

TLEF Project – Final Report

Report Completion Date: 2019/10/31

1. PROJECT OVERVIEW

1.1. General Information

Project Title:	How to communicate with people with aphasia: Establishing an innovative speech-language pathology clinical placement to provide experiential interprofessional learning for health profession students in Northern B.C.		
Principal Investigator:	Dr. Tami Howe		
Report Submitted By:	Dr. Tami Howe		
Project Initiation Date:	September 1, 2017	Project Completion Date:	September 30, 2019
Project Type:	Large Transformation		
	Small Innovation		
	Flexible Learning		
	Other: [please specify]		

1.2. Project Focus Areas – *Please select all the areas that describe your project.*

Resource development (e.g. learning materials, media)

Infrastructure development (e.g. management tools, repositories, learning spaces)	 Student experience outside the classroom (e.g. wellbeing, social inclusion)
Pedagogies for student learning and/or engagement (e.g. active learning)	Experiential and work-integrated learning (e.g. co-op, community service learning)
Innovative assessments (e.g. two-stage exams, student peer-assessment)	Indigenous-focused curricula and ways of knowing
Teaching roles and training (e.g. teaching practice development, TA roles)	Diversity and inclusion in teaching and learning contexts
Curriculum (e.g. program	□ Open educational resources
development/implementation, learning communities)	☑ Other: Interprofessional student learning

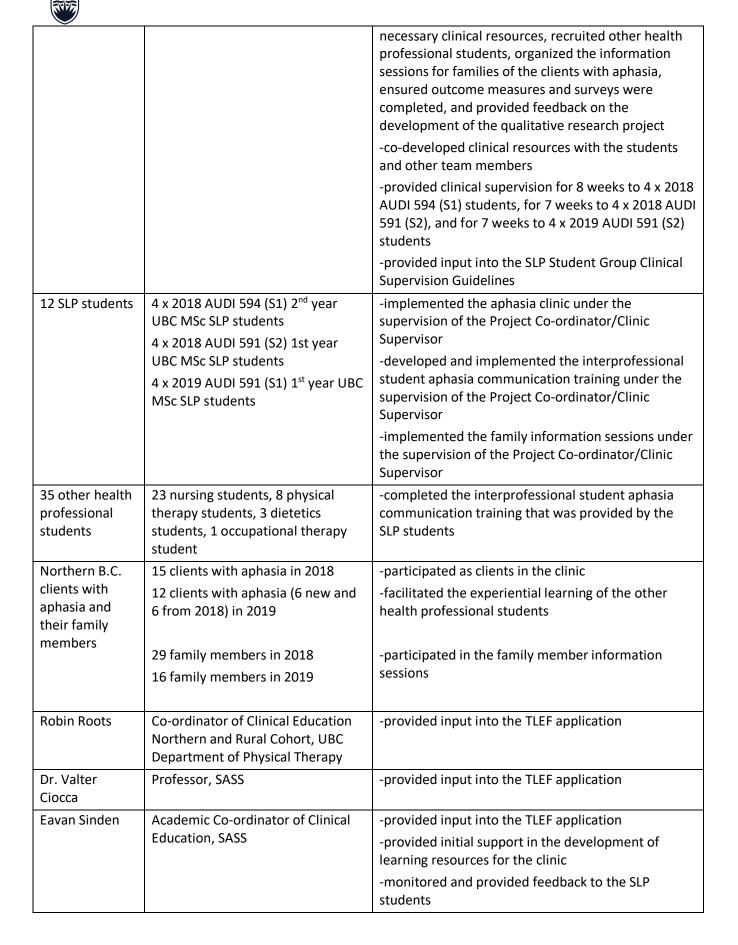
1.3. Project Summary

In 2015, a 50% increase in Speech-Language Pathology (SLP) seats resulted in the need for 288 clinical placements for 72 students over the two-year MSc program (an increase from 192 placements). To address a critical shortage of placements involving adult clients, we collaborated with the University Hospital of Northern B.C. to develop an innovative student-led aphasia clinic in Prince George. Aphasia, a communication disorder, affecting approximately 30% of stroke survivors, masks an individual's competence. It results in difficulties expressing one's thoughts and ideas, reading, writing, and understanding spoken language. The Canadian Stroke Best Practice Recommendations state that all health care providers working with people post-stroke should receive training on how to communicate with individuals with aphasia. However, most health care providers and health care students do not receive this training.

This project involved the implementation of a student-led aphasia clinic in Prince George, B.C, during the summer of 2018 and the summer of 2019. This project was innovative because: 1) the clinic addressed a gap in outpatient SLP services for people with aphasia in Northern B.C. by providing a student-led aphasia clinic under the supervision of the project co-ordinator/clinic supervisor; 2) the SLP students trained other health professional students to communicate effectively with people with aphasia post-stroke, using the evidence-based program, Supported Conversation for Adults with Aphasia (SCA_{TM}); 3) the SLP students provided the other health professional students with experiential learning involving people with aphasia within the group therapy sessions; and 4) the clinic involved the successful development and implementation of a model for SLP student group clinical supervision in which one clinical educator supervised more than 1 student at a time.

Name	Title/Affiliation	Responsibilities/Roles
Dr. Tami Howe	Assistant Professor – School of Audiology and Speech Sciences (SASS)	-provided academic support and advice to ensure the project was successfully implemented and conducted a qualitative research as one component of the project evaluation -developed the SLP Student Group Clinical
Marcia Chai	Acadomic Co. ordinator Load of	Supervision Guidelines
Marcia Choi	Academic Co-ordinator Lead of Clinical Education – SASS	 -provided clinical co-ordination support and advice to ensure the project was successfully implemented -oriented and prepared 12 SLP students for the project -monitored and provided feedback to the SLP students
Elaina McCarron	Project Co-ordinator/Clinic Supervisor	-established and implemented 2 iterations of the student-led aphasia clinic in Prince George, B.C. during the summer of 2018 and 1 iteration of the clinic during the summer of 2019 -liaised with key stakeholders, recruited individuals with aphasia, developed and organized the

1.4. Team Members – Please fill in the following table and include <u>students</u>, undergraduate and/or graduate, who participated in your project.





Jessica Barclay, Danielle Bigiolli, Rheanne Brownridge, Kean Leung	UBC MSc SLP students who graduated in 2017	-provided input into the TLEF application
Cheryl McGee, Sandy Taylor	Academic Co-ordinators of Clinical Education, SASS	-monitored and provided feedback to the SLP students
Namsook Jahng	Instructional Designer/ Project Manager, CTLT	-provided support with the development of the CANVAS website for the project
Katharine Davies	Research Assistant/ SASS PhD student	-conducted and transcribed qualitative interviews with participants who volunteered for the qualitative interview study

1.5. Courses Reached – Please fill in the following table with <u>past</u>, <u>current</u>, and <u>future</u> courses and sections (e.g. HIST 101, 002, 2017/2018, Sep) that have been/will be reached by your project, including courses not included in your original proposal (you may adapt this section to the context of your project as necessary).

Course	Section	Academic Year	Term (Summer/Fall/Winter)
AUDI 594	001	2018	S1 (May-June)
AUDI 591	001	2018	S2 (June–July)
AUDI 591	001	2019	S2 (June – July)
AUDI 526	001	2019	Т2
UBC Master's of Physical		2018	S1, S2
Therapy, Master's of		2019	S2
Occupational Therapy, Dietetics Clinical Practica			
courses; UNBC Nursing			
program Clinical Practica			
courses			



2. OUTPUTS AND/OR PRODUCTS

2.1. Please <u>list</u> project outputs and/or products (e.g. resources, infrastructure, new courses/programs). Indicate the current location of such products and provide a URL if applicable.

Product(s)/Achievement(s):	Location:
A student-facilitated SLP clinic for 15 clients with	The clinic was held at the University Hospital of
aphasia and their families was implemented in Prince	Northern British Columbia's Learning and
George from May to July, 2018.	Development Centre, Prince George, B.C.
A student-facilitated SLP clinic for 12 clients with	3 Family and Friends' Information Nights were held at
aphasia (6 new clients and 6 clients from the 2018	the University Hospital of Northern British Columbia's
clinic) and their families was implemented in Prince	Learning and Development Centre, Prince George,
George from June to July 2019.	B.C.
	The resources that were developed for the clinic are
	on the CANVAS course website.
3 iterations of the Interprofessional student aphasia	The training was held at the University Hospital of
communication training were provided by the SLP	Northern British Columbia's Learning and
students, under the supervision of the Project Co-	Development Centre, Prince George, B.C.
ordinator/Clinical Supervisor. 35 other health	
professional students completed both components of	
the training.	
Workshop facilitation resources for implementing the	The resources are on the CANVAS course website.
interprofessional student aphasia communication	
training were developed.	The uidecaling are an the CANN/AC secures we haits
9 customized videoclips of people with aphasia	The videoclips are on the CANVAS course website.
interacting with students for instructional use in	
future interprofessional student aphasia	
communication student training and SASS aphasia courses were developed.	
Implementation of a new SLP student group clinical	3 iterations of the SLP student group clinical
supervision model (involving 1 clinical supervisor	supervision model were implemented at the
supervision model (involving 1 clinical supervisor supervising 4 SLP students at one time) which could be	University Hospital of Northern British Columbia's
replicated in other similar sites in the future.	Learning and Development Centre, Prince George,
Development of SLP Student Group Clinical	B.C.
Supervision Guidelines which can be used by other	5.0.
clinical supervisors to implement similar clinics in	
other sites in the future.	

2.2. Item(s) Not Met – Please list intended project outputs and/or products that were not attained and the reason(s) for this.

Item(s) Not Met:	Reason:
Health professional students in the fields of Social	The clinical placement schedules of the Social Work,
Work, Pharmacy, and Medicine did not participate	Pharmacy, and Medicine students in Prince George did
in the interprofessional student aphasia	not fit with the schedule for the interprofessional
communication training.	student aphasia communication training.



3. PROJECT IMPACT

- **3.1.** Project Impact Areas Please select all the areas where your project made an impact.
- Student learning and knowledge
- Student engagement and attitudes
- □ Instructional team teaching practice and satisfaction
- □ Student wellbeing, social inclusion
- Awareness and capacity around strategic areas (indigenous, equity and diversity)
- □ Unit operations and processes
- ☑ Other: Interprofessional student learning
- **3.2.** What were you hoping to change or where were you hoping to see an impact with this project? *Please describe the intended benefits of the project for students, TAs, instructors and/or community members.*

Benefits for students:

Benefit #1: To increase clinical placement opportunities for SLP students to work with adult clients in an enriched peer learning environment.

Benefit #2: To increase other health profession students' knowledge of aphasia and their confidence and skills in communicating with people with aphasia post-stroke.

Benefit 3: To develop a sustainable group clinical supervision model for SLP students in the future.

Benefits for clinical supervisors:

Benefit 4: To develop SLP student group clinical supervision guidelines for future clinical supervisors.

Benefits for people with aphasia and their family members:

Benefit 5: To provide SLP group services to people with aphasia and their family members who do not have access to public outpatient SLP services in northern BC.

3.3. Were these changes/impacts achieved? How do you know they occurred? – What evaluation strategies were used? How was data collected and analyzed? You are encouraged to include copies of data collection tools (e.g. surveys and interview protocols) as well as graphical representations of data and/or scenarios or quotes to represent and illustrate key themes.

Benefit 1:

a. An additional 12 SLP clinical placements involving working with adults were able to be provided for SLP students in Prince George, B.C. over the course of the project.



- b. All 12 students met their clinical course intended learning outcomes through their participation in the project.
- c. Qualitative feedback during interviews with SLP students included:

"For the students to be able to not only practice on each other, but practice with people with aphasia was vital - that hands-on experience."

"And the fact that we [health professional students] were all there and all working in a hospital setting also helped because, like I said, we all kind of had knowledge of our work setting, knowledge of our profession, but what we were just trying to create was more knowledge about aphasia and how that could fit into those settings."

"I think the SNAP Clinic is a fantastic project, and it has so much potential. The gap in the healthcare system for this population in Northern BC is heartbreaking, and I think it would be great if one day, the clinic could become permanent and run year round...I'm very grateful for the opportunity to learn from her [clinical educator] and be a part of this project."

Benefit #2:

- Attendance was taken at each of the interprofessional student aphasia communication training sessions: 35 students completed both the information and experiential learning components of the training (consisting of 23 nursing students, 8 physical therapy students, 3 dietetics students, and 1 occupational therapy student),
- b. Health profession students completed pre-post rating forms about their knowledge of aphasia and their confidence in communicating with people with aphasia. The students indicated that their confidence had improved post-training and they were able to identify more appropriate specific strategies for communicating effectively with people with aphasia.
- c. Qualitative feedback about their experiences in the training from other health professional students included:

"Very beneficial! I actually got to work with people who actually have aphasia which was such a good experience rather than just role-playing with students."

"Every healthcare professional needs to be a part of this workshop!"

Benefit #3:

a. 3 iterations of students met their clinical course intended learning outcomes using the 1 clinical supervisor to 4 SLP student clinical supervision model.



Benefit #4:

a. SLP student group clinical supervision guidelines were developed for use by future clinical supervisors.

Benefit #5:

a. Clients with aphasia completed post-clinic feedback forms (with the support of a student) about their experiences in the clinic.

Qualitative feedback from the clients with aphasia post-clinic included:

"I got out more and talked more, very more!"

"My confidence built."

"We feel safe ... not feel embarrassed."

b. Family members completed anonymous post-clinic feedback forms about their experiences in the clinic.

Qualitative feedback from the family members of the clients with aphasia post-clinic included:

"I became less protective...We used the [strategies] at his specialist's office and he was able to communicate his need for an increase in medication... it gave [client's name] a 'voice' in his care that had more depth than 'how are you feeling?' and [client's name] making an unhappy face."

"The experience made my husband much more positive about his aphasia and a much happier person. That also made me happier. This is such an important service for people with aphasia in the North. Please continue it!!"

- c. In the summer of 2019, the SLP students and the clients with aphasia initiated and co-developed 2 versions of an advocacy video about the clinic. One version of the video was developed for presentation to Northern Health administrators in order to advocate for implementation of a similar clinic in Prince George in the future.
- **3.4.** Dissemination Please provide a list of <u>past</u> and <u>upcoming</u> scholarly activities (e.g. publications, presentations, invited talks, etc.) in which you or anyone from your team have shared information regarding this project.
 - Poster presentation about the project UBC School of Audiology and Speech Sciences 50th Anniversary Open House – September 13, 2019.
 - Brief presentation by a SLP student about his participation in the project UBC School of Audiology and Speech Sciences 50th Anniversary Open House – September 13, 2019.
 - An abstract for a poster about the project is currently being prepared for submission to an international conference.

- A manuscript about the project is currently being prepared for submission to a peer-reviewed journal.
- **4. TEACHING PRACTICES** Please indicate if <u>your</u> teaching practices or those of <u>others</u> have changed as a result of your project. If so, in what ways? Do you see these changes as sustainable over time? Why or why not?
 - The practice of one clinical supervisor supervising more than one SLP student will be facilitated in the future as the result of having developed the SLP Student Group Clinical Supervision Guidelines.
 Implementing more similar clinics in the future will help to address the critical shortage of clinical placement opportunities, particularly with adult patients, for SASS SLP students.
- **5. PROJECT SUSTAINMENT** Please describe the sustainment strategy for the project components. How will this be sustained and potentially expanded (e.g. over the next five years). What challenges do you foresee for achieving the expected long-term impacts listed above?
 - The practice of one clinical supervisor supervising more than one SLP student will be facilitated in the future as the result of having developed the SLP Student Group Clinical Supervision Guidelines.
 - In July 2019, Tami Howe and Elaina McCarron met with Sherri Tillotsen, Northern Health Director of Regional Tertiary Services, to explore the possibility of the health authority developing a long-term version of this clinic. In August 2019, Elaina McCarron participated in a follow-up meeting about this option with a larger group of Northern Health administrators. To date, the Northern Health Authority has not made any concrete plans regarding this option.
 - Dr. Howe and Marcia Choi have recently been contacted by another Canadian health SLP service in the Yukon regarding the possibility of collaborating to implement a modified version of this clinical model within their specific context.