



Master of Speech Pathology

CLINICAL CONTRACT: LEARNING GOALS

Name:

Date: 04/08/13

Placement:

Last Updated: 16/09/13

What knowledge and skills do I want to gain?	Strategies to develop goals	Time Frame	I know I have achieved my goal when I can/am able to	Evidence of achieving the goal...
<p><i>Develop the ability to succinctly document adult client's progress efficiently and independently in client's charts and formal reports.</i></p>	<ul style="list-style-type: none"> a) Obtain and file templates and examples of reports/chart entries for assessments and therapy (e.g OME assessment report template) b) Create a work bank of commonly used terminology used in speech pathology reports and chart entries, specific to caseload. (Cancer Care, dysphagia, stroke) c) Create a word bank of medical terms often used and seen in medical charts for caseload (cancer care, ENT, stroke) d) Draft and practice chart entries. 	<p>Midway Compass: Week 5.</p>	<p>When I am able to document a client's</p> <ul style="list-style-type: none"> a) initial assessment b) review assessment c) intervention session d) discharge report <p>in a timely manner as determined through feedback from CE and development of confidence in my own ability.</p>	<p style="color: green;">Independently writing progress notes directly in Pt's charts in On-Treat clinic in a timely manner. Initial Ax and r/v's.</p> <p style="color: green;">Progress notes continuing to develop – writing drafts for more complex Pt's on ENT and then checked and amended by Sarah.</p> <p style="color: green;">Independently completely progress notes on misc med and misc surg ward for non-complex pt's, some input for non familiar and complex pt's.</p> <p style="color: blue;">D/C reports for Pt's in On-Treat clinic. Drafted and then r/v'd by Jen with minimal changes.</p> <p>Work bank – still developing.</p>

<p>Develop the ability to choose appropriate assessments and differentially diagnose dysphagia and/or communication disorders in adult client's and provide feedback to patients and their families regarding assessment results/diagnosis. (ENT Pt's, H&N Ca Pt's, stroke Pt's, neurosurg Pt's)</p>	<p>a) Increase familiarity with differing assessment and management options of dysphagia, particularly for cancer care Pt's through consulting lecture notes, PBL material and journal articles and resources in the clinic.</p> <p>b) Take observational notes of client's behaviours to help guide decision making.</p> <p>c) Obtaining information from Pt's chart that give a whole picture of a Pt's presenting condition.</p> <p>d) Use a decision matrix to guide diagnosis – What I already know? and What more I need to know?</p> <p>e) Consult peers and clinical educator to discuss reasoning process.</p>	<p>Midway Compass: Week 5.</p>	<p>When I am independently and confidently able to choose and conduct an appropriate assessment to holistically assess a client with dysphagia including:</p> <ul style="list-style-type: none"> a) case history b) OME c) Swallow Ax <p>When I am able to:</p> <ul style="list-style-type: none"> - Choose Ax to conduct with Pt - Introduce Ax to Pt - Carry out the Ax - Identify the significant people in the client's life and collate the information - Provide feedback to Pt and the significant other people regarding Ax. 	<p>Case Hx Independently gather Pt case Hx in medical charts and used to inform Ax. Further questioning with Pt's to attain case hx. Independently use Pt history info to make an Ax plan for Pt's on ENT, misc med or misc surg wards or in on-treat clinic. Check plan with Sarah/Gen and implement plan.</p> <p>OME Independently conduct OME – report back to Pt re findings and why. Draw conclusions from OME about Pt's likely swallow.</p> <p>Reported back to Pt results on MBS with guidance and support from Sarah. Used MBS to determine dysphagia rehab for Pt.</p> <p>Swallow Ax Provide a diagnosis based on presentation during swallow Ax. Independently implementing diet changes, compensatory and rehabilitation strategies for pt's with dysphagia – 3 second hold, chin tuck, lip and swallowing exercises. Consulting with Jane when dealing with</p>
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<p><i>Develop the ability to use assessments results to devise a holistic management plan for familiar and non-complex cases client's with dysphagia and/or communication disorders.</i></p>	<p>a) Increase familiarity with differing management options of dysphagia, particularly for cancer care Pt's through consulting lecture notes, PBL material and journal articles and resources in the clinic.</p>	<p>Midway Compass: Week 5</p>	<p>When I am able to:</p> <ul style="list-style-type: none"> - Identify several intervention strategies that may be appropriate with reference to the client's total needs - discuss Mx options with client, caregiver and relevant others and decide on most suitable option. - Implement Mx plan. - Document the Mx plan in the handover lists. <p>Receive feedback from my CE regarding my progress.</p>	<p>complex/non familiar pt's. Consult with Sarah/Jen re changes.</p> <p>Communication Informal Ax of communication during Ax session through probing questions.</p> <p>Independently inform Pt, NS, kitchen and journey board. Provided verbal and written information regarding diet modifications (minced moist/ puree).</p> <p>Discussed with Dr, diet upgrade for Pt with hemiglossectomy and lip split in relation to timing of upgrade from puree to soft. Continue to liaise with Dr re diet after surgery – FOM resection. D/w Dr re pt NBM status and for how long pt to remain NBM.</p> <p>Implement dysphagia rehab for Pt's, including ROM exercises for glossectomy and FOM Pt's, Masako, mendolshon and effortful swallow for misc med pt's. Independently implement facial exercises for facial weakness and tongue retraction for Pt NBM.</p>
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<p>Expand my electronic portfolio of reading and resources for speech, language and swallowing, pertaining to an adult caseload, particularly Cancer Care to underpin and guide treatment and management options for patients. Resources and readings specific to</p> <ul style="list-style-type: none"> • <i>TNM tumour staging</i> • <i>Radiotherapy and Chemotherapy</i> • <i>Dysphagia and H&N Ca</i> • <i>Compensatory and Rehabilitation techniques for H&N Pt's.</i> 	<p>a) Continue to obtain readings, resources and journal articles relevant to the caseload.</p> <p>b) Obtain and file information from clinical placement and clinical educator.</p> <p>c) Add independent reading and resources found to portfolio.</p> <p>d) File reading and resources relevant to assessment and intervention.</p>	<p>Ongoing throughout Clinic.</p>	<p>When my portfolio has a collection of quality articles and resources relevant:</p> <ul style="list-style-type: none"> - Ear Nose and Throat - Head and Neck Cancer - Stroke - Neurosurgery - Relevant case loads - Key competencies of speech, lang, voice & swallowing. 	<p>Provide positional strategies for Pt's, including upright for all oral intake.</p> <p>Trialled syringe feeding and feeding from spoon and straw for Pt's.</p> <p>Updated handover lists on G:</p> <p>With guidance from Sarah, consider a pt's discharge date and plan for discharge.</p> <p>Clinically reason a pt's presenting symptoms in On-Treat clinic and independently provide pt's with recommendations.</p> <p>See portfolio for further evidence:</p> <p>Assessments: OME, Swallow, dysarthria, high level language</p> <p>Fact sheets from the H&N Clinic Folder</p> <p>Journal articles</p> <ul style="list-style-type: none"> - Prophylactic exercises for HNC Pt's - Dysphagia and rehabilitation and compensatory strategies. <p>SPA Position Statements</p> <ul style="list-style-type: none"> - Trache - Laro's <p>Book Chapter's and Lecture Notes</p> <p>Clinical Tute Case notes</p>
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<ul style="list-style-type: none"> • <i>Surgical information</i> • <i>Symptoms of H&N Ca</i> <p><i>Develop rapport with clients and their families and develop clinical skills including the ability to:</i></p> <ol style="list-style-type: none"> <i>1) feedback assessment results,</i> <i>2) collaboratively devise management plans with clients</i> <i>3) employ counselling skills in the area of cancer care management.</i> 	<ol style="list-style-type: none"> Obtain readings, resources and journal articles relevant to the caseload to ensure I am well informed. View clinical educator and other Speech Path's working with clients and reflect on their practice. Self-reflect on own practice, including positives and areas for improvement. 	<p>Midway Compass: Week Five Final Compass</p>	<p>When I feel confident and comfortable in leading a session with a client and discussing their Ax results and Tx progress with them. Feedback from CE.</p>	<p>Glascow Coma Scale</p> <p>A number of journal articles pertaining to management of dysphagia in HNC Pt's.</p> <p>Additional notes from Tracheostomy Workshop attended on the 02/09. Additional notes from MBS workshop attended on the 03/09. Information re neck dissection and complications.</p> <p>Provided feedback to Pt's</p> <p>Listening to Pt's in on-treat clinic Reflections on own practice and dealing with difficult situations. – <i>Self reflections continued.</i> Provided feedback to pt re his MBS. Photocopied a list of supportive language (from the nurses station) to be used with oncology pt's. Independently provide feedback to client and family re swallowing difficulties – potential reasons for. ENT pt – WLE retromolar trigone. Developing confidence in</p>
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<p><i>Develop interprofessional relationships with other health professionals, (including Dr's, nurses, SW'S, OT's, Physio's as needed) to provide a holistic Mx plan for the client.</i></p>	<p>a) Research and learn the specific role each profession plays in the management of patient's.</p> <p>b) Create open lines of communication through introducing myself and the role I play.</p> <p>c) Liaising with nurses and doctors regarding a Pt's diet (as required)</p>	<p>Midway Compass: Week 5.</p>	<p>Introduce myself to the relevant health professionals on the ward. Am able to communicate with nurses, doctors, OT's, physio's, SW about a Pt's swallowing and/or communication. Maintain positive interactions with other health professionals. Am able to provide handover information about a Pt. Send pages or make phone calls regarding Pt's Ax or Mx.</p>	<p>On-Treat clinic. Liaising with nursing staff on 8AN about new admissions to the ward. Informing nurses of diet changes and positional strategies for patients on ward. Providing handover to Clare (dietician) in on-treat clinic about pt's and verbal handover to Sp Path's in department. Sharing documentation with dietician in on-treat clinic. Paged and spoke with Dr regarding a Pt's diet upgrade. Liaised with nurse to organise the removal of a Pt's NG tube. Paged and spoke to 8AN dietician re discharge report for Pt – and pt's diet on discharge. Provide handover to OP Speech Path clinician re client. Liaised with med team re pt's post surgery diet and complication – NBM. Liaising with nurses on various wards re Pt's mgmt and nurses in oncology re Pt's mouthcares etc.</p>
<p><i>Develop interprofessional experience with the dietician to work together to</i></p>	<p>a) Take notes during observation relating to the questions asked from the Dietician and Speech Path during the clinic.</p>	<p>Midway Compass and Final.</p>	<p>When I feel confident in leading a session with a client in collaboration with the dietician. Can document in the medical chart</p>	<p>Providing handover to Clare (dietician) in on-treat clinic about pt's. Independently in unison</p>

<p><i>successfully see patients in the on-treat outpatient clinic and document their progress.</i></p>	<ul style="list-style-type: none"> b) Research the side effects of radiation on voice and swallowing. c) Consult the readings and material in the H&N Clinic folder. d) Photocopy an example of a chart entry to guide documentation. 		<p>during the session. Feedback from CE Feedback from dietician.</p>	<p>with dietician run On-Treat clinic. Worked with Christine in On-Treat clinic and shared documentation of pt's with her. Sharing documentation with Claire and collaboratively working together in On-Treat clinic.</p>
<p><i>Attend the Head and Neck Cancer Admission Clinic and gain an insight into the processes behind deciding a patient's management plan.</i></p>	<ul style="list-style-type: none"> a) Gain information surrounding the caseload and understand the differing options of treatment for readings and materials and resources in the H&N Clinic Folder. b) Ask clinician's when would be a suitable time to attend this clinic. 	<p>Final Compass</p>	<p>Attending the H&N Admission Clinic and reflecting on SpPath's role in the clinic.</p>	<p>Attended Head and Neck Clinic on the 06/09. Insight into the medical management of Pt's. Provided a clear understanding of a Pt's journey from the beginning through to d/c.</p>
<p><i>Present the Head and Neck Talk to Ca Pt's and their carers in a confident and professional manner.</i></p>	<ul style="list-style-type: none"> a) Research the symptoms of Chemo and RT on H&N Ca pt's swallow. b) Access information from the folder related to the H&N talk. c) Draft a script and practice script with the slides used in the H&N talk. 	<p>Midway Compass</p>	<p>Able to confidently deliver the H&N talk to Ca Pt's and their caregivers.</p>	<p>Presented Xerostomia section on 21/08 Presented half of talk on 28/08 Presented all of HNC Talk on 04/09. Presented prophylactic swallowing exercises during talk on the 11/09.</p>
<p><i>Conduct a Quality Improvement Project that provides a literature review on prophylactic exercises in</i></p>	<ul style="list-style-type: none"> a) Create a timeline of key dates for the project. b) Research the topic. c) Access previous literature reviews for guidance. 	<p>Final Compass</p>	<p>Completed a literature review on the topic. Made a resource of evidence based prophylactic exercises to be used</p>	<p>Discussion with Jen, re project. Attended journal club on article relating to</p>

<p><i>H&N patients undergoing chemo-radiation and a resource to assist the implementation of exercises with this population.</i></p>	<p>d) Liaise with CE regarding project and the departments needs.</p>		<p>with H&N Ca patients undergoing chemo-radiation.</p>	<p>prophylactic exercises. Research for literature review started. Project proposal in finishing phases, including timeline for project. Completed Lit Review. Completed resource – handout of prophylactic swallowing exercises for HNC Pt’s and implemented exercises on 11/09.</p>
<p><i>Manage the workload in the caseload in a timely and efficient manner throughout the day and over a week.</i></p>	<p>a) Become familiar with the computer systems used to store Pt information and log hours/time. b) Use a diary to help manage the days. c) Use a watch to manage time efficiently.</p>	<p>Final Compass</p>	<p>Prioritise caseload and pt’s within caseload. Am able to conduct Ax and Mx in a timely manner. Am able to update statistics using P15 on a daily basis. Handover list is updated daily. Documentation completed in a timely and efficient manner and is factored into the day. Appropriately assumes the role, duties, and responsibilities depending on caseload – 8ANorth & On-Treat Clinic Can use the computer system of the differing clinics including MOSAIC, OSIM, G: etc.</p>	<p>Print out ward handover lists from in G drive. Attempt prioritisation of Pt’s with other student, Jane and discuss with CE, Sarah. Print out Pt’s to be seen in on-treat clinic using MOSAIC and access Pt information in on-treat folder. Prioritisation of own Pt’s seen on 8AN completed and then consulted with Sarah. Independent management of caseload Inputting P15 stats. Consistently updating ward lists on G:</p>

Student's signature:..... Date:

Clinical Educator's signature: Date: