Chapman University Communication Disorders and Sciences

Supervising Multiple Generations in Schools, Private Practices and Medical Setting

(graduate interns, assistants, fellows and licensed Speech-Language Pathologists)

Angela Mandas, MA-CCC, Speech-Language Pathologist

Chapman University , Clinical Fieldwork Coordinator

Lisa LaChance, MA-CCC Speech Language Pathologist

Chapman University, Director of the Adult Learning Lab

California Speech-Language Pathology & Audiology & Hearing Aid Dispensers Board: Supervision Course Requirements

- Any SLP who supervises new grads (RPEs) or SLPAs is required to:
 - Complete an initial 6 hours of supervision coursework.
 - Complete an additional 3 hours of supervision coursework in each subsequent license renewal period.
 - If no supervision coursework is completed in a given license renewal period, the SLP must again complete 6 hours.

California is the only state that REQUIRES supervision coursework.







Today's agenda

- We are training future school, private practice and medical speech language pathologists
- The Newest Generation
- Baby Boomers meet with the new generation Gen Z
- Coaching, Mentoring, Collaborating Hybrids and more
- Styles of learning
- Hands on activity show me how....
- Supervision styles
- How to deal with conflict
- Providing feedback

We provide a service

We need to know who we work with and who are our stakeholders.

ASHA's essential functions

Have you heard of ASHA's Essential Functions

Yes

No

Essential Oils? Oh no, essential functions - nope!

Essential Functions of Speech-Language Pathologists

Excerpt from the Council of Academic Programs in Communication Sciences and Disorders

- COMMUNICATION
- A student must possess adequate communication skills to:
- Communicate proficiently in both oral and written English language.
- (Language to be determined by program.)*
- Possess reading and writing skills sufficient to meet curricular and clinical demands.*
- Perceive and demonstrate appropriate non-verbal communication for culture and context.* Modify communication style to meet the communication needs of clients, caregivers, and other persons served. *

- Communicate professionally and intelligibly with patients, colleagues, other healthcare professionals, and community or professional groups.
- Communicate professionally, effectively, and legibly on patient documentation, reports, and scholarly papers required as a part of course work and professional practice. Convey information accurately with relevance and cultural sensitivity

Do you agree with these Communication functions?

Yes

No

Motor skills

- A student most possess adequate motor skills to:
- Sustain necessary physical activity level in required classroom and clinical activities.* Respond quickly to provide a safe environment for clients in emergency situations including fire, choking, etc.*
- Access transportation to clinical and academic placements.*
- Participate in classroom and clinical activities for the defined workday.*
- Efficiently manipulate testing and treatment environment and materials without violation of testing protocol and with best therapeutic practice.

- Manipulate patient-utilized equipment (e.g. durable medical equipment to include AAC devices, hearing aids, etc) in a safe manner.
- Access technology for clinical management (i.e. billing, charting, therapy programs, etc.).

Do you have any questions about this function?

Intellectual/Cognitive

- A student must possess adequate intellectual and cognitive skills to:
- Comprehend, retain, integrate, synthesize, infer, evaluate and apply written and verbal information sufficient to meet curricular and clinical demands.*
- Identify significant findings from history, evaluation, and data to formulate a diagnosis and develop a treatment plan.
- Solve problems, reason, and make sound clinical judgments in patient assessment, diagnostic and therapeutic plan and implementation.

- Self evaluate, identify, and communicate limits of one's own knowledge and skill to appropriate professional level and be able to identify and utilize resources in order to increase knowledge.
- Utilize detailed written and verbal instruction in order to make unique and dependent decisions.

Sensory/Observational

- A student must possess adequate sensory skills of vision, hearing, tactile, and smell to:
- Visually and auditorily identify normal and disordered (fluency, articulation, voice, resonance, respiration characteristics, oral and written language in the areas of semantics, pragmatics, syntax, morphology and phonology, hearing and balance disorders, swallowing cognition, social interaction related to communication).
- Identify the need for alternative modalities of communication.
- Visualize and identify anatomic structures.
- Visualize and discriminate imaging findings.

- Discriminate text, numbers, tables, and graphs associated with diagnostic instruments and tests.
 - Recognize when a client's family does or does not understand the clinician's written and or verbal communication.

Behavioral/Social

- A student must possess adequate behavioral and social attributes to:
- Display mature empathetic and effective professional relationships by exhibiting compassion, integrity, and concern for others.*
- Recognize and show respect for individuals with disabilities and for individuals of different ages, genders, race, religions, sexual orientation, and cultural and socioeconomic backgrounds.*

- Conduct oneself in an ethical and legal manner, upholding the ASHA
 Code of Ethics and university and federal privacy policies.*
- Maintain general good physical and mental health and self care in order not to jeopardize the health and safety of self and others in the academic and clinical setting.*
- Adapt to changing and demanding environments (which includes maintaining both professional demeanor and emotional health).

- Manage the use of time effectively to complete professional and technical tasks within realistic time constraints.
- Accept appropriate suggestions and constructive criticism and respond by modification of behaviors.
- Dress appropriately and professionally.

What function stuck out to you the most?

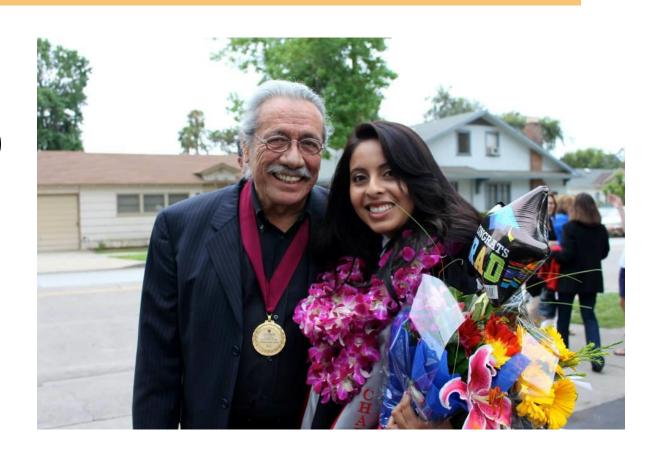
How do we operate as a business?

What do we need to know to train the next generation?

What do we need to know about the person we supervise and what do they need to know about us.

Generational groups

- Traditionalists (1922-1945) 75 million
- Baby Boomers (1946-1963) 80 million
- Generation X (1964-1980) 46
 million
- Millennial (1981-1995) 76 million
- Gen Z (1995-2012) 73 million



The Boomers and the Millennials





Millennials

Half of the 83 million millennials

are now parents



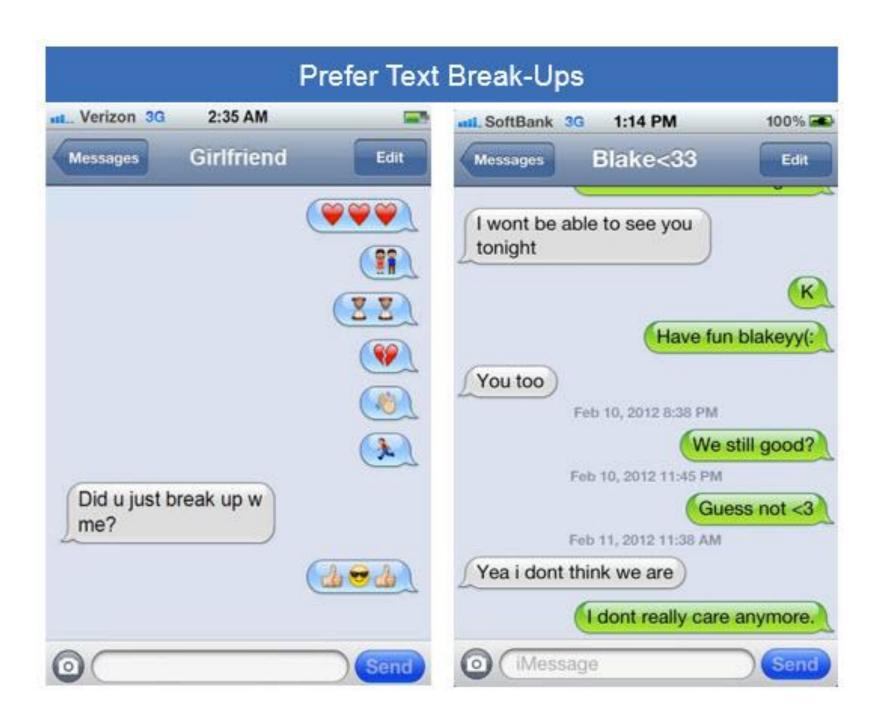




Gen Z: Independent, Focused and Fiercely Competitive







The new reality





Can we autocorrect humanity?



Let's take a quick quiz to judge your long term memory on generation icons and such

What you need:

- Paper
- Pen or pencil
- Brain power

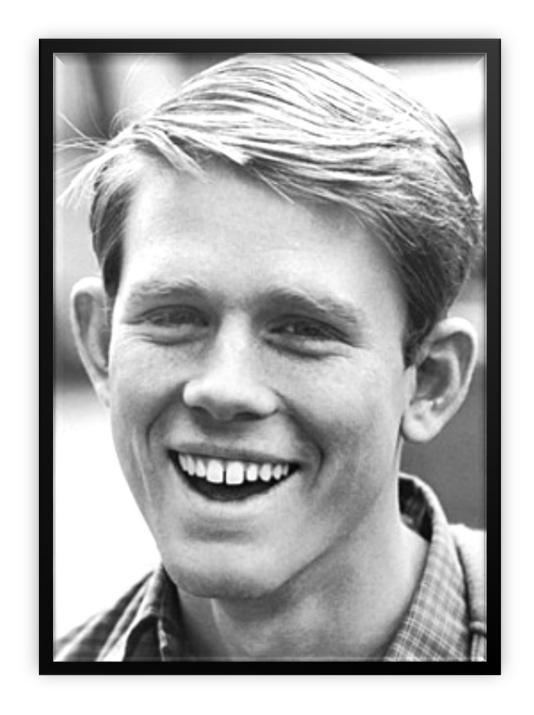




3. Who are these people?



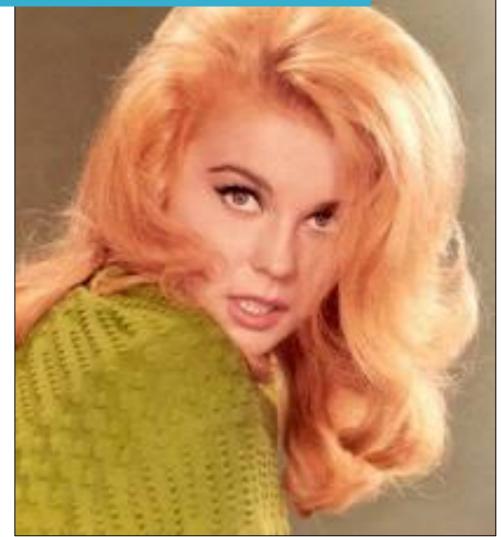
4. What was his first tv show as a child?







8-9. Name these beauties



10. What film is this from?





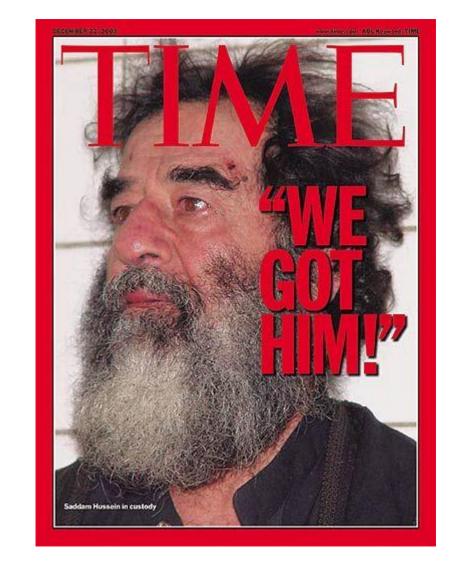
11.Name these characters



12.13.What's her name and who is her father?

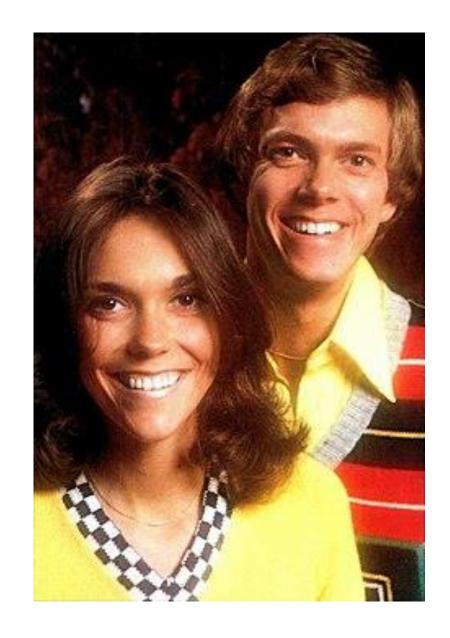


14. 15 Who are they?

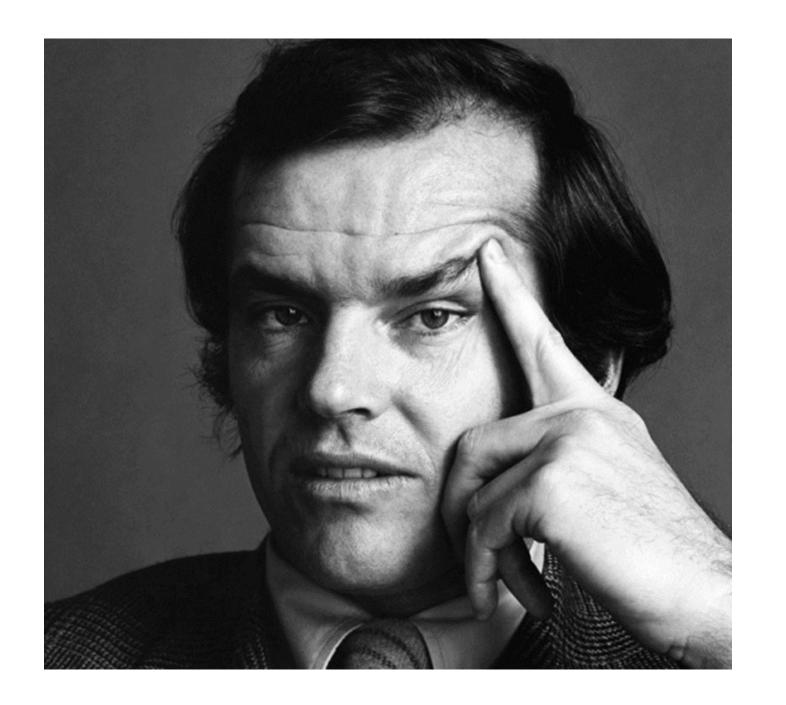




17-18-19





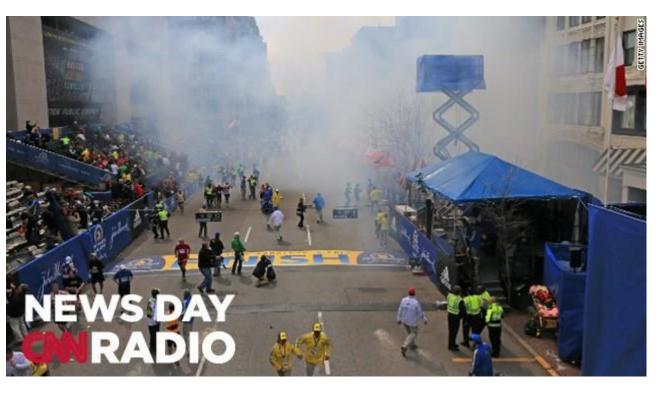






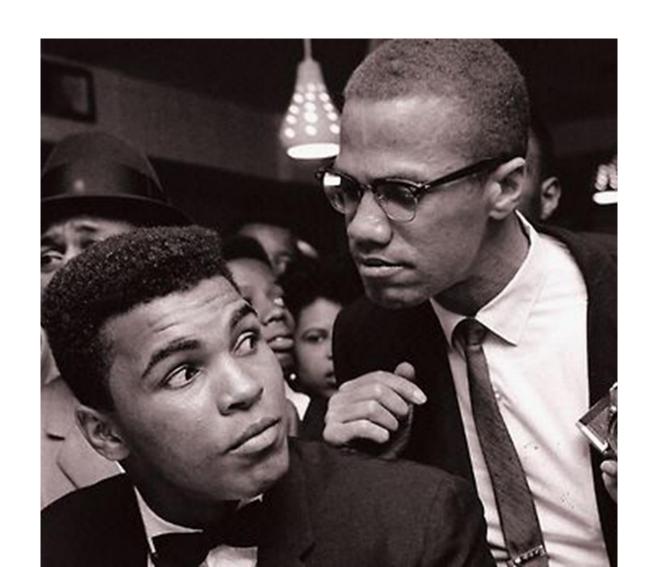
24-25



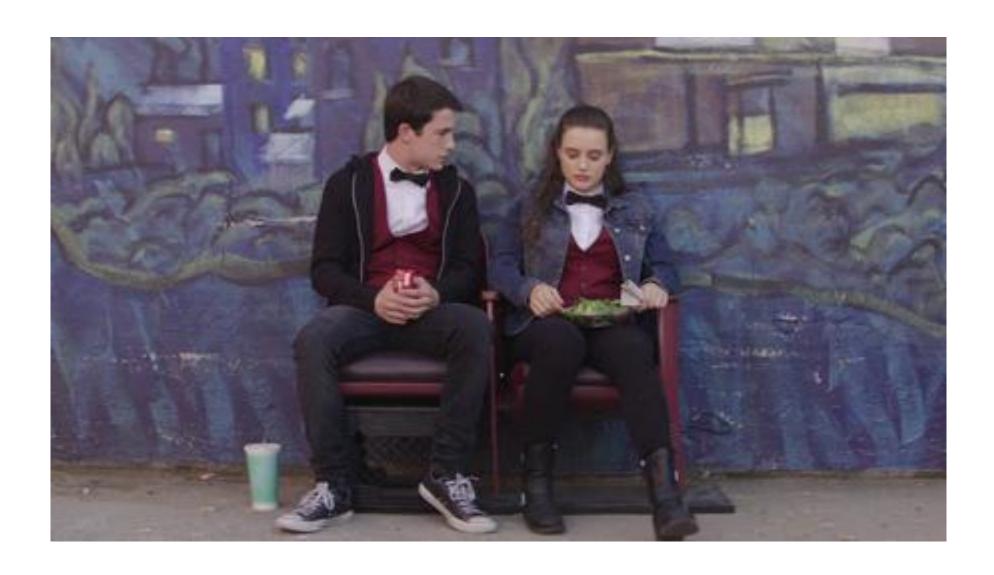








30. What is the name of this Netflix movie?

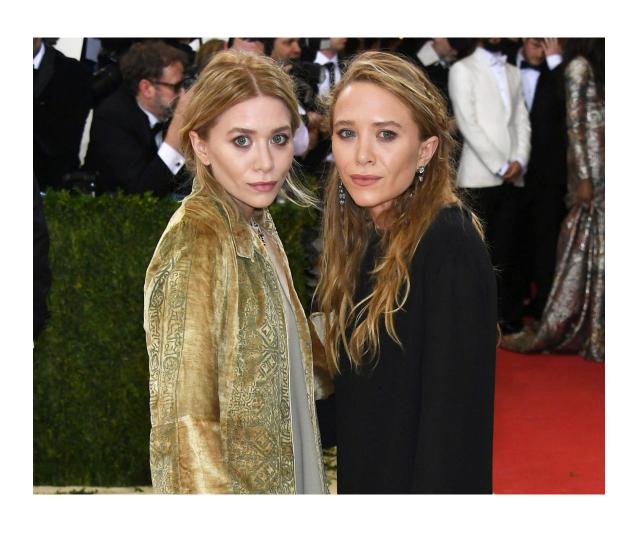












Meet the Millennial generation



• Simon talks about millennials

Meet Tammy Erickson



<u>Tamara J. Erickson</u> has authored the books <u>Retire</u>
<u>Retirement</u>, <u>Plugged In</u>, and <u>What's Next, Gen X?</u> She is the author or co-author of five Harvard Business Review articles and the book <u>Workforce Crisis</u>. Erickson was named one of the top 50 global business thinkers for 2011.

Re-Generation group coined by Erickson

- Bill Gates calls this generation : Generation I (Internet)
- Children born after 1995 were raised on the Internet
- Digital Natives were Generation X
- Digital Pioneers are Gen Z
- Re-Generation has access to everything, everywhere, anytime, all the time!

Texting



- Kids age 11 to 13, spend 73 minutes a day texting
- The average teen sends more than 50 texts a day



Sherry Turkle, Director of MIT's Initiative on Technology and Self and Author of Alone Together, has studied the psychological effects of texting on teens. "Kids don't know how to express feelings unless they put it in a text"

Franklin Covey's Resolving Generational Conflict

- www.youtube.com/watch?v=rTLzf3tU0OA
- www.youtube.com/watch?v=fP3WJldE6OI

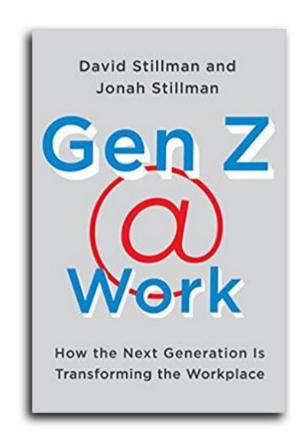




5 generations are working together rubbing shoulders!

Father and son making the news





Who are they?

- David Stillman is the co-author of the best-selling books When Generations
 Collide (HarperBusiness, 2003), The M-Factor: How the Millennial Generation Is
 Rocking the Workplace (HarperBusiness, 2010), and Gen Z @ Work: How the
 Next Generation Is Transforming the Workplace (HarperBusiness, 2017). He has
 contributed to Time magazine, The Washington Post, The New York Times and
 USA Today, and has been featured as a generational expert on CNN, CNBC and
 the "Today" show. Stillman has been named one of the "200 to Watch" by
 Business Journal.
- Jonah Stillman is a 17-year-old high school senior and currently the youngest speaker on the national circuit. He was a nationally ranked alpine snowboarder and has served as an ambassador for the international nonprofit WE, traveling to Kenya and Ecuador to build schools. Jonah provides companies and organizations a unique perspective on Generation Z. He is the co-author of Gen Z @ Work: How the Next Generation Is Transforming the Workplace.

Info from the Stillman's:

- "There is no distinction between working in an office and working in a coffee house it's all work; they're always online."
- "Our world is phigital- meaning every physical aspect has a digital equivalent."

• Steve reports that a meeting is considered to be a face to face interaction. His son reports that a meeting can be via Skype.

A perfect example of generational divide.

Scenario #1

• A 60 year old workaholic baby boomer, supervising a 23 year old millennial graduate student, is upset that the student has to miss two scheduled treatment sessions because of attendance at a family wedding. The student on the other hand, who values a work-life balance, plans to make up the missed sessions and wonders why her supervisor seems distant and annoyed.

What do you think? How would you resolve this?

Discussion

What if the person was a SLPA?

What if the person was another Baby Boomer?

Scenerio #2

- A SLP supervisor is excited to supervise. She remembers her former supervisors and wants to be just like them. The first day of the practicum experience, the student leaves the school site humiliated. She reports that the supervisor made her felt stupid as she couldn't cite references to her therapy methods. The supervisor calls the University and informs the Fieldwork Director that our students are not prepared.
- What should be done?

Scenerio #3

- The new employee meets the Speech Team at a district meeting. He is shy initially but decides to introduce himself to the other younger clinicians. He tells the other clinicians the educational workshops he has previously attended, has plans to start his own practice and eventually teach at a local private university. He is confident and self assured.
- He leaves the meeting discouraged as no one wants to get to know him. He heard someone say "he thinks he knows everything". Well I don't want to mentor him.
- Who would want to supervise/mentor/coach this young man?

Scenerio #4

- A graduate student discusses with you her need for accommodations.
 The student has an anxiety disorder and needs to have his feedback from his onsite supervisor to be written instead of verbal.
- Is this reasonable?
- Could you permit this in your work setting?
- What are accommodations anyway?

Possible solutions from Vicki McCready, SLP@ UNC

- Establish a discussion of expectations
- Consider reviewing generational differences
- Strengths and weaknesses
- Discuss personal relationships
- Empower your supervisee
- Always consider their perspective

it should we expect from graduate stude

They are prepared

They are willing to work hard as we do

They are willing to ask questions



If you see this message in presentation mode, install the add-in or get help at PollEv.com/app





Styles of Supervision for you

- Based on
 - Your learning style
 - Your temperament
 - The nature of your work and supervisor-supervisee relationship



Styles of Supervision

Directing

- High level of instruction
- Provides a low level of support
- Communicates clearly and assertively
- Provides a high level of control

Coaching

- Provides a high level of instruction
- Provides a high level of support
- Makes and explains decisions
- Demonstrates when needed

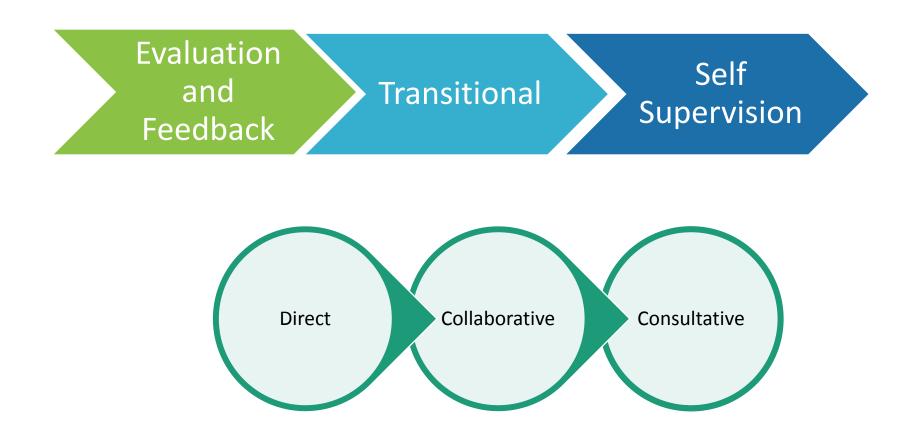
Supporting

- Provides a low level of direction
- Provides a high level of support
- Shares responsibilities and the lead
- Evaluates collaboratively

Delegating

- Provides a low level of direction
- Provides a high level of support
- Provides minimal information
- Provides feedback only periodically

Anderson's Continuum of Supervision Model



"The Process Of Equipping People With The Tools, Knowledge, And Opportunities They Need To Develop Themselves Or Become More Effective." Peterson And Hicks

Coaching





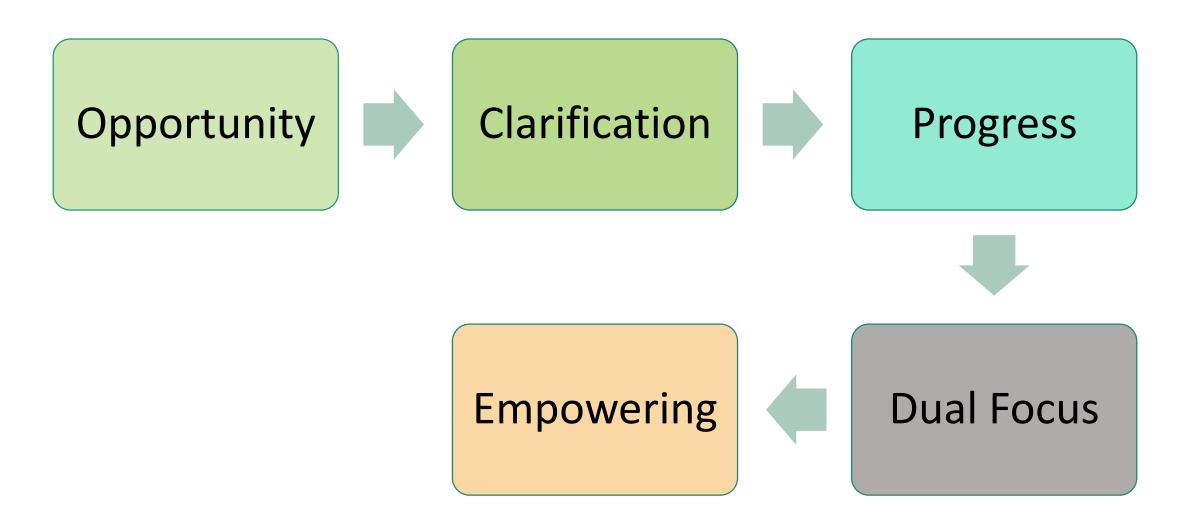




What is a coach?

- "A coach acts as a guide by challenging and supporting people in achieving their personal and organizational performance objectives" Tom Crane
- Author of the Heart of Coaching.

Coaching explained



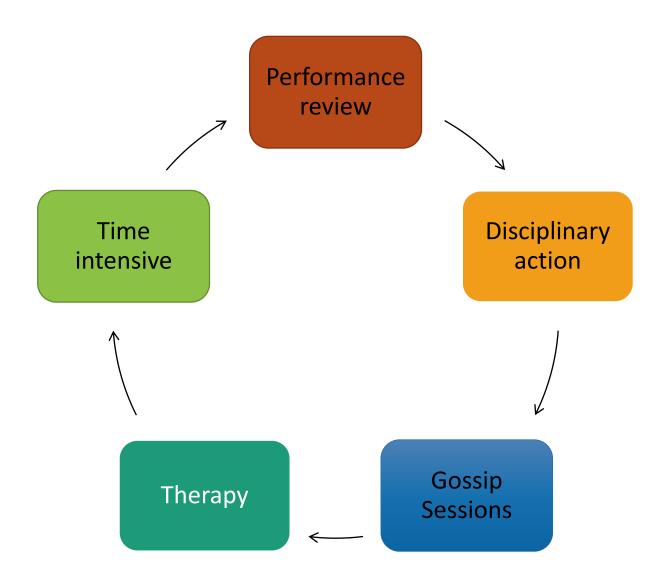
CorporaToons

Nitya Wakhlu



Tyson practices coaching at every chance he gets!

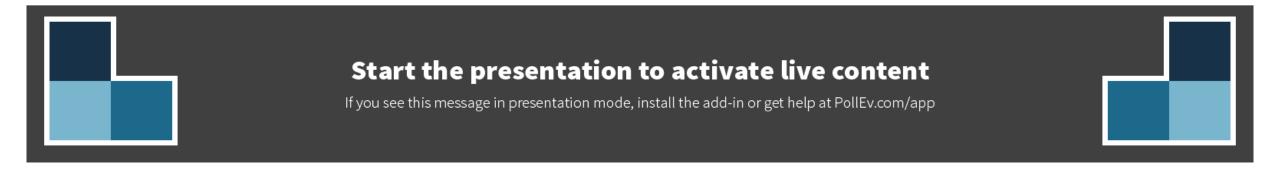
What coaching is not





"I expect you all to be independent, innovative, critical thinkers who will do exactly as I say!"

What is your hesitancy for not wanting to supervise?



Coaching misperceptions

- Takes a lot of time who has the time?
- Primary focus is to fix problem behaviors
- Role of the coach is to give feedback and advice
- Coaching is the same as mentoring

Mentoring tips

Tammy Erickson, HarvardBusiness.org



- Creating a "gift Culture"
- Start with Specific needs

- Put the onus on the mentee
- Make it a two-way relationship



"Well, a pop-up doctoral dissertation is certainly an original idea..."





www.youtube.com/watch?v=fQYW6v YSGXs

Take the learning style assessment.

Would you consider using this with your new grad student, new hire, or slpa?

Learning Styles: Inventory

Complete the 12 sentences below. Each has 4 endings. Rank the endings according to how well you think each one fits how you would go about engaging in learning. Try to recall a recent learning experience related to your work. In the spaces provided next to each ending, give a numerical ranking 1-4; 4=best, 1=least. Use each number only once. Rank all of the endings for each sentence. You know you are correct if the tally of the row equals 10. When complete, tally each column. You know you are correct when the tally of the 4 columns equals 120. Circle the highest score.

1. When I Learn:	I like to deal with my	_I like to watch and	I like to think about	I like to be doing
	feelings	listen	ideas	things
2. I learn best	I trust my hunches and	I listen and watch	I rely on logical	_I work hard to get
when:	feelings	carefully	thinking	things done
3. When I am	I have strong feelings and	I am quiet and	I tend to reason things	I am responsible about
learning:	reactions	reserved	out	things
	1			
4. I learn by:	Talking	Watching	Thinking	Doing
5. When I learn:	I am open to new	I look at all sides of	I like to analyze things	I like to try things out
	experiences	issues	and break them into parts	
6. When I am	I am an intuitive person	I am an observing	I am a logical person	I am an active person
learning:		person		
7. I learn from:	Personal relationships	Observations	Rational theories	_A chance to try out
				and practice
8. When I learn:	I feel personally involved	I take my time before	I like ideas and theories	I like to see my results
	in things	acting		from my work
9. I learn best	I rely on my feelings	_I rely on my	I rely on my ideas	I can try things out
when:		observations		
10.When I am	I am an accepting person	I am a reserved person	I am a rational person	I am a responsible
learning:				person
11.When I learn:	I get involved	I like to observe	I evaluate things	I like to be active
12.I learn best	I am receptive and open-	I am careful	I analyze things	I am practical
when:	minded			
Totals:				
	Sensor	Reflector	Thinker	Actor



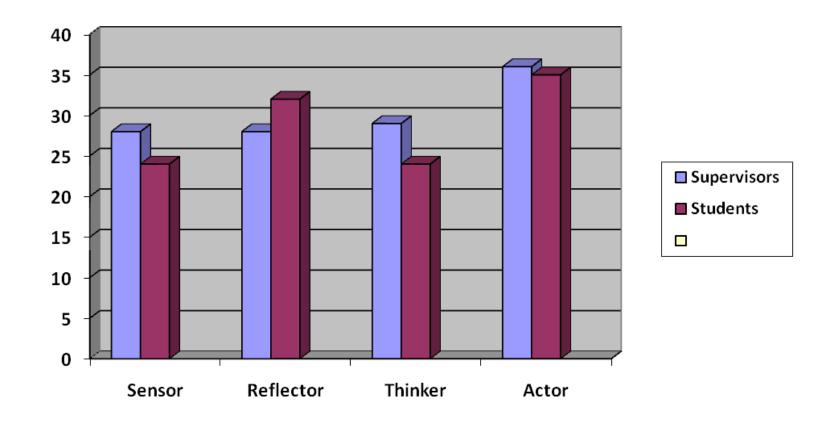






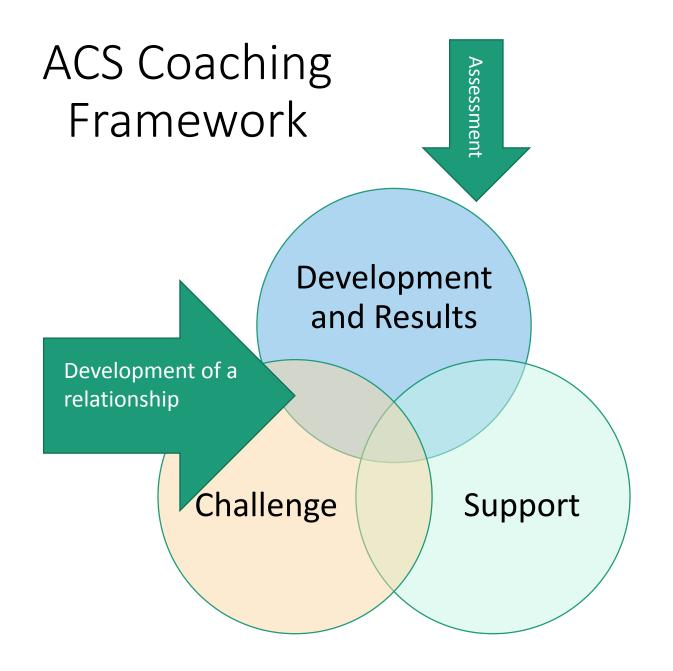
What's your style?

Average scores of 8 supervisors and 8 graduate student interns examining their learning styles



Share and learn







Assessment

- Understanding strengths, weaknesses, and preferences
- Cultivating insight
- Balance self assessment with feedback from others
- Taking time to reflect on experiences





Challenges

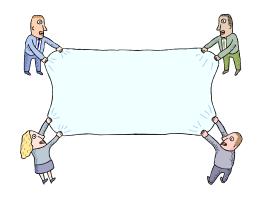
- Personal and environmental obstacles
- Stretch beyond one's comfort zone
- Balance between not enough and too much challenge
- Helping person move forward, grow, and develop





Support

 Provides the safety net for taking risks and encouragement to persist at the hard work of change



- Foundation creating mutual trust and respect
- Identify key motivators that will sustain person's momentum when it gets difficult
- Help person see movement, even if only in small increments or baby steps.



Agenda for Afternoon

- Chapman University Program
 - Education Schema
 - Faculty
 - University Supervisors
 - On Site supervisors
 - Students
 - Placements
 - Forms
 - Requirements













Student Placements

- Public Schools
- NPA's
- Private Practices
- Rehab hospitals
- Acute medical centers
- Skilled nursing centers

 WE provide the student opportunities to gain clinical experience with all 8 KASA areas in authentic settings

Now how do I score/support the student? Understanding the scoring

- 1=Immediate and continuous support is needed to complete this task
- 2=Intermittent or focused support needed to complete this task
- 3= Sporadic support with specific or new tasks
- 4=Student clinician requests support or is independent

Scoring is regarding what you are doing to support the student.

Documentation

The Importance of Teaching Data Collection to our Graduate Student Clinicians

Rationale for Documenting Every Session with Every Student

- Track Student Attendance
- Goal Planning
- Assessing Student Progress
- Reflection/Lesson Effectiveness
- LEA/Medi-Cal Billing
- High Profile Cases

Lesson Plans

Data Collection

- Whatever system you use, keep it consistent.
- Make sure you have a key for interpretation
- IEP Baselines/Progress Reports
- Percentage of Accuracy
- Subjective/Behavioral Observations
- Other errors noted during sessions

Teaching the Skill of Data Collection to our students.

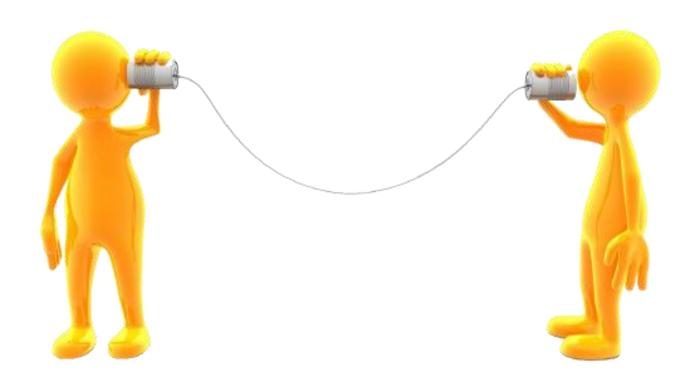
- Students don't have student goals "in their heads". They need to be able to reference goals throughout the session.
- Students need to learn how to take meaningful data during sessions without losing the dynamic therapy process.
- Start with one student in a group and progressively add more until they are taking data on every student, every session.

Something to Think About:

How Much is too Much?

- Do we need to document every attempt/production?
- Is a sample of 10 enough?
- Do you take the data before or after direct teaching?
- Students need to see the benefit of taking meaningful data.
- Systematic/data driven lessons result in faster student progress and create trust with parents!

How to give feedback



Before beginning.. Try finding out what they prefer: verbal or written

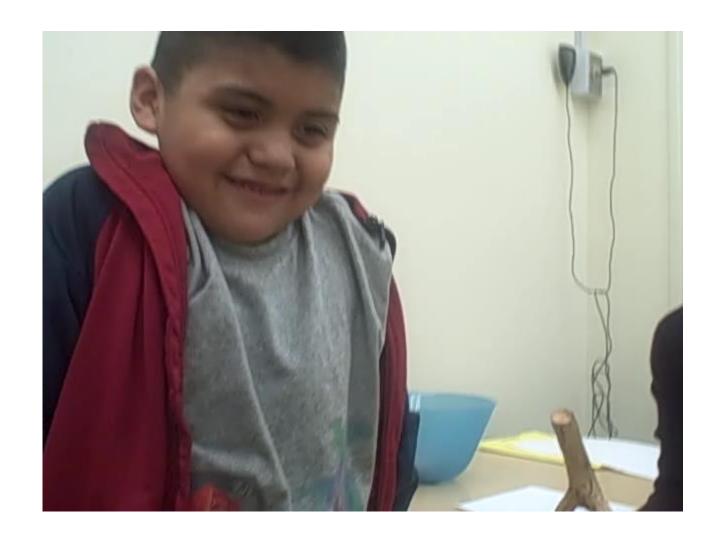
What happened I think the goals/objectives were: Positive Feedback Questions for discussion

Four Square Reflection tool

Watch and record on a Four Square

- What happened? –
- I think the goals and objectives were....
- Positive feedback
- Questions for discussion









Examples of valuable comments

- Minnie Mouse was a pleasure to supervise. She dressed well, had matching shoes and accessories and spoke in a rather high voice.
- The children and support staff liked her enthusiasm for life. She will be a great clinician.

A better comment

- Minnie was a joy to supervise. She was timid at first with the preschoolers but learned how to play, how to document while playing, learned how to conduct an IEP meeting and was able to talk professionally to parents.
- Minnie areas of continued growth include time management, behavior training, data collection, flexibility and writing reports.
- · She is expected to reach these goals by her final weeks at this practicum experience.

Difficult Conversations

Adapted from material by

Anne St. John

MemorialCare Health System

What is a Difficult Conversation?

What is a difficult conversation?

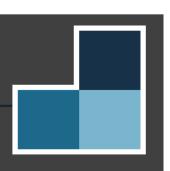
Any conversation that is not pleasant.

Any conversation that you avoid having

None of the above



If you see this message in presentation mode, install the add-in or get help at PollEv.com/app



A Difficult Conversation

A discussion between 2 or more people where:

- Opinions vary
- Stakes are high
- Emotions run strong

How Do We Typically Handle Difficult Conversations?

- We can avoid them
- We can face them and handle them poorly
- We can face them and handle them well

CONSEQUENCES

 What are the consequences of NOT having these conversations and/or not doing them well?

The Goal With Difficult Conversations:

- Develop a way to deal creatively with difficult messages while treating people with dignity and integrity
- Learn to have "Learning Conversations"

Difficult conversations often go awry not because of the content, but because others believe that the painful and pointed content means that you have malicious intent.

"Start With Heart Questions"

- What do I really want for myself?
- What do I really want for others?
- What do I really want for the relationship?

Check Your Purpose and Decide Whether to Raise the Issue

• <u>Purpose</u>: What do you hope to accomplish by having this conversation?

 Deciding: Is this the best way to address the issue and achieve the purposes?

Inquiry and Advocacy

 Inquiry: A process for understanding the other person's point of view by exploring his/her thoughts, feelings and reasoning

 Advocacy: A process of influencing the other person's thinking and behavior by stating one's opinions and suggestions, and outlining the rationale for each

Active Listening Definition

• It is the <u>active</u> process of seeking to understand (not evaluate)

It involves more than hearing words

 Need to consider <u>content</u> (what they mean), <u>emotions</u> (how they feel), and <u>perceptions</u> (their view)

Toward Effective Coping: Basic Steps

- 1. Assess the situation
- 2. Stop wishing it was different
- 3. Get some distance between you and the situation
- 4. Formulate a plan
- 5. Implement your strategy
- 6. Monitor your plan and modify when appropriate

Protocol: Confronting Difficult Issues

Start Meeting Acknowledge

State Original Goal or Agreement (Pause)



Say What You See (Pause)



Acknowledge Your Part in the Situation



Make a Good Faith Statement About Future



Ask for Their Help



Be Silent



Listen



Negotiate a New Way of Working Together or Reconfirm Your Original Agreements



Discuss Next Steps



How Will You Know When You've Been Successful?

Let's practice

• Situation A: You have been assigned a graduate student clinician. After the first week, he begins showing up late every day. At first he is only late enough that he must scramble to pull materials together, but eventually he starts coming so late that you must start, or even finish, his first therapy session. You have mentioned it to him indirectly, but things only seems to be getting worse. You happen to know that the student lives 5 minutes away, so traffic is no excuse.

• **Situation B:** Your student intern quickly becomes defensive when you offer feedback about her sessions. She is, at times, poorly prepared for her sessions and when confronted, she immediately deflects the blame. Over time, you discover that she is telling different versions of events to you and to her university supervisor.

Begin the Discussion

"I have a (tough, uncomfortable, important, serious, etc.) issue to raise with you."						raise	
			· · · · · · · · · · · · · · · · · · ·			 	

Acknowledge Any Reservations You've Had

"I've been reluctant to raise this because"					
"but, I've decided to do so anyway because"					

State Your Understanding of the Original Goal or Agreement or Your Assumptions

"It's my understanding when we last met we agreed"						
"When we got together, you agreed to"						
"I know we didn't have a formal agreement, but I assumed that"						

Say What You See

Hold up a mirror" to the behavior.					
Focus on the situation, issue, or behavior, not the person					
This is what I'm seeing that causes me concern"					

Acknowledge Your Part in the Situation

"I've worsened the problem by"					
"I've contributed to the problem by"					
					
					

Make a Good Faith Statement about the Future

"I really want to resolve this so that we can work better together." "It's really important for both of us to work this out."					

Ask for Their Help

"I need you	r help."			

Ask and Listen

"I'd like to know how you see it	t."				
"I really want to understand how you see it." "What are your thoughts about what I've said?"					

Negotiate a Different Way of Working Together or Reconfirm Your Original Agreements

"This is what I need from you" "What do you need from me?"				
			-	

Discuss Next Steps (When/How Will You Know You've Been Successful?)

"When should we get together a	gain to see how things are going?"			
"What will we see/hear that will indicate things are getting better?"				
"If things are getting better, wha	t will be different?			

Questions and Answers

Thank you for participating today!