A Collaborative Model to Improve the Training of Student Interns in Medical Settings

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Due to the increasing demands of professionals working in health care settings, there is less and less time to commit to the training of future clinicians and thus fewer health care agencies are willing to provide internship experiences. Yet, in order to meet the complex clinical needs and ever evolving demands in the changing health care environment, on-site training at a medical facility is critical if we are to adequately prepare speech-language pathology and audiology graduate students for service delivery in these settings. An informal survey of speech-language pathologists and audiologists working in medical settings in Southern California indicated there was a need to strengthen the relationship between the university training programs and the professional community working in these settings. To address this need, members of the Southern California Medical Speech Pathology and Audiology Council (SCMC) and members from three of the six graduate training programs in Southern California met to explore common issues and concerns. The major problems identified were:

1. Lack of information about what is expected of master clinicians (supervisors) during the internship experience.
2. Lack of consistency in conveying the expectations for the internship experience from one university program to another.
3. Lack of standards in the student evaluation process. There was great disparity in the student evaluation tools used by the various universities and site supervisors had to continually adjust to these varied procedures.

The principal outcome of this meeting was the establishment of an ad hoc committee consisting of three SCMC members and two clinical coordinators from two of the graduate training programs. The charge to this committee was to explore the possibility of developing uniform materials that could be used by all training programs and that would serve as the center piece for the supervision and training of graduate student interns in medical settings. A request for what training materials were already available went out to various medical centers and university training programs, and the responses received revealed how little printed information was actually available. Forms and materials used for training student interns varied greatly from one university and/or medical setting to the other. More importantly, there was no real documentation about what was expected of either the intern or the supervisor.

In order to provide the professional community and the students with comprehensive information pertaining to training and supervision expectations in medical internship experiences, this committee developed a Handbook for Student Interns and Clinical Instructors in Speech-Language Pathology and Audiology (1999). Training guidelines developed at Loma Linda University, including an evaluation instrument and grading procedures, served as a guide.

The “Handbook” was completed in 1998, and, after being used by several clinical instructors who provided feedback and suggestions for changes/additions, it was revised in May 1999. In its present form, it
includes important information pertaining to professional issues in a medical setting, internship expectations, as well as guidelines for clinical instructors. These guidelines include information pertaining to the qualifications and responsibilities of clinical instructors, and ASHA’s Position Paper pertaining to supervision (1985). Another section of the Handbook provides information about the collaborative nature of supervision and takes into consideration the need for different styles of supervision depending on the level of the student’s clinical experience (Anderson, 1988).

In addition, there is an explanation of the evaluation process as well as actual forms that permit assessment of a comprehensive set of clinical competencies. Other forms are included that provide an opportunity for the student intern to evaluate his/her own competencies as well as the entire internship experience (e.g., the site and the supervisor).

The Handbook is part of a larger plan to provide more consistent training of graduate speech-language pathology and audiology interns in medical settings, regardless of the university graduate program they attend. Since many of the medical settings are used by different graduate training programs, consistency in the expectations and in the training procedures simplifies the process for supervisors. Such consistency saves time, creates uniform standards, and increases the willingness on the part of supervisors to get involved in the supervisory process.

Recognizing that the training of first time supervisors would facilitate a greater understanding of the supervisory process, the Council offered its first supervision workshop on June 10, 2000. About 60 clinicians attended this training, and this is intended to become an annual event. It is hoped that every clinician that agrees to supervise a graduate student for the first time will attend this 3-hour workshop, although at present this is not mandatory. Everyone who agrees to supervise a student from California State University, Los Angeles is given a copy of the Handbook, and the university supervisor provides individual instruction on how to use the evaluation form. All the training directors of the six graduate programs in Southern California have been given a copy of the Handbook and encouraged to incorporate this as part of their medical internship program. As noted above, the goal is to have greater uniformity in terms of the expectations for the assignment, and in the way in which students are evaluated.

The collaboration between SCMC and the graduate training programs has resulted in more opportunities for internship placements, and it has heightened the awareness of the importance of the supervisory process to the training of the next generation of speech-language pathologists. The feedback received from those who have used the Handbook is that it facilitates an understanding of the expectations of the assignment, that the forms included are helpful in providing regular feedback to students, and that having a systematic way to evaluate a student’s performance is very helpful and beneficial.

While the problems initially identified have not been completely resolved, the collaborative efforts of the SCMC and the graduate programs have certainly had an influence on those professionals who have chosen to become involved in the supervisory process. What is needed is more frequent training modules offered for first-time supervisors, and the cooperation from all the graduate training programs in Southern California in implementing the Handbook procedures.

While this California experience may be atypical because of the density of university programs and the availability of many medical facilities, particularly in Southern California, the need for collaboration in clinical preparation is well-documented (King, Sheridan, & Hake, 1996; Mastriano, B., 1996; Montgomery & Herer, 1994). Our experience adds further support to this practice, and we certainly recommend this collaborative approach to graduate training programs that want to enhance internship experiences for their students.

References


