Program: SPH   **Course: 500**   **Section: 020**   **Semester: 202010**   **Instructor: Conn**

Instructor: Jessica Conn
Office: Human Services 205 B
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Course Time & Location: M 5:30 - 8, HSTC 322
Office Hours: M 2:30-5:00, W: 12-2:30
Credits: 3
Email: connjl@sfasu.edu

Prerequisites:

I. Course Description
Language and communication disorders due to neuropathic deficits.

Typically meets once each week in 150-minute segments for 15 weeks, and also meets for a final examination. Students have significant weekly reading assignments, ten quizzes, three simulated cases, two case study paper, two reflections, four group projects, a midterm, and a final examination. These activities average at a minimum 6 hours of work each week to prepare outside of classroom hours.

Students will be required to purchase a subscription to SimuCase, in order to complete course assignments.

II. Intended Learning Outcomes/Goals/Objectives (Program/Student Learning Outcomes)

This course reflects the following core values of the College of Education:

The mission of the Perkins College of Education is to prepare competent, successful, caring and enthusiastic professionals from diverse backgrounds dedicated to responsible service, leadership, social justice, and continued professional and intellectual development in an interconnected global society. In the Perkins College of Education, we value and are committed to:

• Academic excellence through critical, reflective, and creative thinking
• Life-long learning
• Collaboration and shared decision-making
• Openness to new ideas, to culturally diverse people, and to innovation and change
• Integrity, responsibility, diligence, and ethical behavior
• Service that enriches the community.

This course also supports the mission of the Department of Human Services:

The Department of Human Services prepares undergraduates and graduate students for leadership and service roles in East Texas and the global community. The department is committed to incorporation of community-based, service-learning experiences within its educational programs to maximize the advancement of students' personal and professional development.

This course also supports the mission of the Speech-Language Pathology Program.

The mission of the Speech-Language Pathology Program is to prepare knowledgeable caring professionals committed to educating the public, properly diagnosing and effectively treating persons with communication and swallowing disorders across the lifespan, thereby improving their quality of life. To meet this mission, the program embraces cultural and linguistic diversity, emphasizes the importance of evidence based practice, critical thinking skills, interdisciplinary collaboration, ethical principles and continued professional development throughout one's career.

This course also supports the Core Objectives/Outcomes of the THECB.
- Critical Thinking Skills
    - o To include creative thinking, innovation, inquiry, and analysis, evaluation and synthesis of information
- Communication Skills
    - o To include effective development, interpretation and expression of ideas through written, oral and visual communication.
- Empirical and Quantitative Skills
    - o To include the manipulation and analysis of numerical data or observable facts resulting in informed conclusions.
- Teamwork
    - o To include the ability to consider different points of view and to work effectively with others to support a shared purpose or goal.
- Personal Responsibility
    - o To include the ability to connect choices, actions and consequences to ethical decision-making
- Social Responsibility
    - o To include intercultural competence, knowledge of civic responsibility, and the ability to engage effectively in regional, national, and global communities.

This course addresses the following standard(s) of the Council for Clinical Certification of the American Speech-Language-Hearing Association:

Standard I: Degree
Standard II: Education Program
Standard III: Program of Study
Standard IV: Knowledge of Outcomes
Standard V: Skills Outcomes
Standard VI: Assessment
Standard VII: Speech-Language Pathology Clinical Fellow
Standard VIII: Maintenance of Certification

Standard IV: Knowledge of Outcomes
Standard IV-B: The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span

Standard IV-C: The applicant must have demonstrated knowledge of communication and swallowing disorders and
differences, including the appropriate etiologies, characteristics, anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:
- • Articulation
- • Fluency
- • Voice and resonance
- • Receptive and expressive language
- • Cognitive aspects of communication
- • Social aspects of communication
- • Augmentative and alternative communication modalities

Standard IV-D: For each of the areas specified in Standard IV-C, the applicant must have demonstrated current
knowledge of the principles and methods of prevention, assessment, and intervention for people with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

Standard IV-E: The applicant must have demonstrated knowledge of standards of ethical conduct

Standard IV-F: The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

Program Learning Outcomes: This course supports the Speech-Language Pathology and Audiology Program Learning Outcomes. These competencies are measured by successful completion of all course requirements, including examinations, group discussion and activities, written assignments, and quizzes:

I. Students will recognize and articulate the foundational skills related to communication and its disorders.
II. Students will analyze, interpret, and synthesize clinical findings in the management of speech disorders
III. Students will analyze, interpret, and synthesize clinical findings in the management of language disorders
IV. Students will analyze, interpret, and synthesize clinical findings in the management of swallowing disorders.
V. Students will analyze, interpret, and synthesize clinical findings in the management of hearing disorders.
VI. Students will integrate research principles and processes in planning Capstone projects and in clinical practice.
VII. Students will communicate professionally and demonstrate comprehension of professional and ethical responsibilities of speech-language pathologists.

Specific Student Learning Outcomes (SLO):

1. Cognition and its relationship to language and communication in normal development and across the life span.
   o Knowledge of cognitive processes and systems (e.g., attention, perception, memory, organization, executive function).
   o Knowledge of language domains (i.e., phonologic, morphologic, syntactic, semantic, pragmatic) and their interrelatedness with cognition.
   o Knowledge of the neuroanatomical substrates of language, other cognitive processes, and communication.
   o Knowledge of the cognitive, linguistic, psychosocial, sensory, motor, and perceptual processes required for the performance of various communication tasks.
   o Knowledge of typical child and adult development of language, other cognitive processes, and communication—including factors that influence development in these domains.
   o Knowledge of the effects of changes in cognitive, linguistic, psychosocial, sensory, motor, and perceptual processes involved in communication across the life span.
   o Knowledge of environmental and personal factors that influence the development and performance of cognitive-communication activities, including cultural and linguistic factors.

2. Cognitive-communication disorders across the life span.
   o Knowledge of genetic, medical, and environmental conditions that place individuals at risk for developing cognitive-communication disorders.
   o Knowledge of pre-, peri-, and postnatal medical conditions associated with cognitive-communication disorders.
   o Knowledge of acquired etiologies of cognitive-communication disorders (e.g., traumatic brain injury, stroke, tumor, anoxic or toxic encephalopathy, dementia and other degenerative neurological disorders).
   o Knowledge of brain-behavior relationships and the effects of various etiologies and sites of lesion on language, other cognitive processes, and communication.
   o Knowledge of the natural course of various etiologies of cognitive-communication disorders.
   o Knowledge of personal and environmental factors (e.g., education, social and cultural background, psychological status, medications, motivation and support of communication partners, access to technology and other resources) that may affect language, and other cognitive-communication processes.
   o Knowledge of the effects of specific sensory, motor, and perceptual impairments on communication performance and improvement of cognitive-communication disorders.
3. Clinical tools and methods for assessing cognitive-communication disorders.
   o Knowledge of various purposes of assessment (e.g., diagnosis; qualification for services; planning intervention; measuring intervention outcomes; academic, social, and vocational accommodations) and tools and procedures relevant to each purpose.
   o Knowledge of standardized and nonstandardized, static and dynamic procedures for assessing language and other cognitive processes, including factors that influence ecological and cultural validity.
   o Knowledge of standardized and nonstandardized, static and dynamic procedures for assessing cognitive-communication performance at the activity/participation level.
   o Knowledge of standardized and nonstandardized, static and dynamic procedures for assessing contextual factors influencing cognitive-communication performance.
   o Knowledge of procedures for assessing interactive competencies and support behaviors of communication partners in a variety of environments.

- o Knowledge of the needs of culturally and linguistically diverse populations, including selection and/or adaptation of assessment procedures.
- o Knowledge of assessment approaches with augmentative and alternative communication systems (AAC).

4. Intervention approaches and methods for cognitive-communication disorders across the life span.
    - o Knowledge of each individual's service needs (admission, types of service delivery, discharge, follow-up) based on the individual's characteristics, environment, and support systems.
    - o Knowledge of models of intervention including impairment-oriented (e.g., training discrete cognitive processes) and activity/participation-oriented (e.g., teaching specific functional skills) approaches.
    - o Knowledge of specific intervention strategies.
    - o Knowledge of the impact of personal and environmental contextual factors on cognitive-communication performance.
    - o Knowledge of the impact of the neuropharmacologic agents on cognitive-communication performance.
    - o Knowledge of the cognitive, language, and speech characteristics of developmental and acquired communication disorders for the purpose of differential diagnosis.
    - o Knowledge of the prognostic implications of specific diagnostic categories.
    - o Knowledge of the accepted formats for documenting and reporting assessment results in various health care and education settings.
    - o Knowledge of the impact of context and other factors (e.g., medical treatments) on the application of intervention strategies.
    - o Knowledge of applicable laws regarding least restrictive environment and possible negative effects of placement in an overly (or insufficiently) restrictive setting.
    - o Knowledge of the criteria for evaluating the evidence supporting intervention strategies.
    - o Knowledge of the components of the comprehensive treatment plan, including goal selection and prioritization, goal-attack strategies, objectives, procedures, activities, and coordination with other services and agencies.
    - o Knowledge of characteristics and application of available treatment materials
    - o Knowledge of procedures for improving interactive competencies and support behaviors of communication partners in a variety of environments (e.g., home, school, work, and social settings).
    - o Knowledge of characteristics and application of available technologies (e.g., memory and organization aids, computer-assisted intervention, AAC systems).
    - o Knowledge of principles of behavior management and behavior modification.
    - o Knowledge of service-delivery models (e.g., classroom-, home-, and workplace-based; pull-out, collaborative-consultation; individual and group intervention).
    - o Knowledge of group dynamics and techniques for conducting intervention in groups.
    - o Knowledge of theories and principles of learning and generalization/transfer.
    - o Knowledge of methods for facilitating and measuring generalization and maintenance of treatment effects, and of procedures for follow-up.
    - o Knowledge of procedures for facilitating effective transitions (e.g., hospital to community; school to work).
    - o Knowledge of methods for measuring treatment efficacy, effectiveness, and outcomes for individuals and programs.
    - o Knowledge of the impact a disability may have on the individual, family, and others; knowledge of family systems theory.
    - o Knowledge of counseling principles and techniques, and criteria for referral to other professionals.
    - o Knowledge of current reimbursement policies and practices.

5. Collaboration, education, advocacy, and research principles.
    - o Knowledge of the roles, responsibilities, and specialized expertise of other individuals providing services and supports to children and adults with cognitive-communication disorders.
    - o Knowledge of current models and methods of collaborative intervention.
    - o Knowledge of ways to conduct family education and support activities.
    - o Knowledge of the broad spectrum of services that families and others may require.
    - o Knowledge of factors (e.g., sociocultural, educational, emotional) that affect the content and delivery of information to individuals from diverse backgrounds.
    - o Knowledge of ways to effectively communicate information to referral sources, administrators, payers and other decision-makers.
    - o Knowledge of available resources for individuals with cognitive-communication disorders, family members, and others.
    - o Knowledge of curricular content and adult teaching/learning strategies for clinical education, mentoring, and supervision.

- o Knowledge of local, state, and federal legislation and regulations related to service provision for children and adults with cognitive-communication disorders.
- o Knowledge of research principles and methods of conducting clinical research to address questions related to cognitive-communication disorders and interventions

III. Course Assignments, Activities, Instructional Strategies & Use of Technology

Reading Assignments:
Text chapters that correspond to selected course topics/activities are listed on the course schedule, below. The listing is comprehensive and according to the date(s) the topic(s) will *first be introduced.* Each time we meet, I will assign *specific* chapters for you to read prior to our *next* class discussion.

Examinations:
There will be two scheduled examinations. Exams are comprehensive, containing multiple choice, fill in the blank, and short answer

Case Study:
A two-part comps style case study will be completed **with a partner.**

Quizzes:
There will be 10 quizzes periodically throughout the semester. They are tentatively scheduled and will be announced one week prior.

Reflections:
Two reflections are required for this course.

Each student will complete a two-page paper (double spaced, Times New Roman font-12 point with one-inch margins) on your perceptions following either an interview with and individual and their caregivers living with a neurogenic communication disorder or reading an autobiographical styled book of the same subject matter. More specific requirements will be posted.

Each student will complete a two-page paper (double spaced, Times New Roman font-12 point with one-inch margins) on their perceptions following a minimum of two hours volunteering/observing in a skilled nursing facility. This time MAY be spent with the SLP if necessary, however it is preferred that you observe social interactions as opposed to treatment. In order to facilitate this, it is recommended that you contact the activities director at the facility. More specific requirements will be posted.

SimuCase:
A total of three simulations on Simucase will be assigned. These will also count as clinical clock hours!

Videos:
Four videos over assessments and treatment strategies will be completed. These roleplaying activities give students an opportunity to gain hands on experience prior to their externships.

Participation:
Successful class interactions depend on prepared and present communicators! Students are expected to attend each class and to participate in all class discussions and activities. This includes actively listening, asking and answering questions, expressing your opinion and/or making other relevant and timely comments. Diversions due to personal notes, visiting, working on day planners, etc. is not considered appropriate and will be addressed when observed. Cell phones are to be silent during class. Please be respectful and considerate of your peers and instructor.

IV. Evaluation and Assessment (Grading)
Points for grade are as follows:

Midterm	100
Final	100
Case Study (2 parts)	200
SimuCase (50 pts each)	200
Videos/Blog (25 pts each)	100
Interview/book Reflection	50
Observation Reflection	25
Quiz (5 pts each)	50

Total Points: **825**

**NOTICE: These assignments may be subject to change according to the instructor's discretion.

The course grading scale is as follows:

Grade Calculation: (Points Earned to date) / (Points Possible to Date) x 100 = Current Grade

Avoid point penalties by attending class and by submitting assignments on time and according to the required formats. Late assignments are **only** accepted for excused absences or by the discretion of the instructor. Late work must be turned in at the next class period after an excused absence to receive credit. No late work will be accepted Finals Week without written permission from the instructor attached. Make-ups for scheduled exams will be allowed only in an extreme emergency including illness or death of a family member and documentation must be provided. You are responsible for scheduling the make-up exam with the instructor. **This must be done within one week of your missed exam.**

Individual grades will be rounded up when appropriate. Due to this, final grades will NOT be rounded up. A final grade of a 90.1 and a 90.9 are both a 90.

V. Tentative Course Outline/Calendar

Week	Topic	Readings	Due
Week 1	Neuroanatomy and Assessment		
Week 2	**Quiz** Assessment of Neurogenic Cognitive-Communication Disorders	Ch. 1 & 2	
Week 3	**Quiz** Assessing Language	Ch. 5	**Assessment Video**
Week 4	**Quiz** Assessing Functional Communication, Cognition, and Quality of Life	Ch. 4 & 6	
Week 5	**Quiz** The Context for Treatment	Ch. 7	**Interview/book Reflection Due**
Week 6	Aphasia	Ch. 8	**SimuCase Due**

Week 7	**Midterm**	Ch. 9	**Case Study Due**
Week 8	Treatment of Aphasia		
Week 9	**Quiz** Treatment of Aphasia		**SimuCase Due**
Week 10	**Quiz** Right-Hemisphere Syndrome	Ch. 10	**Treatment "blog"**
Week 11	**Quiz** Traumatic Brain Injury	Ch. 11	**Observation Reflection Due**
Week 12	**Quiz** Dementia	Ch. 12	**Treatment "blog"**
Week 13	Treatment of Dementia		**SimuCase Due**
	Thanksgiving Break		
Week 14	**Quiz** Real Life		
Week 15	**"Quiz"** **Final**		**Case Study 2 Due**

**NOTICE: These dates and/or topics may be subject to change according to the instructor's discretion.

VI. Readings

Required texts and materials:

Brookshire, Robert H. (2007) Introduction to Neurogenic Communication Disorders, 8th edition,

Mosby/Elsevier Publishers

VII. Course Evaluations

Near the conclusion of each semester, students in the College of Education electronically evaluate courses taken within the COE. Evaluation data is used for a variety of important purposes including: 1. Course and program improvement, planning, and accreditation; 2. Instruction evaluation purposes; and 3. Making decisions on faculty tenure, promotion, pay, and retention. As you evaluate this course, please be thoughtful, thorough, and accurate in completing the evaluation. Please know that the COE faculty is committed to excellence in teaching and continued improvement. Therefore, your response is critical!

In the College of Education, the course evaluation process has been simplified and is completed electronically through MySFA. **Although the instructor will be able to view the names of students who complete the survey, all ratings and comments are confidential and anonymous, and will not be available to the instructor until after final grades are posted.**

In addition to the electronic course evaluation you will be asked to complete at the conclusion of the semester, I welcome your comments, feedback and suggestions throughout the duration of the course.

VIII. Student Ethics and Other Policy Information

Class Attendance and Excused Absence: Policy 6.7

Regular, punctual attendance, documented participation, and, if indicated in the syllabus, submission of completed assignments are expected at all classes, laboratories, and other activities for which the student is registered. Based on university policy, failure of students to adhere to these requirements shall influence the course grade, financial assistance, and/or enrollment status. The instructor shall maintain an accurate record of each student's attendance and participation as well as note this information in required reports and in determining final grades. Students may be excused from attendance for reasons such as health, family emergencies, or student participation in approved university-sponsored events. However, students are responsible for notifying their instructors in advance, when possible, for excusable absences.

For this course: As stated above, regular attendance in class is required**.** Absences will be excused only by documentation and instructor approval. **If you miss a class, it is your responsibility to obtain handouts and class notes from your peers**. Absence is not an excuse for missing information, handouts, class notes, etc. If you miss class during an exam, quiz or other assignment that a grade was given, you are responsible for providing written documentation (illness, hospitalization, death in the family) so that you may make up that grade. You are also responsible for scheduling the make-up within 2 days of a quiz and 4 days of an exam.

Academic Accommodation for Students with Disabilities: Policy 6.1 and 6.6

To obtain disability related accommodations, alternate formats and/or auxiliary aids, students with disabilities must contact the Office of Disability Services (ODS), Human Services Building, and Room 325, 468-3004/468-1004 (TDD) as early as possible in the semester. Once verified, ODS will notify the course instructor and outline the accommodation and/or auxiliary aids to be provided. Failure to request services in a timely manner may delay your accommodations. For additional information, go to http://www.sfasu.edu/disabiltiyservices/.

Student Academic Dishonesty: Policy 4.1

Abiding by university policy on academic integrity is a responsibility of all university faculty and students.

Definition of Academic Dishonesty
Academic dishonesty includes both cheating and plagiarism. Cheating includes, but is not limited to:
-using or attempting to use unauthorized materials on any class assignment or exam;
-falsifying or inventing of any information, including citations, or an assignment; and/or;
-helping or attempting to help another in an act of cheating of plagiarism.

Plagiarism is presenting the words or ideas of another person as if they were one's own. Examples of plagiarism include, but are not limited to:
-submitting an assignment as one's own work when it is at least partly the work of another person;
-submitting a work that has been purchased or otherwise obtained from the Internet or another source; and/or,
-incorporating the words or ideas of an author into one's paper or presentation without giving the author credit.
Academic integrity is a responsibility of all university faculty and students. Faculty members promote academic integrity in multiple ways including instruction on the components of academic honesty, as well as abiding by university policy on penalties for cheating and plagiarism.

Penalties for Academic Dishonesty
Penalties may include, but are not limited to reprimand, no credit for the assignment or exam, resubmission of the work, make-up exam, failure of the course, or expulsion from the university.

Student Appeals
A student who wishes to appeal decisions related to academic dishonesty should follow procedures outlined in Academic Appeals by Students (6.3).

Withheld Grades: Policy A-54

At the discretion of the instruction of record and with the approval of the academic unit head, a grade of WH will be assigned only if the student cannot complete the course work because of unavoidable circumstances. Students must complete the work within one calendar year from the end of the semester in which they receive a WH, or the grade automatically becomes an F, except as allowed through policy [i.e. Active Military Service (6.14)]. If students register for the same course in future semesters, the WH will automatically become an F and will be counted as a repeated course for the purpose of computing the grade point average.

Student Code of Conduct: Policy 10.4

Classroom behavior should not interfere with the instructor's ability to conduct the class or the ability of other students to learn from the instructional program (see the Student Conduct Code, policy D-34.1). Unacceptable or disruptive behavior will not be tolerated. Students who disrupt the learning environment may be asked to leave class and may be subject to judicial, academic or other penalties. This prohibition applies to all instructional forums, including electronic, classroom, labs, discussion groups, field trips, etc. The instructor shall have full discretion over what behavior is appropriate/inappropriate in the classroom. Students who do not attend class regularly or who perform poorly on class projects/exams may be referred to the iCare: Early Alert Program at SFA. Information regarding the iCare program is found at https://www.sfasu.edu/judicial/earlyalert.asp or call the office at 936-468-2703.

Respect for Diversity

The Speech-Language Pathology program embraces a notion that students from all diverse backgrounds and perspectives be well served by this course, that students' learning needs be addressed both in and out of class, and that the diversity that students bring to this class be viewed as a resource, strength and benefit. It is my intent to present materials and activities that are respectful of diversity: gender, sexuality, disability, age, socioeconomic status, ethnicity, race, and culture. Your suggestions are encouraged and appreciated. Please let me know ways to improve the effectiveness of the course for you personally or for other students or student groups. In addition, if any of our class meetings conflict with your religious events, please let me know so that we can make arrangements for you.

IX. Other Relevant Course Information

Communication for this course will be done in class and through D2L. Please check D2L often to get announcements, print out handouts, check your grades, etc.
If you have difficulty accessing D2L, contact Student Support – 498-1919