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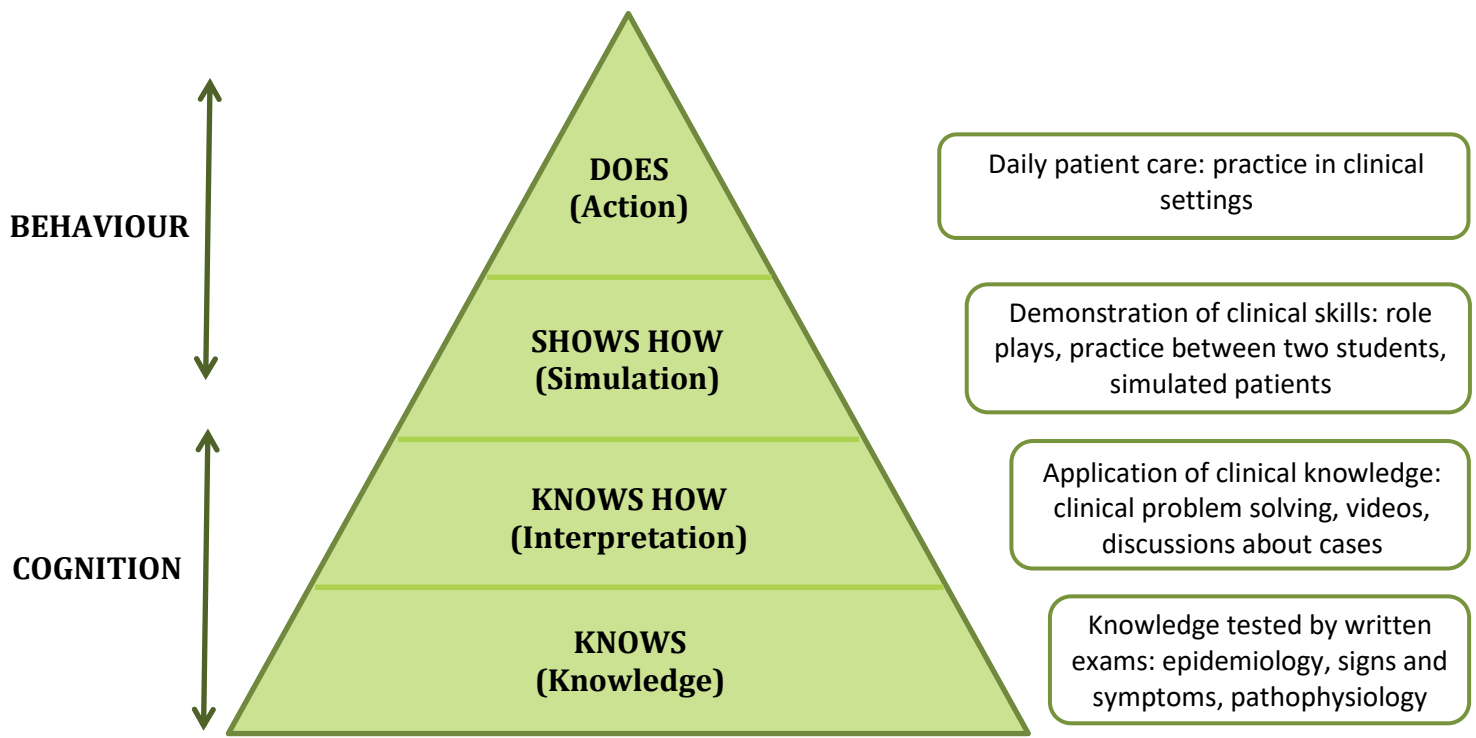
From Novice to Expert Tool for CEs



School of Communication Sciences and Disorders
Speech-Language Pathology Program, Faculty of Medicine
<https://www.mcgill.ca/scsd/clinical/clinical-educators>

From Novice to Expert

As learners acquire experience and abilities, their processing of the many variables guiding their actions changes from a simplistic, rule-based approach to the automatic process of the expert. As they advance in expertise, students pass through the following stages: knows, knows how, shows how, and does. Identifying where students are in the pyramid below (Miller's Pyramid), in regards to different skills, can act as a starting point to assigning students' tasks. It can also help Clinical Educators (CEs) provide appropriate scaffolding to students' learning.



Continuum: Novice to Expert

As learners develop their competencies, they move through the continuum from novice to expert. Students may be at different points along the continuum for different skills (e.g. assessment vs. intervention or counselling) and different clienteles.

CEs have likely reached the expert level for the majority of their daily tasks. Students, however, are not expected to reach the expert level by the end of their placements. In order to graduate and become a member of a professional Order or College (e.g. OOAQ, CASLPO), students are expected to be at the "entry to practice" level. Students' skills should be in the Competent to Proficient range.

CEs play a critical role in helping the students move along the continuum. The table on the following page describes abilities and behaviours that CEs can observe for each of the stages.

Stage	Abilities and Behaviours demonstrated by the Learner
Novice	<ul style="list-style-type: none"> • Recognizes facts and features • Relates to observable and measurable signs • Focused on the disorder process • Does not always consider the context • Novices tend to separate pieces of information
Advanced Beginner	<ul style="list-style-type: none"> • Once the novice has some experience with clients, they learn to consider additional cues • Has a broader view of the clients • Relates to the patient as an individual • Recognizes presence and absence of behaviour, but not yet able to attach meaning to it as looking for familiar patterns to help in the problem identification • Recognizes similarities across contexts, but difficulty seeing the whole picture and identifying priorities • Builds up episodic knowledge
Competent	<ul style="list-style-type: none"> • Can see more facts and observations and knows which ones are more relevant • Has an easier time figuring out the priorities • Flexibility and creativity are still challenging
Proficient	<ul style="list-style-type: none"> • Can perceive a situation as a whole rather than viewing isolated parts • Has a sense of vision and direction for their clients • Can recognize and deal with unfamiliar situations • Has learned the ability to be flexible and modify initial hypothesis in light of unexpected or new findings
Expert	<ul style="list-style-type: none"> • Rules are no longer in foreground, they are applied and adapted easily to new situations • Clinical intuition develops based on reflection of past experiences and the correct identification of relevant cues

Competency-based Tool: Novel to Proficient

In collaboration with CEs working in various settings, the SCSD's Coordinators of Clinical Education (CCEs), Kelly Root and Sophie Vaillancourt, developed a tool which proposes different tasks that students can be asked to perform at each stage.

During the 2015 Annual Meeting, 10 CEs participated in a brainstorming session where they exchanged ideas on tasks that students could perform in different settings starting from the Novice stage up to the Proficient stage. The Expert stage was excluded since it is not expected that students will reach that stage during their training. The CEs (all of them Speech-Language Pathologists) who participated in the development of this tool on June 19, 2015, are listed below:

- Alaina Benoit, Summit School
- Stéphanie Brosseau, Commission scolaire Marie-Victorin
- Mariska Burger, Sir Wilfrid Laurier School Board

- Jesse Burns, Royal-Victoria Hospital
- Teresa Harvie, Constance-Lethbrige Rehabilitation Centre
- Lisa Maislin, Lester B. Pearson School Board
- Susan Nemeth-Sinclair, MAB-Mackay Rehabilitation Centre
- Helene Packman, Lester B. Pearson School Board
- Caroline Richer, Montreal Children's Hospital
- Lauren Tittley, Jewish General Hospital

The SCSD's Coordinators of Clinical Education completed the tool once the data from the brainstorming session was collected and compiled. The following tool was last updated on February 21, 2020.

References

- Lemov, D. et al. (2012). *Practice Perfect: 42 Rules for Getting Better at Getting Better*, Jossey-Bass, USA: San Francisco, 263 p.
- Preceptor Education Program (PEP), University of Western Ontario: <http://www.preceptor.ca/>
- Skeff, K.M. & Stratos, G.A. (2010). *Methods for Teaching Medicine*, ACP teaching Medicine Series, American College of Physicians, Versa Press, United States, 141 p.

ASSESSMENTS

		Tasks to Accomplish	Novice	Advanced Beginner	Competent	Proficient
Planning the Assessment	Analyzing the Referral		<ul style="list-style-type: none"> Locate referrals Review referral Use template to collect information Begin to identify important factors written in referral 	<ul style="list-style-type: none"> Review referral and identify important information Begin to hypothesize possible impact on the client Begin to identify missing information Begin to identify how to gather missing information 	<ul style="list-style-type: none"> Review referral and identify important information and irrelevant information (or less important information) Identify what is known and what needs to be found out Hypothesize possible impact on client Modify original hypothesis after gathering further information 	<ul style="list-style-type: none"> Return to referral source to explain what constitutes a good referral – who should be referred and why and who should not be referred Advocate at the organizational level to modify the way referrals are done
	Gathering Background Information		<ul style="list-style-type: none"> Locate charts Review questionnaire or relevant documents Actively observe CE interviewing client, family, caregiver, or other professionals Use template to collect information from chart or interview 	<ul style="list-style-type: none"> Identify important information Begin to identify missing information or information that needs clarification Begin to identify how missing information will be gathered Begin to hypothesize possible impact on client Interview client and family , or caregiver following a template in presence of CE Begin to gather information from other professionals 	<ul style="list-style-type: none"> Gather clarifying information Identify other sources of potential relevant information Complete entire case history; begin to spontaneously ask unplanned follow up questions Answer questions from other professionals about background information Begin to analyze information to guide assessment 	<ul style="list-style-type: none"> Gather information from multiple sources Analyze information to guide and modify assessment Provide verbal summary of relevant information to other professionals
	Planning Assessment including Tools to Use		<ul style="list-style-type: none"> Identify broad areas that require assessment (language, speech, swallowing, etc.) Associate tests with broad populations (e.g., PLS-5 used with pre-schoolers for language; BDAE-3 used with adults with aphasia) 	<ul style="list-style-type: none"> Identify tests used for each broad area Identify tests used for specific populations Plan assessment following a structured model for a specific population 	<ul style="list-style-type: none"> Know what each subtest evaluates Plan assessment <ul style="list-style-type: none"> Identify specific subtests to be administered Identify informal tasks to be performed Identify relevant observation opportunities (e.g., classroom; interaction with family member) Prioritize test administration (which ones to administer first) Estimate time of test administration for specific clientele Plan adaptations to standardized procedures based on type of client 	<ul style="list-style-type: none"> Identify how much time the assessment will take and choose tests based on time limits Plan to buy new tests to assess specific areas when resources are lacking Advocate purchasing of tests to organization

ASSESSMENTS CONT'D

	Tasks to Accomplish	Novice	Advanced Beginner	Competent	Proficient
During the Assessment	Administering Formal and Informal Tasks	<ul style="list-style-type: none"> Read administration manual <ul style="list-style-type: none"> Be familiar with instructions (e.g., repetition rules) Know basal/ceiling Practice administration (e.g., with a classmate, friend, family member) Administer parts of a test following a model Perform structured informal tasks following a model or using a checklist provided by CE 	<ul style="list-style-type: none"> Administer full test following model Administer parts of a test without previous model Record answers for easier tasks (e.g., circle choice on test form) Record answers for more complex tasks while the CE or teammate administers a test Perform structured informal task without a model Perform non-structured informal task following a model and with support and simultaneous feedback from CE Prepare a list of acceptable feedback to provide client Begin to provide feedback to client Begin to be aware of impact of individual non-verbal feedback 	<ul style="list-style-type: none"> Administer tests without previous models Record responses on-line Administer pre-designed informal tasks independently Design informal task with support from CE Provide adequate verbal and non-verbal feedback to client Know when to give clients a break 	<ul style="list-style-type: none"> Adapt standardized procedures based on performance Record additional information not part of the test (e.g., timing, self-corrections, word finding abilities) Design informal task based on assessment needs
	Behaviour Management	<ul style="list-style-type: none"> Identify problematic or difficult behaviours 	<ul style="list-style-type: none"> Implement some specific strategies that were discussed ahead of time for a specific client Begin to identify triggers and causes for behavioural issues of specific client Consult with other professionals for suggestions in behaviour management regarding specific clients Begin to propose some possible strategies to manage behaviour 	<ul style="list-style-type: none"> Identify triggers and causes for behavioural issues Implement strategies spontaneously 	<ul style="list-style-type: none"> Successfully implement behaviour management strategies with difficult clients Identify potential challenges based on referral
	Scoring	<ul style="list-style-type: none"> Use manual to score easy sub-tests (e.g., circled choices) Start to score complex tasks and later review with CE (e.g., multiple acceptable answers; descriptive answers) 	<ul style="list-style-type: none"> Begin to score while administering a test (CE scores in parallel) Use manual to score complex tasks with minimal support from CE 	<ul style="list-style-type: none"> Score tests independently Score non-complex tasks on-line 	<ul style="list-style-type: none"> Score complex tasks on-line

ASSESSMENTS – CONT'D

		Tasks	Novice	Advanced Beginner	Competent	Proficient
Reflecting on the Assessment	Interpretation of Results		<ul style="list-style-type: none"> Read grid for severity ratings Begin to broadly categorize results Begin to identify information that can be attained from administering additional tests/subtests CE discusses results with students explicitly stating their clinical reasoning process on the topics below. Students actively participate in discussion by asking questions <ul style="list-style-type: none"> Combine formal and informal results Combine results from different areas (receptive and expressive) Hypothesize clinical conclusion Link results with functional impact 	<ul style="list-style-type: none"> Begin to combine formal and informal results Consider more than one area in assessment and begin to combine results (receptive and expressive) Hypothesize clinical conclusion based on results with CE support Begin to link assessment results with functional impact Identify information that can be attained from administering additional tests/subtests 	<ul style="list-style-type: none"> Combine formal and informal information Consider assessment results as a whole Link assessment results with functional impact Devise clinical impression independently Extract other information gained from tests other than specific testing goal - specific to your client Formulate clinical conclusion for simple cases independently Formulate clinical conclusion for complex cases with minimal CE support 	<ul style="list-style-type: none"> Formulate clinical conclusion for simple and complex cases independently Interpret results in context (e.g. info from other disciplines, client context etc.) Consult colleagues or CE for unique cases
	Documentation		<ul style="list-style-type: none"> Collect all protocols and scores together Prepare a file with all necessary documentation based on a template with CE support Write parts of a report following a model and template with corrections from CE Write case history based on a template Write SOAP note following a session using a template and associated discussion with CE 	<ul style="list-style-type: none"> Write a whole report given a template and examples of similar profiles with corrections from CE Begin to determine what to include in a report and what should not go in Write SOAP note after session; CE will edit note as needed 	<ul style="list-style-type: none"> Write a whole report (with minimal editing/consultation with CE) Write SOAP notes independently directly in file 	<ul style="list-style-type: none"> Write whole reports independently Consult colleagues or CE for help on how to describe a unique situation or behaviour in reports with immediate legal implications (e.g., insurance, validation, etc.)
	Presentation of Results		<ul style="list-style-type: none"> Actively observe CE presenting results. Prior to the session, CE and student discuss the tasks of the student during session (e.g., student will take notes on what CE did first, on clients' response, etc.) Practice presenting results to CE (e.g., role play) 	<ul style="list-style-type: none"> Draft a written script to present results to clients Collaboratively present results to clients with CE (present results on one aspect) Present results to clients following discussion of results with CE and role play Begin to modify level of language with input from CE 	<ul style="list-style-type: none"> Report results to clients (e.g., parents, spouses, other professionals) with CE present/supporting Begin to modify how to present results based on client response Begin to modify level of language independently Begin to provide information and support to promote client self-advocacy and societal inclusion 	<ul style="list-style-type: none"> Report results independently Spontaneously modify level of language based on client response Explain functional impact of results Provide information and support to promote client self-advocacy and societal inclusion Facilitate opportunities for clients to connect with others experiencing similar challenges
	Recommendations and Intervention Plan*		<ul style="list-style-type: none"> Select recommendations from a list Select possible goals from a list Research possible recommendations or goals for different problems Discuss external referrals to be made with CE 	<ul style="list-style-type: none"> Formulate one or two recommendations based on assessment results Formulate one or two goals based on assessment results Begin to identify external referrals to be made 	<ul style="list-style-type: none"> Formulate majority of recommendations and goals, with some CE support Justify recommendations to clients/family members/caregivers Make appropriate outside referrals 	<ul style="list-style-type: none"> Formulate recommendations and goals independently

* In Quebec, recommendations need to be general (e.g., referral to another professional, need for schooling in a smaller group, need for S-LP treatment, etc.). The goals that are written for the clients, the client families or other professionals are not part of the recommendations, but are included in the Intervention Plan.

INTERVENTIONS

		Tasks to Accomplish	Novice	Advanced Beginner	Competent	Proficient
Planning for Sessions	Planning and Writing Mid and Long Term Goals		<ul style="list-style-type: none"> Identify global areas to be targeted Select goals from a goal bank Select one goal based on CE's report Write treatment/intervention plan using a template and a sample from a similar client with CE support 	<ul style="list-style-type: none"> Identify specific areas to be targeted Write treatment/intervention plan using a sample from a similar client with minimal CE support Write treatment/intervention plan with feedback from CE Begin to develop measurable goals 	<ul style="list-style-type: none"> Begin to develop individualized and functional goals based on specific client's needs and context Develop measurable goals Write treatment/intervention plan independently Begin to prioritize goals Begin to plan levels of mid-term goals to achieve long term goal 	<ul style="list-style-type: none"> Develop individualized and functional goals based on specific client's needs and context Prioritize goals Plan levels of mid-term goals to achieve long term goal
	Planning Session goals		<ul style="list-style-type: none"> Select one session goal with CE input Generate sequence of session goals (goals determined by CE) 	<ul style="list-style-type: none"> Choose one session goal independently Choose how many goals to target in a session Begin to plan other session goals with CE support 	<ul style="list-style-type: none"> Plan goals for entire session independently Begin to adapt sequence of goals based on client from one session to the next Begin to adapt sequence of goals based on client performance during session 	<ul style="list-style-type: none"> Adapt sequence of goals based on client performance during the session
	Planning Activities and Selecting Materials and Tools to be Used		<ul style="list-style-type: none"> Choose one activity for client based on CE goal Prepare materials and activity already used by CE Plan next session based on CE's activity (1st session), with a familiar client Explore different sources for activities/materials, including technology, based on CE's recommendations 	<ul style="list-style-type: none"> Find different sources for activities/materials independently Prepare similar activities as CE with different materials Begin to adapt an existing game or activity to meet a specific goal Plan a novel activity based upon existing materials Create a novel activity based on client's interests with CE support Begin to develop back-up plan 	<ul style="list-style-type: none"> Create novel activities based on client's interests independently Develop back-up plan Begin to coordinate activities and materials with others for interprofessional therapy, so that goals in both areas are addressed Begin to adapt activities to provide adequate trials Anticipate how well an activity will target a goal 	<ul style="list-style-type: none"> Coordinate activities and materials with others for interprofessional therapy, so that goals in both areas are addressed Easily adapt activities to provide adequate trials

INTERVENTIONS CONT'D

	Tasks to Accomplish	Novice	Advanced Beginner	Competent	Proficient
During Sessions	Leading Sessions	<ul style="list-style-type: none"> Observe CE and repeat same activity with same client Complete a task started by CE Participate in session led by CE (e.g., be a player in Go Fish game) 	<ul style="list-style-type: none"> Lead entire session with familiar client and familiar activities Lead one novel activity that was prepared ahead of time (e.g. role play) Begin to lead small or large group sessions using activities similar to CE model 	<ul style="list-style-type: none"> Lead entire session with new client independently (can include some novel activities) Manage entire small or large group sessions Begin to modify tasks on-line based on client performance Able to elicit a large number of trials 	<ul style="list-style-type: none"> Modify tasks on-line based on client performance
	Behaviour Management	<ul style="list-style-type: none"> Inquire about strategies already in place in client's context (e.g., home, school, work) Research behaviour management approaches for specific clienteles Observe CE or other professionals in action and take notes on strategies pre-identified by CE Follow CE's lead in implementing pre-determined behaviour management strategies in co-intervention Implement pre-determined behaviour management strategies with one familiar client 	<ul style="list-style-type: none"> Gather and prepare materials for behaviour management (e.g., visual schedules, environment set-up) Practice behaviour management techniques through role play Hypothesize problem behaviours and develop back-up plans ahead of time Begin to generate ideas for managing behaviour with a new client Begin to implement behaviour management strategies with unfamiliar clients Begin to reinforce behaviour management strategies in a group, modeled by the CE 	<ul style="list-style-type: none"> Identify source of behaviours Generate ideas and implement behaviour management strategies with new client Reinforce behaviour management strategies in a group Individualize behaviour management strategies within groups Organize groups based on behaviour Begin to coordinate behaviour management strategies with others for interprofessional therapy 	<ul style="list-style-type: none"> Modify behaviour management strategies spontaneously based on client response Manage behaviours independently with complex clients Coordinate behaviour management strategies with others for interprofessional therapy Recognize own limitations in behaviour management and identify when to involve other professionals
	Data Collection and Clinical Observations on Performance	<ul style="list-style-type: none"> Document specific targets while observing Collect data/observations with template based on targets identified by CE 	<ul style="list-style-type: none"> Identify targets that will be observed and documented Begin to document performance for specific tasks while leading session 	<ul style="list-style-type: none"> Document performance for specific tasks while leading session Begin to note difficulties in areas not specifically targeted in activity 	<ul style="list-style-type: none"> Note difficulties in areas not specifically targeted in activity
	Sub and Super-Stepping	<ul style="list-style-type: none"> Plan sub-steps and super-steps for measurable goals before the session with CE support Identify the need to modify task after the session based on client performance Participate in discussion led by CE on cueing hierarchies for specific goals and clients (e.g., imitation, elicitation, spontaneous speech, etc.) 	<ul style="list-style-type: none"> Plan sub-steps and super-steps for measurable goals before the session independently Identify the need to modify task based on client performance and begin to propose solutions Write out cueing hierarchy specific to an activity/task 	<ul style="list-style-type: none"> Plan series of activities to meet goals with options to modify based on client performance Modify or abandon task based on client performance on-line Identify sources of difficulties and propose solutions 	<ul style="list-style-type: none"> Change task or materials to suit client's needs spontaneously

INTERVENTIONS CONT'D

	Tasks to Accomplish	Novice	Advanced Beginner	Competent	Proficient
Reflecting on Sessions	Homework	<ul style="list-style-type: none"> Generate one homework assignment with CE support and advance preparation 	<ul style="list-style-type: none"> Generate homework assignments with advance preparation and CE revisions Develop a home program at end of treatment block with CE revisions Begin to brainstorm with client when and how to do homework Brainstorm functionality of homework with CE 	<ul style="list-style-type: none"> Generate homework assignments independently with advance preparation Begin to generate homework assignments on-line Develop a home program at end of treatment block independently Begin to provide speech goals/homework to other professionals to incorporate in their therapy Brainstorm with client when and how to do homework Begin to generate functional homework (day-to-day activities targeting goals) 	<ul style="list-style-type: none"> Generate homework assignments that are effective, functional, and easy to apply in day-to-day activities while respecting client context Generate homework assignments on-line Provide speech goals/homework to other professionals to incorporate in their therapy
	Explanation of Progress to clients or caregivers	<ul style="list-style-type: none"> Observe CE in action and take notes on strategies pre-identified by CE Practice explaining progress to CE after session Explain progress in one goal area to client, family member or caregiver after practicing with CE 	<ul style="list-style-type: none"> Discuss progress with client, family member or caregiver after writing a draft and discussing it with CE prior to meeting 	<ul style="list-style-type: none"> Discuss progress with client, family member or caregiver independently Justify recommendations to client, family member or caregivers 	<ul style="list-style-type: none"> Justify recommendations to other professionals and offer training when needed
	Documentation (SOAP notes and Progress Reports)	<ul style="list-style-type: none"> Prepare a file with all necessary documentation based on a template with CE support Write SOAP note using a template following a session and associated discussion with CE Write parts of a progress report following a model and template with corrections from CE 	<ul style="list-style-type: none"> Write SOAP note while discussing with CE Write a whole progress report following a model and template with corrections from CE Formulate one or two recommendations based on progress Begin to identify external referrals to be made 	<ul style="list-style-type: none"> Write SOAP notes independently Write a whole progress report (with minimal editing/consultation with CE) Formulate recommendations based on progress with some CE support for complex cases Make appropriate outside referrals 	<ul style="list-style-type: none"> Write SOAP notes and progress reports independently for simple and complex cases Write notes and reports in a timely manner