 and are divided into the following assessment categories. The program success target is for clinicians to obtain skills in the minimum score range 7-9 on the Evaluation of Undergraduate Internship. 10-12 – Takes initiative and works toward independence 7-9 – Regularly needs specific direction/demonstration 4-6 – Performs effectively ONLY after specific direction/demonstration 1-3 – Fails to perform regardless of supervision

Program Success Target for this Measurement	90% or better	**Percent of Program Achieving Target**	100%

Methods	All Evaluation of Undergraduate Clinical Internship Rubrics for senior level students who conducted therapeutic intervention through the Communication Disorders Clinic (n=37-Fall '20 and n=34-Spring '21) during the CD 495/Clinical Internship were collected and deidentified. 50% of the rubrics each semester (n=19 Fall '20; n=17 Spring '21) were selected to assess Outcome 4. Artifacts were obtained from client binders and supervisor records that contained scores in each competency area in Sections II and IV of the rubric assigned by WKU clinical supervisors. All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Student progress was discussed and reviewed amongst thirteen clinical supervisors, including full-time clinical faculty, to identify areas of strength as well as potential areas for improvement.
Measurement Instrument 2	SOAP (Progress) Note The SOAP note is a progress note written following each therapy session documenting the following areas: S- subjective information regarding the client O- Objective data collected towards meeting the objective each session A- Analysis of the session – how it went, what could have gone better, what strategies used or needed for better success, analysis of data collected & comparing current data to last session data to track progress P- Plan – what is the plan for the next session or ongoing therapy.
Criteria for Student Success	Student interns' clinical writing should meet the clinical documentation rating of at least 7-9 on the Evaluation of Clinical Internship Rubric in area IV (Written Documentation) by the end of the semester.

Program Success Target for this Measurement	90% of sample	**Percent of Program Achieving Target**	100%

Methods	During the Fall 2020 & Spring 2021 semesters, 34 students participated in the clinical internship. Of that number, 25% of student clinicians were randomly selected for analysis (n=8) of their first and last written SOAP notes for each semester. Supervising clinical educators rated students' writing performance over the course of the internship using the "Undergraduate Clinical Internship rubric."
Measurement Instrument 3	Initial Treatment plans -ITP The Initial Treatment Plan (ITP) is developed as a plan of action for implementation during the semester. It contains goals and specific short-term objectives to meet those goals and designed to fit the unique needs of the client(s) being served by the student clinician.
Criteria for Student Success	Student interns' clinical writing should meet the clinical documentation rating of at least 7-9 on the Evaluation of Clinical Internship Rubric in area IV (Written Documentation) by the end of the semester.

Program Success Target for this Measurement	**90% of sample**	**Percent of Program Achieving Target**	**100%**

Methods	All Evaluation of Undergraduate Clinical Internship Rubrics for senior level students who conducted therapeutic intervention through the Communication Disorders Clinic (n=37-Fall '20 and n=34-Spring '21) during the CD 495/Clinical Internship were collected and deidentified. 50% of the rubrics each semester (n=19 Fall '20; n=17 Spring '21) were selected to assess Outcome 4. Artifacts were obtained from client binders and supervisor records that contained scores in each competency area in Sections II and IV of the rubric assigned by WKU clinical supervisors. All identifying information was removed from clinical documentation to remain compliant with HIPAA and FERPA regulations. Student progress was discussed and reviewed amongst thirteen clinical supervisors, including full-time clinical faculty, to identify areas of weakness and strength as well as potential needs to be addressed.

Based on your results, circle or highlight whether the program met the goal Student Learning Outcome 4.	☐ **Met**	☐ Not Met

Actions

- Comparative analysis of first and last SOAP notes and ITP's was completed by the program director and shared with faculty. Faculty recognized that although the Evaluation of Undergraduate Clinical Internship Rubrics were utilized by individual clinical educators to assess this outcome, we would also like to have an overall comparative analysis of the SOAP notes & treatment plans to further identify strengths and needs across all class and clinical experiences. Faculty feedback indicated that a rubric may provide a better tool to analyze SOAP notes and ITP's.
- A New rubric was identified and adapted from: Willis, Laura B. and Piazza, Lindsey (2019) "Developing and Using a Rubric to Provide Feedback and Improve CSD Clinical Writing," Teaching and Learning in Communication Sciences & Disorders: Vol. 3 : Iss. 2 , Article 4. DOI: https://doi.org/10.30707/TLCSD3.2Willis Available at: https://ir.library.illinoisstate.edu/tlcsd/vol3/iss2/4.
- The expectation is for clinical writing to have reached the 2- Developing or 3 Mature level by the end of the last clinical internship. This new rubric was identified to be used by the assessment team to further assess the sampling of artifacts (SOAP notes, Treatment Plans) for the

writing growth in these areas: 1.)content development, 2.)analysis, 3.)mechanics, 4.) professional language and 5.) evidence-based resources exhibited. The new targets (2022-23) are 90% of sample will be in the 2- developing or 3- Mature range on a 4 point scale in 5 out of the 5 assessment areas by the end of the final internship the Spring semester of the senior year. Since evidence-based practice citations are not routinely a part of the daily SOAP note, only sections 1-4 of the new rubric will be used for assessment of SOAP notes.

Follow-Up

- The new rubric will be used during the 2022-23 assessment cycle for future analysis of the written documents (SOAP notes, ITP's) associated with this SLO as well. At least 2 program faculty will each apply the rubric to the sampling of artifacts for interrater reliability/agreement.
- The identified target is that 90% of students will achieve a score of 2 developing or 3 Mature on a 4 point scale on applicable sections (Areas 1-4 SOAP or 1-5 ITP's).
- Faculty will review SLO's again early in the Fall 2021 semester to identify ways their course content can reinforce and contribute to students' development of SLO 4, particularly incorporating evidence-based practice.
- Program Director will meet with clinical supervisors and faculty to remind them 1.) of the artifacts to be collected during the academic year and 2.) that the use of evidence based treatment strategies AND the appropriate citations on Initial Treatment Plans will be assessed beginning in 2022-23. This practice will further prepare students for graduate practica and externships, as well as their future clinical practice, where they will be expected to be functional consumers of research in clinical application decisions. It was determined that this will only be required for Treatment Plans at this time and not SOAP notes.
- In order to assure that students demonstrate the skillful use of high quality, appropriate, and credible sources, all faculty and clinical supervisors/educators will be updated on this student learning outcome criteria and rubric to be used to measure this outcome during faculty meetings, CSD faculty retreat and clinical supervisor/educator meetings.

Next Assessment Cycle Plan

This outcome will be reassessed in even years (2022-23) utilizing artifacts of Evaluation of Undergraduate Clinical Internship rubrics, SOAP notes (first and last written), and ITP's from both the Fall and Spring semesters of the school year. The course is CD 495 and all rubrics and SOAP notes, ITP's will be collected, de-identified and protected health information will be removed. Clinical supervisors will forward all Evaluation of UG Clinical Internship Rubrics to the clinical office associate for collection and de-identification of student names/etc. Clinical office associate and/or designated graduate assistants will be assigned to collect submitted documents and remove identifying and protected health information. At least 25% of collected data will be analyzed to assess the SLO. At least two clinical faculty will apply the newly identified and adapted CSD Clinical Writing rubric (Willis & Piazza, 2019) to the collected first and last SOAP notes written and ITP's to document growth and/or areas of concern in students' clinical writing.   Sections 1-4 of the rubric will be applied to daily SOAP note analysis and sections 1-5 will be used for Treatment Plans.

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COMMUNICATION SCIENCES & DISORDERS CLINIC

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Clinician Semester Reflection

Name: _____   Date: _____

Positive things about my experiences this semester (what were you good at, what made you feel good, something you learned):

_____

_____

_____

_____

_____

_____

Difficult aspects of my experiences this semester:

_____

_____

_____

_____

_____

_____

When I started this semester, I wish I had known…

_____

_____

In my future internship/externship placements, I hope to grow in the following way(s):

_____

_____

_____

_____

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Pre-Clinical Experience

Name: _____   Date: _____

After receiving my client list, I am most excited about:

_____

_____

_____

_____

_____

_____

After receiving my client list, I am most nervous about and will need support with:

_____

_____

_____

_____

_____

_____

During this internship, I hope to grow in the following way(s):

_____

_____

_____

_____

I think you should know:

_____

_____

_____

_____

Developing and Using a Rubric to Provide Feedback and Improve CSD Clinical Writing

Appendix A
The Rubric

	1-Beginning	2-Developing	3-Mature	4-Exemplary
Content Development	-Does not include required or relevant components -Includes irrelevant information -Includes inaccurate information	-Includes all required or relevant components -A few instances of irrelevant information -No inaccurate information	-Includes all required or relevant components AND uses content to develop and explore ideas through the majority of the report -No instances of irrelevant information -Paints a basic and accurate picture of the session	-Includes all required or relevant components AND uses content to develop and explore ideas through the entire report AND the report conveys the writer's understanding of clients' performance and needs - No instances of irrelevant information -Paints an accurate and whole picture of the session beyond the objective data
Analysis	-Lists data but does not adequately explain OR make appropriate recommendations	-Includes data and an incomplete attempt of analysis AND recommendations	-Synthesizes data and makes a limited analysis AND general recommendations	-Synthesizes data to reveal insightful patterns and makes thorough and specific recommendations
Use of Professional Language	-No evidence of professional language -Professional terminology is misused or impedes the meaning because of errors in usage	-Little evidence of professional language -Limited and accurate use of professional terminology	-Evidence of professional tone and discipline-specific language AND accurate use of professional terminology throughout the majority of the report	-Evidence of professional tone and discipline-specific language AND accurate use of professional terminology throughout the entire report
Control of Syntax and Mechanics	-Frequent errors in spelling or grammar (e.g. misused punctuation, incomplete sentences, etc.) -Lack of flow or organization in writing -Frequent tense shifts	-Some spelling and/or grammatical errors -Some consideration given to organization but poor flow of writing	-Very few spelling and/or grammatical errors -Consistent organization and flow of writing	-No spelling or grammatical errors -Writing exhibits sophisticated organization and flow to fluently and clearly communicate thoughts

The instructor will select the most representative classification of each category (e.g. "Content and Development", "Analysis", etc) based on your report.

	1-Beginning	2-Developing	3-Mature	4-Exemplary
Sources and Evidence	-No appropriate AND/OR credible sources used to support the chosen evidence-based practice	-Demonstrates an attempt to use appropriate AND credible sources to support the chosen evidence-based practice	-Demonstrates consistent use of appropriate AND credible sources to support the chosen evidence-based practice	-Demonstrates skillful use of high quality appropriate AND credible sources

Western Kentucky University
Communication Disorders Clinic
Evaluation of Undergraduate Internship

Clinician: _____ Supervisor: _____ Semester: _____

GRADING RUBRIC

A = 10-12 Clear & convincing evidence (can work independently)
B = 7-9 Clear evidence (needs only general direction)
C = 4-6 Partial evidence (need specific direction/demonstration)
D = 1-3 Little or minimal (no evidence of specified skill/ineffective)
F = N/A Not applicable

Profile of Clinical Skills   **Final**

I. Diagnosis in Therapy Settings	A. Familiarity with, and choice of appropriate diagnostic tools, ensuring use of least biased testing techniques	
	B. Administers and scores according to established procedures	
	C. Observes and identifies relevant behaviors	
	D. Interprets and analyzes diagnostic information accurately	
	E. Establishes appropriate short and long term objectives	
	F. Collects and uses baseline data as appropriate	
	G. Explains results of assessment to clients and caregivers in an effective way	
II. Development & Preparation for Therapy	A. Applies theory and research knowledge in treatment	
	B. Demonstrates creative selection/preparation of treatment techniques and materials, and if applicable, ensuring appropriate accommodations and modifications to support client access to curriculum	
	C. Plans and organizes sessions to meet individual and/or group goals	
III. Therapy Implementation	A. Uses materials and/or equipment proficiently	
	B. Provides clear, concise instruction in a manner appropriate to the age, attention, and developmental level of the client	
	C. Uses appropriate cues and task modifications, as needed, to maintain attention while eliciting/facilitating therapy objectives	
	D. Demonstrates appropriate reinforcement/behavior management	
	E. Responds to/modifies treatment based on changes in client performance	
	F. Uses time in therapy session effectively to maximize learning	
	G. Demonstrates ability to lead session and/or collaborate in group activities	
IV. Written Documentation	A. Includes information that is relevant, accurate, and appropriate	
	B. Writes in a style that is clear, well-balanced, complete, and grammatically correct.	
V. Interpersonal Skills	A. Demonstrates sensitivity and responsiveness to the emotional as well as the behavioral needs of clients and caregivers	
	B. Interacts appropriately with family members/other professionals	
VI. Personal & Professional Qualities	A. Professionalism: Oral communication model, dependability, appearance, level of involvement, seeks out help when needed	
	B. Manages time, documentation, and clinic demands with flexibility	
	C. Responds to supervisor's suggestions appropriately	
	D. Takes initiative and works in a self-directed manner	
	E. Trains family/caregivers to enhance therapy, as appropriate by providing transactional support	

CSD 495 - Grading Scale   Total: _____

Therapy only:
A = 212 to 228   C = 175 to 193   F = 154>
B = 193 to 211   D = 155 to 175

Diagnostic + Therapy:
A = 290 to 312   C = 240 to 264   F = 211>
B = 265 to 289   D = 212 to 239