Background and Purpose

Background: Effective January 1, 2005, students working towards certification in speech-language pathology (CCC-SLP) must demonstrate competence in meeting certain knowledge and skills outcomes throughout their academic careers. A list of these knowledge and skills outcomes appears in Appendix A.

The knowledge and skills outcomes are addressed throughout the student’s undergraduate and graduate curricula, and are recorded on a document known as the Knowledge and Skills Acquisition (KASA) form. For the most part, knowledge outcomes are typically addressed in the student’s academic courses, while skills outcomes are typically addressed during the student’s clinical practicum experiences. As the student progresses from academic term to academic term, the knowledge and/or skills outcomes that were addressed in a given term are recorded on the KASA form (this form will eventually be maintained in an electronic format). The expectation is that the student will have mastered all of the knowledge outcomes and most of the skills outcomes by the time the graduate degree is awarded.

Each academic course in our program (whether undergraduate or graduate) addresses a number of the knowledge outcomes. There is even a certain degree of overlap, where more than one course may address the same knowledge outcome(s). The totality of all of our courses affords the student the opportunity to master all of the knowledge outcomes. Similarly, clinical practicum experiences are assigned in such a way that the student has many opportunities to master as many of the skills outcomes as possible.

For any given course or practicum experience, the program uses a three-tiered classification system for describing the student’s progress in mastering the knowledge and skills outcomes. Depending upon the student’s performance and whether a given outcome is addressed through a hierarchy of courses or practicum experiences, progress is noted as either (1) no progress, (2) in progress, or (3) met. Student progress is also determined by the grade he or she earns in academic course work and practicum experiences. The expectation is that by the time the student reaches the end of graduate study, all knowledge outcomes and a majority of skills outcomes will have been marked as met. The program recognizes that there may be some instances (especially in relation to the skills outcomes) where certain outcomes may be listed as in progress by the time of graduation. As long as the student has mastered most of the knowledge and skills outcomes, he or she will be eligible for conferral of the graduate degree.
The Council on Academic Accreditation (CAA) of the American Speech-Language-Hearing Association (ASHA) requires that academic programs track the progress of students as they work towards the graduate degree. This is accomplished through formative and summative assessment. Formative assessment occurs at frequent intervals throughout the student’s studies (e.g., in each academic course and clinical experience), while summative assessment occurs at critical junctures in a student’s academic career (e.g., upon completion of the requirements for the bachelor’s and master’s degrees, respectively).

The faculty of the Department of Communication Disorders understands that certain students may experience difficulty from time to time in their academic course work and/or clinical experiences. A student may earn a poor grade in a course or not make sufficient progress in meeting the knowledge outcomes for specific courses. Because of this, the program has developed an academic assistance plan for students struggling in academic courses, and a clinical assistance plan for students struggling in their practicum experiences. These assistance plans have been developed to assist students who are struggling in meeting the knowledge and skills outcomes.

**Purpose:** The purpose of our academic and clinical assistance plans is to provide structured and individualized assistance through faculty direction for students who perform below standard in academic coursework and/or clinical practicum experiences. The plans are designed to provide struggling students with additional experiences that will assist them in making sufficient progress in meeting the knowledge and skills outcomes necessary for certification as a speech-language pathologist.

**Academic Assistance Plan**

Faculty of the Department of Communication Disorders will provide assistance to students who are struggling in their academic coursework. This assistance will take the form of an academic assistance plan. The determination as to whether or not an academic assistance plan is needed is determined partially by course grade but also by assessment of the student’s progress in addressing the knowledge outcomes for a given course.

Every academic course in our program addresses a certain number of knowledge outcomes (see Appendix B for a sample course syllabus). Student progress on these outcomes is measured through various means of assessment such as homework, examinations, in-class discussions, term papers, etc. Every one of our course syllabi provides information as to how each knowledge outcome is being assessed, as well as whether successful completion of the assessment will result in the knowledge outcome being checked off as either *in progress* or *met*. For some courses, successful completion of the outcome assessment will only result in a determination of *in progress* because the knowledge outcome is addressed in greater depth in more advanced
coursework. For other courses (referred to as “terminal” courses), successful completion of outcome assessment will result in a determination of met. Each syllabus in our program specifically states whether successful completion of assessments will result in a judgment of in progress or met.

**KASA Outcome Progress as Determined by Course Grade**

At the **undergraduate** level, students who earn a grade that is between 3.8 and 4.0 in a course (which is equivalent to a letter grade of “A”) will be judged as having successfully addressed all of the knowledge outcomes for that course (i.e., all outcomes will be checked off as either in progress or met depending on the highest level of the hierarchy that is possible). Conversely, students who earn a grade of 1.7 or less will be judged as having not made progress towards any of the knowledge outcomes for that particular course (i.e., all outcomes will be documented on the KASA form as no progress). In the case where the student earns a grade less than 3.8 but higher than 1.7, any number of outcomes may or may not be judged as having been successfully addressed (i.e., some may be documented on the KASA form as no progress, while others may be checked off as either in progress or met). The course instructor will maintain a record of each student’s progress in addressing the knowledge outcomes for that particular course, and that information will be transferred to the KASA form upon completion of the course.

At the **graduate** level, students who earn a grade that is between 3.8 and 4.0 in a course (which is equivalent to a letter grade of “A”) will be judged as having successfully addressed all of the knowledge outcomes for that course (for the majority of graduate courses, the outcomes will be documented on the KASA form as met although there are a few outcomes that may be documented as in progress). Conversely, students who earn a grade of 2.3 or less will be judged as having not made progress towards any of the knowledge outcomes for that particular course (i.e., all outcomes will be documented on the KASA form as no progress). In the case where the student earns a grade less than 3.8 but higher than 2.3, any number of outcomes may or may not be judged as having been successfully addressed (i.e., some may be documented on the KASA form as no progress, while others may be checked off as either in progress or met). The course instructor will maintain a record of each student’s progress in addressing the knowledge outcomes for that particular course, and that information will be transferred to the KASA form upon completion of the course.

If a student does not meet the minimum grade requirement for a course, the academic assistance plan will be to retake the course. The inability of a student to earn a minimum grade of 1.8 in an undergraduate course or 2.4 in a graduate course will be taken by faculty as a sign that the student did not understand the content of the course. *All* outcomes related to the course(s) in question will be documented on the KASA form as no progress. Therefore, the student will retake the course the next time it is offered again. Should the course that must be repeated be a pre-requisite course for more advanced courses, the student will not be allowed to enroll in the advanced course(s) until the deficient course has been successfully repeated. This will be duly noted on an Academic Assistance Plan form that will be placed in the student’s KASA file.
**Successful Completion of KASA Outcomes and Graduation**

An undergraduate student can graduate with the baccalaureate degree having not successfully addressed all of the knowledge outcomes for the undergraduate courses taken, but under no circumstance will that student be considered for admission to our graduate program until all deficient knowledge outcomes have been judged to be successfully addressed (depending on the hierarchy, some outcomes must be documented as *in progress* while others must be documented as *met*). In other words, a student will not be eligible for graduate study in our program if any KASA knowledge outcomes addressed at the undergraduate level are documented as *no progress* by the time the student earns the baccalaureate degree. Should a student who has any outcomes documented as *no progress* wish to be considered for graduate study at EWU, he or she will have to successfully address all deficient outcomes first through enrollment in an independent study.

Likewise, a graduate student can still earn the graduate degree having not successfully addressed all of the knowledge outcomes, but the chair of the department will not certify that the student has met the academic requirements for certification when the student applies for the CCC-SLP. All outstanding deficient knowledge outcomes must be documented as *met* before the program will sign off on the student’s certification application. Should this be the case, the student will be required to enroll in an independent study to address the deficient outcomes. Once all knowledge outcomes have been documented as *met*, the chair of the department will certify that the student has met all academic requirements for professional certification.

**The Process of Documenting Progress**

For any given course, the instructor will provide three opportunities for the student to make sufficient progress towards the knowledge outcomes in that course (see Appendix B again for a sample course syllabus). The first opportunity will be when the outcome is assessed. Should assessment indicate that the student is not making sufficient progress on one or more of the knowledge outcomes, the instructor and student will meet to design a strategy to directly address the knowledge outcome(s) that are deficient (this is the second opportunity). The *Academic Assistance Plan* form (see Appendix C) will be used for this purpose. Should the student successfully complete the *Academic Assistance Plan* on a first attempt while still enrolled in the course, successful completion will be documented using the *Academic Assistance Plan Progress Note* (see Appendix D) and the outcome(s) in question will be duly documented on the *KASA* form (i.e., as either *in progress* or *met*). If there is not sufficient time left in the academic term for the student to complete the first *Academic Assistance Plan*, then the faculty member and student will establish a clear time line for when the student must complete the plan outside of the classroom. In this case, since the student did not successfully address the outcome(s) within the timeframe of the course, the outcome(s) in question will be documented on the *KASA* form as *no progress*. 
If the student does not successfully complete the Academic Assistance Plan on a first attempt, the faculty member and student will meet again to design a second Academic Assistance Plan (this is the third opportunity). If there is sufficient time remaining in the academic term for the student to complete the plan while still enrolled in the course, a determination as to whether the student has successfully completed the second Academic Assistance Plan will be made at that point. If the student has been judged as having successfully completed the second Academic Assistance Plan, successful completion will be documented on the Academic Assistance Plan Progress Note as well as the KASA form (i.e., as either in progress or met). If the student is judged not to have successfully completed the outcome(s) in question, the deficient outcome(s) will be documented as no progress on the KASA form and the student will be offered no further attempts to address the deficient outcome(s) under the purview of the course.

If there is not sufficient time left in the academic term for the student to complete the second Academic Assistance Plan, then the faculty member and student will establish a clear time line for when the student must complete the plan outside of the classroom. In this case, since the student did not successfully address the outcome(s) under the purview of the course, the outcome(s) in question will be documented on the KASA form as no progress. The student will then complete the Academic Assistance Plan outside of the course. Should the student successfully complete the Academic Assistance Plan on this second attempt, successful completion will be documented on the Academic Assistance Plan Progress Note as well as the KASA form (i.e., no progress will be changed to either in progress or met).

Under no circumstance will the student be allowed more than two attempts to successfully complete an Academic Assistance Plan. If the student does not successfully address the deficient knowledge outcome(s) by a second attempt (regardless of whether the second attempt was made while still enrolled in the course or made outside the purview of the course), he or she will be required to enroll in an independent study for more in depth exploration of the outcome(s) in question. An Academic Assistance Plan will note that the student has been directed to complete an independent study. Should the student successfully complete the independent study, successful completion of the knowledge outcome(s) in question will be documented on an Academic Assistance Plan Progress Note as well as the KASA form (i.e., no progress will be changed to either in progress or met). If the student does not successfully complete the independent study, the outcome(s) in question will remain documented on the KASA form as no progress.

It should be noted that grade performance supersedes individual performance on the knowledge outcome(s) for a course. That is, should the student’s performance on assessments in a course indicate that he or she has successfully addressed any number of knowledge outcomes, but the student does not earn the mandatory minimum grade of 1.8 (for undergraduate courses) or 2.4 (for graduate courses), then all outcomes for that course will be documented on the KASA form as no progress. The student will then be required to retake the course at its next offering. Any Academic Assistance Plan in place at that time will become null and void and will be replaced by
an Academic Assistance Plan that states that the course is to be retaken at its next offering.

**Clinical Assistance Plan**

Mastery of skills outcomes will be determined in a similar fashion to the academic knowledge outcomes. Student progress towards addressing the skills outcomes will be accomplished through formative assessment at regular intervals throughout the student’s clinical experiences. All documentation of clinical progress will be placed in the student’s KASA file.

**The Process**

Clinical supervisors will evaluate the student’s clinical performance at midterm and at the end of the term. If the student is demonstrating at-risk clinical skills during the practicum experience, the clinical supervisor(s) will meet with the student to design a clinical assistance plan using the Clinical Assistance Plan form (see Appendix E). If the student demonstrates successful completion of the clinical assistance plan while the practicum experience is still ongoing, the supervisor(s) will complete a Clinical Assistance Plan Progress Note (see Appendix F).

Upon completion of a practicum experience, if the student either (1) earned a grade of 2.7 or lower, or (2) earned a grade of 2.8 or higher but still demonstrated at-risk clinical skills at the end of the term, a Clinical Assistance Plan will be designed by the student, supervisor(s), and clinical director. The student would then wait until his or her clinical practicum experience the following academic term. The stipulations of the Clinical Assistance Plan would then be addressed during the new term. Should the student successfully complete the clinical assistance plan during the new term, the supervisor(s) and clinical director will complete and sign off on the Clinical Assistance Plan Progress Note. Student progress would also be assessed and monitored throughout the new term, so that formative assessment in clinic is cyclic in nature. It should be noted that a student may be placed on a clinical assistance plan at any point during his or her clinical experiences.

Students must maintain a 3.0 cumulative average in all clinical courses (i.e., all COMD 561 experiences) and have received at least a grade of 3.0 in the final clinical course immediately preceding the off-site clinical placement. In addition, students must be recommended by faculty and supervisors for placement in an off-site practicum experience.

The specific process of assessment and clinical assistance will be accomplished in the following manner:
1. **By midterm of the student’s practicum experience:** If a supervisor is concerned about a student’s clinical performance (whether diagnostic, treatment, or both), that supervisor will identify the student clinician as being “at risk” by either formally notifying the respective Clinical Coordinator (Audiology or Speech-Language Pathology) or by informally identifying the student clinician during a supervisor meeting. “At risk” is defined as performing at a grade level of 2.7 or lower in any aspect of the clinical experience.

2. **Upon identification of a student as “at-risk”:** The Clinic Coordinator and the supervisor(s) with concerns will contact the student and arrange to meet with the student within one week.

3. **During the remainder of the term:** The student will participate in the following activities:
   
   a. Meet with the supervisor(s) to review specific concerns.

   b. The supervisor(s) will provide a formal assessment of the student clinician using the University Hearing and Speech Clinic *Assessment of Clinical Performance* (this is a separate document that can be obtained from the Clinical Director). Additionally, the student may be asked to complete a self-assessment. Performance ratings, written commentary and the midterm grade will be provided by the supervisor(s). The student and supervisor(s) will sign the evaluation, which will be filed in the student’s clinical and academic files.

   c. Within a timely manner, and based on the formal midterm evaluation, the supervisor(s) and clinician will develop and sign a clinical improvement plan. This plan will include quantifiable objectives. Qualitative objectives may be determined as well. A copy of the *Clinical Assistance Plan* will be filed in the student’s clinical and academic files.

   d. The supervisor(s) and student will continue to meet weekly throughout the remainder of the quarter. During these meetings, discussions will center around the student’s progress towards achieving the objectives stated in the assistance plan. If the student successfully completes the clinical assistance plan, a *Clinical Assistance Plan Progress Note* will be completed by the supervisor(s), and signed by the supervisor(s), student, and clinical director. The *Clinical Assistance Plan Progress Note* will be filed in the student’s clinical and academic files.

4. **At the end of the academic term:** If the student earns a final grade of 2.7 or lower, he or she will continue or be placed on a clinical assistance plan and be asked to complete a number of clinical activities, as appropriate, designed to address areas of clinical weakness. Performance will be reviewed by a
committee comprised of the Clinic Coordinator, supervisor(s), clinical director, academic advisor and/or department chair as appropriate.

a. The committee will meet during the first week of the next academic term to plan the student’s clinical experience, which will be tailored to the areas of concern that were identified in the clinical assistance plan from the previous term. The expectations for performance and performance assessment, along with roles and responsibilities for the student and the supervisor(s) will be determined and documented during the first week on a collaborative basis.

b. If the student earned a grade of 2.7 or lower the previous term, he or she will enroll in COMD 596: Directed Clinical Study, instead of a clinical practicum course. This course will be a conventionally graded course, and must be completed with a grade of 3.0 or better in order to continue with clinical training. A grade for COMD 596 will not replace a clinical practicum grade. The following are examples of clinical activities that may be included in the student’s COMD 596 experience. Additional activities may be designed and incorporated depending upon individual needs:
   1. Working as a principal clinician.
   2. Working as a peer clinician.
   3. Completing clinical observations and written summaries.
   4. Writing treatment plans that include rationales for the objectives along with detailed expected outcomes.
   5. Reviewing evidence-based practice and completing related assignments.
   6. Viewing videotaped evaluations and self-evaluations of diagnostic and treatment sessions.

c. The COMD 596 experience may be completed only one time.

d. After successful completion of COMD 596, the student must complete the original practicum course (COMD 561) with a grade of 3.0 or better. Any additional unsatisfactory clinical work while enrolled in the regular clinic practicum course will result in dismissal from clinical training.

e. If there are two or more client/patient/guardian requests for a student clinician to be removed from an assigned clinical case on grounds of clinical incompetence and there is sufficient evidence that the student is having difficulty with these clinical assignments, the student will be removed from clinical training.

5. If a student earns a grade of 1.7 or less (i.e., a letter grade equivalent of “C-” or worse) for a clinical practicum course, the clock hours accrued during that course will not be accepted towards ASHA’s practicum clock hour requirements.

Documentation of Progress Toward KASA Skills Outcomes

ASHA recognizes nine general clinical populations: (1) articulation disorders; (2) fluency disorders; (3) voice and resonance disorders; (4) receptive and expressive language
disorders; (5) hearing disorders; (6) swallowing disorders; (7) disorders related to the cognitive aspects of communication; (8) disorders related to the social aspects of communication; and (9) disorders related to communication modalities. Throughout their clinical experiences, students may be exposed to any number of these clinical populations. Skills outcomes are centered around three broad areas of endeavor: (1) evaluation; (2) intervention; and (3) interaction and personal qualities. Each of these three areas of endeavor are further divided into a number of skills outcomes. There are seven basic skills associated with evaluation, seven basic skills associated with intervention, and four basic skills associated with interaction and personal qualities. In total then, any number up to as many as 18 skills outcomes may be assessed for each of the nine general clinical populations (not all 18 possible skills outcomes are assigned to all nine types of disorder).

As the student enrolls in the various clinical practicum courses (COMD 461 at the undergraduate level and COMD 561, 562, 563, and 697 at the graduate level), he or she may be assigned any number of clients who present with any number of the nine general clinical populations. It is the intent of our clinical program to expose the student to as many of the nine basic clinical populations as possible over the course of all of their clinical experiences. As the student works with a client presenting one or more of the nine disorders, progress towards meeting the skills outcomes will be documented in the following manner.

For any particular general clinical population to which the student is assigned, if the student earns at least a minimum of 15 clock hours and those clock hours were earned in good standing, all skills outcomes associated with that clinical population (i.e., all evaluation and/or intervention skills and all interaction and personal quality skills) will be documented as met on the KASA form. If the student earns at least one clock hour of experience but less than 15, and those clock hours were earned in good standing, the appropriate skills will be documented on the KASA form as in progress. If the student accrues any clock hours but not in good standing, all pertinent outcomes will be documented on the KASA form as no progress. Further, if the student earns a practicum grade of 1.7 or worse, none of the clock hours earned will be counted towards ASHA’s certification requirements.

If the student earns less than 15 clock hours in good standing for a particular clinical population (i.e., the appropriate skills outcomes have been documented as in progress on the KASA form), the skills outcomes in question will be documented as met if at any time the student is assigned another client presenting the same disorder and earns a cumulative total of at least 15 clock hours in good standing (i.e., the total of all clinical experiences for a particular clinical population reaches a minimum of 15 clock hours).

It should be noted that for any given clinical assignment, the skills related to evaluation and intervention may or may not be addressed depending on the specific nature of the clinical experience. For example, the student may be assigned to a client where the experience is almost exclusively evaluation or intervention, but not both. In such a case only the skills outcomes that are pertinent to the type of clinical experience will be
documented (i.e., those skills related to evaluation or intervention, but not both). If on the other hand there is a strong evaluation and intervention component to a particular clinical assignment, all skills outcomes pertinent to evaluation and intervention will be documented. Regardless of the type of clinical experience, skills related to interaction and personal qualities will always be documented.

Over the course of the student's studies, clinical experiences will be tailored in a way that the student will be assigned to clients presenting several of the nine basic clinical disorders. As such, several opportunities will be provided to each student to meet as many of the skills outcomes as possible by the time the graduate degree is conferred.
APPENDIX A

KASA Knowledge and Skills Outcomes

1. Demonstrates knowledge of the biological basis of the basic human communication processes (III-B)
2. Demonstrates knowledge of the neurological basis of the basic human communication processes (III-B)
3. Demonstrates knowledge of the acoustic basis of the basic human communication processes (III-B)
4. Demonstrates knowledge of the psychological basis of the basic human communication processes (III-B)
5. Demonstrates knowledge of the developmental and life span bases of the basic human communication processes (III-B)
6. Demonstrates knowledge of the linguistic basis of the basic human communication processes (III-B)
7. Demonstrates knowledge of the cultural basis of the basic human communication processes (III-B)
8. Demonstrates knowledge of the biological basis of swallowing processes (III-B)
9. Demonstrates knowledge of the neurological basis of swallowing processes (III-B)
10. Demonstrates knowledge of the psychological basis of swallowing processes (III-B)
11. Demonstrates knowledge of the developmental and life span bases of swallowing processes (III-B)
12. Demonstrates knowledge of the cultural basis of swallowing disorders (III-B)
13. Demonstrates knowledge of the etiologies of articulation disorders (III-C)
14. Demonstrates knowledge of the characteristics of articulation disorders (III-C)
15. Demonstrates knowledge of the etiologies of fluency disorders (III-C)
16. Demonstrates knowledge of the characteristics of fluency disorders (III-C)
17. Demonstrates knowledge of the etiologies of voice and resonance disorders (III-C)
18. Demonstrates knowledge of the characteristics of voice and resonance disorders (III-C)
19. Demonstrates knowledge of the etiologies of receptive and expressive language disorders (III-C)
20. Demonstrates knowledge of the characteristics of receptive and expressive language disorders (III-C)
21. Demonstrates knowledge of the etiologies of hearing disorders (III-C)
22. Demonstrates knowledge of the characteristics of hearing disorders (III-C)
23. Demonstrates knowledge of the etiologies of swallowing disorders (III-C)
24. Demonstrates knowledge of the characteristics of swallowing disorders (III-C)
25. Demonstrates knowledge of the etiologies of cognitive aspects of communication (III-C)
26. Demonstrates knowledge of the characteristics of cognitive aspects of communication (III-C)
27. Demonstrates knowledge of the etiologies of social aspects of communication (III-C)
28. Demonstrates knowledge of the characteristics of social aspects of communication (III-C)
29. Demonstrates knowledge of the characteristics of communication modalities (III-C)
30. Demonstrates knowledge of the prevention of articulation disorders (III-D)
31. Demonstrates knowledge of the assessment of articulation disorders (III-D)
32. Demonstrates knowledge of the intervention of articulation disorders (III-D)
33. Demonstrates knowledge of the prevention of fluency disorders (III-D)
34. Demonstrates knowledge of the assessment of fluency disorders (III-D)
35. Demonstrates knowledge of the intervention of fluency disorders (III-D)
36. Demonstrates knowledge of the prevention of voice and resonance disorders (III-D)
37. Demonstrates knowledge of the assessment of voice and resonance disorders (III-D)
38. Demonstrates knowledge of the intervention of voice and resonance disorders (III-D)
39. Demonstrates knowledge of the prevention of receptive and expressive language disorders (III-D)
40. Demonstrates knowledge of the assessment of receptive and expressive language disorders (III-D)
41. Demonstrates knowledge of the intervention of receptive and expressive language disorders (III-D)
42. Demonstrates knowledge of the prevention of hearing disorders (III-D)
43. Demonstrates knowledge of the assessment of hearing disorders (III-D)
44. Demonstrates knowledge of the intervention of hearing disorders (III-D)
45. Demonstrates knowledge of the prevention of swallowing disorders (III-D)
46. Demonstrates knowledge of the assessment of swallowing disorders (III-D)
47. Demonstrates knowledge of the intervention of swallowing disorders (III-D)
48. Demonstrates knowledge of prevention related to the cognitive aspects of communication (III-D)
49. Demonstrates knowledge of assessment related to the cognitive aspects of communication (III-D)
50. Demonstrates knowledge of intervention related to the cognitive aspects of communication (III-D)
51. Demonstrates knowledge of prevention related to the social aspects of communication (III-D)
52. Demonstrates knowledge of assessment related to the social aspects of communication (III-D)
53. Demonstrates knowledge of intervention related to the social aspects of communication (III-D)
54. Demonstrates knowledge of assessment related to communication modalities (III-D)
55. Demonstrates knowledge of intervention related to communication modalities (III-D)
56. Demonstrates skill in screening and prevention procedures during evaluation of articulation disorders (IV-G)
57. Demonstrates skill in collecting and integrating case history information during evaluation of articulation disorders (IV-G)
58. Demonstrates skill in selecting and administering appropriate evaluation procedures for articulation disorders (IV-G)
59. Demonstrates skill in adapting evaluation procedures for articulation disorders (IV-G)
60. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for articulation disorders (IV-G)
61. Demonstrates skill in completing administrative and reporting functions to support evaluation for articulation disorders (IV-G)
62. Demonstrates skill in referring clients with articulation disorders for appropriate services (IV-G)
63. Demonstrates skill in screening and prevention procedures during evaluation of fluency disorders (IV-G)
64. Demonstrates skill in collecting and integrating case history information during evaluation of fluency disorders (IV-G)
65. Demonstrates skill in selecting and administering appropriate evaluation procedures for fluency disorders (IV-G)
66. Demonstrates skill in adapting evaluation procedures for fluency disorders (IV-G)
67. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for fluency disorders (IV-G)
68. Demonstrates skill in completing administrative and reporting functions to support evaluation for fluency disorders (IV-G)
69. Demonstrates skill in referring clients with fluency disorders for appropriate services (IV-G)
70. Demonstrates skill in screening and prevention procedures during evaluation of voice and resonance disorders (IV-G)
71. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for voice and resonance disorders (IV-G)
72. Demonstrates skill in completing administrative and reporting functions to support evaluation for voice and resonance disorders (IV-G)
73. Demonstrates skill in referring clients with voice and resonance disorders for appropriate services (IV-G)
74. Demonstrates skill in collecting and integrating case history information during evaluation of voice and resonance disorders (IV-G)
75. Demonstrates skill in screening and prevention procedures during evaluation of receptive and expressive language disorders (IV-G)
76. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for receptive and expressive language disorders (IV-G)
77. Demonstrates skill in completing administrative and reporting functions to support evaluation for receptive and expressive language disorders (IV-G)
78. Demonstrates skill in referring clients with receptive and expressive language disorders for appropriate services (IV-G)
79. Demonstrates skill in screening and prevention procedures during evaluation of hearing disorders (IV-G)
80. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for hearing disorders (IV-G)
81. Demonstrates skill in completing administrative and reporting functions to support evaluation for hearing disorders (IV-G)
82. Demonstrates skill in referring clients with hearing disorders for appropriate services (IV-G)
83. Demonstrates skill in screening and prevention procedures during evaluation of swallowing disorders (IV-G)
84. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for swallowing disorders (IV-G)
85. Demonstrates skill in completing administrative and reporting functions to support evaluation for swallowing disorders (IV-G)
86. Demonstrates skill in referring clients with swallowing disorders for appropriate services (IV-G)
87. Demonstrates skill in collecting and integrating case history information during evaluation of swallowing disorders (IV-G)
93. Demonstrates skill in selecting and administering appropriate evaluation procedures for swallowing disorders (IV-G)
94. Demonstrates skill in adapting evaluation procedures for swallowing disorders (IV-G)
95. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for hearing disorders (IV-G)
96. Demonstrates skill in completing administrative and reporting functions to support evaluation for swallowing disorders (IV-G)
97. Demonstrates skill in referring clients with swallowing disorders for appropriate services (IV-G)
98. Demonstrates skill in screening and prevention procedures during evaluation of the cognitive aspects of communication disorders (IV-G)
99. Demonstrates skill in collecting and integrating case history information during evaluation of the cognitive aspects of communication disorders (IV-G)
100. Demonstrates skill in selecting and administering appropriate evaluation procedures for the cognitive aspects of communication disorders (IV-G)
101. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for the cognitive aspects of communication disorders (IV-G)
102. Demonstrates skill in completing administrative and reporting functions to support evaluation for the cognitive aspects of communication disorders (IV-G)
103. Demonstrates skill in referring clients with cognitive-communicative disorders for appropriate services (IV-G)
104. Demonstrates skill in screening and prevention procedures during evaluation of the social aspects of communication disorders (IV-G)
105. Demonstrates skill in collecting and integrating case history information during evaluation of the social aspects of communication disorders (IV-G)
106. Demonstrates skill in selecting and administering appropriate evaluation procedures for the social aspects of communication disorders (IV-G)
107. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for the social aspects of communication disorders (IV-G)
108. Demonstrates skill in completing administrative and reporting functions to support evaluation for the social aspects of communication disorders (IV-G)
109. Demonstrates skill in referring clients with social-communicative disorders for appropriate services (IV-G)
110. Demonstrates skill in screening and prevention procedures during evaluation of communication modalities (IV-G)
111. Demonstrates skill in selecting and administering appropriate evaluation procedures for communication modalities (IV-G)
112. Demonstrates skill in interpreting, integrating, and synthesizing evaluation information for communication modalities (IV-G)
113. Demonstrates skill in completing administrative and reporting functions to support evaluation for communication modalities (IV-G)
114. Demonstrates skill in referring clients with disorders affecting communication modalities for appropriate services (IV-G)
115. Demonstrates skill in developing setting-appropriate intervention plans for clients with articulation disorders (IV-G)
116. Demonstrates skill in selecting and developing appropriate intervention materials for clients with articulation disorders (IV-G)
117. Demonstrates skill in measuring and evaluating performance for clients with articulation disorders (IV-G)
118. Demonstrates skill in modifying intervention plans for clients with articulation disorders (IV-G)
119. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with articulation disorders (IV-G)
120. Demonstrates skill in identifying and referring clients with articulation disorders for appropriate services (IV-G)
121. Demonstrates skill in developing setting-appropriate intervention plans for clients with fluency disorders (IV-G)
122. Demonstrates skill in implementing intervention plans for clients with fluency disorders (IV-G)
123. Demonstrates skill in selecting and developing appropriate intervention materials for clients with fluency disorders (IV-G)
129. Demonstrates skill in measuring and evaluating performance for clients with fluency disorders (IV-G)
130. Demonstrates skill in modifying intervention plans for clients with fluency disorders (IV-G)
131. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with fluency disorders (IV-G)
132. Demonstrates skill in identifying and referring clients with fluency disorders for appropriate services (IV-G)
133. Demonstrates skill in developing setting-appropriate intervention plans for clients with voice and resonance disorders (IV-G)
134. Demonstrates skill in implementing intervention plans for clients with voice and resonance disorders (IV-G)
135. Demonstrates skill in selecting and developing appropriate intervention materials for clients with voice and resonance disorders (IV-G)
136. Demonstrates skill in measuring and evaluating performance for clients with voice and resonance disorders (IV-G)
137. Demonstrates skill in modifying intervention plans for clients with voice and resonance disorders (IV-G)
138. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with voice and resonance disorders (IV-G)
139. Demonstrates skill in identifying and referring clients with voice and resonance disorders for appropriate services (IV-G)
140. Demonstrates skill in developing setting-appropriate intervention plans for clients with receptive and expressive language disorders (IV-G)
141. Demonstrates skill in implementing intervention plans for clients with receptive and expressive language disorders (IV-G)
142. Demonstrates skill in selecting and developing appropriate intervention materials for clients with receptive and expressive language disorders (IV-G)
143. Demonstrates skill in measuring and evaluating performance for clients with receptive and expressive language disorders (IV-G)
144. Demonstrates skill in modifying intervention plans for clients with receptive and expressive language disorders (IV-G)
145. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with receptive and expressive language disorders (IV-G)
146. Demonstrates skill in identifying and referring clients with receptive and expressive language disorders for appropriate services (IV-G)
147. Demonstrates skill in developing setting-appropriate intervention plans for clients with hearing disorders (IV-G)
148. Demonstrates skill in implementing intervention plans for clients with hearing disorders (IV-G)
149. Demonstrates skill in selecting and developing appropriate intervention materials for clients with hearing disorders (IV-G)
150. Demonstrates skill in measuring and evaluating performance for clients with hearing disorders (IV-G)
151. Demonstrates skill in modifying intervention plans for clients with hearing disorders (IV-G)
152. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with hearing disorders (IV-G)
153. Demonstrates skill in identifying and referring clients with hearing disorders for appropriate services (IV-G)
154. Demonstrates skill in developing setting-appropriate intervention plans for clients with swallowing disorders (IV-G)
155. Demonstrates skill in implementing intervention plans for clients with swallowing disorders (IV-G)
156. Demonstrates skill in selecting and developing appropriate intervention materials for clients with swallowing disorders (IV-G)
157. Demonstrates skill in measuring and evaluating performance for clients with swallowing disorders (IV-G)
158. Demonstrates skill in modifying intervention plans for clients with swallowing disorders (IV-G)
159. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with swallowing disorders (IV-G)
160. Demonstrates skill in identifying and referring clients with swallowing disorders for appropriate services (IV-G)
161. Demonstrates skill in developing setting-appropriate intervention plans for clients with cognitive-communicative disorders (IV-G)
162. Demonstrates skill in implementing intervention plans for clients with cognitive-communicative disorders (IV-G)
163. Demonstrates skill in selecting and developing appropriate intervention materials for clients with cognitive-communicative disorders (IV-G)
164. Demonstrates skill in measuring and evaluating performance for clients with cognitive-communicative disorders (IV-G)
165. Demonstrates skill in modifying intervention plans for clients with cognitive-communicative disorders (IV-G)
166. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with cognitive-communicative disorders (IV-G)
167. Demonstrates skill in identifying and referring clients with cognitive-communicative disorders for appropriate services (IV-G)
168. Demonstrates skill in developing setting-appropriate intervention plans for clients with social-communicative disorders (IV-G)
169. Demonstrates skill in implementing intervention plans for clients with social-communicative disorders (IV-G)
170. Demonstrates skill in selecting and developing appropriate intervention materials for clients with social-communicative disorders (IV-G)
171. Demonstrates skill in measuring and evaluating performance for clients with social-communicative disorders (IV-G)
172. Demonstrates skill in modifying intervention plans for clients with social-communicative disorders (IV-G)
173. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with social-communicative disorders (IV-G)
174. Demonstrates skill in identifying and referring clients with social-communicative disorders for appropriate services (IV-G)
175. Demonstrates skill in developing setting-appropriate intervention plans for clients with communication modality disorders (IV-G)
176. Demonstrates skill in implementing intervention plans for clients with communication modality disorders (IV-G)
177. Demonstrates skill in selecting and developing appropriate intervention materials for clients with communication modality disorders (IV-G)
178. Demonstrates skill in measuring and evaluating performance for clients with communication modality disorders (IV-G)
179. Demonstrates skill in modifying intervention plans for clients with communication modality disorders (IV-G)
180. Demonstrates skill in completing administrative and reporting functions to support intervention for clients with communication modality disorders (IV-G)
181. Demonstrates skill in identifying and referring clients with communication modality disorders for appropriate services (IV-G)
182. Demonstrates the ability to communicate effectively (IV-G)
183. Demonstrates the ability to collaborate with other professionals in case management (IV-G)
184. Demonstrates the ability to provide counseling regarding communication and swallowing disorders (IV-G)
185. Demonstrates adherence to the ASHA Code of Ethics (IV-G)
186. Demonstrates knowledge of standards of ethical conduct (III-E)
187. Demonstrates knowledge of research processes and integration with evidence-based practice (III-F)
188. Demonstrates knowledge of contemporary professional issues (III-G)
189. Demonstrates knowledge of certification, specialty recognition, licensure, and other relevant professional credentials (III-H)
190. Demonstrates knowledge and skill working with clients from culturally/linguistically diverse backgrounds and across the life span (IV-F)
Appendix B
Sample Syllabus with KASA Outcomes

COMD 498
Seminar in Articulation and Phonological Disorders

Term: Winter 2007 (January 8 - March 23)
Fridays, 9:00 – 11:00 am
Credits: 2
Instructor: Donald R. Fuller
Office: Health Sciences Building, Room 125R
Telephone: (509) 368-6889
E-mail: dfuller@mail.ewu.edu
Office hours: By appointment

Purpose of the Course:
This course is specifically designed for post-baccalaureate students to introduce them to aspects of normal and atypical phonological development as well as the assessment and treatment of articulation and phonological disorders. The course will follow a seminar format and will consist of lectures, student presentations, and discussions.

Course Objectives:
At the end of this course the learner will be able to:

- describe normal and atypical phonological development
- describe differences between articulation and phonological disorders
- describe and give examples of common articulation and phonological errors among children
- take a detailed case history pertaining to articulation and phonological disorders
- administer at least three (3) different types of articulation tests and interpret the results
- elicit a speech sample and perform a phonological analysis of the sample using existing phonological tests and informal phonological process analysis
- classify phonological errors by using the voice-place-manner approach, the phonological approach, and the distinctive feature approach
- perform an oral peripheral examination (OPE)
- use common stimulation techniques to elicit improved speech sound productions
- perform a complete diagnosis of a sample of sound production errors and prioritize therapy goals for the case
- describe main stages and procedures of the following therapy approaches: traditional minimal pairs, cycles, metaphor, and imagery approach
- write a basic therapy plan for a traditional and a phonological approach

Textbook:

Assessment of Student Learning:

1. Each student will present at least one articulation or phonology test in class. This assignment has a value of 100 points (20% of the final grade).

2. Each student will present a number of articulation and/or phonology intervention strategies in class. This assignment has a value of 100 points (20% of the final grade).

3. Each student will integrate information from a case study and design an effective therapy approach for the case study, including therapy objectives. This assignment will be presented to the rest of the class.
This assignment has a value of 100 points (20% of final grade). More information will be provided about this assignment in class.

(4) Each student will take a written midterm and final examination; each exam has a value of 100 points (each exam is 20% of the final grade; both exams are 40% of the final grade).

There are 500 points possible for this course. Final grades will be determined according to the following scale:

<table>
<thead>
<tr>
<th>Point Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>495 – 500</td>
<td>4.0</td>
</tr>
<tr>
<td>482 – 494</td>
<td>3.9</td>
</tr>
<tr>
<td>470 – 481</td>
<td>3.8</td>
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<tr>
<td>463 – 469</td>
<td>3.7</td>
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<tr>
<td>454 – 462</td>
<td>3.6</td>
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<tr>
<td>447 – 453</td>
<td>3.5</td>
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<tr>
<td>440 – 446</td>
<td>3.4</td>
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<tr>
<td>431 – 439</td>
<td>3.3</td>
</tr>
<tr>
<td>423 – 430</td>
<td>3.2</td>
</tr>
<tr>
<td>415 – 422</td>
<td>3.1</td>
</tr>
<tr>
<td>406 – 414</td>
<td>3.0</td>
</tr>
<tr>
<td>398 – 405</td>
<td>2.9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Point Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>390 – 397</td>
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<tr>
<td>383 – 389</td>
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<tr>
<td>374 – 382</td>
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<td>367 – 373</td>
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<tr>
<td>360 – 366</td>
<td>2.4</td>
</tr>
<tr>
<td>352 – 359</td>
<td>2.3</td>
</tr>
<tr>
<td>346 – 351</td>
<td>2.2</td>
</tr>
<tr>
<td>340 – 345</td>
<td>2.1</td>
</tr>
<tr>
<td>330 – 339</td>
<td>2.0</td>
</tr>
<tr>
<td>320 – 329</td>
<td>1.9</td>
</tr>
<tr>
<td>310 – 319</td>
<td>1.8</td>
</tr>
<tr>
<td>303 – 309</td>
<td>1.7</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Point Range</th>
<th>Grade</th>
</tr>
</thead>
<tbody>
<tr>
<td>297 – 302</td>
<td>1.6</td>
</tr>
<tr>
<td>291 – 296</td>
<td>1.5</td>
</tr>
<tr>
<td>285 – 290</td>
<td>1.4</td>
</tr>
<tr>
<td>276 – 284</td>
<td>1.3</td>
</tr>
<tr>
<td>268 – 275</td>
<td>1.2</td>
</tr>
<tr>
<td>260 – 267</td>
<td>1.1</td>
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<tr>
<td>253 – 259</td>
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</tr>
<tr>
<td>247 – 252</td>
<td>0.9</td>
</tr>
<tr>
<td>241 – 246</td>
<td>0.8</td>
</tr>
<tr>
<td>235 – 240</td>
<td>0.7</td>
</tr>
<tr>
<td>0 – 234</td>
<td>0.0</td>
</tr>
</tbody>
</table>

A missed assignment or examination can be made up with approval of the instructor if the absence is due to personal illness or bona fide family emergency. The instructor reserves the right to determine the legitimacy of an absence. Any missed assignment or examination that has been determined to be unexcused will be graded as a zero (0).

**ASHA Knowledge and Skills Outcomes:**

This course addresses the following knowledge outcomes from the Knowledge and Skills Acquisition (KASA) form:

- 6. Linguistic basis of the basic human communication processes (III-B)
- 13. Etiologies of articulation disorders (III-C)
- 14. Characteristics of articulation disorders (III-C)
- 30. Prevention of articulation disorders (III-D)
- 31. Assessment of articulation disorders (III-D)
- 32. Intervention of articulation disorders (III-D)

**Assessment of Knowledge and Skills Outcomes:**

The examinations and clinic observation reports will also be used to assess the student's mastery of the KASA knowledge outcomes. The following table summarizes which outcomes will be evaluated through the various assessment tools:

<table>
<thead>
<tr>
<th>Form of Assessment</th>
<th>Outcomes Addressed</th>
<th>Successful Performance Results in:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Midterm Examination</td>
<td>6  13  14  30</td>
<td>&quot;In progress&quot;</td>
</tr>
<tr>
<td>Final Examination</td>
<td>31  32</td>
<td>&quot;In progress&quot;</td>
</tr>
<tr>
<td>Articulation/Phonology Test Assignment</td>
<td>6  31</td>
<td>&quot;In progress&quot;</td>
</tr>
<tr>
<td>Articulation/Phonology Intervention Strategy Assignment</td>
<td>6  32</td>
<td>&quot;In progress&quot;</td>
</tr>
<tr>
<td>Case Study Assignment</td>
<td>6  31  32</td>
<td>&quot;In progress&quot;</td>
</tr>
</tbody>
</table>

**Student Assistance Plan:**

Should the student experience difficulty with any of the knowledge outcomes for this course, the instructor will provide an assistance plan for that student. If the student does not reach the established criterion for at least one activity used to assess a particular KASA outcome, that student will be counseled by the instructor and an Academic Assistance Plan will established. Should the student meet the expectations of the Academic Assistance Plan while the course is still being taken, the proper notation will be made by the instructor on an Academic Assistance Plan Progress Note. Upon completion of the course, if the student has any KASA outcomes that have not been successfully addressed,
an Academic Assistance Plan will be established in consultation with the instructor and the student will be expected to successfully complete the plan outside of the classroom setting within the time frame listed on the Academic Assistance Plan.

If the student earns a final grade less than 2.4 (i.e., a grade lower than a B-), the student will be judged as not having made sufficient progress in successfully addressing the KASA outcomes for this course. The academic assistance plan then, will involve the student retaking the course at its next offering.

More detailed information about the Academic Assistance Plan can be found in the document entitled COMD Student Assistance Plan. This document is available on the department web site at http://www.ewu.edu/commdisorders.

**Policy Concerning Academic Integrity:**

Academic dishonesty, including all forms of cheating, plagiarism, and fabrication is strictly prohibited and will not be tolerated. Knowingly facilitating academic dishonesty is also prohibited. A single violation of this policy will result in an automatic failing grade (0.0) for the course. Other sanctions may also be imposed by department faculty.

**Accommodations for Students with Disabilities:**

Reasonable accommodations are available for students who have a documented disability. Please notify the instructor during the first week of class if any accommodations are needed. Late notification may delay or make the requested accommodation unavailable.

**Tentative Schedule of Classes:**

<table>
<thead>
<tr>
<th>Date</th>
<th>Topic(s)</th>
<th>Reading Assignment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 12</td>
<td>Course Overview</td>
<td>Chapter 2 (pp. 50-98)</td>
</tr>
<tr>
<td></td>
<td>Review of Phonetics</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Articulation vs. Phonology</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Traditional Place/Manner</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Distinctive Features</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Phonological Processes</td>
<td></td>
</tr>
<tr>
<td>Jan 19</td>
<td>Development</td>
<td>Chapter 3 (pp. 120-162)</td>
</tr>
<tr>
<td></td>
<td>• Articulation and Phonology</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Phonological Awareness</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Acquisition of Reading</td>
<td></td>
</tr>
<tr>
<td>Jan 26</td>
<td>Articulation and Phonological Disorders</td>
<td>Chapters 4-5 (pp. 176-241)</td>
</tr>
<tr>
<td></td>
<td>Dialectal and Cultural Variations</td>
<td></td>
</tr>
<tr>
<td>Feb 2</td>
<td>Assessment</td>
<td>Chapter 6 (pp. 253-326)</td>
</tr>
<tr>
<td>Feb 9</td>
<td><strong>Midterm Examination [Chs. 2, 3, 4, &amp; 5]</strong></td>
<td></td>
</tr>
<tr>
<td>Feb 16</td>
<td>Assessment (continued)</td>
<td></td>
</tr>
<tr>
<td>Feb 23</td>
<td><strong>Artic Test &quot;Show and Tell&quot;</strong></td>
<td></td>
</tr>
<tr>
<td>Mar 2</td>
<td>Intervention</td>
<td>Chapter 7 (pp. 379-454)</td>
</tr>
<tr>
<td>Date</td>
<td>Topic(s)</td>
<td>Reading Assignment</td>
</tr>
<tr>
<td>-------</td>
<td>-----------------------------------</td>
<td>--------------------------</td>
</tr>
<tr>
<td>Mar 9</td>
<td>Intervention (continued)</td>
<td>Chapter 8 (pp. 476-528)</td>
</tr>
<tr>
<td>Mar 16</td>
<td>Intervention Presentations</td>
<td></td>
</tr>
<tr>
<td>Mar 23</td>
<td><strong>Final Examination [Chs. 6, 7, &amp; 8]</strong>&lt;br&gt;Case Studies Due</td>
<td></td>
</tr>
</tbody>
</table>
The purpose of this Academic Assistance Plan is to inform you that you have not successfully met all of the KASA outcomes listed for the course COMD________. This plan documents that a deficiency exists and outlines the assignment(s) required for you to meet the KASA course objectives for which a deficiency exists.

The following KASA outcomes were not met in relation to the above named course:

Academic Assistance Plan Objectives (completed by the instructor, in consultation with the department chair and the student’s academic advisor) include:

1. 
2. 
3. 

Timeline: The above activities/assignments will be completed by ________________.

If the outcomes are successfully met as outlined above and by the date specified, a progress note will be completed by your instructor and placed in your KASA student file. Course objectives will be documented as “met” on an academic assistance plan progress note.

If outcomes are not successfully completed, a second academic assistance plan will be developed and completed. If deficiencies are not corrected following two academic assistance plans, the student will be required to retake the course.

Student Signature ____________________________ Date __________________
Instructor Signature __________________________ Date __________________
Student Advisor Signature ______________________ Date __________________
Department Chair Signature ____________________ Date __________________
APPENDIX D

EASTERN WASHINGTON UNIVERSITY
Department of Communication Disorders
Academic Assistance Plan Progress Note

Student ____________________________________________________________
Instructor ___________________________________________ Date __________
Department Chair ___________________________ Academic Advisor ___________
Course: COMD ____________

The purpose of this Progress Note is to inform you that your instructor has approved your KASA Academic Assistance Plan assignment(s).

Congratulations! You have successfully met the KASA outcome(s) as identified by the Academic Assistance Plan dated ____________________________.

A copy of this progress note will be placed in your KASA student file. The KASA outcomes in question will receive the appropriate documentation on your KASA tracking form.

Student Signature ___________________________ Date __________
Instructor Signature ___________________________ Date __________
Department Chair Signature ___________________________ Date __________
Academic Advisor Signature ___________________________ Date __________
APPENDIX E

Eastern Washington University
University Hearing and Speech Clinic
Clinical Assistance Plan

Student Clinician: ___________________________________________ Date: ______________________
Clinical Supervisor: _________________________________________ Academic Advisor: __________________

The purpose of this Clinical Improvement Plan is to inform you that your clinical supervisor(s) have identified one or more concerns regarding your clinical performance and to outline goals for improvement. This note serves as a document to indicate that a deficiency exists and to convey the importance of correcting this deficiency prior to placement in an off-site practicum.

The concerns regarding your clinical performance are specified below:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

Performance Objectives (completed by the student, clinical supervisor(s) and the Clinical Director):

1. ____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

2. ____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

3. ____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

If the concerns are not corrected and/or a final grade of B- or below is earned, you will be placed on clinical probation for the following block. If the deficiency is corrected, a progress note will be completed by your supervisor(s) indicating satisfactory performance in the areas of concern.

Student Signature ___________________________________________ Date ______________________
Clinical Supervisor Signature ___________________________________________ Date ______________
Clinical Director Signature ___________________________________________ Date ______________
The purpose of this Progress Note is to inform you that your clinical supervisor(s) has/have evaluated your current clinic performance as satisfactory.

Congratulations! You have made substantial progress on the clinical deficiencies noted on the Clinical Improvement Plan dated ____________________________.

Congratulations! You have satisfactorily met the objectives established for your probationary term, ____________________________.

You are to be commended for improving your clinical performance. If you have any questions, please schedule an appointment with your clinical supervisor(s) and/or the Clinical Director.

Student Clinician Signature __________________________________________ Date ______________________

Supervisor Signature __________________________________________ Date ______________________

Supervisor Signature __________________________________________ Date ______________________

Supervisor Signature __________________________________________ Date ______________________

Clinical Director Signature __________________________________________ Date ______________________