Impact of a Clinical Education Workshop on Perceived Performance of Speech-Language Pathology Clinical Educators : Preliminary Results

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Background Information

Clinical education has been part of the speech-language pathology (SLP) profession and other health professions since its beginnings (ASHA, 2013; CAPCSD, 2013). There is a need to develop accessible and appropriate educational activities to better fulfil the role of clinical educator. Nonetheless, requirements for the amount of training or the type of training have yet to be developed in the SLP profession.

Literature available on the effect of clinical training suggests that performance could improve with training. It is also expected that this training could benefit the students in clinical practice. Specifically, trained supervisors could supervise different in response to individual differences, are able to change the content of the supervision conference, and demonstrate behaviors not exhibited before. Thus, there is evidence that training affects the clinical educators' attitudes towards supervision (Gonzalez, & Milne, 2010).

Objetives and Goals

The purpose of this exploratory study was to evaluate whether an educational workshop about clinical education of speech-language pathology (SLP) students would impact the perceived knowledge and performance of SLP attendants in fulfilling a role of clinical educators.

Methods and Study Population

Workshop: 3--day (9-hour total) workshop offered to SLPs who supervise graduate level , SLP students in clinical practicum.

Content: a) preparing for clinical education, b) the process of clinical education, b) evaluation of the students and c) clinical education experience.

Purpose: Designed to increase the participant' s knowledge about the discipline's clinical education requirements, expected duties and responsibilities of the clinical educator and available resources for continuing development, purpose of planning in supervision, supervisee's development stages and supervisory style, instructional strategies that apply to a clinical setting, and to enhance interpersonal skills related to clinical education and reflective practice. Attendants were expected to define the skills needed for effective practice in their clinical setting, and to relate these skills to expected academic competencies and professional certification standards.

Participants: Participation in the study was voluntary and did not affect the workshop's attendance. Twenty two clinicians attended the workshop on its second offering and 16 participants completed the survey on the first administration, 17 on the second, 10 on the third. All participants were SLPs licensed in Puerto Rico , between the ages of 21 and 65 years, in a clinical educator role at least for a first time during the time of the study, and they were currently active with a student.

Design: This was a quasi-experimental, time-series design with convenience sampling. The evaluation design included completion of the onsite workshop and completion of surveys by the participants at three time points to test whether the intervention of the educational program had an impact on perceived knowledge and performance.

Participants were asked to complete the same survey at three times: a pre-course survey, an immediate post-course survey, and a six-month follow-up survey if they have been active in clinical education. There were five possible responses to each survey question, ranging from completely disagree (1) to completely agree (5) .

Survey Instrument: Paper and pencil survey developed by the author utilizing evidence from the literature (references available upon request).

- 25 questions
- Designed to represent 4 constructs: A) Preparation; B) Reflection, C) Skills, D) Planning.
- The internal consistency of the scales was examined using Cronbach α. Reliability was first determined separately for each subscale.

Table 1 presents these results:

Cronbach α	First Administration	Second Administration
Preparation	.88	.84
Reflection	.69	.65
Planning	.24	.53
Skills	.72	.75

The index of the set of questions representing the Planning construct was not acceptable. The rest of the scales were considered for the analyses of results in these first phases of the current exploratory study.

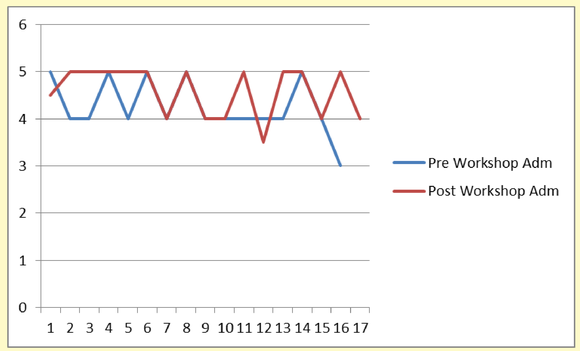
Preliminary Results

Expected findings included change in participants' current knowledge, perceived ability to adopt this knowledge at work and willingness to change professional behavior in the short term. Following are preliminary results from the first and second administration.

Sociodemographic data: There was a representation of various ages (21 to 65), work setting (university clinic, private practice, hospital, school) and roles (clinician, clinic director, educator). Information about years of experience in the profession, number of students and clinician's education were also obtained.

Questions Responses: The *Mann-Whitney U* nonparametric test was used to analyze the data as data was not matched, there was a small sample size , and the survey included ordinal data. Since there were no identifying factors with the data collected and individual responses were anonymous, each administration was treated as an independent group. Only the responses from subscales Preparation, Reflection, and Skills were used for the analyses . The test presented a *Z score of 1.46, P value is .1443.* Results were not significant at p<.05.

Figure 1 presents distributions of median scores per participant per administration (first administration = X1; second administration = X2)



Discussion/Significance of Impact:

The study was designed as an exploratory one to investigate options of service delivery for clinical supervisors training, alternatives to measure changes in perceive knowledge and performance and to provide more information into the need of preparation of SLPs as clinical educators. Evidence is still needed in this line. Exploration of additional educational delivery models is underway, looking for viable and accessible alternative for change in perceived performance.

Results were expected to add evidence towards the finding that perceived knowledge and performance improves with training. This was not seen comparing responses before and a month after the workshop. It was noticeable that a high number of attendees presented a positive and high agreement with most of the items from the beginning of the study. This brings into questions if the survey data gathering technique is appropriate to measure change in knowledge and performance in this cultural group.

Follow up work

- Examination of internat consistency of individual items on each subscale, specifically for the planification construct.
- Examination of responses to individual questions
- Examination of data of 6 months following the workshop
- Design of research using mixed approaches to reliably measure changes in knowledge, attitudes and performance

We continue the quest to explore options for effective delivery and examininationof scientific evidence regarging training needs of clinical faculty.

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