Clinical Evaluation of Student: Midterm or End of Semester

Completed by the Clinical Supervisors, regarding the Graduate Student in practicum. Before beginning an evaluation, the clinical supervisors will be asked to select which student they are evaluating by a drop down list.

The purpose of the final evaluation is for you, the Clinical Educator, to formally describe the student's performance in their clinical practicum. The key to a successful student evaluation is to provide clear and specific feedback about the student on their performance to date in the experiences they have had. The evaluation includes written and verbal feedback about the student's current areas of strength and growth; additionally, clear descriptions of areas of weakness to improve should be provided. This evaluation provides an opportunity for you and the student clinician to make sure that there is common understanding of their current level of performance. The evaluations support the student in developing strategies to promote growth and achievement of clinical competencies. Goals should be listed at the end of the form on the Formative Improvement Plan.

Step 1 Hold conference to review student’s self-ratings and clinical instructor ratings. It is recommended that you take time during the final term to have the student provide feedback to you regarding the effectiveness of the clinical teaching you provided them. Review feedback notes and paperwork from the student training activities and identify the student's current areas of strength and areas to improve.

Step 2 Determine a clinical skill level: I, II, III:

I. Beginning clinician (less than 75 hours of clinical experience)
II. Intermediate (75 -150 hours)
III. Advanced (final semester)

Step 3 1-4 rating scale is then used to describe the student’s professional and clinical skills at your setting. NA= Not Applicable The student was not given an opportunity final clinic experiences.

- 1 Emerging skill Student had exposure (observations) and/or 100% supervision and guidance in activities. Demonstration of skills not evident. Student is not reflective in use of resources, does not ask questions that reflect critical thinking. Student demonstrates unprofessional behaviors (poor timing, poor pragmatics, unprofessional language). Requires conference call with UM Director of Clinical Education.
- 2 Developing skills Student is observing and/or hands on and demonstrates active engagement in all aspects of the clinical process. Seeks assistance appropriately. Direct guidance, modeling may be necessary. Asks questions that reflect critical thinking and offers own hypothesis. Implements use of resources and apply supervisor's feedback.
- 3 Refining skills: Performs most skills independently, requires guidance and supervision for new experience. Independently seeking assistance and support. Shares information such as research, evaluations, and intervention ideas.
- 4 Independent skills Student is self-directed and seeks out supervisor as a consult. Able to perform most skills independently. Initiates and shares research, evaluation, and intervention ideas with supervisor. Exceed expectations for a graduate student.

Step 4 Include comments and examples as need to support student understanding of their skills.

Step 5 In the Formative section provide goals with specific examples of activities or procedures to further strengthen competencies.

Updated 1/27/2016
You can **SAVE** the form to continue your work. Save every 30 minutes to make sure information is not lost. Once complete you **must SUBMIT** the format.

**Student Clinician Competency Level** *(assigned by educational supervisor)*. Please contact Chris Merriman if you are unsure of your graduate student's competency level. *Drop down menu to choose.*

- Level I: UG or Graduate students in their first or second clinical practicum. Skills should be rated at 2-3 with no more than two rated as a 1.
- Level II: Graduate student in their third semester of clinical practicum. Skills should be rated with 3 and 4 with no 1 and only a few 2.
- Level III 3 & 4 with no scores of 1 or 2. Required level for all graduate students in their final clinical practicum. Scores of 1 or 2 will require consideration of a remediation plan.

**Check the age group(s) of clients you served this semester. Check all that apply.**

<table>
<thead>
<tr>
<th>Early Intervention (Birth-3)</th>
<th>Adolescent (13-18 years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschool (3-5 years)</td>
<td>Adults (19-61 years)</td>
</tr>
<tr>
<td>School Age (6-12 years)</td>
<td>Seniors (62 Plus)</td>
</tr>
</tbody>
</table>

**For this practicum, check the disorders served (Big 9) and write in the approximate number of clients served.**

<table>
<thead>
<tr>
<th>Articulation/Phonology</th>
<th>Swallowing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fluency</td>
<td>Cognition</td>
</tr>
<tr>
<td>Voice Resonance</td>
<td>Social Aspect</td>
</tr>
<tr>
<td>Language/Literacy</td>
<td>Alternative Modalities</td>
</tr>
<tr>
<td>Hearing</td>
<td>Indicate number of clients served:</td>
</tr>
</tbody>
</table>

**4 Part Clinical Assessment: Evaluation, Intervention, Oral and Written communication, Professional skills**

1. **Evaluation based on the 2014 SLP certification standards: V-B skills outcome.**
   - Skills are evaluated as: 1 - Not evident, 2 - Developing skill, 3- Refining Skill, 4- Independent skill, or N/A. Include comments and examples as needed.
   
   1. Conducts screening and prevention procedures including prevention activities for hearing, speech, language, and/or swallowing.
   
   2. Collects case history information and integrates information from clients/patients, family, caregivers, teachers, other professionals and relevant others.
   
   3. Selects and administers appropriate evaluation procedures, such as behavioral observations, non-standardized and standardized tests, and instrumental procedures.
   
   4. Adapts evaluation procedures to meet client/patient needs taking into consideration cultural and/or linguistic variables.
   
   5. Interprets, integrates, and synthesizes all information to develop a diagnosis and make appropriate recommendations.
   
   6. Completes administrative and reporting functions necessary to support evaluation in a timely and professional manner.
7. Comprehensively summarizes client's communication/swallowing/cognitive status (including report writing) based on target audience and facility requirements.
8. Refers clients/patients for appropriate services.
9. Describes expectations of "typical" development across communication and swallowing areas.
10. Explains the evaluation and gives appropriate instructions, recognizing client/family needs and cultural linguistic background.

2. Intervention ASHA 2014 SLP certification standards V-B
Skills are evaluated as: 1 - Not evident, 2 - Developing skill, 3 - Refining Skill, 4 - Independent skill, or N/A. Include Comments/examples as needed.

1. Develops appropriate intervention plans with measurable and achievable goals that meet the client's/patient's needs. Collaborate with clients/patients and relevant others in the planning process.
2. Implements intervention plans that involve clients/patients and relevant others in the intervention process.
3. Selects or develops appropriate materials and instrumentation for prevention and intervention process.
4. Comprehensively summarizes patient's/client's therapy session in written format that is based on target audience and facility requirements (e.g., SOAP, progress, treatment plan, etc.).
5. Modifies intervention plans, strategies, materials, or instrumentation as appropriate (including the use of behavior strategies) to meet the needs of the clients/patients.
7. Applies research literature to treatment practice (evidence based practice).

3. Oral and Written Communication ASHA 2014 SLP Standards V-A
Demonstrate skills in oral and written or other forms of communication sufficient for entry into professional practice. Skills are evaluated as: 1 - Not evident, 2 - Developing skill, 3 - Refining Skill, 4 - Independent skill, or N/A. Include Comments/examples as needed.

1. Presents oral information accurately, clearly, logically, concisely, and appropriate for audience.
2. Uses professionally adequate articulation, voice, fluency and language.
3. Communicates in spoken English consistent with ASHA's position on non-standardized dialects and accents.
4. Attends and responds to supervisors and other staff's oral and written questions, comments, directions, etc., with maturity and professionalism.
5. Presents written information accurately, clearly, logically, concisely and appropriate for audience and site.
6. Writes evaluation reports following facility format. Reports are timely, appropriate in content, and professional.
7. Writes evaluation reports following facility format. Reports are timely, appropriate in content, and professional.
8. Demonstrates adequate technical writing skills (e.g., grammar, spelling, content, and professional style).
4. Interaction and Personal Qualities - ASHA 2014 SLP standards V-B

Skills are evaluated as: 1 - Not evident, 2 - Developing skill, 3 - Refining Skill, 4 - Independent skill, or N/A. Include Comments/examples as needed.

1. Communicates effectively, recognizing the needs, values, preferred mode of communication and cultural/linguistic background of the client/patient, family, caregivers, and relevant others.
2. Collaborates with other professionals in case management.
3. Provides counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others.
4. Demonstrates ethical and professional behaviors as outlined in the ASHA Code of Ethics.
5. Proposes application or discussion of the ASHA or sites ethical standards to clinical situations as appropriate (e.g., client welfare, professional competence, public responsibility, professional relationship).
6. Demonstrates a positive attitude toward clinical training and is responsive to feedback.
7. Self-evaluates and demonstrates initiative and responsibility for professional and clinical growth (e.g., practices new skills, follows-up on feedback suggestions, monitors and share personal clinical goals).
8. Completes responsibilities on time, including paperwork, preparation for sessions, and supervisory meetings.
9. Demonstrates critical thinking and problem solving skills appropriate for the situation.

Complete this section with the student.

Clinical Areas of Strengths

Formative Improvement Plan at Final:
Provide a summary of the student’s overall performance, listing current areas of strength and highlights of their progress, skills mastered. Include the student's perceptions of their strengths.

Needs and Strategies for Improving

Formative Improvement Plan Final:
Discuss areas scored 1, 2, or 3 and define specific goals to work towards for the remainder of this term or for the next clinical practicum or Clinical Fellowship if graduating. The goals or plans should be clearly defined, be measurable, and be accomplished before the end of the semester and/or appropriate for the next clinical placement. Provide suggestions and specific examples for a plan of improvement, and/or clinical exposure. Include the Director of Clinical Education in a meeting when students receive more than four areas with scores of 1 and/or 2.