The University of Maine DigitalCommons@UMaine

Faculty and Staff Monograph Publications

1-2015

University of Maine, Speech Therapy Telepractice and Technology Program Manual

Judy Perkins Walker judy.perkins.walker@umit.maine.edu

Follow this and additional works at: https://digitalcommons.library.umaine.edu/fac_monographs

Part of the Communication Sciences and Disorders Commons, Psychiatry and Psychology
Commons, Social Work Commons, and the Special Education and Teaching Commons

Recommended Citation

Perkins Walker, Judy, "University of Maine, Speech Therapy Telepractice and Technology Program Manual" (2015). Faculty and Staff Monograph Publications. 220.

https://digitalcommons.library.umaine.edu/fac monographs/220

This Book is brought to you for free and open access by DigitalCommons@UMaine. It has been accepted for inclusion in Faculty and Staff Monograph Publications by an authorized administrator of DigitalCommons@UMaine. For more information, please contact um.library.technical.services@maine.edu.



Speech Therapy Telepractice and Technology Graduate Student Training Program Manual

Developed by: Judy P. Walker, Ph.D., CCC-SLP, Department of Communication Sciences and Disorders Madelyn E. and Albert D. Conley Speech-Language-Hearing Center at the University of Maine

umaine.edu/telespeech

To learn more about the University of Maine telepractice training program, contact:

The Madelyn E. and Albert D. Conley Speech, Language and Hearing Center University of Maine
Department of Communication Sciences and Disorders
5724 Dunn Hall, Orono, ME 04469-5724

Phone: 207.581.2006 Fax: 207.581.2060

Email: lynn.kelley@umit.maine.edu Website: umaine.edu/telespeech

Copyright and Reprint Authorization:

Copyright © 2014 Judy P. Walker. All rights reserved. To reprint portions or excerpts of this publication, fax or email your request to the Madelyn E. and Albert D. Conley Speech, Language and Hearing Center.

ISBN 978-0-692-36881-7

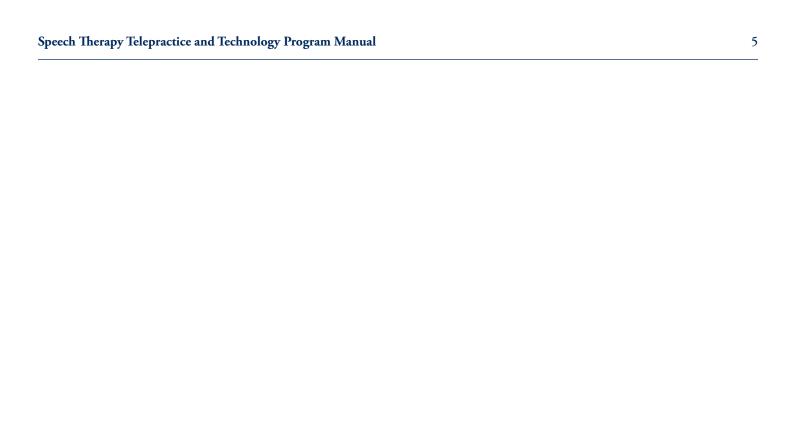
Note: The author does not have a financial relationship with any company whose products or services are mentioned in this manual.

The University of Maine does not discriminate on the grounds of race, color, religion, sex, sexual orientation, including transgender status and gender expression, national origin, citizenship status, age, disability, genetic information or veteran status in employment, education, and all other programs and activities. The following person has been designated to handle inquiries regarding nondiscrimination policies: Director, Office of Equal Opportunity, 101 North Stevens Hall, 207.581.1226.

Table of Contents

Ackno	wledgments	5
I.	Speech Therapy Telepractice Fact Sheet	6
II.	Training Program Overview	7
	A. Rationale	7
	B. Mission	
	C. Benefits	7
III.	Technology	8
	A. Space, Equipment and Supplies	8
	B. Application	
	C. Security	
IV.	Program Design	9
	A. Components	
	B. Scheduling	10
	C. Tele-ethics, Policies for Confidentiality	10
V.	Student Preparation	10
	A. Student Eligibility Requirements	
	B. Intensive Training	
	C. Clinical Practicum	
	1. Intake/Client Selection	11
	2. Candidacy for Telepractice	
	3. Evaluation	
	4. Plan of Care	
	5. Treatment	
	6. Progress Reports	
	D. Individual Supervisor Conferences and Discussion Groups	
	E. Achieving Clinical Competencies	
	F. Student Self-Evaluation	12
	G. Student Practicum Documentation	12
VI.	Supervision	12
	A. Qualifications	12
	B. Supervision of Sessions	12
	C. Supervisory Conference and Discussion Groups	12
	D. Student Evaluation	12
	E. Supervisor Evaluation	12
VII.	Measuring Outcomes	12
	A. Client Outcomes	12
	B. Student Outcomes	12
	C. eHelper Outcomes	12
	D. Telepractice Outcomes	12
VIII.	References and Resources	13
IX.	Appendices	
	A. Clinical Practicum Forms	14
	1. Request for Service	
	2. Informed Consent	
	3. Child Case History	
	4. Adult Case History	
	5. Technology Checklist	
	6. Speech-Language Pathology Evaluation	
	7. Plan of Care	
	8. Telepractice Lesson Plan	
	9. Daily Progress Notes	35

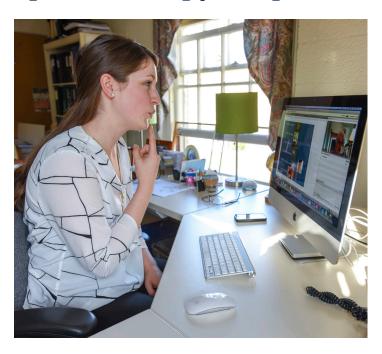
10. Progress Report	36
11. Practicum Evaluation	
B. Supervisor Evaluation Form	
1. Supervisor Evaluation	
C. Measuring Outcomes Forms	
1. eHelper Competencies	
2. Consumer Satisfactions.	
2. 001041101 04401401010	



ACKNOWLEDGMENTS

I am grateful to the clinical staff at the Waldo County General Hospital, Belfast, Maine who have been instrumental in serving as consultants on this program. They are nationally recognized leaders in both speech therapy telepractice and the delivery of speech therapy services. In particular, I would like to thank Michael Towey, Nathan Curtis and Jennifer Whitcomb. I also want to recognize my colleagues Judy Stickles, Casey Monnier, MaryBeth Richards and telepractice graduate students for their contributions to this program.

Speech Therapy Telepractice Fact Sheet



Telepractice is "the application of telecommunications technology to the delivery of speech-language pathology or audiology professional services at a distance by linking clinician to client/patient, or clinician to clinician, for assessment, intervention and/or consultation."

American Speech-Language-Hearing Association (2013)

- Many children and adults living in Maine who have communication disorders do not receive speech therapy.
 Rural geography, a shortage of qualified speech-language pathologists, inadequate/costly transportation and inclement weather create significant challenges in reaching children and adults in need of services.
- In response, an innovative graduate-level telepractice training program in speech-language pathology has been developed at the University of Maine Department of Communication Sciences and Disorders (CSD).
- Speech therapy telepractice is an efficient way of providing services in a predominantly rural state and it is extremely cost effective in providing the kind of services necessary for children and adults with communication disorders.
- The Department of CSD has the only graduate program in speech-language pathology in Maine. CSD faculty have a broad range of expertise in several areas of communication sciences and disorders.
- This training program is one of the first in the country to teach telepractice as a service delivery model to future speechlanguage pathologists.
- This training program complies with American Speech-Language-Hearings Association (ASHA) (2013) competency guidelines for the provision of telepractice services and adheres to state and federal regulations for privacy and confidentiality.
- This training program aligns itself perfectly with the Maine Health Plan and national goals. Nationally, \$700 billion in savings is expected over the next 15–20 years from health/broadband initiatives (Monegain, 2010).



"The speech therapy telepractice program was extremely helpful to my wife. With assistance (from UMaine telepractice), she has improved in her ability to communicate. Because of the therapy provided, she regained confidence in her ability to communicate."

Bob Jackson about his wife Kathy

Training Program Overview

A. Rationale

Many children and adults with communication disorders, who live in Maine, do not receive speech therapy. Rural geography, a shortage of qualified speech-language pathologists, inadequate/costly transportation and inclement weather create significant challenges in reaching people in need of services. In response to this problem, an innovative graduate-level telepractice training program in speech-language pathology has been developed at the University of Maine Department of Communication Sciences and Disorders (CSD).

This training program is one of the first in the country to teach telepractice as a service delivery model for future speech-language pathologists. The University of Maine has the only graduate program in communication sciences and disorders in the state. CSD faculty have extensive administrative, clinical and training experience in speech-language pathology.

Telepractice is a workforce multiplier providing an efficient way to deliver services in a predominantly rural state. Additionally, telepractice is extremely cost effective in providing the kind of speech therapy services necessary for children and adults with communication disorders. For instance, several facilities can pool their resources to hire one speech-language pathologist who is capable of providing speech therapy to multiple geographical locations. Telepractice is the future in health care delivery. This program has the potential to make a significant impact in the state and the country and aligns perfectly with the Maine Health Plan and national goals.

What we do at a glance



B. Mission

- To provide the highest quality training of graduate students in communication sciences and disorders for the delivery of speech therapy telepractice and technology in compliance with the ASHA (2013) standards, state and federal laws and licensing pertaining to telemedicine.
- To provide the highest quality speech therapy to children and adults with communication disorders in need of services throughout Maine by overcoming any potential barriers through the use of technology.
- To promote efficiency in delivering speech therapy as a
 workforce multiplier where one speech-language pathologist
 can provide services to multiple facilities and clients/patients,
 eliminating the time consuming commute across broad
 geographical regions.
- To promote cost effectiveness in providing speech therapy services. With this model, several facilities can pool their resources to hire one speech-language pathologist, as they are not bound by geographical proximity.
- To partner with community and state organizations in Maine to build statewide telehealth networks.
- To promote self-sufficiency and carry-over by training eHelpers and other support systems within any setting receiving speech therapy telepractice services.
- To promote the use of technology for building communication networks between individuals with communication disorders and their support systems.

C. Benefits

Quality of competencies: This training program is one of the first in the country to teach telepractice as a service delivery model to future speech-language pathologists. The program complies with the ASHA (2013) guidelines in demonstrating competencies in the acquisition of knowledge and skills in telepractice services. Speech-language pathologists who participate in the University of Maine telepractice program will be competent in using this service delivery model to effectively treat children and adults with communication disorders.

Improve efficiency: This training program is a step in the right direction in solving the critical shortage of speech-language pathologists in Maine, nationally and internationally to better serve the children and adults in need of services. The use of telepractice creates a workforce multiplier where future speech-language pathologists can be more efficient in their service delivery via remote access and expand services to larger numbers of children and adults in multiple locations (e.g., schools, health care facilities, home). Because travel time is eliminated, one speech-language pathologist can treat more children and adults using telepractice than would

be possible in the traditional therapy model requiring the speech therapist to travel between locations.

Improve accessibility: Telepractice improves accessibility of services to children and adults, who otherwise may be inaccessible given the rural geography and inclement weather. Additionally, caregivers, teachers, parents and other professionals involved in the patient's program can observe the patient's therapy in real time via remote access from any location.

Cost effective: Speech-language pathologists trained at the University of Maine will be able to implement speech telepractice services at a minimal cost to insurance companies, schools, health care facilities, and individuals using existing computers, Internet connections and a secure Web-based video conferencing system. Nationally, \$700 billion in savings is expected over the next 15–20 years from health/broadband initiatives, spurred on by \$795 million in federal dollars to support rural broadband development (Monegain, 2010).

Other advantages: People like technology. Speech therapy telepractice uses a medium that is highly motivating, especially to children, and is already familiar to them. Starting in pre-school, children are connected to a variety of media (e.g., cell phones, tablets, game consoles, social media, virtual games) making this technology present everywhere children live, learn and play. Adults use technology in aspects of their work and for social networking.

Emerging evidence of speech therapy telepractice indicates that this application is as beneficial as a traditional on-site service delivery model for different patient populations. For example, a systematic review of telepractice assessment and treatment of individuals with aphasia indicated that these patients showed improvement from telepractice procedures (Hall et al., 2013). Other research has shown that children with stuttering impairments (e.g., Wilson, Onslow & Lincoln, 2004) and speech disorders (e.g., Waite et al., 2006) have demonstrated excellent outcomes after receiving speech therapy telepractice services. Another study supports the validity and reliability of the assessment of children's literacy via a telepractice system (Waite et al., 2010). Parents, teachers and administrators in a rural school district in North Carolina were satisfied with the telepractice service delivery model for their school-based speech therapy and recommended this model to other school districts (Crutchley & Campbell, 2010).

Public schools, health care facilities and communities are increasingly well connected within and outside of Maine. Maine is known for its substantial investment in the Maine Learning Technology Initiative, which provides a laptop to every child in middle school. The state has also established the Maine School and Library Network providing Internet access and other Internet related services to almost 1,000 schools and libraries across the state. Health care facilities in the state are using telemedicine technology to share information between facilities. CSD graduates will be well trained and familiar with the statewide plans to develop and use information technology infrastructure.

Technology

A. Space, Equipment and Supplies

Space: The Madelyn E. and Albert D. Conley Speech, Language and Hearing Center (Conley Center) serves as the on-site training center and has private, secure therapy rooms to provide telepractice services. Each room is located in a quiet environment and has excellent lighting to ensure optimal audio and video quality during sessions.

Equipment: This program does not require costly equipment as participants in this program use existing computers. The Conley Center is fully equipped with computers and Internet access. Students learn how to deliver speech therapy telepractice services on multiple platforms and mobile devices. The equipment currently used in the telepractice program includes the following:

- A Dell Precision T3500 workstation and microphone, headset, speakers and accessories which possess high quality audio and video capabilities
- An iMac 21.5-inch 2.7G HZ computer system with similar capabilities and one printer
- iPads and iPhones



Materials and Supplies: Telepractice materials are not readily available through commercial vendors or any other source. Therefore, telepractice materials are created digitally and stored on a shared website throughout the entire training cycle. These materials assure an available supply of appropriate speech therapy materials that can be used in speech therapy telepractice sessions. The materials cover all major speech and language disorders and are part of the ongoing archived supplies and materials that are being developed during this training program. Supplies include: digital assessment materials, DVDs, license rights for digital images and software, flash drives for storage and transporting of data. At the end of the telepractice training, these extensive archived materials continue to be available in the telepractice program for future training and therapy utilization by other graduate students in our program.

B. Application

Speech therapy services are provided at a small cost, using existing computers and Internet connections connected to the secure Web-hosted Cisco WebEx Connect video conferencing system (webex.com). The WebEx Connect system employs a Web 2.0 digital interactive approach where the speech-language pathologist manipulates digital speech therapy materials on a computer in one location, while the client simultaneously manipulates the same materials as his/her computer in any location.

Cisco WebEx Meeting Center offers a rich, real-time collaborative Web therapy session with a powerful feature set for productive and efficient sessions anytime, anywhere on any device. Some of the unique features are as follows:

- *File, application, and desktop sharing:* Users can easily collaborate during sessions while sharing audio and video
- *Comprehensive multimedia experience:* Users can share video files in real time and incorporate multimedia in therapy sessions
- *Real-time video for several participants:* WebEx provides multiple, simultaneous webcam video feeds with voice-activated switching. Up to 25 people can view and/or participate in the session in real-time
- High-definition video: The HD video with up to 720p screen resolution provides exceptional clear images of the people and materials

C. Security

Cisco WebEx Connect is a secure Web-hosted encrypted (128-bit SSL) video conferencing system that ensures privacy of therapy sessions in compliance with the Health Insurance Portability and Accountability Act (HIPAA, 1996) and other state and federal rules, standards and regulations. (See Cisco WebEx webex.com for more information).

Program Design

A. Components

The Department of Communication Sciences and Disorders at the University of Maine serves as the on-site training center and owns all of the necessary computer equipment and technology to support the telepractice program. The principal program staff consists of two CSD faculty members who have extensive administrative and training experience in speech-language pathology. One CSD faculty member is the program coordinator. She oversees program operations, is the intensive training instructor and supervises students in telepractice clinical practicum. The other CSD faculty member is an instructor and supervisor.

The training program has three learning components: (1) Intensive Training, (2) Clinical Practicum, (3) Discussion Groups. These complementary activities are guided by ASHA (2013) requirements of knowledge and skills of speech-language pathologists in providing speech therapy telepractice clinical services.



Learning Component 1: Intensive Training. The program begins with intensive training, which is scheduled during the first week of each semester preceding the clinical practicum experience. Extensive classroom instruction and accompanying labs are provided to train students in all aspects of telepractice and technology. Students learn:

- The components of the video conferencing system
- The supporting software applications for developing digital materials
- Web-based content management of digital materials filming and editing recorded therapy sessions
- Training eHelpers
- Interpersonal skills for interacting with individual and multiple users
- Documentation
- Laws and regulations



Learning Component 2: Clinical Practicum. Upon completion of the intensive training, each student trainee provides telepractice services to children and/or adults at remote pilot sites during one semester of clinical practicum. Clinical practicum experiences are supervised by CSD faculty supervisors and scheduled over the duration of 16 week semesters (September–December; January–May) and six weeks during the summer (July–August). Speech therapy is delivered via the secure Cisco WebEx system, which operates on existing computers with web cams and online (high definition) video and audio connections. Therefore, remote sites use their current infrastructure to participate in this program. Students demonstrate competencies in the following areas of the telepractice service delivery model:

- Proficiency in using the video conferencing system and different types of technology
- Client selection
- Assessment
- Intervention
- Training and use of support personnel
- Outcomes measures
- Documentation
- Professional and interpersonal skills



Learning Component 3: Discussion Groups. Individual supervisory meetings between the CSD supervisor and graduate students are held weekly throughout the semester. A discussion group between the students in the telepractice clinical practicum and faculty supervisors is scheduled every other week as part of the experiential learning experience. Individuals within the group share learning experiences, give case presentations, develop new telepractice content, learn different types of technology and how to troubleshoot.

B. Scheduling

The administrative assistant at the Conley Center processes all incoming telepractice referrals. Clients who are deemed appropriate to participate in speech therapy telepractice are assigned to student clinicians in the telepractice clinical practicum. Students are responsible for scheduling telepractice sessions with clients at least three days prior to the session. Individual telepractice sessions are typically scheduled one time/week for 45 minutes to an hour. Group sessions are held every other week for one hour.

C. Tele-ethics, Policies for Confidentiality

Ethics: Graduate clinicians in this program are considered to be one of a team of professionals and will act accordingly. Every student is a representative of the Department of Communication Sciences and Disorders at the University of Maine and the profession of speech-language pathology. Therefore, it is expected that all students will adhere to the standards described in the ASHA Code of Ethics (2010). To ensure the highest quality of services, faculty supervisors will have the appropriate licensure, credentials and competency for training students in the telepractice service delivery model. All clients will be provided with information about the telepractice sessions and sign an informed consent form prior to the initiation of services.

Confidentiality: The telepractice training program adheres to the same laws for ensuring privacy and confidentiality that govern inperson service according to Family Educational Rights and Privacy Act (FERPA) (1974), Health Insurance Portability and Accountability Act of 1996 (HIPAA). Additionally the program adheres to the Health Information Technology (HITECH) (1996) guidelines, which expand HIPAA for the protection of electronic transmission.

The telepractice program uses Cisco WebEx Connect, which is a secure Web-hosted encrypted (128-bit SSL) video conferencing

system that ensures privacy of therapy sessions in compliance with HIPAA and other state and federal rules, standards and regulations.

Specific rules that must be followed at all times to ensure client confidentiality are as follows:

- All electronic files are to be kept on secure password protected computers that are designated for telepractice. Hard copy folders are locked in a filing cabinet in the central office of the Conley Center.
- 2. No client identifying information is allowed in any type of electronic transmissions. Use only the client's initials.
- 3. Recordings of the sessions are to be stored on the secure password protected computers that are designated for telepractice. Treat these recordings as part of the client's medical record and protect the privacy of the client.
- 4. Therapy sessions are to be held only through the Cisco WebEx Connect video conferencing system. Do not use any other unsecure sites (e.g., Skype, social media) to conference with a client.
- 5. Do not save client identifying information on any computers, devices or other media that is not designated for the telepractice program.
- 6. Telepractice sessions must be held in private, secure sites by the host, client and any other attendees.
- 7. Do not discuss any clients in hallways or any other public area. Meetings with supervisors and group discussions are held in private areas.
- 8. Prior to the initiation of speech therapy telepractice, clients must be provided with information about the delivery of telepractice services and give consent for treatment.

Student Preparation

A. Student Eligibility Requirements

In order to participate in the telepractice training program, graduate students must have experienced at least one semester of clinical practicum in the on-campus Conley Center. The students must exhibit the requisite essential functions in communication, motor, intellectual-cognitive, sensory-observational and behavioral-social areas to acquire the knowledge and skills to deliver telepractice speech therapy services (CAPCSD, 2007).

B. Intensive Training

Students will enroll in an intensive training to be conducted during the first week of the clinical practicum. In this training, students will demonstrate their knowledge of all aspects of speech therapy telepractice in a classroom setting and through lab experiences.

Student learning outcomes include:

- 1. Students will summarize the benefits and limitations of using telepractice.
- 2. Students will summarize competencies for speech therapy telepractice and the rules and regulations governing the safety and secure use of telepractice.

- 3. Students will describe the tools and methods for using the video conferencing systems and demonstrate the use of the following components of the system in hypothetical evaluation and treatment sessions.
 - Schedule, start, maintain and end each session
 - Use interactive video systems without interfering with service delivery
 - Develop and incorporate digital materials into the video system
 - Open and switch between materials, web-based tools, desktop and documents, and incorporate websites
 - Share the presenter status
 - Record and edit sessions
 - Use cross platform and mobile Web-based devices
 - Sharing and transferring digital files
- 4. Students will demonstrate three interpersonal techniques to engage clients in speech telepractice.
- Students will demonstrate an evaluation of eHelper competencies and three techniques to enhance eHelper facilitation of the session.
- 6. Students will write a prototype of an evaluation report, lesson plan and S.O.A.P. note for a hypothetical session.
- 7. Students will summarize different outcome measures and at least one study addressing telepractice outcomes.
- 8. Students will describe the impact of cultural and linguistic variables on the client's ability to benefit from telepractice.

C. Clinical Practicum

Students will demonstrate their knowledge and skills of speech therapy telepractice in one semester of clinical practicum under the supervision of a CSD clinical supervisor. (Templates and forms can be found in Appendix A).

- Intake/Client Selection: Prior to meeting with a client, students will be responsible for ensuring that the *Request For Service, Informed Consent* and *Case History* forms along with any medical records are in the client's file. This information will be reviewed to make a preliminary decision regarding whether the client is a good candidate for telepractice.
- **2. Candidacy for Telepractice:** The student will conduct an evaluation of the remote site using the *Technology Checklist* to determine if the location, technology, eHelper and client characteristics are adequate for engaging in speech telepractice.

3. Evaluation:

 An evaluation of the client will be conducted at the remote site and/or via telepractice. In addition to evaluating the communication abilities of the client, the clinician will also determine if the client has the appropriate physical, sensory, cognitive and technology capabilities to participate

- in speech therapy telepractice. The clinical supervisor will determine the format and location for the evaluation.
- The student will analyze and interpret the results and write an evaluation report following the *Evaluation Report* template.
- **4. Plan of Care:** Students will write a plan of care for the client based upon the evaluation results following the Plan of Care template.

5. Treatment:

- Students will develop digital therapy materials and conduct therapy sessions utilizing the knowledge and skills from the intensive training course.
- Weekly lesson plans will be written following the *Lesson Plan* template and will be submitted digitally to the supervisor at least three days prior to the session. Digital materials may accompany the lesson plan for review.
- Following each session, students will write a daily progress
 note that contains information regarding the parameters
 for using telepractice following the *Daily Progress Note*template. A digital copy of the daily progress note
 without client identifying information will be sent to the
 client with homework materials. A hard copy of the daily
 progress note will be signed by the supervisor and placed
 in the client's folder.
- **6. Progress Reports:** The student will write a progress report following the *Progress Report* template at the end of each semester and/or when the client is discharged from therapy. A hard copy of the progress report will be placed in the client's file and mailed to the client.

D. Individual Supervisory Conferences and Discussion Groups

Students will meet with the supervisor for an individual supervisory conference one time per week. The purpose of individual meetings is to review therapy sessions, prepare future sessions and discuss any issues related to the client and student performance. Students will also meet in a discussion group with peers every week. The purpose of the discussion group is to learn from each other by discussing cases and sharing experiences.

E. Achieving Clinical Competencies

Students will be provided with a *Speech Therapy Telepractice* and *Technology Practicum Evaluation* form at the beginning of the practicum (see Appendix A). This practicum evaluation form is specifically geared toward the acquisition of knowledge and skills in telepractice services following ASHA (2005; 2013) guidelines. Each student will be evaluated at the middle and end of each semester using a 0–5 point rating scale (failure to perform effectively–performs with high degree of independence). Areas that are evaluated include knowledge and skills in the:

- 1) Uses of technology
- 2) Types of technology

- 3) Client selection for telepractice
- 4) Assessments
- 5) Interventions
- 6) Cultural/linguistic variables
- 7) Evaluation of effectiveness and outcomes
- 8) Documentation
- 9) Licensure/malpractice, reimbursement, tele-ethics, confidentiality

F. Student Self-Evaluation

Students will be encouraged to informally critique their performance at the end of each therapy session. This critique will be used for discussion in the weekly supervisory conference in addition to the supervisor feedback. Students will also rate themselves at the middle and end-of-semester using the practicum evaluation form. The supervisor and student evaluations will be compared and discussed to note similarities and differences in the ratings. Both assessments form the basis of a mid and end-of-semester conference regarding the student's strengths and weaknesses.

G. Student Practicum Documentation

Students will be responsible for all documentation pertaining to the client. Students will also be responsible for tracking their clinical practicum clock hours and billing following the same procedures used for clients seen on-campus in the Conley Center.

Supervision

A. Qualifications

The UMaine CSD faculty supervise students in the telepractice clinical practicum. All supervisors have a graduate degree, a Maine license and ASHA certification of clinical competency. Supervisors are trained in speech therapy telepractice and have previous supervision experience and expertise in a broad array of communication disorders.

B. Supervision of Sessions

Clinical supervisors are required to observe students at least one-half of their therapy sessions with each assigned client. Supervision may take place in the on-campus site or via remote access from another location. Following each supervised session, the supervisor critiques the session in writing on the lesson plan form and returns it electronically to the student for review during the supervisory conference.

C. Supervisory Conferences and Discussion Groups

The supervisor schedules a weekly conference with each student to review the student's performance and the client's progress. During these conferences, supervisors and students discuss: the implementation of the telepractice service delivery model, planning of the therapy sessions, instructional and interpersonal skills with the client and others involved in the client's program. Supervisors schedule and facilitate discussion groups comprised of students involved in the telepractice clinical practicum every other week. Students present cases and other aspects of

the telepractice program, which are discussed by the group to facilitate experiential learning from their peers.

D. Student Evaluation

Supervisors critique each student's performance during every therapy session to provide immediate feedback of emerging skills. This feedback is used for discussion in the individual supervisory conferences. Supervisors also evaluate each student at mid- and end-of-semester using the *Speech Therapy Telepractice and Technology Practicum Evaluation* form.

E. Supervisor Evaluation

Students are asked to complete a *Supervisor Evaluation* form at the end of each semester (See Appendix B). Supervisors are rated on a 1–4 scale (poor—more than adequate) in general, instructional and interpersonal areas.

Measuring Outcomes

A. Client Outcomes

Each client's progress in achieving individual treatment goals is measured on a weekly basis using data collected during sessions. Standardized and informal repeated measures are conducted at the beginning and end of each client's treatment program or at six month intervals for programs of longer duration. Pre-post treatment data is compared to determine the client's progress and benefits of the program.

B. Student Outcomes

Student learning outcomes are assessed at mid-semester and at the end of each semester using the Speech Therapy Telepractice and Technology Practicum Evaluation form specifically geared toward the acquisition of knowledge and skills in telepractice services (ASHA, 2005; 2013).

C. eHelper Outcomes

When appropriate, the student can evaluate eHelpers using the *eHelper Competencies* form, at end of each treatment program to determine the competencies that were developed during the program. (See Appendix C). For instance, an eHelper working in public schools may benefit from a competency evaluation as part of his/her end-of-year evaluation at the school. The eHelper is evaluated using a 0–5 point rating scale (fails to perform—consistently performs) addressing technical and instructional skills.

D. Telepractice Outcomes

A *Consumer Satisfaction Survey* is administered at the end of each therapy program as a measure of the effectiveness of the training program. (See Appendix C). Clients, caregivers, teachers, administrators and/or other people that are involved in the client's therapy program complete the survey. The effectiveness of this training program and speech therapy telepractice is also determined by the progress that each client demonstrates in individual therapy programs.

References and Resources

References

American Speech-Language-Hearing Association. (2005). Knowledge and skills needed by speech-language pathologists providing clinical services telepractice [Knowledge and Skills].

American Speech-Language-Hearing Association. (2013). *Professional Issues: Telepractice*. Retrieved from asha.org/Practice-Portal/Professional-Issues/Telepractice

American Speech-Language-Hearing Association. (2010r). *Code of ethics [Ethics]*. Retrieved from asha.org/Code-of-Ethics

Cisco WebEx. (2008). Enterprise-level security and compliance in the collaborative work environment. Retrieved from intercallapac.com/files/WXConnect_Security_whitepaper.pdf

Council of Academic Programs in Communication Sciences and Disorders (2007). *Eligibility Requirements and Essential Functions*. Retrieved from sfsu.edu/~comdis/pdf/Essential%20Functions.pdf

Crutchley, S., & Campbell, M. (2010). Telespeech therapy pilot project: Stakeholder satisfaction. *International Journal of Telerehabilitation*, 2(1), 23–30.

Hall, N., Boisvert, M., & Steele, R. (2013). Telepractice in the assessment and treatment of individuals with aphasia: A systematic review. *International Journal of Telerehabilitation*, 5 (1), 27–37.

Monegain, B. (2010). Broadband funding to boost 900 healthcare systems. Government health IT telehealth mobile. Retrieved from govhealthit.com/news/broadband-funding-boost-900-healthcare-systems.

U.S. Department of Education (1974). Family Educational Rights and Policy Act (FERPA). Retrieved from ed.gov/policy/gen/guid/fpco/ferpa/index.html

U.S. Department of Health and Human Services. (2009). *Health Information Technology*. Retrieved from hhs.gov/ocr/privacy/hipaa/understanding/special/healthit/

U.S. Department of Health and Human Services. (1996). *The Health Insurance Portability and Accountability Act of 1996*. Retrieved from hhs.gov/ocr/privacy

Waite, M., Cahill, L., Theodoros, D., Russell, T., & Busuttin, S., (2006). Online assessment of childhood speech disorders. *Journal of Telemedicine and Telecare*, 12, 92–94.

Waite, M. C., Theodoros, D. G., Russell, T. G. & Cahill, L. M. (2010). Assessment of children's literacy via an Internet-based telehealth system. *Telemedicine and e-Health*, *16*(*5*), 564–575.

Wilson, L., Onslow, M., & Lincoln, M. (2004). Telehealth adaptation of the Lidcombe program of early stuttering intervention: Five case studies. *American Journal of Speech-Language Pathology, 3*, 81–93.

Telepractice Resources

American Speech-Language-Hearing Association. (2012). *State provisions update for telepractice*. Retrieved from asha.org/Practice-Portal/Professional-Issues/Telepractice/State-Provisions-Update-for-Telepractice/

American Speech-Language-Hearing Association. (2013). *Clinical Supervision in Speech-Language Pathology*. Retrieved from asha.org/policy/TR2008-00296/#sec1.6

American Speech-Language-Hearing Association. (2013). *Professional Issues: Telepractice*. Retrieved from asha.org/Practice-Portal/Professional-Issues/Telepractice

American Speech-Language-Hearing Association. (2013). Telepractice: Frequently asked questions. Retrieved from asha.org/ Practice-Portal/Professional-Issues/Telepractice/Telepractice-Frequently-Asked-Questions

American Speech-Language-Hearing Association. (2013). *Telepractice: Key Issues*. Retrieved from asha.org/PRPSpecificTopic. aspx?folderid=8589934956§ion=Key_Issues

American Speech-Language-Hearing Association. (n.d.). *HIPAA Security Rule: Frequently asked questions*. Retrieved from asha.org/practice/reimbursement/hipaa/securityrule

American Telemedicine Association. Retrieved from americantelemed.org

Carlin, C. H. (2012). e-Supervision of graduate students in speech-language pathology: Preliminary research findings. *SIG 18 Perspectives in Telepractice*, (2), 26–30.

Cason, J, & Cohn, E. R. (2014). Telepractice: An overview and best practices. *SIG 12 Perspectives on Augmentative and Alternative Communication*, (23), 4–17.

Cohn, E. (2102). Tele-ethics in telepractice for communication disorders. *SIG 18 perspectives on Telepractice, (2), 3–*15.

Kumar, S., & Cohn, E. R. (2013). *Telerehabilitation*. London: Springer-Verlag.

Mashima, P. A. (2012). Using technology to improve access to health care for culturally and linguistically diverse populations. SIG 14 Perspectives on Communication Disorders and Sciences in Culturally and Linguistically Diverse (CLD) Populations, (19), 71–76.

Stacy, W. (2013). Telepractice: New and emerging technologies that promise change. *SIG 18 Perspectives on Telepractice, (3)*, 23–30.

Tindall, L. (2014). Client safety and telepractice in a clinic or home setting. SIG 18 Perspectives on Telepractice, (3), 41–43.

Appendix A

Clinical Practicum Templates and Forms

Request for Service
Informed Consent
Case History: Child
Case History: Adult
Technology Checklist
Evaluation Report template
Plan of Care template
Weekly Lesson Plan template
Daily Progress Note template
Progress Report template
Practicum Evaluation

Madelyn E and Albert D. Conley

SPEECH, LANGUAGE AND HEARING CENTER

336 Dunn Hall, Orono, ME 04469-5724, Phone (207) 581-2006

The University of Maine, Department of Communication Sciences and Disorders REQUEST FOR SERVICE

Date of Request	ForSpeech TherapySpeech/Language EvaluationSpeech Telepractice
Name	Age Date of Birth
Parents Names (for minors)	
Address	
Phone: H) C)	w)
E-mail Address	
Describe problem in Hearing/Speech/Language	
Referred/recommended by	
Request being made by	
Person/Agency to be billed:	
Insurance Information: Company Group# Group# MaineCare Coverage? MaineCare#	
Primary Care Physician	
Address	
IF PERSON IS SCHOOL AGE: Name of School (RSU/SAD, Union, Town) Grade Has school authorized and agreed to p	
DatePre-appointment forms mailedAppointment dateNotified of appointmentConfirmed appointment	Forms returned
Service Report Ready Fee Report to () () Report Sent	Result of evaluation:
Billing Complete	



Graduate Student Training Program
Department of Communication Sciences and Disorders

Informed Consent

Clinical Records

Clinical records are the live telepractice sessions, video/audiotapes of sessions, written reports, and progress/file notes that are produced during the provision of speech-language-hearing evaluation/treatment services to clients.

Equipment

The Department of Communication Sciences and Disorders (CSD) has a full-service speech and hearing center, which will serve as the on-site training center and is fully equipped with computers and Internet access. The equipment used for the telepractice program includes the following: one Dell Precision T3500 workstation and microphone, headset, speakers and accessories which possess high quality audio and video capabilities; one iMac 21.5-inch 2.7G HZ computer system with similar capabilities and one printer. Clients will use computers, tablets, smart phones or other accessible devices in their homes, schools and/or other secure locations.

Delivery of Services

Speech therapy services will be provided at a small cost to remote sites, using existing computers, Internet connections connected to the secure Web-hosted encrypted Cisco WebEx video conferencing system. The Cisco WebEx system employs a Web 2.0 digital interactive approach where the speech-language pathologist manipulates digital speech therapy materials on a computer in one location, while the patient simultaneously manipulates the same materials on a computer in any secure location. Caregivers and/or other approved individuals can watch the sessions in real time on a computer in any secure location.

Taping, Observation

The clinical education, research and client service functions of the Department of Communication Sciences and Disorders telepractice training program are met in the following ways. Speech-language-hearing services to clients are provided by a clinician team, consisting of a graduate student clinician and an ASHA certified, state licensed clinical supervisor. In the course of evaluation and treatment, client sessions may be recorded (video, audio, photo) and observed for clinical education and teaching purposes. These materials are viewed by supervisors and graduate clinicians and may be used as demonstration tapes or clinical/case study data in CSD courses. In addition, client sessions are observed by undergraduate students completing the ASHA pre-clinical requirement for 25 hours of supervised observations.

Confidentiality

The Cisco WebEx system employs proprietary technology to ensure that the content of all telepractice sessions is encoded and optimized for sharing with only approved individuals. All presentations are encrypted using the 128-bit SSL encryption standard to ensure confidentiality of sessions. Visit webex.com for more information regarding security standards of the Cisco WebEx system.

Individual client records are kept in accordance with accepted procedures, and confidentiality is maintained in accordance with both state law and ASHA ethical standards. Information related to client services in the department is kept confidential with the following exceptions: (1) when clients sign a form permitting us to release information about them to specified others, (2) when we use videotapes/audiotapes and/or clinical data from sessions in CSD courses and course assignments, with the client's signed permission on this form.

Except as otherwise specified below, I hereby consent and au	thorize the Department of Communication Sciences and Disorders, its
employees or agents, to release any and all of the information	n contained in the clinical records and to discuss any information relating to the
diagnosis and treatment of	to CSD Department clinical supervisors, graduate student
clinicians and undergraduate students completing pre-clinic	al requirements for the purposes of clinical and pre-clinical education and client
service functions.	
Information that I refuse to disclose (specify):	

	clinical record	•	of the following information, I understand that the CSD Departmen	nt needs my specific consent to	
1.	I Do	_ Do Not	_ authorize disclosure of information which refers to treatment or d	iagnosis of substance abuse.	
2. a.	. a. I Do Do Not authorize disclosure of information which refers to treatment or diagnosis of mental health.				
2. b.	b. I Do Do Not want to review this information before it is released. I understand that reviews must be supervised.				
3.	I Do	_ Do Not	 authorize disclosure of information which refers to HIV/AIDS test treatment information. 	st results, infection status or	
have th refusal adverse before	ne right to result in may result in consequence the expiration	fuse to author n improper dia es. Clients ha n date subject	12 months from the date of signature and authorizes repeated disclosure disclosure of all or part of the information related to their speechagnosis or treatment, denial of coverage or a claim of health benefits over the right to revoke this authorization at any time by notifying the case to the right of any person who acted in reliance on the authorization he basis for denial of health benefits or other insurance coverage or benefits.	language-hearing services, but that or other insurance and/or other department with a written revocation a prior to receiving notice of the	
			te is the person whose records are involved, or if not the person, that s r, the person's parent or legal guardian and that she/he has full power		
Client	Consent For		bove information regarding the use of clinical records. I understand the nd that signing this Client Consent Form is completely voluntary and epartment.		
Signatı	ıre:		Relationship to Client:	Date:	
Witnes	ss:			Date:	



Graduate Student Training Program
Department of Communication Sciences and Disorders

Child Case History Form

Confidentiality Statement

In order to provide the optimum level of service, appropriate to your child's needs and wishes, certain background information is very helpful. The information requested will assist us in understanding and developing a plan that best suits your child's needs. Many factors may impact on the hearing, understanding, and use of speech. The information you provide us will help us understand your concerns and assist us in addressing your needs.

If possible, complete this information form on behalf of your child and return it to us a week before the date of the first appointment. Thank you for your time and cooperation.

General Information

Name of Client:	Date of Birth:
Address:	Phone:
City:	Zip:
Email Address:	
School:	
Parent's Marital Status: Single Widowed/Divorced Married	
Siblings (include name, gender and ages):	
Name of person completing questionnaire if other than the client named above:	
Referred by:	Phone:
Address:	
Primary Care Physician:	
Address:	
Person/Agency paying for service:	

Medical History

Describe the events that led to your child's current speech and language problems.

Status of vision and hearing: Condition of oral structures (i.e., teeth, tongue, etc.): Oral/motor impairments (i.e., slurred speech, weakness of lips, tongue, jaw, etc.): Special concerns regarding physical condition: Describe any major surgeries, operations or hospitalizations that you have experienced in the past (incl.)	
Oral/motor impairments (i.e., slurred speech, weakness of lips, tongue, jaw, etc.):	
Special concerns regarding physical condition:	
Special concerns regarding physical condition:	
Describe any major surgeries, operations or hospitalizations that you have experienced in the past (incl	
Describe any major surgeries, operations or hospitalizations that you have experienced in the past (incl	
. ,	lude approximate dates).
Check which of the following illnesses and conditions you have experienced:	
denoidectomy Allergies Asthma Chicken	Pox
Convulsions Dizziness Draining Ear Ear Infe	ctions
ncephalitis German Measles Headaches Hearing	Loss
Iigh Fever Influenza Mastoiditis Noise Ex	xposure
Otosclerosis Pneumonia Seizures Sinusitis	
innitus Stroke Tonsillectomy Head In	· •
Other:	

Describe any cognitive and/or language difficulties your child is currently experiencing.

What do you believe may have caused these difficulties?
How does your child's communication difficulty affect his/her school work, daily activities at home, with friends, in the community, etc.?
Developmental and Educational History
What grade is your child in school?
Did your child reach developmental milestones on time? If no, please describe.
Does your child have a history of learning disability, reading or writing problems? If yes, please describe.
Describe any problems your child is experiencing in school.
Family History Describe your family members and where they live.
Are there any family members who experience communication difficulties? If yes, tell us your child's relation to the family member and describe the nature of the difficulties.

What languages are spoken at	nome? Include the languages yo	our child s _l	speaks and indicate which is the primary langu	ıge.
Hobbies and Interests What are your child's hobbies	and/or special interests?			
What activities does your child	participate in (church, commu	unity, etc.))?	
Computer Skills 1. Describe your child's knowledge.	edge of computers and any othe	er digital d	devices that your child knows how to operate.	
2. Does your computer have vi	deo and audio connections?	Yes	No	
3. Do you have Internet access	?	Yes	No	
4. How many years has your cl	nild used computers?			
5. How often does your child t	ise computers, smart phones or	other dig	gital devices?	
Daily	Weekly	Montl	thly	
6. Rate your child's knowledge	and experience of using compu	iters.		
Beginner	Average	Advan	nced	
Why did you decide to request	speech therapy telepractice serv	vices? Wh	nat do you hope will result?	

Provide any additional information that might be helpful in the evaluation or therapy process.

Person completing this form:	
	_
Signature:	Date:

If you have any questions regarding the completion of this information form, call our office at 207.581.2006.

Return this form to: lynk@maine.edu

or

Madelyn E. and Albert D. Conley Speech, Language and Hearing Center
Department of Communication Sciences and Disorders
University of Maine
5724 Dunn Hall, Room 344
Orono, ME 04469-5724



Conducto Student Training Decompos

Graduate Student Training Program
Department of Communication Sciences and Disorders

Adult Case History Form

Confidentiality Statement

In order to provide the optimum level of service, appropriate to your needs and wishes, certain background information is very helpful. The information requested will assist us in understanding and developing a plan that best suits your needs. Many factors may impact on the hearing, understanding, and use of speech. The information you provide us will help us understand your concerns and assist us in addressing your needs with you.

If possible, complete this information form and return it to us a week before the date of your first appointment. Thank you for your time and cooperation.

Date:	_	
General Information		
Name of Client:	Date of Birth:	
Address:	Phone:	
City:	Zip:	
Email Address:		
Employer/School:		
Marital Status: Single Widowed/Divorced Married	Spouse's Name:	
Children (include name, gender and ages):		
Name of person completing questionnaire if other than the client named above: _		
Referred by:	Phone:	
Address:		
Primary Care Physician:		
Address:		
Person/Agency paying for service:		

M	ed	ical	His	torv
				,

Describe the events that led to your current medical condition.

Are you having any negative reactions to these medications? If yes, please describe.

Status of vision and hea	uring:			
Condition of oral struc	tures (i.e., teeth, tongue, etc.): _			
Oral/motor impairmen	ts (i.e., slurred speech, weakness	of lips, tongue, jaw, etc.):		
Special concerns regard	ing physical condition:			
Describe any major sur	geries, operations, or hospitaliza	tions that you have experienced	d in the past (include approximate dates).	
Check which of the foll	lowing illnesses and conditions y	ou have experienced:		
Adenoidectomy	Allergies	Asthma	Chicken Pox	
Convulsions	Dizziness	Draining Ear	Ear Infections	
Encephalitis	German Measles	Headaches	Hearing Loss	
High Fever	Influenza	Mastoiditis	Noise Exposure	
Otosclerosis	Pneumonia	Seizures	Sinusitis	
Tinnitus	Stroke	Tonsillectomy	Head Injury	
Other:				
Do you have any eating	g or swallowing difficulties? If so	please describe.		
List all medications you	ı are currently taking.			

Describe any cognitive and/or language difficulties you are currently experiencing.
What do you believe may have caused these difficulties?
How does your communication difficulty affect your daily activities at home, with friends, at work, in the community?
Developmental History Did you reach all of your developmental milestones on time?
Do you have a history of learning disability, reading or writing problems?
Educational and Vocational History
What is the last grade you completed in school?
Describe your employment history. Are you currently employed?
Family History
Describe your family members and where they live.

Are there any family member the nature of the difficulties.	s who experience communication	n difficult	ies? If yes, tell us your relation to the family member and describe
What languages are spoken at	home? Include what languages	you speak	and which is your primary language.
Hobbies and Interests			
What are your hobbies and/o	r special interests?		
What organizations do you pour process of the second secon	articipate in (church, communit	y, etc.)?	
1. Describe your computer ar	nd any other digital devices that	you know	how to operate.
2. Does your computer have	video and audio connections?	Yes	No
3. Do you have Internet access	ss?	Yes	No
4. How many years have you	used computers?		
5. How often does your child	use computers, smart phones or	other dig	rital devices?
Daily	Weekly	Mont	hly
6. Rate your child's knowledg	e and experience of using compu	uters.	
Beginner	Average	Advar	nced
Why did you decide to reque	st speech therapy telepractice ser	vices? Wh	at do you hope will result?

How did you hear about us?					
Provide any additional information that might be helpful in the evaluation or therapy process.					
Person completing this form:					
Signature:	Date:				

If you have any questions regarding the completion of this information form, call our office at 207.581.2006.

Return this form to: lynk@maine.edu

or

Madelyn E. and Albert D. Conley Speech, Language and Hearing Center
Department of Communication Sciences and Disorders
University of Maine
5724 Dunn Hall, Room 344
Orono, ME 04469-5724



Graduate Student Training Program
Department of Communication Sciences and Disorders

Technology Checklist

Joining the Therapy Session

- 1. Send a meeting invitation to the client's email address.
- 2. Send the client the following instructions in a separate email to join the meeting.
 - A. First steps:
 - Click on the <univmainetelespeech> link
 - Enter your name and email if requested
 - Enter the password for the session
 - Click on <join>
 - B. Establish audio connection:
 - Click on <call using computer>
 - Audio icon should be gray
 - C. Establish video connection:
 - Click on <video icon>
 - Video icon should be green

Equipment Check

1. Computer type:	Operating system:
2. Audio quality:	Video quality:
3. Internet connection (type/quality):	
4. Printer connection:	
5. Other equipment (e.g., iPad, iPhone):	
eHelper Check	
1. Explain the role of the eHelper	
2. Who is the eHelper?	
3. Availability:	
4. Sufficient computer experience:	

Navigating Features of Video Conferencing System

1. Web-based tool check: Explain to client ar icons, you can do the following." Then ask th			
Arrow to use as pointer			
"T" to type on the screen			
"/" and the box icon to draw shapes			
Pencil icon to draw			
Eraser icon to erase			
Change colors			
2. Moving between windows: Explain to the demonstrate moving between windows follow Full screen display Thumbnails		'You can move between di	fferent windows." Then ask the client to
Client Selection for Telepractice			
1. Physical and sensory characteristics:	Adequate	Accommodation	Not adequate
2. Cognitive and behavioral characteristics:	Adequate	Accommodation	Not adequate
3. Communication characteristics:	Adequate	Accommodation	Not adequate
4. Client environment/resources:	Adequate	Accommodation	Not adequate
Client Candidacy for Telepractice			
Good candidate			
Good candidate with accommodations			
Not a good candidate			



Graduate Student Training Program
Department of Communication Sciences and Disorders

Speech-Language Pathology Evaluation

Client:		Date of report:	
Address:			
		School (if applicable):	
Date of birth:	Age:		
Phone:		DX:	
Parents:			

I. Background

Start text here. Wrap around text and make a hanging paragraph so that the second line of text starts here. Content should include pertinent history, reason for referral for evaluation and referring party. If you are conducting a telepractice evaluation you must note that here.

II. Behavioral Observations

Start text here. Wrap around text and make a hanging paragraph so that the second line of text starts here. Content should include pertinent observations of your client's behavior during the evaluation period.

III. Procedures Employed

- 1. Start text here. List the names of the assessments used. If any one test has a name longer than the formatted line, wrap around text and make a hanging paragraph so that the second line of text starts here as shown.
- 2. Be sure to add the common initialed acronym after the formal name of the test. For Example, you would write; Goldman Fristoe Test of Articulation, 2nd Edition (GFTA-2)
- 3. Note that the numbers for this section are in **bold type**
- 4. Any adaptations of test protocols for telepractice must be noted.

IV. Results

- 1. Name first test here in **bold.** Start text here. Wrap around paragraphs to keep left margin under the N in name. If there are a lot of subtests to report, consider putting results in table form, with a narrative explanation. Introduce the test (what/ why) in first paragraph and then give client's results in the next.
- 2. Name second test here. Start text here. Wrap around paragraphs to keep left margin under the N in name. If there are a lot of subtests to report, consider putting results in table form, with a narrative explanation.
- **3.** Name third test here and so on for as many assessment instruments that are used. Start text here. Wrap around paragraphs to keep left margin under the N in name if there are a lot of subtests to report, consider putting result s in table form, with a narrative explanation.

V. Diagnostic Summary and Impressions

This is a narrative section where you will be interpreting the results and formulating a diagnosis. *Your opening statement should always state if there is a problem or not.* Start paragraph with indentation and wrap text around so left margin lines up under D in diagnosis.

VI. Recommendations

Start text here and format the paragraph as for Section IV. Is speech therapy telepractice indicated? If yes, include a prognostic statement. Include specific information of areas to be addressed. Include other recommendations. You may list them in bulleted format. [Do not use numbers unless you are rank ordering them.]

- First recommendation
- Second recommendation
- Etc.

Thank you for referring questions concerning this report, call the center at 207.581.2006.	to the Conley Speech, Language and Hearing Center. If you have any
(Names)	(Name) *(M.A, M.S., Ph.D., or M.Ed.) CCC-SLP
Graduate Student Clinician	Title



Graduate Student Training Program
Department of Communication Sciences and Disorders

Plan of Care

Client: _			_ Date of report:
Address:		Site:	
			School (if applicable):
Date of b	irth:	Age:	Date of evaluation:
Phone: _			
Parents:			_
	Summary of Communicatio A. Pertinent Background Informa Note: This section contains essentate of the margins.	tion	t client relevant as to why he/she has been referred for services. Take
	specific header. First line of each pa	ragraph should also be set file for details. Enough in	eft edge of content lined up under the left leading margin of each to be indented in five spaces. Only summarize the most recent aformation should be entered so that the goals and objectives would
	C. Performance		
	Strengths: Start context here an progress in therapy.	d wrap around to left edge	e. This section contains client's strengths which would benefit
	2. Needs: This section contains inf population?	ormation which relates to	why services are needed. What sets this client apart from normal
	3. Current Communication: State diagnoses along with severity lev		out client's communication skills and also give/report on any current
II. Pla	an of Care for Report Period	:	to
	A. Frequency and Duration of Di	rect Services	

What else will you be doing for the client that is not face-face direct contact. Carryover and transfer activities? Consulting with

This paragraph contains information about how often the client will receive services.

B. Indirect Services

parents on strategies to use at home?

	C. Long Term Goals and Short-Term Objectives: Goal 1: Start text on this line and wrap text to the left edge of the letter "g," like this line. Underline "Goal 1."			
Short-term Objectives 1. a Start to write on this line and then wrap	text around to the left edge of the number.			
1. b				
1.c.				
Goal 2: Same as above.				
Short-term Objectives 2.a				
2.b				
2.c.				
Goal 3:				
Short-term Objectives 3.a				
3.b				
3.c.				
D. Methods for Measuring Progress: Start this paragraph below header and ind	lent first line of all paragraphs.			
e look forward to working with07.581.2006) or the individual clinicians if you have	Contact the Conley Speech, Language and Hearing Center e questions regarding this report.			
Names) Fraduate Student Clinician	(Name) *(M.A, M.S., Ph.D., or M.Ed.) CCC-SLP Title			



Graduate Student Training Program
Department of Communication Sciences and Disorders

Telepractice Lesson Plan

Client Goals/Objectives	Materials/Activities/Strategies	Results/Data/Supervisor Com



Graduate Student Training Program
Department of Communication Sciences and Disorders

Daily Progress Notes

Client initials	:			
Date:	Time In: _	Time Out:	Total Time:	Service Code:
Patient Physic	cal Location:			
Technology Tr	<i>aining Manual</i> . Thi	1	*	the Speech Therapy Telepractice and connections connected to the secure
The need for	telepractice is estab	lished as (check one):		
Geographic b	arrier	Physical limitations	Social limitations _	
FAN	ully acceptable cceptable/minor de finimal/noticeable foderate/some inter	elays interruptions, no affect on quality rruption in treatment session terminated and rescheduled	•	leck one):
An eHelper		(name/title)		
W	7as present			
X	as not present			
X	7as observing			
X	Vas actively assisting	g with treatment		

[CONTINUE WITH THE TREATMENT DOCUMENTATION IN THE USUAL MANNER]



Graduate Student Training Program
Department of Communication Sciences and Disorders

Progress Report

Client:		Date of report:
Address:	_	Service delivery site: Conley Speech, Language, and Hearing Cente
		School (if applicable):
Date of birth:	Age:	Date of evaluation:
Phone:		DX:
Parents:		
I. Summary of Telepract	ice Services:	
A. Direct Services State the telepractice	e services that you provided direc	tly to the client.
	ere provided indirectly such as ho provided to the client.	omework, recommendations for carry over and supplemental educational
II. Current Testing and C	Other Evaluative Measure	s:
Put pre-post testing here.		
III. Results of goals and	short-term objectives:	
Progress Key		

S — Satisfactory Progress

L — Limited Progress

M — Goal Met

N — Not introduced

Goal 1: Start text on this line and wrap text to	the left edge of the letter "G", like this line. Underline Goal 1.
Short term Objectives	
1. a Note: for short term objectives. Start to we paragraph.	rite on this line and then wrap text around to the left edge of the number like this
Progress:	
Comments:	
1. b.	
Progress:	
Comments:	
1.c.	
Progress:	
Comments:	
List all other goals/objectives in the same for IV. Summary of Progress	mat as above.
V. Recommendations	
It has been a pleasure to work with	Contact the Conley Speech, Language and Hearing Center we any questions regarding this report.
(Names) Graduate Student Clinician	(Name) *(M.A, M.S., Ph.D., or M.Ed.) CCC-SLP Title

Student clinician: _



Speech Therapy Telepractice and Technology

Graduate Student Training Program
Department of Communication Sciences and Disorders

Practicum Evaluation

Practicum site: <u>CSLHC/Telepractice</u>

Semester:	Dates of review:
Supervisor:	Practicums completed:
First time in this clinical setting? Yes No	Approximate no. of clients assigned: child adult
Percentage of session observed: dx tx	Client communication needs (list):
ASHA certification number:	
Rating Scale	
4.0 3.0 Student performs effectively with general guidance for 2.0 1.0 Student performs effectively only after specific direct 0.0 Student fails to perform effectively regardless of the Professional ASHA Standard IV-G.3: The applicant must communicate effectively regardless of the cultural/linguistic background of the client/patient, family, carego	tion and/or demonstration from supervisor
Midterm Final	
•	andards explicit in the Code of Ethics.
The clinician follows all policies punctuality and paperwork dead	and procedures for appointments, including cancellation notification, llines.
The clinician shows good judgm clinical environment.	nent regarding behavior, language and personal appearance in the
The clinician can state licensure potential sources of reimbursem	, liability and malpractice laws and requirements for telepractice and the tent for telepractice.

Uses of Technology

		wledge and Skills (2005) Role 1.0: The clinical will have knowledge of synchronous technology applications, r store and forward transmission of clinical data, and the ability to test the applications without an on-site facilitator.
Midterm	Final	
		The clinician can conduct a needs assessment to determine whether the telepractice model adequately matches needed services at any potential site.
		The clinician demonstrates knowledge of the need for telepractice software and hardware applications to be configured for use with encryption, VPN or firewall applications to ensure confidential transmission of client information using synchronous or store and forward technology.
		Types of Technology
_	practice Know practice service	wledge and Skills (2005). Role 2.0: To understand the appropriate specifications and operations of equipment that is delivery.
Midterm	Final	
	_	The clinician can set up meetings and maintain contact throughout the sessions with remote sites.
	_	The clinician can use interactive videos systems without interfering with service provision (e.g., desired camera characteristics, audio settings, video settings, bandwidth requirements).
	_	The clinician can open and switch between materials, use web-based tools and pass presenter status, share desktop and documents, and incorporate Web 2.0 applications.
		The clinician can record sessions and link the recorded sessions to caregivers and/or others involved in the client's care.
		The clinician can provide telepractice services using cross platform as well as mobile Web-based devices.
		Client Selection for Telepractice
ASHA Kno	wledge and S	Skills (2005). Role 3.0: To select clients who are appropriate for assessment/intervention services via telepractice.
Midterm	Final	
		The clinician demonstrates an understanding of the potential impact of physical and sensory characteristics on the client's ability to benefit from telepractice and provide modifications or accommodations for any limitations (e.g., hearing ability, visual acuity, manual dexterity, physical endurance).
	_	The clinician demonstrates an understanding of the potential impact of cognitive and behavioral characteristics on the client's ability to benefit from telepractice and provide modifications or accommodations for any limitations (e.g, level of cognitive functioning, maintaining attention).
	_	The clinician demonstrates an understanding of the potential impact of communication characteristics on the client's ability to benefit from telepractice and provide modifications or accommodations for any limitations (e.g., auditory comprehension, literacy, speech intelligibility, cultural/linguistic variables).
		The clinician demonstrates an understanding of the potential impact of the client's resources on his or her ability to benefit from telepractice and provide modifications or accommodations as appropriate (e.g., availability of technology, broadband, environment, eHelper).

Assessment and Interventions

ASHA Knowledge and Skills (2005). Role 4.0: To use technology to deliver appropriate assessments and interventions.

Assessment Midterm	Final	
TVIIGTOIII	Tillai	The clinician develops rapport quickly within a telepractice session to engage each client.
		The clinician can select and administer formal and informal diagnostic tools at a distance and/or face-to-face
		(e.g., traditional, digital diagnostic materials).
		The clinician can apply appropriate criteria for determining the reliability and validity of assessment procedures performed via telepractice.
		The clinician can analyze and interpret quantitative and qualitative information from the evaluation to develop appropriate goals/objectives/recommendations.
		The clinician can explain the evaluation results to the family/caregivers and mutually develop appropriate goals/objectives/recommendations.
Interventio Midterm	n Final	
		The clinician can develop digital materials that are appropriate for stated goals for clients to receive optimal services at a distance.
		The clinician uses appropriate vocal loudness, affect and pacing of presenting materials to match the needs of the client within each session.
		The clinician demonstrates flexibility in adjusting pre-planned lessons to meet a current need within a telepractice session.
		The clinician demonstrates deliberate practices (i.e., maximizing number of response opportunities) within a telepractice session.
Cultural/Li	nguistic Va	ariables
ASHA Knowle	•	lls (2005). Role 5.0: To be sensitive to cultural and linguistic variables that affects the identification, assessment,
Midterm	Final	
		The clinician demonstrates an understanding of the potential impact of cultural and linguistic variables on the client's ability to benefit from telepractice and provides modifications or accommodations.

client's responses).

Use of Support Personnel

	wledge and S vices via telep	kills (2005). Role 6.0: To train and use support personnel (e.g., eHelper, family, caregiver) appropriately when ractice.
Midterm	Final	
		_ The clinician provides appropriate training to the support personnel in the delivery of services via telepractice.
		The clinician can establish a relationship with the eHelper to provide coaching support for the eLearner within the telepractice session.
		The clinician provides opportunities for family, caregivers and others to observe and participate in telepractice sessions when appropriate.
Evaluation	n of Effect	iveness and Outcomes
		kills (2005) Role 7.0: To be familiar with available tools and methods and apply them to evaluate the effectiveness of actice and measure their outcomes.
Midterm	Final	
		The clinician will apply appropriate criteria for determining how the telepractice model may impact the validity and reliability of assessment tools and evidence-based treatment protocols.
		The clinician will evaluate the quality of care delivered via telepractice including: access to care, timeliness of care, continuity of care, coordination of care and comprehensiveness of care.
		_ The clinician will collect and analyze clinical outcomes data to support reimbursement for telepractice services.
Documen	tation	
	•	kills (2005) Role 8.0: To manage potential risk and liability by documenting the difference between telepractice face-to-face encounters.
Midterm	Final	
		The clinician will provide information consent for the use of telepractice and document the telepractice encounter (e.g., the type of equipment used, the location of the client, the role of every person present, and

Date

Summary of Clinical Performance
Review of mid-term goals and emerging competencies:
Suggestions for continued clinical skills development:
Final Grade:

Adapted 2012 from:

Supervisor Signature

American Speech-Language-Hearing Association (ASHA). (2005). Knowledge and skills needed by speech-language pathologists providing clinical services telepractice [Knowledge and Skills].

Date

Student Signature

Appendix B

Supervisor Evaluation Form



Graduate Student Training Program
Department of Communication Sciences and Disorders

Supervisor Evaluation Form

Student Name:		Date:				
Supervisor Name:	No. of clients:					
1=Poor 2=Less than adequate 3=A	4=More than adequate					
General:						
Demonstrates knowledge of technology		1	2	3	4	
Professional expertise in field		1	2	3	4	
Maintains appropriate focus on student's work		1	2	3	4	
Demonstrates knowledge and expertise in the clinic	al intervention	1	2	3	4	
Supervisor observes student often enough to have good understanding of work		1	2	3	4	
Encourages students to be creative and push limits of	1	2	3	4		
Instructional:						
Supervisor is clear as to what is expected		1	2	3	4	
Provides therapy/evaluation suggestions and directive	s as appropriate	1	2	3	4	
Offers guidance to resources		1	2	3	4	
Shares owns clinical experience and knowledge		1	2	3	4	
Supervisor demonstrates techniques as appropriate		1	2	3	4	
Supervisor stimulates students to think for him/hers	self	1	2	3	4	
Supervisor gives feedback promptly		1	2	3	4	
Supervisor gives feedback clearly		1	2	3	4	

Interpersonal:

Supervisor offers criticism about therapy in helpful ways	1	2	3	4
Supervisor identifies specific areas of weaknesses in helpful ways	1	2	3	4
Supervisor offers praise and support regarding clinical strengths	1	2	3	4
Supervisor listens acceptingly to student's perceptions, opinions, and rationales	1	2	3	4
Listens effectively to student's feelings and concerns	1	2	3	4
Shares personal self (feelings, mistakes) as appropriate	1	2	3	4
Accepts feedback about supervisory process	1	2	3	4
Strives for open relationship	1	2	3	4

Describe areas in which you feel your supervisor could improve:

Describe supervisory techniques that you have found especially helpful:

Appendix C

Measuring Outcomes Forms

eHelper Competencies Consumer Satisfaction Survey



Graduate Student Training Program
Department of Communication Sciences and Disorders

eHelper Competencies*

Name o	of eHelper Practicum Site:
Rati	ing Scale
5.0 4.0	eHelper consistently performs effectively with a high degree of independence, taking initiative and making changes when appropriate
3.0	eHelper performs effectively with general guidance from supervisor
1.0 0.0	eHelper performs effectively only after specific direction and/or demonstration from supervisor eHelper fails to perform effectively regardless of the amount of supervision
Technic	cal Skills
	1. Set up a schedule that provides an optimal and consistent time for patient to offer best responses.
	2. Troubleshoot basic audio and video difficulties.
	3. Can access email and Internet to locate the links and online connections for the telepractice session.
	4. Help patient access web-based therapy tools (e.g., highlighter, pointer text tools).
	5. Can establish the video and audio connection for the telepractice session on the local computer.
	6. Provide feedback about the quality of items being displayed and make appropriate adjustments to ensure highest quality.
Instruc	ctional Skills
	1. Establish an adequate therapy environment for the patient including positioning for privacy.
	2. Utilize email, texting and direct communication with other involved personnel, families and caregivers about any pertinent updates before or after treatment sessions.
	3. Establish proper seating for the patient, allowing access to the computer and appropriate lighting for adequate video transmission.
	4. Understand therapeutic strategies and provide timely cueing and strategies to help the patient become independent in responding to the teletherapy therapist.
	5. Follow directions of the therapist

 6. Provide accurate feedback about the patient response to materials, restate the patient's utterance if needed for clarification and provide statements that will aid in completing tasks.
 7. Attend solely to the patient's needs during teletherapy sessions with no other job requirements.
 8. Help patient transition from an existing activity to the next activity.
 9. Provide feedback and restate expectations for behavior to the patient at appropriate times during the session.
 10. Become aware of the patient's strengths and needs, acquire a basic understanding of the patient's communication needs, and have knowledge of the treatment goals.
 11. Assure privacy and confidentiality of the patient.

Towey, M. P. (2013). Speech telepractice. In K. Sajeesh & E. Cohn (Eds). Telerehabilitation. New York: Springer.

^{*}Adapted 2013 from:



Graduate Student Training Program
Department of Communication Sciences and Disorders

Consumer Satisfaction Survey

Date: _

Relationship to client:							
1. My expectations for the speech therapy telep program have been meet.	practice						
2. Progress was made toward speech-language sthe speech therapy telepractice program.	goals through						
3. I would recommend this speech therapy tele program to other people in need of speech t							
4. The graduate student clinician providing the therapy was easy to reach when needed.	e speech						
5. The speech therapy telepractice provided in meets the needs of the clients involved in the							
6. The graduate student clinician was responsive concerns.	ve to my						
7. Overall, I am satisfied with the speech thera	ру						

Comments:

Name: _