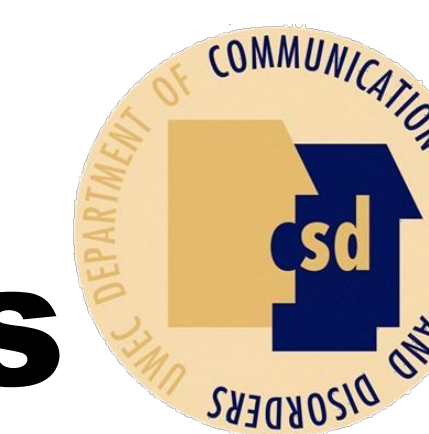


Course Embedded Clinical Experiences: Meaningful LPAA interventions delivered by students who learn in the process

Jerry K. Hoepner & Tom W. Sather University of Wisconsin – Eau Claire

"It was nice to be able to get some hands on experience right now, while I am still in the class, rather than not being able to practice my skills possibly ever in the clinic."

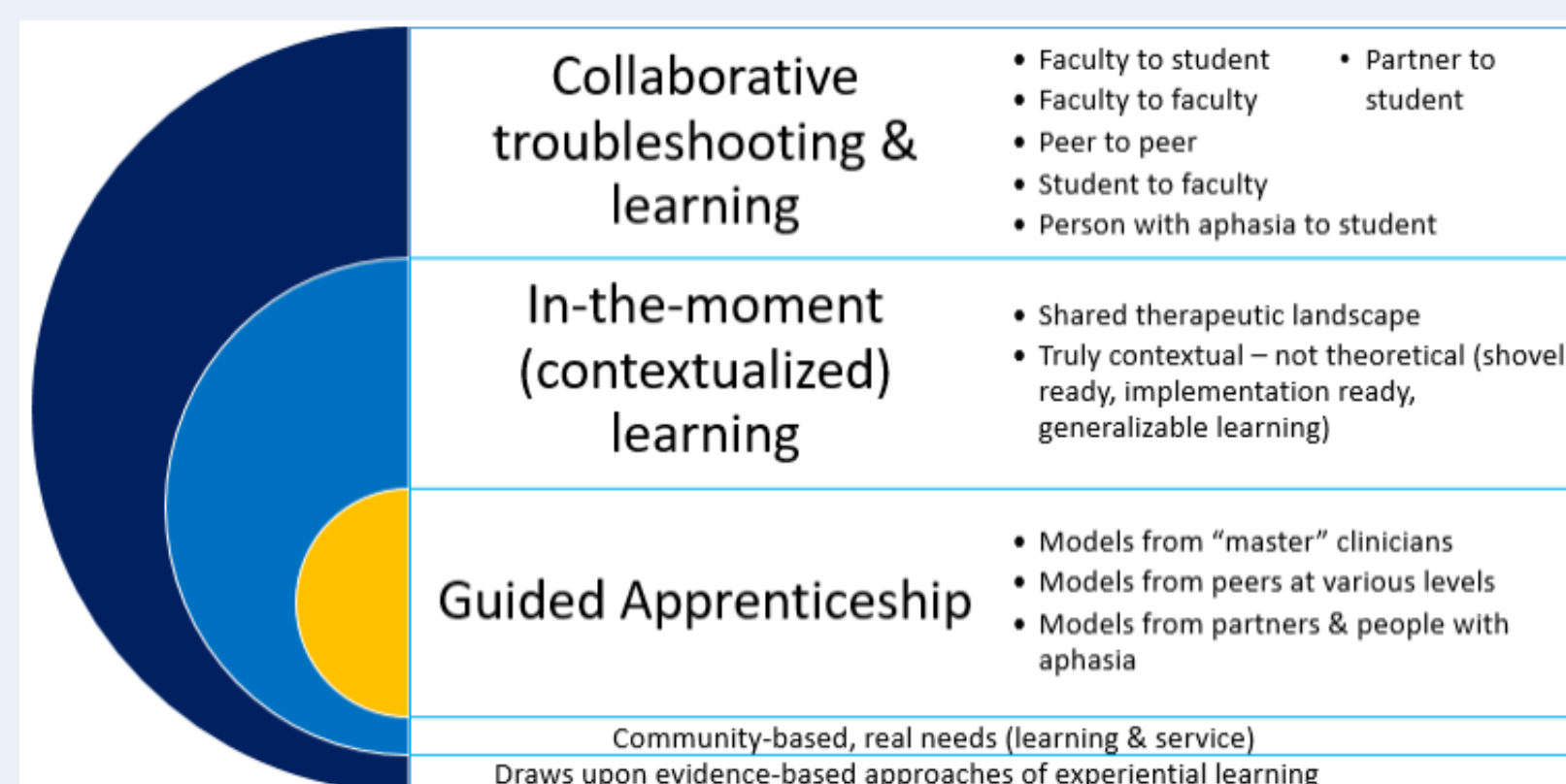


The Power of
AND

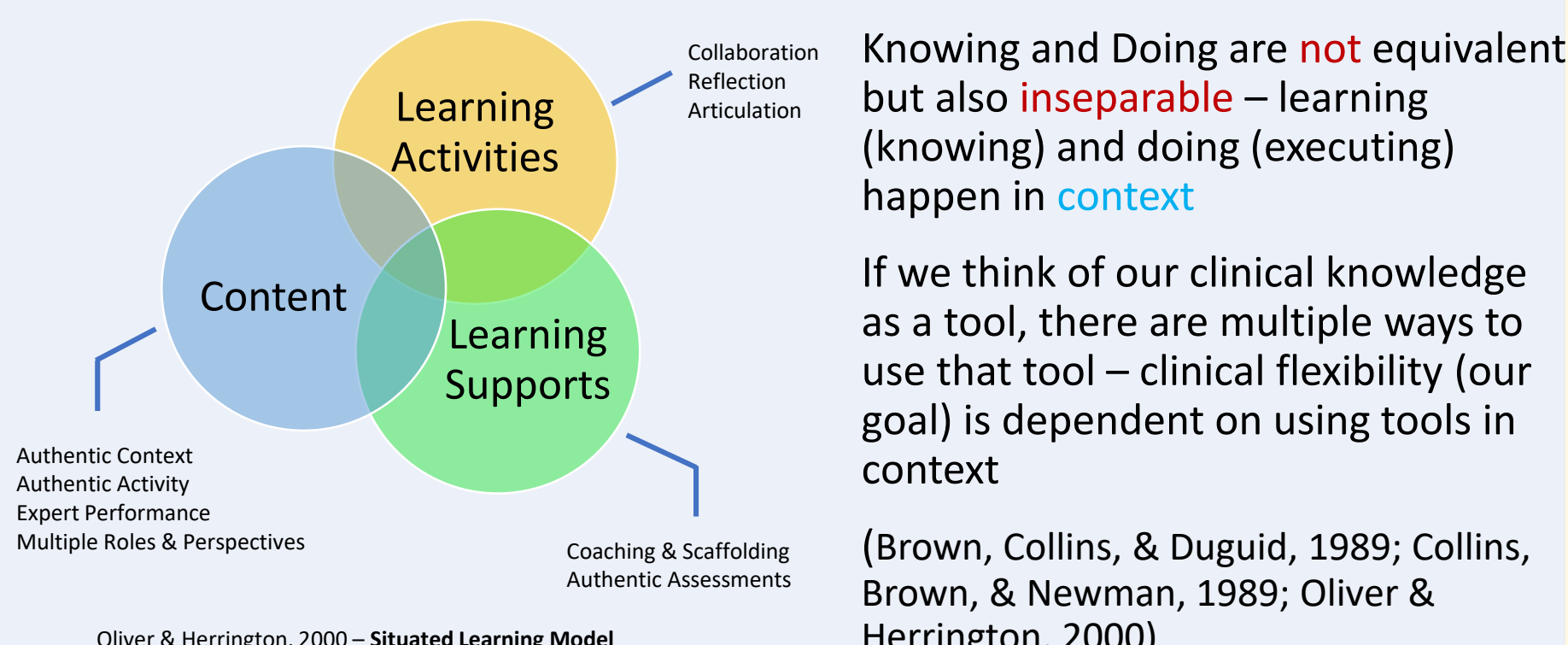
What is a course-embedded clinical experience?

- Brings an authentic intervention program into a course
- Employs an apprenticeship model where instructors deliver interventions alongside of students
- Explores service delivery models
- Exposes students to the lived experience
- Fosters reflection and collaboration

Core Elements of Learning



Donaldson, 2015; Feeney & Lamparelli, 2002; Glazer & Hannafin, 2006; Rueda & Monzo, 2002; Sheepway, Lincoln, & Togher, 2011; Wilson, Chasson, Jozhowski, & Mulhern, 2017



Apprenticeship Model of Instruction

(Feeney & Lamparelli, 2002)

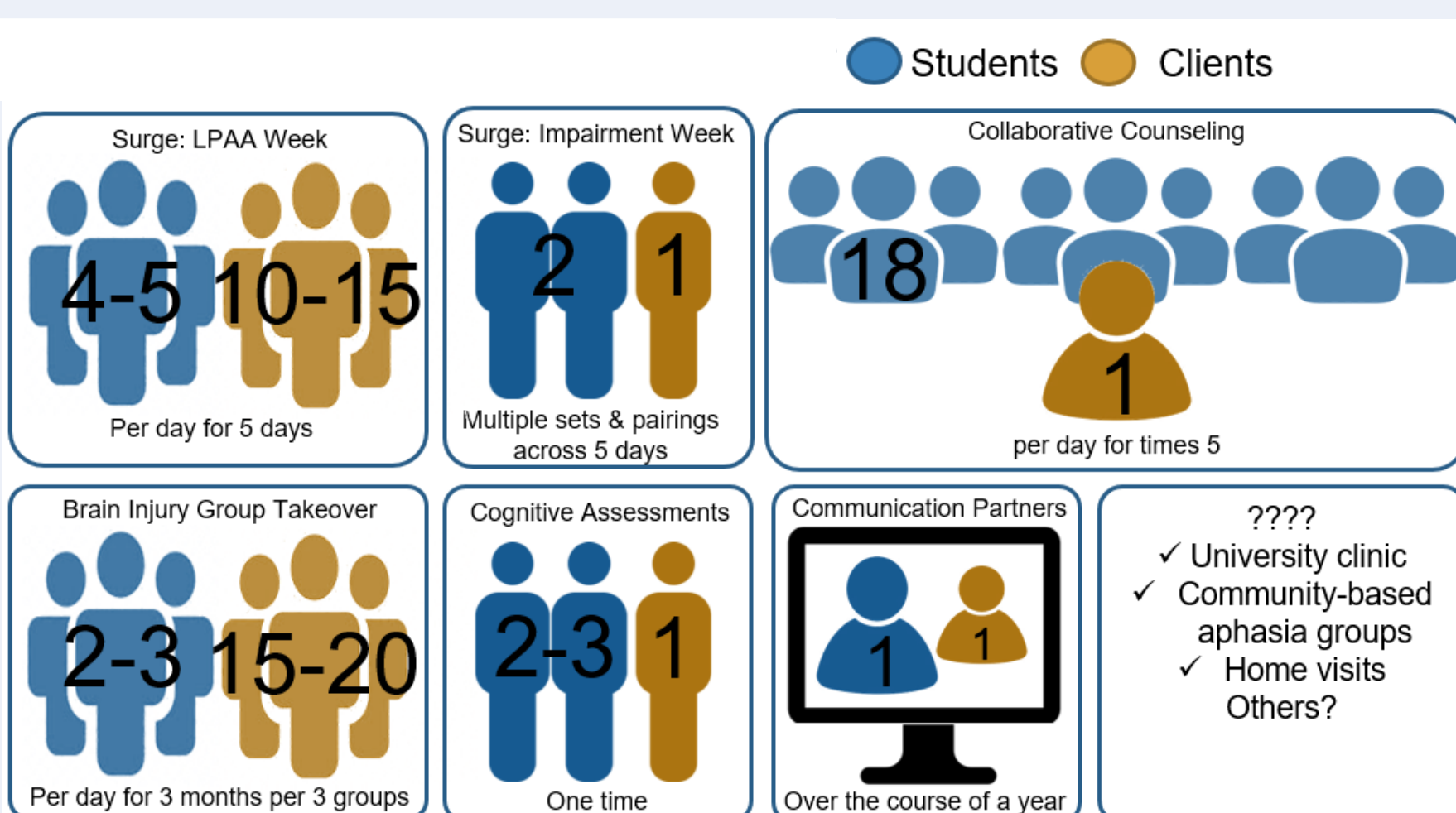
Level the disparity between expert and learner
This is a Vygotskian principle – participation in authentic interactions, the role of zone of proximal development, and vicarious learning (needs to be an achievable model) – if we create a knowledge divide, the chasm is harder to cross

- Roles can change depending on context
- Faculty, students, and clients can be experts
- Faculty, students, and clients can be apprentices



Donaldson, 2015; Feeney & Lamparelli, 2002; Glazer & Hannafin, 2006; Rueda & Monzo, 2002; Sheepway, Lincoln, & Togher, 2011

What does or might this look like?

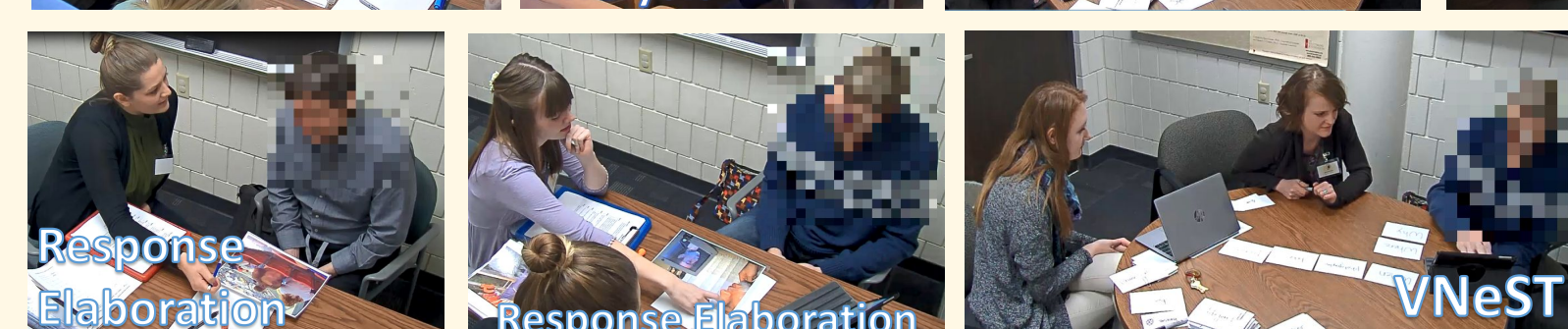


CSD 448/648: Aphasia & Related Disorders



(Hoepner, Sather, Pakanich, Mcfaul, & Gretzinger)

- Delivering interventions for two weeks since 2016
- In the inaugural year, students delivered a 1 week, LPAA group intervention to persons living with aphasia
- We added an impairment-based individual intervention in 2018
- Students plan and deliver interventions
 - Student pairs deliver impairment based interventions (i.e., ORLA, RET, VNeST, and SFA) – faculty on deck and intervene when indicated

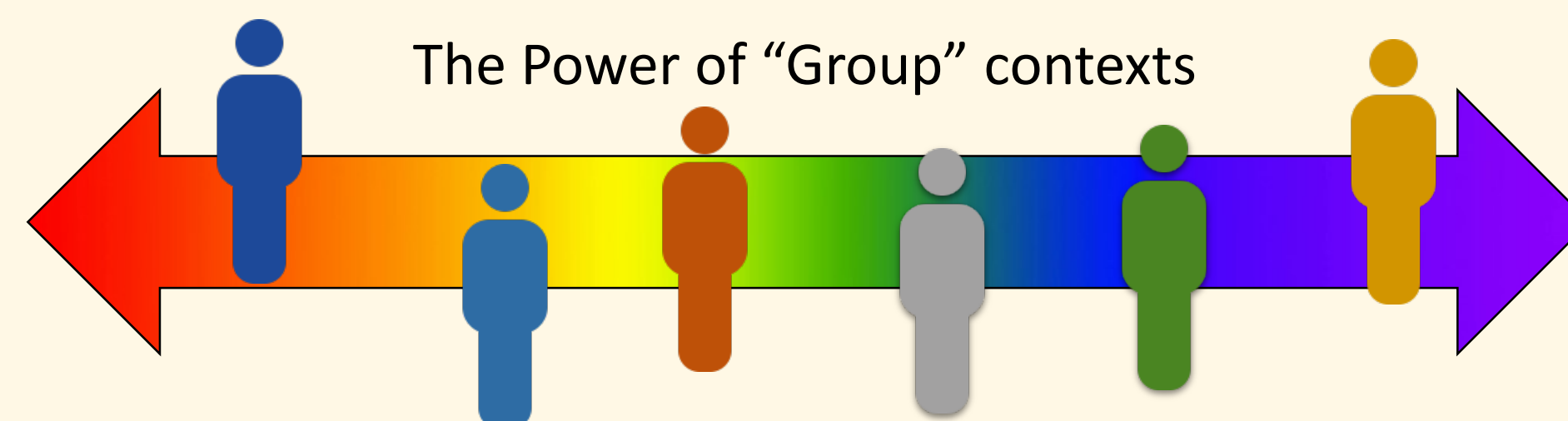


- Students deliver the LPAA interventions alongside of faculty



Student Outcomes

- 25 students – 8 undergraduates and 17 first year graduate students
- Qualitative analysis of individual and group student reflections
- Qualitative Themes:
 - Program Issues – learning about logistics of program development
 - "But umm, I don't know if like a lot of people were interested in with like the Connect with Tech and so, I don't know about some other sessions too."
 - Learning about people affected by aphasia
 - "And it was cool too because each of the caregivers, their person with aphasia was also at a different point with their stroke. Like there was 10 years after their stroke. There was 4 and then there was 1. And you could see the different levels of like confidence with implementing strategies, those who still needed more help."
 - Task analysis – breaking down what can be planned and being ready and flexible in the moment
 - "We had to like think on our feet like the whole time."
 - "but like you were saying, I mean it's difficult cuz you don't know who benefits from what."
 - Sources of clinical learning – self, peer, client, faculty
 - "We could kind of see which individuals benefited from the writing that Dr. Sather did [cuz] we saw a lot of head nods. It was very easy to indicate like which individuals this was helpful for. Which just made the whole rest of the session overall like a lot easier."
 - Nuggets of learning – learning beyond the textbook
 - "Actually one of the caregivers said this 'there's only so much your textbooks can teach you' and it was so eye-opening to see their perspective and how they have learned strategies to implement with their person with aphasia when they've never even had exposures like we've had."
 - "and be like oh yes this is what we have been studying and connecting it back to class."

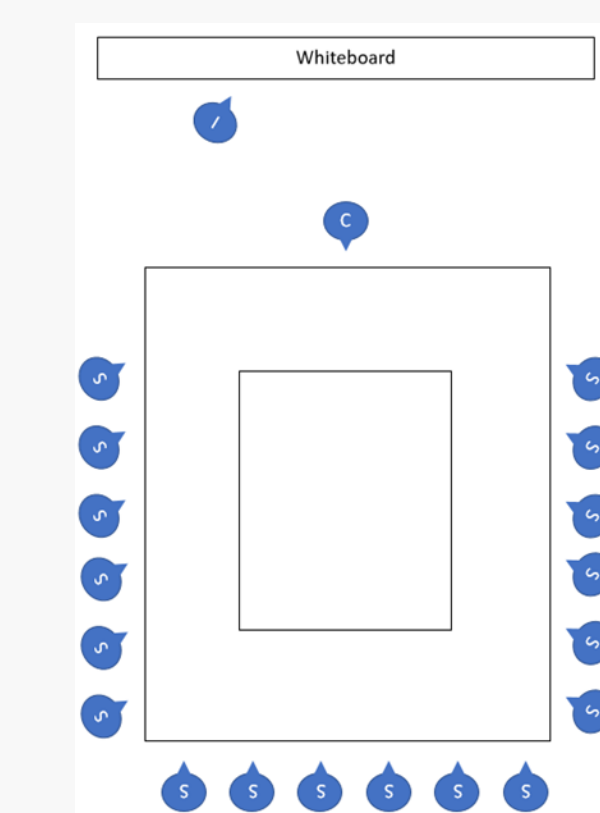
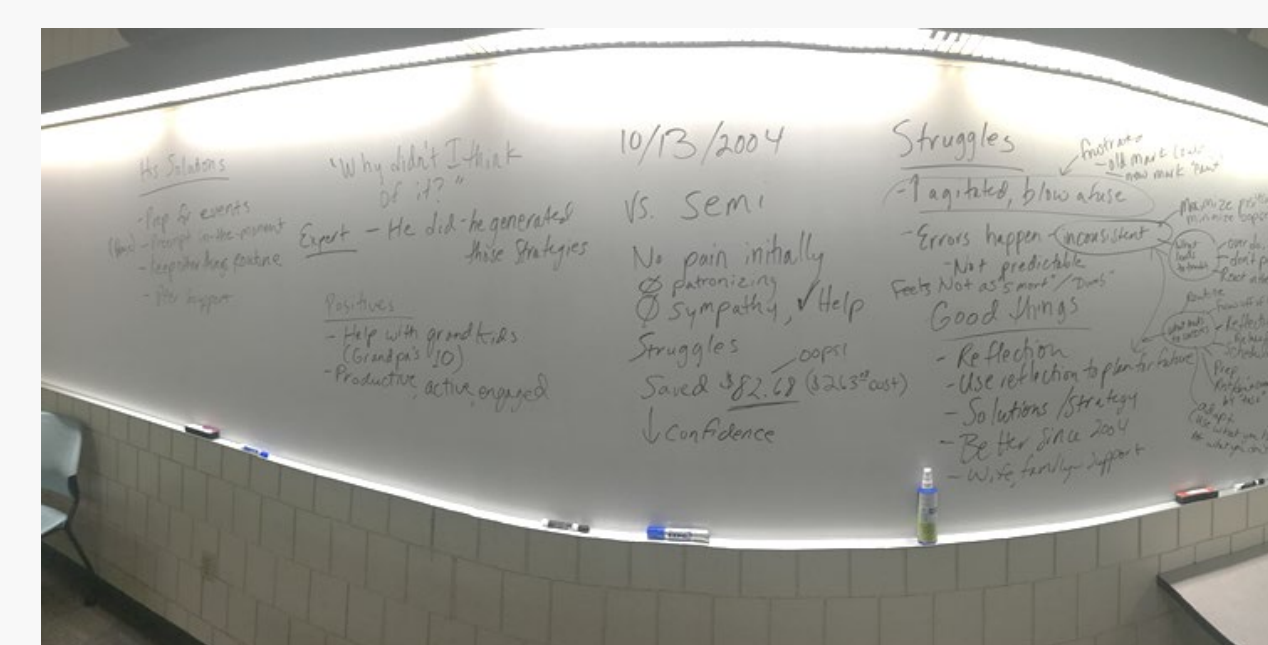


(Wilson, Chasson, Jozhowski, & Mulhern, 2017; Sheepway, Lincoln, & Togher, 2011)

CSD 725: Counseling



(Hoepner, Zigler, & Overeem)



- 4-5 sessions per semester
- Follows training and competency assessment
- Instructor present, alongside of students
- Instructor scaffolds interaction and techniques

Joint review of counseling videos

Video competency and self-review

Collaborative counseling sessions

Student Outcomes

- 36 graduate students across two semesters
- Currently conducting a qualitative analysis of individual and group student reflections

Preliminary Themes:

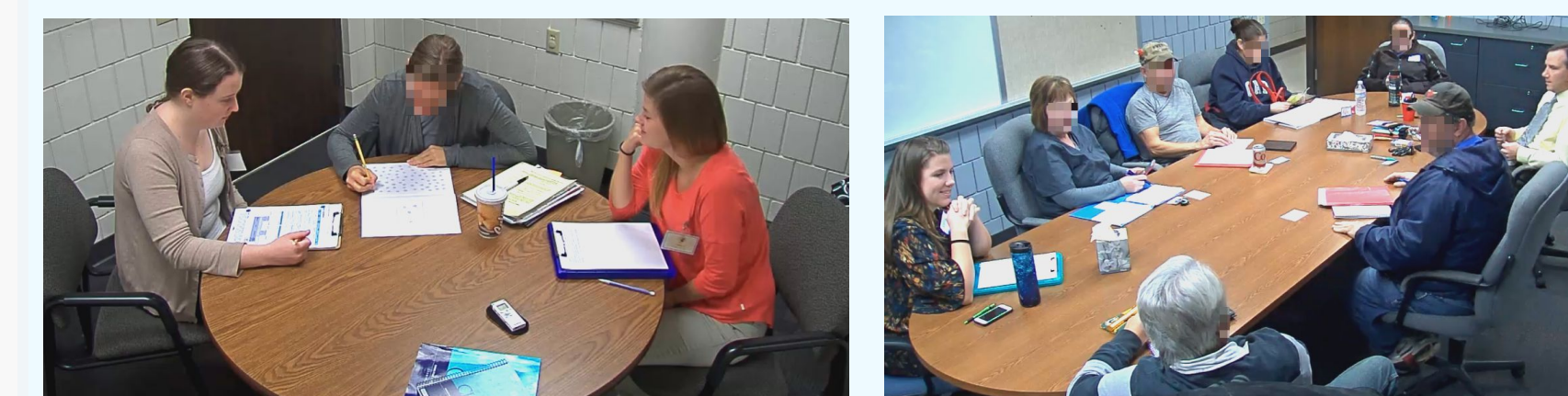
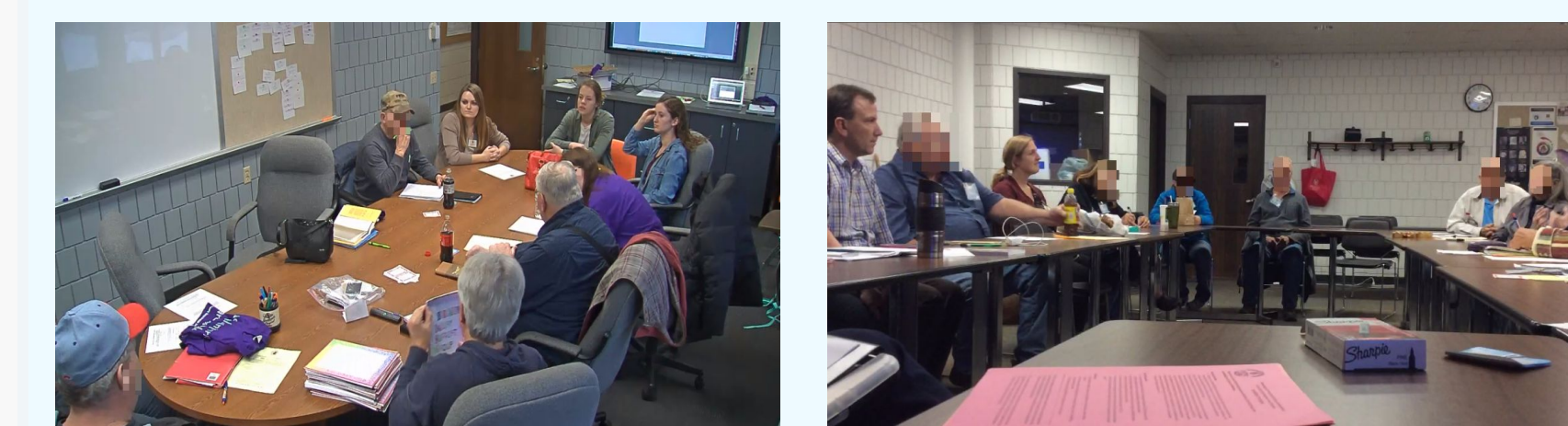
- Broad about the counseling experience
 - Benefits of models
 - Negotiating group interactions
 - Confidence & preparedness
 - Client specific factors
 - Implementing counseling skills
 - Client or disorder specific learning
- Feelings after the first session
 - Development of planning skills
 - Implementing counseling skills
- Feelings after the second & third sessions
 - Negotiating group interactions
 - Improved implementation of skills
 - Improved confidence & preparedness
- Counseling notes
 - Moving from jotting everything down towards more intentional approach – right notes to support counseling in the moment

CSD 754: Acquired Cognitive Disorders



(Hoepner)

- Serving three regional brain injury groups and our own Blugold Brain Injury Group since 2016
- We're on their turf and need to assess their interests and needs
- They are the experts, so evoking their input and direction is key



The future:

- Sitting on three years of data from individual and group reflections
- Plan to conduct qualitative analyses...

Student Outcomes (anecdotal):

- They are the experts
- Exposure to the lived experience
- Flexibility
- Seeing the full continuum of TBI
 - Learning about group facilitation
 - Being the curb
 - Learning to trust one's instincts
 - Redirecting skills
 - Expressing commitment and confidence in a task while remaining flexible
 - Negotiating the thin line between professional and personal (authentic) interactions
- Learning about group and peer counseling
- Learning about cognitive rehabilitation in a social-participation (LPAA) model – Ylvisakarian approach

Common Takeaways

- 1) Authentic is better than contrived
- 2) Implementing skills before you have full training and mastery is uncomfortable but ultimately helps learning
- 3) Contextualized learning aids in deeper discussions of in-class instruction and practice
- 4) A general sense of what it takes to deliver such programming
- 5) A recognition of the ubiquity of living with a communication disorder

Acknowledgments

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