

**The Supervision Toolkit:
Coaching for Our Future**

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Disclosures

- Mark DeRuiter
 - is employed by the University of Arizona which pays his salary
 - is President of the Council of Academic Programs in Communication Sciences and Disorders (he will discuss supervision modules produced through this organization)
 - is a founding board member for *Teaching and Learning in Communication Sciences and Disorders* (he will discuss this journal today)

What is Your Role?

- Audiologist
- Speech-Language Pathologist
- Audiology student
- Speech-Language Pathology student
- Other role

If You've Served as a Clinical Instructor

- How many years have you served?
 - One year or less?
 - 2-5 years
 - 6-10 years
 - 11-19 years
 - 20+ years

Setting the Stage

- We all have varied experiences and opinions
 - Each of us wants the best!

Disclaimers

- Opinions
- Facts

Quotable

- "He's seldom correct,

Quotable

- "He's seldom correct, but rarely in doubt"
-Matthew DeRuiter

Survey says...

- Student success!!
- Students are optimistic and enthusiastic!
- I want to learn!



REFRESHED INTEREST IN CLINICAL EDUCATION AND SUPERVISION

The Pendulum

- We are in a period where issues in clinical education are in focus
– A few examples (there are many)...

The screenshot shows the ASHA's Practice Portal website. The main heading is "ASHA's Practice Portal". Below the navigation bar, the page is titled "Clinical Education and Supervision". The content includes an "Overview" section with text about the portal's scope, a "Definition of Terms" section, and a "Practice PORTAL" sidebar with links like "PRACTICE PORTAL HOME", "CLINICAL TOPICS", "PROFESSIONAL ISSUES", "EVIDENCE MAPS", "WEBINARS", "TOOLKITS", and "ABOUT THE PRACTICE PORTAL". There is also a "Print This Entire Page" link and an "About This Content" section.

SLP Scope of Practice, 2016

- **Supervision is a distinct area of practice; is the responsibility of SLPs; and crosses clinical, administrative, and technical spheres.** SLPs are responsible for supervising Clinical Fellows, graduate externs, trainees, speech-language pathology assistants, and other personnel (e.g., clerical, technical, and other administrative support staff). SLPs may also supervise colleagues and peers. SLPs acknowledge that supervision is integral in the delivery of communication and swallowing services and advances the discipline. **Supervision involves education, mentorship, encouragement, counseling, and support across all supervisory roles.** SLPs
 - possess service delivery and professional practice skills necessary to guide the supervisee;
 - apply the art and science of supervision to all stakeholders (i.e., those supervising and being supervised), recognizing that supervision contributes to efficiency in the workplace;
 - **seek advanced knowledge in the practice of effective supervision;**
 - establish supervisory relationships that are collegial in nature;
 - support supervisees as they learn to handle emotional reactions that may affect the therapeutic process; and
 - establish a supervisory relationship that promotes growth and independence while providing support and guidance.



Audiology Summit, 2016

- Focus on education broadly, with a great deal of time spent on clinical education
 - Models
 - Process
 - The future!

ASHA BOD Minutes, July 2017

- Supervision Specialty Certification
 - “Vice President for Standards and Ethics in Audiology Joe Montano and Vice President for Standards and Ethics in Speech-Language Pathology Barbara Jacobson **updated the BOD regarding the request submitted to the Council for Clinical Specialty Certification (CCSC) for specialty certification in supervision.** Montano and Jacobson presented an overview of clinical specialty certification, the history of petitioning group requests, and CFCC’s response. The CFCC asked if the BOD would be open to considering expanding the scope of specialty certification to include supervision. **The BOD agreed that it would entertain such a resolution to expand the scope.**”

ASHA Convention 2017, Los Angeles

- Research and Academic Town Meeting
 - “Scholarship of Teaching and Learning (SoTL) in Clinical Education and Supervision”

Supervision Certification/Courses

- CH-AP – Certificate Holder – Audiology Preceptor
- Online modules from the Council of Academic Programs in Communication Sciences and Disorders
- Other online resources!

Planning Ahead: Developing Courses on Supervision

Did you know that supervision is a hot topic for audiologists and speech-language pathologists? Recently, the ASHA Ad Hoc Committee on Supervision Training issued a [comprehensive report](#) [PDF] that identified the skills and knowledge needed by supervisors of five different constituent groups: clinical educators of graduate students, preceptors of audiology interns, mentors of clinical fellows, supervisors of support personnel, and supervisors of professionals transitioning to a new area of practice or those reentering the professions. By 2019, ASHA will start requiring Certificate of Clinical Competence (CCC) holders who supervise students or clinical fellows to have first taken a supervision course. In addition, several state regulatory boards require additional training related to supervision.

Where will audiologists and speech-language pathologists (SLPs) look to find CE courses that meet their needs? They will be looking for courses offered by ASHA Approved CE Providers!

We want to help you get ready. ASHA Continuing Education (CE) added [new resources](#) to its website to help you develop CE courses in supervision.

1. [Topics for Supervision Training](#)* [PDF] – This document details the topic areas, knowledge, and skills applicable to each of the five constituent groups. It is also a resource for developing supervision-focused continuing education.
2. [Self-Assessment of Competencies in Supervision](#)* [PDF] – This self-assessment evaluates current knowledge and skills in supervision and helps determine what additional training is necessary for current and future supervisors.
3. [Graphic for Supervision Training](#)* [PDF] – This word cloud graphic represents the most common words and topics related to supervision and supervision training. Consider placing it in marketing materials for your supervision courses.

The Future from the CFCC

- Council for Clinical Certification
 - Proposed standards that would require supervision specific education of clinical educators

SoTL

Teaching and Learning in Communication Sciences & Disorders

Research and reflection on teaching and
learning in speech-language pathology and
audiology

Editorial Team:
Susan M. Gadsberg, Jennifer C. Polberg, Colleen F. Vicenti, Mark DeRubeis, Jerry C. Harper



www.TLCSJournal.com

A Journal Because...

- What do we know about how we educate students?

With This Focus

- Let's talk about:
 - Forms of supervision, leadership
 - Models for the future
 - New thoughts
 - What we already know
 - Inspiration for the future!

Small Group Activity

Supervisors and Coaches

- Discuss:
 - *What are your perceived differences between supervisors and coaches?*
 - *How are they similar?*
- Consider:
 - *What makes a good supervisor?*
 - *What makes a good coach?*

Mentors/Leaders

- Discuss:
 - What are your perceived differences between mentors and leaders?
 - How are they similar?
- Consider:
 - What makes a good mentor?
 - What makes a great leader?

Supervision

- From ASHA's Practice Portal:
 - The terms **clinical supervisor** and **clinical supervision** are often used in reference to the training and education of student clinicians, recognizing that supervision is part of the training and education process. **Supervision can be broadly defined as overseeing and directing the work of others.** However, clinical supervisors do more than oversee the work of the student clinician. They teach specific skills, clarify concepts, assist with critical thinking, conduct performance evaluations, mentor, advise, and model professional behavior (Council of Academic Programs in Communication Sciences and Disorders [CAPCSD], 2013).

Supervision

- Positive aspects
 - Wealth of resources
 - A "standard"
- Challenges
 - More than overseeing....

Coaching

- Definition from MIT-HR:
 - *Coaching, defined as an ongoing approach to managing people:*
 - *creates a genuinely motivating climate for performance*
 - *improves the match between an employee's actual and expected performance*
 - *increases the probability of an employee's success by providing timely feedback, recognition, clarity and support*

<http://hrweb.mit.edu/learning-development/learning-topics/leading/articles/what-is-coaching>

Coaching

- Positive aspects
 - Popular for students and “new” employees
 - Can shape organizations with appropriate motivation at all levels

Coaching

- Challenges
 - May be viewed as external to the work
 - Accountability

Mentorship

- Mentor:
 - Noun: *“An experienced or trusted adviser”*
 - Verb: *“advise or train (someone, especially a younger colleague)”*
- Merriam Webster

Mentorship

- Positive Aspects:
 - Can benefit both the mentor and the “young” employee (Bolman-Pullins & Fine, 2002)
 - Lifelong relationships can be established

Mentorship

- Challenges
 - May be seen as optional
 - May be viewed as a “check the box” relationship
 - Term of the relationship?

Leadership

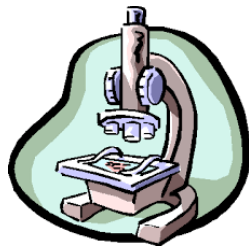
- Many different definitions!
 - Webster: “To guide on a way especially by going in advance”
 - “To lead is to have followers”?
 - Social influence?
 - Effect change?

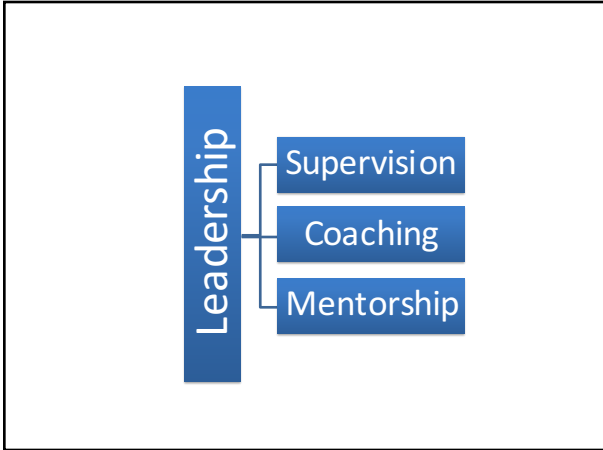
Thinking Differently

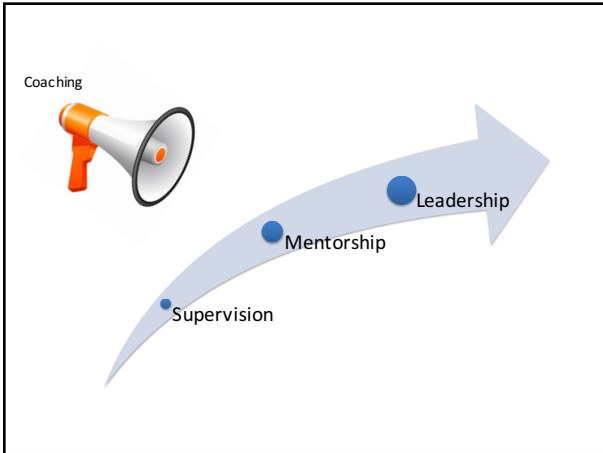
- Each of us as a leader
- Shifting moment-by-moment, consciously and, eventually, unconsciously
 - Which can fit a clinical education model
- *What if we inspired something different in each other?*

Pulling it Together

- Shifting the lens







TAKING THE NEXT STEP

The Story...

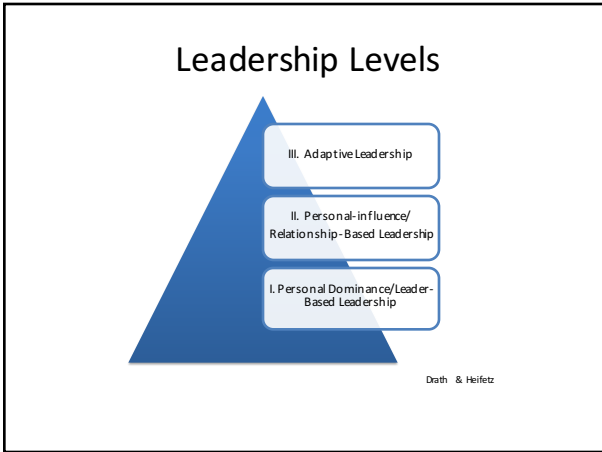
- Here comes a common survey response...

Case Study

- Doug has worked with you for three months. Technically, his work is spot-on. Assessments and treatment planning are appropriate. Doug arrives on time, completes his work alongside the rest of the team and he says, "I've got it" to most everything that comes his way.
- Despite these positive factors, you find that Doug's work is uninspired. Patients rarely comment on his services and he appears to be doing the minimum from a documentation and professional/personal growth perspective. His relationships with other employees are superficial at best and he has a tendency to slip out of the building at **exactly** 4:30 P.M.
 - What questions would you ask here?
 - What matters/is most important?


Adaptive Leadership

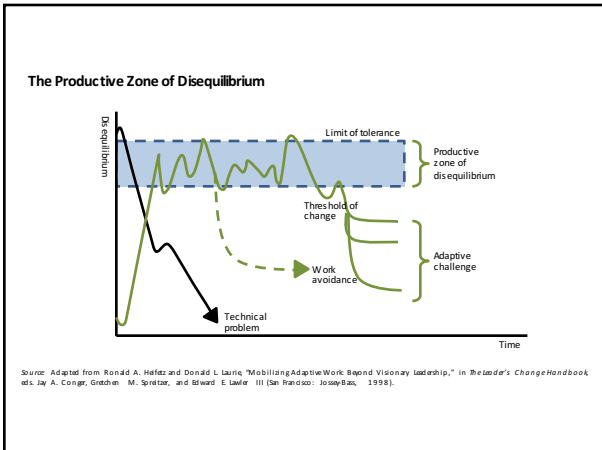
- *Adaptive leadership is the practice of mobilizing people to tackle tough challenges and thrive.*
 - Answers may not be "easy" and come from "on high"
 - Adaptive leadership involves viewing from above as well as participating in the activities themselves
 - A holistic approach is taken to evaluate situation and manage creative solutions (and conflict along the way)



Adaptive Leaders...

- create and inspire change
- “push” people to be their best, and use their resources
- don’t solve all of the problems
 - turning up the heat!





The Productive Zone of Disequilibrium

- PZD: “...enough heat generated by your intervention to gain attention, engagement, and forward motion, but not so much that the organization (or your part of it) explodes.”
– Heifetz, Grashow, and Linsky, 2009

The balcony and the dancefloor

- Different tools, different strategies?



So What Happens Next?

- We can consider our own framework of clinical education, supervisory process, employee relationships in a different way.
- We can consider:
 - Approaches from the balcony
 - Approaches on the dancefloor
 - How do we inspire *ourselves* and those we work with?
 - This fits well in a knowledge and skills model!

http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589942113§ion=Key_Issues

Remembering...

- This is about relationships:
 - “The supervision relationship is probably the single most important factor for the effectiveness of supervision, more important than the supervisory methods used.” (Kliminster & Jolly 2000)

Balancing our expectations with student/employee readiness

Creating the Mindset for Success

THE BALCONY

Expectation

- a strong belief that something will happen or be the case in the future
- a belief that someone will or should achieve something.

Expectations

- Who has them?
- Why is this important?
 - More than one person comes to the clinical education or employment tables



Considering Mindset, Dweck, 2013

- Your intelligence is something very basic about you that you cannot change very much
- You can learn new things, but you can't really change how intelligent you are
- No matter how much intelligence you have, you can always change it quite a bit
- You can always substantially change how intelligent you are

Mindset

- Fixed
- Growth

Mindset

- How does our view of ourselves/our own mindset, influence our practice with others?

STRATEGIES FOR THE DANCEFLOOR

Case Study

- Facts:
 - Clinic is fast-paced
 - Clinic starts at 8 AM
 - Most clinicians eat lunch at desks while completing documentation
 - Documentation is completed at point of service, and during cancellations
- Jim arrived at 7:55 AM for his first day of clinic. He explained that he was five minutes early because he struggled to find a parking spot. The second patient of the day has canceled and he asked if there would be time to “grab coffee” because he was up late studying for a test.
- The day moves forward. It appears that he is very interested in the population you serve and he asks many good questions. Jim is excited to start a new day tomorrow and is wondering whether he should take the lead on some of the sessions. [Group]

How Do YOU Start the Semester/ A New Employee?

- Discuss expectations in small groups
- What categories of information do we see?

Where Do Expectations Often Start?

- At orientation!

Foley 2007

- Study of occupational therapy students in Level II Fieldwork
 - Orientation seen as a critical factor to success!


Klien & Weaver 2000

- Organizational socialization
 - Study of 116 employees
 - Some attended orientation, some did not
- Those who attended:
 - Understood goals and history of the organization
 - Were more socialized with people
 - Were more organizationally committed

SPECIFIC THOUGHTS


Resource or “Launch Kit”

- Log-in and EMR procedures
- Scavenger Hunt *
- Procedures for setting up for evaluations
- Required Elements of Documentation




Resource or “Launch Kit”

- Flowcharts for Decision Making *
- Explanations of sections of IEP
- Things to Consider in Eval or Tx
- Timelines and Tracking Sheets
- “Worksheets” for analysis of info *



Resource or “Launch” Kit

- Sample reports
- Consideration of a final project
- Case studies?



Resource or "Launch" Kit

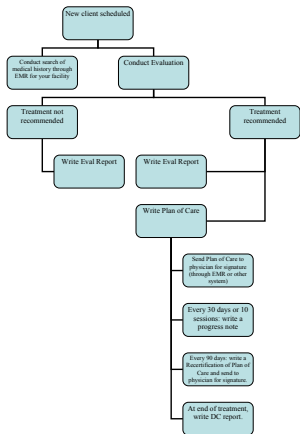
- Downtime
 - Resources
 - Planning



Lula's SLHS Clinic Scavenger Hunt

1. Get your clinic ID badge from the U Card office.
2. Find all 4 clinic rooms and write the room numbers below.
a. _____ b. _____ c. _____ d. _____
3. What is the total number of phones available in the clinic? _____
4. What number would you call to reach U of M Pulse? _____
5. Find the iPad and charger in each treatment room (except Rm 27) Write the passcode to wake it up here. _____
6. List one AAC app and one app that could be used for therapy that is on one of the clinic iPads. Briefly explain how you would use it for therapy.

7. Record a short message to me using Quick Voice app on the iPad in Rm 23. Tell me your name, phone number and whether or not it is ok to text you in the case of a last minute patient cancellation.
8. Where are patients supposed to park when they come to clinic? How many parking spots are available for clinic use? _____
9. Log into Milestone X Protect program on 1 computer in the observation room and set it to AutoConnect. You may choose to view your patients last sessions at this time. Be sure to log out before you leave.
10. Go for a ride up and down the lift.
11. Go to the front office desk, introduce yourself and ask for your clinic key. Also ask where they would like you to hand in the encounter forms.



Post Evaluation Analysis and Treatment Planning Worksheet

Area Assessed	Results	Strengths	Needs	Priority Level	Long Term Goal	Short Term Goals


**** IJ Goals are written with the end product in mind. Where will they be when treatment ends? Functional, generalized and measurable? Target skills to be demonstrated in settings outside of treatment. Involve caregivers in the measurement as much as possible.

*** ST Goals in outpatient medical settings target skills that can be achieved in 30 days. Functional, generalizable and measurable! These skills are the building blocks to achieving the long term goals. These skills begin in the treatment room and as the client progresses, transfer to other settings. Usually 1-2 ST goals for each IJ Goal.

** Goals can be measured quantitatively and/or qualitatively for accuracy, level of assistance needed/level of independence or use of skills in all opportunities.

Resource or “Launch” Kit

- Finding the time?
- There is no reason to go it alone!
 - Students will make an excellent resource – they want to pay it forward!
 - Ask new employees for feedback



EXPECTATIONS: THE OTHER SIDE OF THE TABLE

Larson

- See file



**HOW DO WE LEAD OUR MENTEE
THROUGH THE PROCESS AND MEET
NEEDS AND EXPECTATIONS?**

Balancing Teaching with Quality Care:
Being Efficient and Effective in Service
Delivery and Documentation




THE BALCONY

The Conversation

- 1 • My role
- 2 • Appropriate leadership
- 3 • Your responsibility

Shift Responsibility to the Student/New Employee

- They have to be ready to bring something to the table, but not the whole show.
- The quality of their experience depends on their level of preparation.
- Be explicit in your expectations and feedback.




THE DANCEFLOOR

Shift Responsibility to the Student -
Where Appropriate



High Stakes and Hard Work for
Students and New Employees!



- They are in the real world now.
- They have to be ready to bring something to the table. You'll have to decide how much on day one!
- The quality of their practicum experience depends on their level of preparation.
 - Be explicit in your expectations.

Time Savers



- Start with a focus on aspects of the job that are universal and generalizable

Skill of the Week

- Don't have to learn it all at once.
- Focus on particular skills each week
- Sample skills: evaluation, cueing and prompting, errorless learning, play audiometry, real-ear measures, OAE, billing and coding, behavior management, etc



SOAP Notes

- Writing in parallel
 - Write together so that the student understands:
 - Speed and accuracy required
 - Allows you to save your own documentation the first time around!
 - Give tips as needed




Audiology Support

- Templates
 - Hearing conservation report
 - Report for complete diagnostic evaluation
- Protocols
 - e.g., equipment setup for auditory processing assessments
- Brainstorming prior to client's visit
 - Discussing hearing aid candidacy
 - Outlining hearing aid features
 - Orienting a new hearing aid user to their devices

Organized Conversations


- Take notes during sessions
- Make lists of things to talk about
- Avoid the walk and talk, be organized and efficient in conferencing



Organized Conversations

- E-journaling: provides a reference for future questions
 - Avoids repetitive questions
 - Allows student time to reflect and collect
 - Allows for formative assessment

Always protect confidentiality!



Effective Clinical Education

- Treatment techniques can be teaching techniques

- Fading of cues
- Modeling
- Spaced retrieval
- Most to least cueing
- Forward and Backward chaining
- Hierarchy of skills, hierarchy of cues



Crucial Conversations

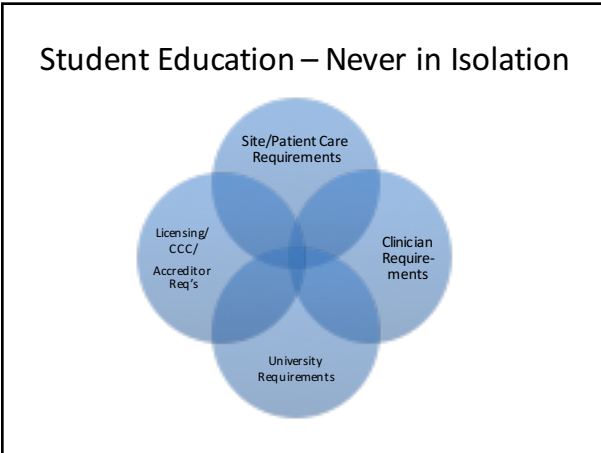
Providing Meaningful Feedback

Survey says...

Conflict and Feedback



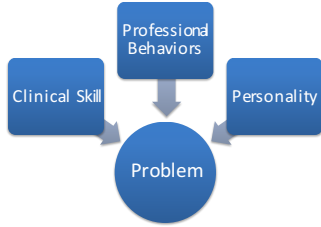
THE BALCONY



New Employees

- Costs associated with hires
 - Society for Human Resources Management predicts it costs 6 to 9 months' salary on average to replace an employee.
 - Making crucial conversations work is important!

The Marginal Clinical Performer



THE DANCEFLOOR

Case Study

- Lydia is rotating at your site. Her performance is superb. She is a “natural” clinician and patients and families rave about her abilities in a clinical situation – most assuming that she is an employee instead of a student. You and your clinical operations manager notice that Lydia has challenges with the dress code. The manager has reported that Lydia appears to dress “to the edge of what is acceptable, every. single. day.” You have a position opening up at your facility and Lydia would be the right fit from a knowledge and skills perspective. However, the operations manager is not convinced. The manager has the final call on the offer of employment.

Where to Begin?

- Isolate the problem or situation
 - What are you responding to here?
- Determine your investment!
 - Deep breathing and deciding: Zero, Once, or More!

Zero...

- Consider
 - The Question Behind the Question!
 - Damaging a relationship
 - Your style as a leader and mentor
 - Compliance vs building your team
 - Examples

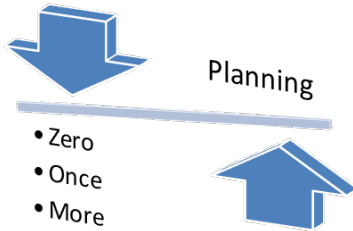
Once...

- Engaging for the good of the relationship
 - Personally
 - Organizationally
- Examples

More....

- Engaging for the good of the relationship
 - Personally
 - Organizationally
- Developing the long-term plan
- Examples

Investment



Clinical Skill

- Often it is starting the conversation:
 - “I wouldn’t be doing my job if I didn’t discuss...”
- Questioning the student regarding what she/he knows regarding the topic
- Developing a plan
 - Remembering your own learning curve
 - Soliciting student buy-in
- *A student? The University is your partner!*
- *An employee? What is your HR policy?*

Professional Behaviors

- Keeping the conversation direct
 - There are some authors who suggest that Millennial learners SEEK direct feedback
- Focusing on the future
 - At-will employment
 - Serving those in need
- “I’d be a pretty poor mentor if I didn’t talk with you about...”
- *A Student? The University is your partner*
- *An employee? Policy. Ethics.*

Personality

- This one is a challenge!
- What’s your investment here?
 - Do aspects of the personality potentially impact the people served?
 - Address it head on!
 - Do aspects of the personality potentially impact what the student will learn?
 - Address it head on!
 - Are the issues more of an issue to you personally?
 - Mind the “Zero, Once, More!” concept
 - *The University is your partner*
 - *Employee – consider Zero, One, More*

Providing Feedback

- Additional considerations:
 - Tone
 - Form
 - General/specific
 - Frequency

Providing Feedback

- *Important considerations:*
 - *Establishing your common goal*
 - *Timing*
 - *Data (assumptions vs. facts)*
 - *The importance of “I” messages if subjective*

http://www.asha.org/PRPSpecificTopic.aspx?folderid=8589942113§ion=Key_Issues

Case Study

- Eddie is an extern at your site, and he has been with you for six weeks of a 12-week rotation (the first week was observation only). He is nearing the completion of his program and he has strong people skills. He has been a delight to be around and staff enjoy his affable personality. He is also always willing to pitch in as needed. He arrives early and stays late. However, you are noticing that Eddie's skills are not ready for his first employment position after this rotation. Eddie needs moderate assistance to complete “average” evaluations. He struggles to integrate interview and assessment information into a plan for the patients you see as well. You have spent time asking Eddie many questions immediately after he works with patients. He seems to have the “right answers” – but, he fails to integrate this information in a clinical situation. You are not confident that Eddie will master the necessary skills for his first job based on his lack of progress. Eddie has asked you for a letter of recommendation and if you know of any open positions in the community.
- You made a call to the university where Eddie is enrolled 10 minutes ago. You are waiting on a return call. You'd like to have a conversation with Eddie today - before a long weekend.

Case Study

- Tamra has been an employee with your facility for 3 years. Tamra spends a fair amount of time in “water cooler” discussions and provides you with a great deal of feedback about “the tone of things around here.” These conversations have a negative focus and are not solution-oriented. Several staff have gently suggested that you not take everything that Tamra says seriously. Tamra states that she is the advocate for the group by asking them, “What could we be doing better? What do you feel is wrong here?”

DEVELOPING YOUR OWN SKILLS

CAPCSD Clinical Education Modules

The Council of Academic Programs in Communication Sciences and Disorders (CAPCSD) has developed a series of self-paced, online course modules focused on the process of clinical education. These courses were developed as part of CAPCSD's mission to provide visionary leadership for academic programs in Communication Sciences and Disorders and to promote the professional development of its constituents. Clinical instruction is a vital component of the education of audiology and speech-language pathology students. Through high-quality and dynamic readings, multimedia offerings and reflective activities, participants will gain a richer understanding of the role of clinical education in graduate programs.

**American Academy of Audiology
CH-AP Program**

- Certificate Holder – Audiology Preceptor
- *“A well-trained preceptor is essential to helping students become practice-ready clinicians, prepared with the technical and professional skills they'll need to be successful; the CH-AP Training Program is designed to do that for current and future audiologists.*
- *Those who earn the CH-AP certificate help facilitate a student's transition from novice clinician to competent, independent professional.”*
<https://www.eaudiology.org/precepting>

ASHA's Practice Portal

- <http://www.asha.org/Practice-Portal/Professional-Issues/Clinical-Education-and-Supervision/>

APTA CCI

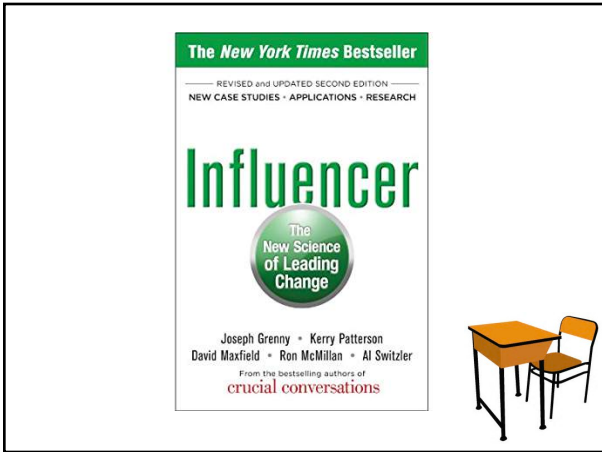
- American Physical Therapy Association
- *"The Credentialed Clinical Instructor Program (CCIP) is intended for health care providers who work primarily in a clinical setting and are interested in developing their teaching abilities. Participants will explore different aspects of the clinical learning environment and will learn skills and techniques necessary to provide a structured and effective learning environment for students. The goal is not to improve individual clinical skills, but to develop and refine each participant's ability to teach, instruct, and guide the development of his or her students."*

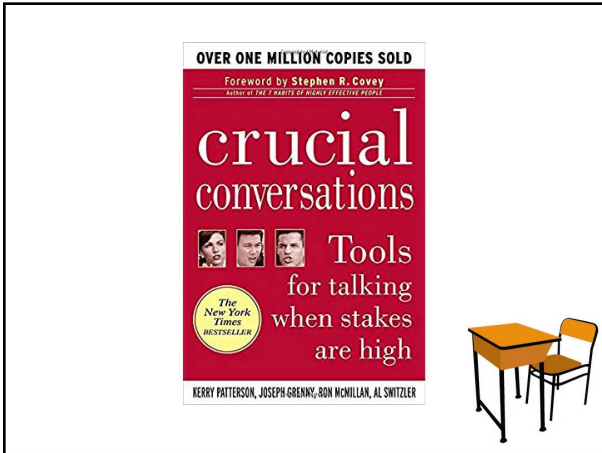
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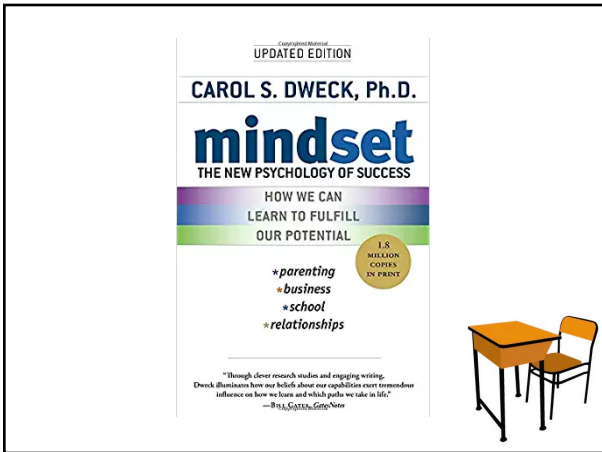
books, Books, BOOKS!

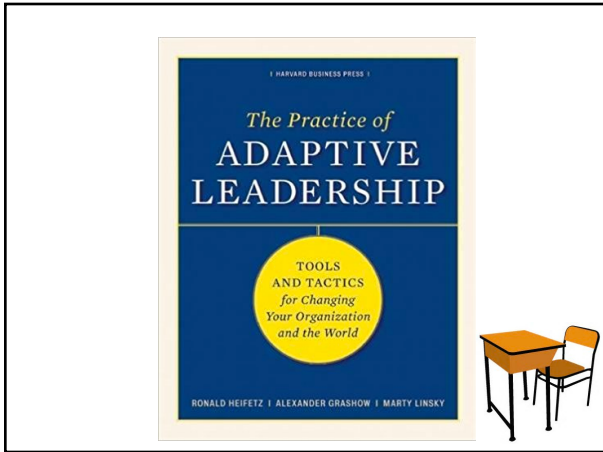
- If you're a reader, there are many great resources for you that touch on supervision and leadership

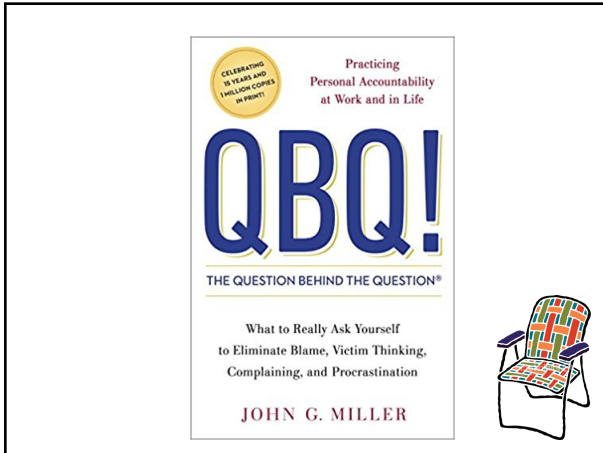


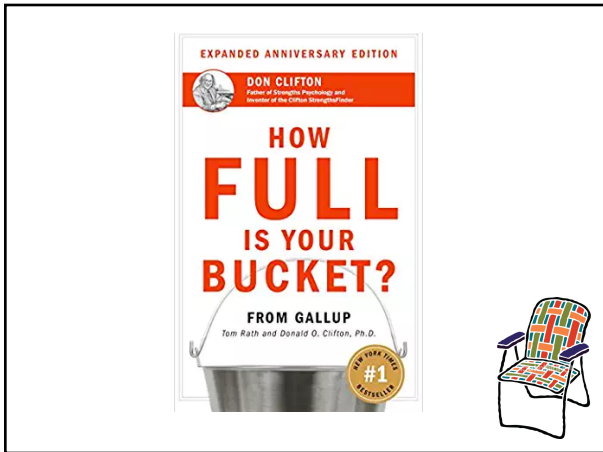


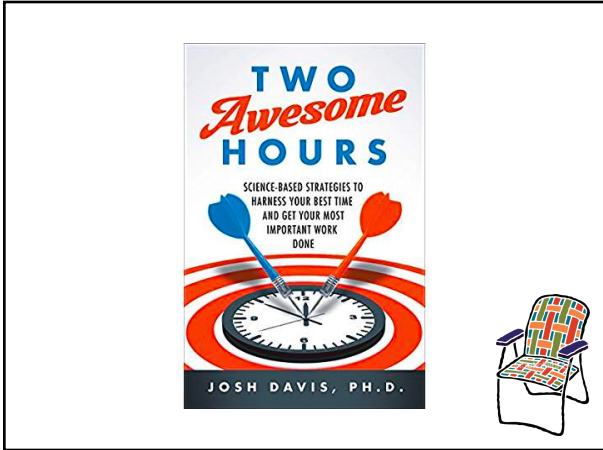


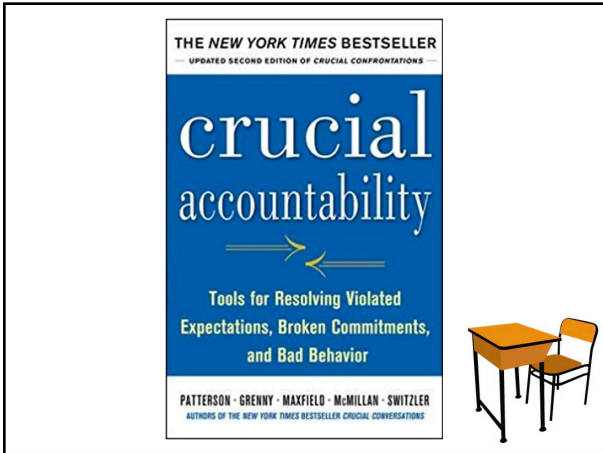


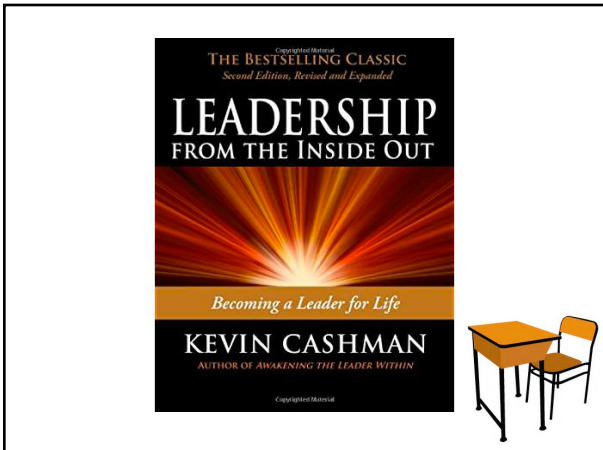












What are You Doing on Monday?

- What will change?
- What will you implement?
