



***A Publication of the North Carolina Association of Supervisors in
Speech-Language Pathology and Audiology***

Vol. 30 No. 2 Fall/Winter 2017

NCASSPA was chartered in March of 1987.

The “black butterfly” with two faces appearing in its wings was designed in 1990.

It represents the spirit and purpose of the organization.

“Thinking that our caring opens the world for a new life for those with whom we work.”

Editors’ Note

Greetings, members! Thank you for taking a moment to read our Fall/Winter newsletter. With this edition, we tried to provide a little more information for those of us that work in a variety of different settings, especially more medically-based settings such as hospitals and skilled nursing facilities. Our group members work in a wide range of settings, and each one comes with its own set of challenges. We hope you find this newsletter to be both informative and a good resource for you as a supervisor!

—Laura Paiewonsky, Patty Brown, & Colette Edwards

Table of Contents

President’s Letter (L. Kincannon) & Welcome New Members.....	2
NCASSPA Executive Committee Directory.....	3
SEUCE Conference Recap (B. Hemric).....	4
Book Review: Left Neglected (L. Paiewonsky).....	5
Hospital Supervision (A. Park).....	6
Student Submission: SNF (M.B. Bownas)	8
Student Submission: Acute Care (H. R. Moore).....	10
2018 NCSHLA Convention Announcement.....	11
NCASSPA Sponsored Session & Business Meeting.....	12
SLPA Job Fair Announcement.....	13
Article Review (C. Edwards).....	14
SLP Humor.....	15
Therapy Corner: Respiratory Muscle Strength Training (L. Paiewonsky).....	16
Q & A on Supervision.....	17
NCASSPA Board of Directors Business Meeting Minutes.....	18
NCASSPA Financial Report.....	21
NCASSPA Membership 2017-2019.....	22
NCASSPA Membership Application.....	23
NCASSPA Supervisor of the Year Award Application.....	24



President's Letter

By Lori Kincannon

My first experience with NCASSPA was about 10 years ago, at a NCSHLA convention. I attended the NCASSPA sponsored presentation by Vicki McCready, Colette Edwards, and Louise Raleigh from UNCG. By the way, all are either founding or long-time members of NCASSPA with a history of huge contributions toward mentoring and promoting supervision as a distinct area of practice.

The session called "20 Timeless Tips for Supervision" changed my life. I still have the handy quick reference cards on a ring that was given out to participants at the end of the session. I have referred to it frequently and have met a couple of other SLPs along the way who also attended that same session. The first response when they see "Tips" hanging out on my bookshelf is, "Oh! I have that, too! Don't you just love it?" Not only has it been helpful, it represents my first concrete "connection" to others who had an interest or passion about the practice of supervision. At the time, I was relatively new to the profession and had only supervised one student intern. Flipping through the cards, reading and re-reading the "tips" and references helped me through many moments of self-doubt. Sometimes, I have just flipped through for affirmation that I was doing the right thing as a supervisor. That NCASSPA session, the handy take-away, and the people I met have made a difference not only in my life, but in the lives of future students that I would supervise.

With recent ASHA changes and recommendations for a phased-in plan for formal training requirements in supervision, resources and networking are essential in guiding future and current supervisors and mentors in our profession. NCASSPA has always been at the forefront of filling this need in North Carolina. As it has done for many years, NCASSPA will sponsor a session on supervision at the NCSHLA convention in March 2018. Sue Hale, one of the featured speakers at the convention, and past chair of ASHA's Ad Hoc Committee on Supervision, will be presenting. I hope you will attend and find the information useful. As important as the information and CEUs, I KNOW you will be able to connect with folks ranging from those with a "spark" to supervise to seasoned and well-versed mentors. It's what NCASSPA is all about!

This will be my last "Letter from the President," as my term comes to a close in March 2018. I have enjoyed this opportunity to serve as President and look forward to continued connections with the friends and colleagues that I have met as a result of my involvement in NCASSPA.

Finally, I would like to encourage some of our newer members to volunteer to be a part of the NCASSPA Executive Board. The benefits outweigh the time commitment, and the NCASSPA Board is always looking for energetic and enthusiastic individuals who have interest and/or expertise in supervision. Consider volunteering with NCASSPA!

Respectfully,

Lori J. Kincannon, MS, CCC-SLP

Welcome!

Welcome to all new and returning members! We hope that this organization and newsletter will provide

opportunities for professionals to learn and grow as supervisors.

NCASSPA Executive Committee Directory

President.....	Lori Kincannon
President-Elect.....	Lisa McDonald
Historian.....	Angie Rikard
Secretary.....	Crystal Leigh Shearin
Treasurer.....	Sherry Street-Tobin
Membership.....	Jennifer Van Gilder
Newsletter Editors.....	Patty Brown Laura Paiewonsky Colette Edwards
Convention Liaison.....	Donna Brown
SLP Assistants.....	Holly Hanley Jessica Raby
University Supervisors.....	Linda Bowers
Board Members at Large.....	Angie Pharr Emily Hamuka Linda Wortman-Lowe

Southeastern University Clinical Educators (SEUCE) Annual Conference

By Bliss Hemric

The 2017 annual Southeastern University Clinical Educators (SEUCE) conference was held at the University of Georgia in Athens on September 27-29, 2017. This event was well attended by NCASSPA members. There were 46 people registered and 17 universities represented at SEUCE this year. The folks at Georgia State University, Valdosta State University, and the University of Georgia did a fabulous job putting together another incredible SEUCE program. The theme was “Think outside the Hat.”

Twelve sessions were presented on a variety of topics related to clinical supervision. Twenty-one different speakers took part in the presentations. The sessions were informative and at times entertaining. There was time allotted for discussions as well as sharing of ideas and experiences. It was exciting to learn from several university programs about the clinical practicum opportunities provided, such as studying abroad, Solution Focused Therapy, peer supervision, group fluency intervention and clinical simulation models. Attention was given to the CFCC standard changes as well as Electronic Health Records implemented in university clinics. It will be great to get an update from Sue Hale about implementation of the new standards at the 2018 NCSHLA Spring Convention.

Presentations targeting ways to write clinical remediation plans to facilitate student success and the impact of drug interactions on speaking, hearing, and swallowing were also part of this year’s topics. These sessions provided valuable information for clinical educators in their work settings.

The 2018 SEUCE conference will be hosted by the University of Louisiana at Lafayette.



Book Review: *Left Neglected*

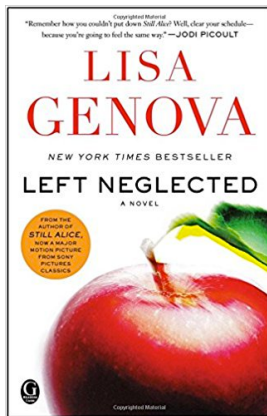
by Lisa Genova

Review written by Laura Paiewonsky, MA, CCC-SLP

Left Neglected is a novel written by neuroscientist Lisa Genova, who has written several other books that all showcase individuals living with neurological diseases. Her first book, *Still Alice*, tells the story of a woman suffering from early-onset Alzheimer's disease and has been turned into a well-known movie.

In her second novel, *Left Neglected*, Genova writes about a young professional with a husband and children at home, who ends up with a traumatic brain injury (TBI) after a car crash on her way into work. The main character, Sarah, spends weeks in a rehabilitation center working with therapies to recover her physical abilities. Sarah also experiences what is known as left neglect – the inability to acknowledge the left side of her body and her world. Throughout this book, you follow her time in rehabilitation as well as her transition back home after such a life-altering injury.

While reading this book, I thought that the author did an exceptional job describing what it might feel like to experience left neglect. At one point in the story, as her husband is trying to tell her to simply look to her left, she asks him to scan the room and share everything that he sees. Then she says:



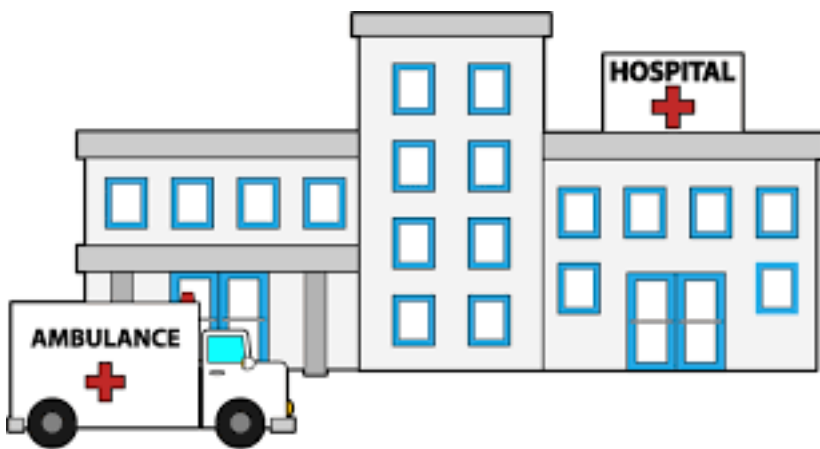
“Okay, now what if I told you that everything you see is only half of everything that is really here? What if I told you to turn your head and look at the other half? Where would you look?”

As Sarah's husband says that he does not know where he would look, she has made her point. My only frustration as a speech pathologist is that the author does not mention speech therapy at all. I think this would have been a wonderful opportunity to highlight our profession and what we can do for cognitive recovery. Nonetheless, this book would be a great benefit and a quick read for the families of our patients living with left neglect, and would help them empathize with their loved one's new way of thinking.

Supervision in the Hospital Setting: Introducing Students to the SLP's Role in Acute Medical Care

Written by: Ashley Parks, MA, CCC-SLP

My palms still sweat when I think back to the first day of my clinical fellowship in the small community hospital in which I still work. Upon receiving my first physician order to evaluate an acute care patient, I completed a bedside swallow evaluation, just as my professor taught in graduate school. Despite my limited experience, I was confident this poorly alert patient did not initiate an effective swallow, but... “Now what?” I thought. “What do I do with this information? Who do I inform of the result? Do I need an objective study to confirm my findings? How is the patient’s acute illness affecting their status? Should I re-evaluate, and if so, when?” Though well prepared by graduate school coursework to complete a swallowing evaluation, I lacked understanding of my role, as the speech-language pathologist (SLP), in a patient’s care. Following much wise counsel from my Clinical Fellowship supervisor, research of medical terms and diagnoses, and many (often awkward) conversations with physicians, nurses, and case managers, I eventually learned how to navigate the acute care setting and gained a framework for how to answer those key questions. Now several years later, one of my favorite aspects of the job is supervising graduate students as they gain experience in the hospital setting. I strongly believe acute care placements are needed to provide potential hospital-based SLPs the experience they need to navigate the hospital environment, integrate general medical knowledge into clinical practice, and fulfill their role in acute patient care.



While every facility has its own nuances, a general understanding of the inner workings of acute care can be learned during a hospital placement. Regardless of the facility, the processes of receiving physician orders, reviewing a medical chart, scheduling around medical procedures, and participating in interdisciplinary rounds are likely applicable to any acute care setting. Learning to communicate effectively with medical providers, nurses, and other medical professionals is essential. Supervision in the acute care setting allows the opportunity for students to not only gain experience in evaluation and treatment in a new setting, but to learn how a hospital operates, and in turn, how an SLP operates within a hospital.

Despite excellent coursework in anatomy, neurology, and dysphagia, a complex medical chart was still daunting when I began my clinical fellowship. Over time, I learned to consider the results of chest x-rays, lab values, prior medical history, and medication lists in my evaluation. Understanding a patient's course of treatment (e.g. length of time on antibiotic treatment) became critical for determining the optimal time for an objective study. I learned to integrate cognitive skills (e.g. ability to follow commands) in my dysphagia recommendations. These considerations were included in my dysphagia coursework but remained abstract concepts, until I encountered actual patients. In an acute care placement, we have the opportunity to coach graduate students to see "the big picture" of a patient's medical care in order to make clinically wise recommendations.



Contrary to my perspective during dysphagia class, swallow evaluations in the acute care setting are seldom straight-forward. The patient's medical status is dynamic and thus recommendations change frequently and quickly. Working together with all members of the medical team is crucial. A hospital placement allows students to observe and participate in multidisciplinary patient care. I encourage the graduate students whom I supervise to shadow our dietician, occupational therapist, and physical therapist. Students also attend our rehabilitation department patient huddle each morning and interdisciplinary team meetings twice a week to provide them with a greater understanding of the SLP's role within the medical team.

Supervision in the hospital setting is not without its challenges. The pace is fast and the schedule unpredictable with a census that often changes hourly. We often interact with people at their worst. High medical acuity brings risk and added stress to all involved. Actual clinical clock hours may be limited, as each swallow evaluation necessitates chart review, interdisciplinary case conferencing, and informing providers, families, and staff of results. But each of these challenges brings an opportunity to provide the next generation of SLPs with the skills, knowledge and experience needed to navigate the hospital setting, integrate medical information, and work together as a member of the healthcare team to serve the acute care patient with excellence.

Student Submission: Skilled Nursing Facility

By Mary Briggen Bownas, Graduate Student (ECU)

During the summer semester of 2017, I completed my part time internship at a skilled nursing facility (SNF) in Eastern North Carolina. I have always had more of an interest in working with children than adults, and I was apprehensive about the opportunity to broaden my clinical horizons. While I was fortunate to have excellent professors, a huge difference exists between the classroom and clinical application. In this facility, I knew I would be doing a great deal of work with dysphagia, cognitive/linguistic disorders, and aphasia; none of these were areas in which I felt particularly competent. However, I quickly came to realize clinical supervisors serve as the vital link between academic performance and clinical application. I was so fortunate to have a passionate and concerned supervisor, who not only structured my experience in a way that was constructive and supportive, but also offered me guidance to foster my growth as a clinician in this challenging experience.



My supervisor presented multiple opportunities to problem solve, provided relevant and practical information, and encouraged me to learn on my own. She provided opportunities to learn through observation, so that I could absorb information and ask questions in a constructive environment. In other words, my internship was similar to learning in class with my supervisor assuming the role of the professor. At first, I felt overwhelmed by the newness of each day's challenges, but as time went on, the quantity of concepts started to make sense. My supervisor was always very understanding if I had a piece of knowledge missing, and was always willing to help me find resources to fill in the gaps. I went home with pages of medications and their uses, different peer reviewed articles, and entire books filled with

activities. As I was learning how to make big picture connections, I began to look at clinical problems in a new way.

Just like in a classroom setting, there were always opportunities to demonstrate my knowledge. After an initial day or two of observations, I was the clinician during sessions. My supervisor was almost always present for the entire session, but she would give me the freedom to choose my own activities, and make my own mistakes. Her willingness to allow me to fail transformed into opportunities for me to solve my own problems, discovering what worked and what didn't. My independence also gave me confidence; even when I made a mistake I grew to understand that I was still a good clinician. I learned even if my session didn't go as planned, it was not a loss, and all I needed to do was change my approach. My supervisor would also ask me case study questions, presenting me with an imaginary patient, and asking what I would do and why. As time went on and I gained more experience, I found myself being more confident with the questions and my answers, which absolutely carried over into my clinical approaches.

Paperwork is an area I can imagine supervisors dislike as much as their students do, and the way my supervisor approached it was very beneficial. I was never responsible for the entirety of the paperwork, which eliminated multiple levels of stress. In between clients, my supervisor and I would talk about the client we had just seen, and we would discuss what the note would include. As we

would look at the data I had collected, think about client trends, and discuss the skilled interventions used, we would work as a team to input that data into the system. Because the pressure of documentation was shared, time was not wasted with one person writing the document and another checking it for accuracy. It was a team effort, allowing more time to focus on acquiring clinical skills.

By the end of my experience, I felt comfortable and confident walking into my sessions. I was able to lead a session from beginning to end without my supervisor, and I felt like I could communicate with other staff about clients and their progress in an efficient and effective way. In addition to my supervisor feeling confident in my skills as a clinician, the Rehab Director told me if I ever wanted to consider PRN work, she would love to have me on the team. I evolved from someone used to working with people age 0 to 21, to someone comfortable providing therapy to people age 0 to 100. My supervisor served as a wonderful mentor during my internship program, providing ample learning opportunities, room to grow as a clinician, and the chance to make my own mistakes and solve my own problems.

While this supervisory experience was a crucial and impactful one, I have had the privilege of working with other supervisors, including three in the university clinic setting. These experiences have been instrumental towards reaching my career objective of becoming a certified SLP. The university clinic is one experience that all graduate students share, and one that forms the foundations of our clinical practice. I would definitely say there are drastic differences in the types of supervision students receive in a university clinic versus an internship experience, but both are beneficial. For example, in a university clinic, the responsibility of paperwork falls primarily on the graduate clinician, while the supervisor takes more of a



back-seat, editing role. I have been fortunate to work with supervisors who have been able to guide me through the paperwork process, but it is not as supported as it was at my internship. On the other hand, there is more independence in session structure, organization, and activities in a university clinic; the materials room is a wonderful place, and provides many sources of inspiration. My internship experience did not have a whole room, rather a section on a shelf, and so the opportunities for session design and creativity were fairly limited. The information gathering and research is also primarily put on the graduate clinician in a university clinic, with the intern supervisor there for support. It is important to remember that in an internship setting, the graduate clinician is coming into the supervisor's world, while in a university clinic, due to the turnover it isn't really anyone's "world" per se, it is what the graduate clinician and the supervisor make it. University clinics are fantastic places for clinicians to gain skills, try new things, and explore materials, activities, and assessments, whereas an internship placement gives clinicians the opportunity to do a test run in the real world, where productivity, insurance, interdisciplinary practice, and outside factors are much more evident.

My experience having a variety of supervisors has helped me learn what I need to look for in a mentor, and, in turn, has made me think about my own future as a supervisor. One of the wonderful characteristics of our field is our willingness to not only give to our patients, but also give back to the SLP community. Knowing the impact a supervisor can make on a student makes me excited to take on that role in my professional career; I can only hope that, like my supervisors, I will be as talented, knowledgeable, and supportive to my students.

Student Submission: Acute Care

By Ragan Moore, Graduate Student (UNCG)



Being a speech-language pathology (SLP) student in the acute care world is an unnerving feeling. In graduate school, you sit through numerous classes and lectures hearing all about what this incredible field has to offer for people. One must learn about medically fragile patients, dysphagia, as well as Passy Muir speaking valves, all in an intense and brief time frame. Before it seems possible you are released into a medical setting where your classroom notes become real patients! Suddenly the lifetime student is responsible for using that classroom head knowledge and transitioning it into skilled clinical judgment, thus becoming equipped to operate as a skilled supporter of someone's medical care.

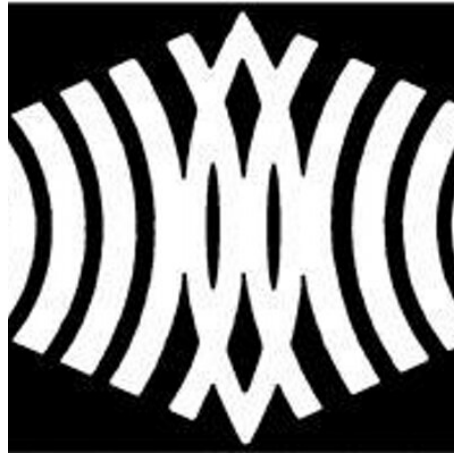
The acute care setting is brimming with new and accelerated experiences. The patients you see on Monday will rarely be the patients you will see on Wednesday. This setting requires you to review and meet different patients and families every day. **The saying that no two days are ever alike has never been more true!** The flexibility needed each day is such a benefit to this setting, but that reinforces the fact that time management is crucial. Productivity is critical and time is of the essence. Prioritization must be considered when receiving your daily patient list. Patients are awaiting specialized medical care that SLPs are qualified to provide. In my particular acute care placement, the expectation is to see eight patients daily. These visits are often a compilation of evaluations, treatments, and instrumental testing. MBS and FEES can both be readily available, which is helpful in making timely decisions for patients. Documentation is also a large part of the day, given that every patient seen requires that a note be written. These notes must be concise and accurate because your recommendations are a necessary piece for an individual's medical care needs. For example, this could come in the form of a bedside swallow evaluation communicating whether it is safe for a patient to begin a diet or noting that one needs further cognitive therapy to aid in the transition into another level of care. As a student, responsibilities and tasks continue to be given to you as your experience and supervisor sees fit. It requires you to be focused and consistent in performing on a level that is reaching for professionalism, because patients and a medical team are using what you write to facilitate further patient care.

This may sound intense, and for me it has been; however, my supervisor has been the epitome of a solid support system for me since the onset of my acute care experience! She has helped me not only learn how to orient through the hospital, but how to orient with patients. She has taught and re-taught me concepts and strategies for understanding the “why” element of what we do as SLPs. I

have been challenged to look inwardly at how I learn and work best. Being a student, I believe it has been of the utmost importance to utilize my supervisor as much as possible. Maintaining an open line of communication not only has helped me as a student, but also has facilitated my supervisor understanding what I am grasping and conceptualizing. For all future acute care SLP students, do not be afraid to ask questions even if you have already asked them. Know it is okay to **not** know, you have never done this job before. Be okay with being corrected and encouraged because your supervisor wants you to succeed! Walk into every day acknowledging that you will be learning all day, and as a student you have an expert with you to help you along the way. I couldn't be more grateful for my placement in acute care. I am confident that I am and will be a better SLP for having this learning experience!

NCSHLA 2018 Annual Convention

March 7-9, 2018



N. Raleigh Hilton/Midtown
3415 Wake Forest Road
Raleigh, NC

Featured speakers include:

- Sue Hale, M.C.D., CCC-SLP, Evanston, IL
- Maya Henry, PhD, CCC-SLP, University of Texas, Austin, TX
- Paula Leslie, PhD, FRCSLT, CCC-SLP, Pittsburgh, PA
- Sheryl Rosn, Ph.D., CCC-SLP, Palm Beach Speech Language Specialists, Nova Southeastern University, and University of Vermont, Palm Beach, FL
- Geralyn R. Timler, PhD., James Madison University, Harrisonburg, VA
- A. Lynn Williams, Ph.D., East Tennessee State University, Johnson City, TN

Sponsored Session and Business Meeting of:
The NORTH CAROLINA ASSOCIATION OF
SUPERVISORS IN SPEECH-LANGUAGE PATHOLOGY
AND AUDIOLOGY (NCASSPA)

Presentation and Business Meeting

Friday, March 9TH, 11-1.

NCASSPA will sponsor Sue Hale's presentation "What's the Same and What's New in Clinical Supervision?" on Friday March 9th, from 11 to 12:30. Save time and room in your schedule to attend the NCASSPA business meeting immediately following the presentation.

NCASSPA President, Lori Kincannon, will pass the gavel to the incoming President, Lisa McDonald who will preside over the NCASSPA Annual Business Meeting. Newly elected officers will be announced and introduced. Everyone interested in supervision is invited to attend this annual meeting.

NCASSPA WILL GIVE AWAY A BEAUTIFUL GIFT BASKET IN THE EXHIBITOR'S DRAWING ON FRIDAY. PLEASE STOP BY OUR DISPLAY IN THE EXHIBIT HALL FOR A CHANCE TO WIN!

TAKE TIME TO CHAT WITH ONE OF OUR MEMBERS ABOUT THE BENEFITS OF JOINING NCASSPA.

NEW MEMBERS RECEIVE A FREE TOTE WITH A YEAR'S PAID MEMBERSHIP.

CHECK OUT OUR "CONVENTION SPECIAL!"

LOOK FOR MORE DETAILS AT NCASSPA.COM-COMING SOON!



Announcement!!!

SLPA Job Fair

The Speech Language Pathology Assistant (SLPA) program at Caldwell Community College and Technical Institute (CCC&TI) held its first annual SLPA job fair/meet-and-greet April 2017. It was a huge success! Representatives from 12 employers were in attendance as well as representatives from Appalachian State University.

The SLPA program is pleased to announce that this year's job fair/meet-and-greet will be held on April 10, 2018 from 4:00 pm to 7:00 pm at the J.E. Broyhill Civic Center in Lenoir, NC. This is an excellent opportunity for companies who employ SLPAs to meet and mingle. It also gives employers an opportunity to meet the upcoming SLPA graduating class.

Please contact Jessica Raby at (828) 726-2495 or jraby@cccti.edu if you would like more information about attending this event.



The graphic features three overlapping speech bubbles on a dark background. The top bubble is green and contains the event title. The bottom-left bubble is blue and contains the date, time, and location. The bottom-right bubble is orange and contains information about registration forms. At the bottom left is the Caldwell Community College and Technical Institute seal, and at the bottom right is contact information for Jessica Raby.

Speech Language Pathology Assistant Career Fair

**April 10, 2018
4:00 - 7:00 pm
J.E. Broyhill Civic Center**

Registration forms will be sent out at a later date.

For more info, contact:
Jessica Raby, MA, CCC-SLP
Instructor/Clinical Coordinator
828.726.2495 • jraby@cccti.edu
Caldwell Community College and Technical Institute



“Tell me and I forget. Teach me and I remember.



Involve me and I learn.”



- Benjamin Franklin

Article Review

Colette Edwards, MA, CCC-SLP

Training in supervision is a frequently discussed topic in most work settings these days. There is a renewed interest and momentum in improving the knowledge and skills of healthcare professionals, driven by the need for higher quality patient safety and the implementation of evidence based care.

NCASSPA has supported these endeavors over the years and acknowledged the work of Vicki McCready and many others who have developed ways to improve supervision and provided education through articles, presentations, ASHA, NCSHLA, and NCASSPA committee work.

The recently published article in the international journal, **The Clinical Supervisor, Vol 36, 2017 Issue 2, *Clinical supervision in speech-language pathology and audiology in the US: development of a professional specialty*** written by Carol C. Dudding, Vicki McCready, Loretta M. Nunez, and Samantha J. Procaccini contains a comprehensive description of the development of clinical supervision in speech-language pathology and audiology in this country. It also offers an abundance of helpful information for anyone currently supervising or interested in supervising in the future.

The article discusses: 1) supervision as a distinct area of practice since 1985, 2) roles and responsibilities of supervisors, 3) approaches to supervision, 4) policy statements, practice guidelines, credential requirements, ethical and legal considerations, 5) training, technology, and advocacy, as well as future directions and challenges.

This is a must-read article for all supervisors! Some highlights of the article include the links to the information being discussed and the description of the different groups of supervisors presented in the article. “The groups include (a) clinical educators of graduate students in university training programs or in externships in off-campus clinical settings, (b) preceptors of audiology students in the final externship, (c) mentors of clinical fellows (CFs) in speech-language pathology, (d) supervisors of support personnel, and (e) supervisors of professionals transitioning to a new clinical practice area or re-entering the workforce.” (Dudding, McCready et al., 2017)

The section describing supervisors’ roles is all encompassing. “In addition to teaching specific skills, supervisors clarify concepts, assist with critical thinking, conduct performance evaluations, mentor, advise, and model professional behavior.” (Council of Academic Programs in Communication Sciences and Disorders [CAPCSD], 2013.) Lastly, information regarding supervisory approaches, feedback methods and the development of critical thinking skills in supervisees was particularly instructional.

This is the best article relating to supervision that I have read in many years! Please take time to read it at this link <http://www.tandfonline.com/eprint/7i7dHHW5Nex4IEnamfgY/full>. You will be glad you did; it is packed with helpful information!

Submitted by Colette M. Edwards, MA, CCC-SLP, Retired UNCG Associate Professor and Clinical Educator

SLP/Audiology Humor

Funny Patient Stories

I was asking a patient who has a history of multiple TBIs and subtle word-finding impairment to generate a list of words that start with the letter "b". About half of the words were neologisms, but the one that was of interest was "bolice". I asked if he meant the word "police" and he said "no, like as in Bolice Navidad" and then he proceeded to sing the song."

-Courtney Payne, SLP

I did an MBS with an outpatient, who hadn't eaten in months since his TBI. Everything was going well until I scanned his esophagus and found a strange, round shape I didn't recognize. I turned to ask the radiologist what it was, but the patient's daughter was already laughing and telling him that it was the wedding band he had accidentally swallowed a few months ago!

-Laura Paiewonsky, SLP

My off-site graduate supervisor was pretty hard-core and never cancelled home visits unless there was a very good reason. One day we showed up at a home and every door and window was open. The mom said their pet snake was on the loose. I was pretty sure my supervisor wouldn't be staying, but no, not my supervisor. We sure did stay and do therapy on their living room floor. The whole time I was looking for the lost snake!!!

-Patty Brown, SLP

Therapy Corner: Respiratory Muscle Strength Training (RMST)

By Laura Paiewonsky, MA, CCC-SLP

RMST is a treatment method designed to increase the strength of the muscles used for respirations. There are trainers used to target muscles of inspiration (IMST) as well as those for expiration (EMST). Research suggests that by increasing the strength of these respiratory muscles, we can facilitate improved swallowing function, cough strength, and breath support for intelligibility of speech. Additional benefits can be found in increased physical endurance and overall improved breathing.

After using a manometer to measure the maximum amount of pressure a person can generate when breathing in and breathing out, the training devices can be set to a certain resistance level. This level is determined by calculating 75% of the person's maximum values. The patient will have to generate at least this much pressure to open a "trap door" on the device. For one treatment session, the patient is instructed to complete five sets of five repetitions. The SLP monitors for improvements and recalibrates the devices as needed for continued improvements to be made.



Courtney Payne, SLP at Moses Cone's Inpatient Rehabilitation Center, shares the following patient story:

"I had a 30-year old patient with Guillain-Barré Syndrome-Miller Fisher Variant, who presented with dysphagia and dysarthria due to decreased breath support and oral-motor weakness with hypernasality with PMSV. She was active in theatre and her vocal quality was very important to her. We initiated RMT, which showed meaningful weakness in both inspiratory and expiratory muscles and IMST/EMST was started. (See Chart Below). Upon discharge from inpatient rehab (about 2.5 weeks), the patient was decannulated and consuming regular texture solids with thin liquids without overt signs of aspiration. She demonstrated improved resonance with increased breath support for speech and cough production as evidenced by RMST re-evaluation measurements.

	Maximum Inspiratory Pressure (MIP)	Maximum Expiratory Pressure (MEP)
Initial Evaluation	19 cm H2O	21 cm H2O
Re-evaluation after 1 week	57 cm H2O	32 cm H2O
Lower Limit of Normal for Age/Gender	47 cm H2O	78 cm H2O

Q & A

Question: Is more supervision required when a student is working with a client diagnosed with a swallowing disorder?

Answer: According to ASHA, supervision for students does not differ based on diagnosis. The needs of each patient, student experience, and minimum requirements for supervision should all be considered when determining the supervision schedule. It is also important to note that many students do not have much experience in the area of swallowing. One reason given is that there are not many patients with swallowing disorders being treated in a university clinic setting. Additional supervision can help to increase a graduate clinician's skills in this area.

Question: I would like to supervise a student, but how do I convince my administrators that this would be beneficial?

Answer: This document created by ASHA would be a great resource for you: [What Administrators Need to Know](#) [PDF]. These answers can help you present your case to your administrators and answer any other questions they may have.

Additionally, a study conducted by ASHA in 2007 discovered that externships can influence a student's thinking about job choice and setting. This makes them a great recruiting tool.

I would like to add that I have been working at my first semester externship placement for 8.5 years since graduating in 2009. My second semester placement was in an outpatient hospital setting and it was not right for me. In my case, my externship with my current practice also served as a six-month interview and on-the-job training. When I asked for the job after graduation the staff already knew me and whether or not this type of setting was a good fit for my strengths and weaknesses.

Students can also be of benefit to their supervising SLP by introducing current information in the field, helping the SLP keep clinical skills sharp through teaching, strengthening relationships with university programs, and providing the SLP a sense of "giving back" to the SLP profession according to ASHA.

These questions and more can be found at ASHA.org. They are great resource for FAQ!

Do you have any questions that you would like answered about supervision?

NCASSPA would like to continue to include a Q & A segment in each newsletter. Please contact us with any questions you have regarding supervision.

Email questions to pattybrownslp@gmail.com



NCASSPA Annual Business Meeting Minutes

Teleconference

October 20, 2017 / 3:00-4:30

Call to Order:

- Lori Kincannon, President

Approval of the Spring Business Meeting Minutes

- Board voted its approval via email in May 2017

Committee Updates

- **President: Lori Kincannon**
 - Thank you to Lynn Mankoff for agreeing to chair the Nominations Committee.
- **President-Elect: Lisa McDonald**
 - No report.
- **Historian: Angie Rickard**
 - Thank you to Patty Brown for her hard work in making the 30th anniversary table look great!
 - New scrapbook started. Asked if Board wants to continue keeping a hardcopy scrapbook or go completely digital and post on website. Board agreed to keep scrapbooking since the books add a nice touch to the convention table.
- **Secretary: Crystal Leigh Shearin**
 - No report.
- **Treasurer: Sherry Street-Tobin**
 - Ending balance for the second quarter was \$3,108.86. Ending balance for the third quarter was \$3,168.86.
 - Spending \$600 for speaker Sue Hale at the spring convention. Spending around \$400 for other convention expenses - \$1,000 total.
 - Motion passed to spend \$200 sponsoring breakfast at the spring convention.
 - Is there a balance we want to maintain in the NCASSPA account? No figure was decided, but we will revisit this.
- **Membership: Jennifer Van Gilder**
 - Currently 75 total members.
 - Lori mentioned the possibility of offering a “convention special” wherein those who signed up to join NCASSPA at the spring convention and paid their dues at that time would have a longer period before having to pay dues again. The board

was receptive to this idea, and Lori stated she will email a draft of membership application reflecting this special offering.

- Lori also mentioned the idea of sending a “we miss you letter” to members who have not recently joined NCASSPA. Holly suggested potentially sending such correspondence through online ASHA connection, then follow up with a phone call. A Google doc will be set up and emailed so Board members can access the list and choose who to call based on potential persona, relationships/connections, etc.

- **Newsletter: Colette Edwards (not present), Laura Paiewonsky (not present), & Patty Brown**

- Deadline: November 7, 2017.
- Expecting to publish between Thanksgiving and Christmas.
- Fall newsletter will slant more toward other settings besides schools (hospitals, skilled nursing facilities, etc.) and Patty encouraged Board members to reach out to anyone they know working in those settings for contributions.
- Needed: president’s letter, update on executive committee, SEUCE recap (Lisa agreed to write)
- Lynn has agreed to write an article about the importance of supervision.
- Lori has contacted a graduate student who will write an article based on her experience as a student in a skilled nursing facility.
- Humor section will include funny on-the-job stories
- Therapy Corner will be geared toward one of the featured settings.
- Will also include a Q&A type section and a spring convention announcement.
- Vicki suggested a newsletter slanted toward the 5 different constituent groups of supervisors. Patty was receptive to this idea and will follow up both with Vicki and the ASHA website resources.

- **Convention Liaison: Donna Brown**

- Sue Hale will speak about supervision on Friday, March 9, 2018, from 11am-12:30pm (1.5 CEUs for supervision). As previously mentioned, NCASSPA will cover the \$600 speaker fee, and NCSHLA will pay for Ms. Hale’s other expenses. This will be Ms. Hale’s last speaking engagement.
- NCASSPA meeting is currently scheduled from 12:30-1pm on Friday, March 9, 2018. Lori asked about the possibility of extending the time allotted for the meeting so the proceedings are not as rushed as previous years. Donna responded we might be able to add 30 minutes. Lori will follow up with AJ at NCSHLA. The possibility of a dinner/meeting was also discussed but tabled.
- Lori also asked about tables at convention and fliers included in convention packets. Donna stated she didn’t know.
- Donna informed the Board this will be her last year serving as Convention Liaison.

- **Nominations: Lynn Mankoff**

- Will ask for nominations from the NCASSPA membership.
- Nominations need to be announced 30 days before spring convention.
- Jennifer Van Gilder will remain as Chair of Membership Committee. Emily Hamuka will continue as Board Member At Large #1. Linda Wortman-Lowe will continue as Board Member At Large #3.

- Nominations needed: President-Elect, Convention Liaison, and Board Member At Large #2.
- Angie Rikard expressed interest in serving as Convention Liaison for 2019.
- **SLP Assistants: Holly Hanley & Jessica Raby**
 - Jessica reported 18 SLP-As are graduating in May 2018.
 - Holly reported 16 SLP-As graduated last year. All are employed, mostly in private practices contracting with schools. Board members were invited to attend a career fair at Caldwell Community College and Technical Institute on April 10, 2018, from 4-7pm.
 - Holly also mentioned the possibility of sending a letter or postcard to student supervisors thanking them for giving back to the profession and inviting them to join NCASSPA. On that note, Lynn Mankoff mentioned the possibility of offering a special first-time supervisor rate or NCASSPA paying for their first year of membership. Board was receptive to idea but logistics need to be sorted. Further discussion was tabled.
- **University Supervisors: Linda Bowers**
 - No report.

Previous Action Items

- **Website**
 - Lisa stated she would coordinate with Lori to determine options for managing the website and developing a committee. She also mentioned the Supervisor of the Year application and section needs to be updated on the website for 2017.
 - Lori mentioned adding a second administrator to the website and will follow up on doing so; will report any associated costs.
 - Adding PayPal to the website for members to pay dues was discussed along with making NCASSPA Treasurer the primary website administrator to change account settings, manage bills, etc. Board was receptive to this idea but further discussion was tabled pending more information.
- **Updates on re-publication of SLP-A book**
 - Per Vicki, no new updates to share – still on hold.
 - Less than 20 books left.

New Business

- **Dissemination of supervision resources through NCASSPA website.**
 - Tabled – Lori and Lisa will decide how to manage, and will present for further discussion at the next Board meeting.
- **Speaker suggestions for 2019 NCASSPA session**
 - Vicki suggested Samantha Procaccini from California, PA. She has conducted research on critical thinking as well as possesses extensive knowledge about the SQF Model.

- Lori will contact AJ at NCSHLA to start the process of potentially securing this speaker for next year's session.
- **Updates for bylaws/constitution, mission statement (re: website management), ex-officio board members, ex-presidents' invitations to board meetings, and changes in supervision requirements**
 - Lisa stated she would handle these updates along with Vicki and Lynn. A draft will be emailed to Board members for review.
- **Other items**
 - Vicki reported an article will be featured in the Clinical Supervisor on November 7, 2017.
 - Next Board meeting will be held either in person or via teleconference in January or February 2018.
 -

President Lori Kincannon adjourned the meeting.

Respectfully submitted,
Crystal Leigh Shearin, NCASSPA Secretary



NCASSPA Financial Report

3rd Quarter

July 1, 2017 – September 30, 2017

07-01-17	NCASSPA Checking	Opening Balance	[NCASSPA Checking]	3108.86
08-14-17	NCASSPA Checking	Deposit	Memberships	60.00

NCASSPA Checking Balance (09-30-17): 3168.86

Memberships (July 1-September 30, 2017) = \$60.00

NCASSPA Membership

July 01, 2017- June 30, 2018

July 01, 2018 – June 30, 2019

Christopher Atkins ²⁰¹⁹	Mckenzie Hatch ²⁰¹⁸	Lisa Pruitt ²⁰¹⁸
Debby Bengala ^{LM}	Brenda Hawkins ²⁰¹⁸	Jessica Raby ²⁰¹⁸
Andrea Bowen ²⁰¹⁸	Bliss Hemric ²⁰¹⁹	Louise Raleigh ^{LM}
Linda Bowers ^{LM}	Emily Hornback ²⁰¹⁸	Vicky Ravenel ²⁰¹⁸
Aliya Boone ²⁰¹⁸	Bethany Hood ²⁰¹⁸	Wendy Ray ²⁰¹⁸
Emily Brewer ²⁰¹⁸	Sarah Hopkins ²⁰¹⁸	Sarah Reid ²⁰¹⁸
Donna Brown ^{LM}	Susan Insko ²⁰¹⁸	Angie Rikard ²⁰¹⁹
Kristen Cline ²⁰¹⁹	Paula Izquierdo ²⁰¹⁸	Joya Roberston ²⁰¹⁸
Geneva Coffey ^{LM}	Deborah James ²⁰¹⁸	Darlene Robke ²⁰¹⁹
Karalee Cole ²⁰¹⁹	Joy Kennedy ²⁰¹⁸	Deborah K. Rosenzweig ²⁰¹⁸
Catherine Cotton ²⁰¹⁸	Lori Kincannon ²⁰¹⁸	Benjamin Russell ²⁰¹⁹
Matt Cuddington ²⁰¹⁸	Rachel Larson ²⁰¹⁸	Mary Ruth Sizer ^{LM}
Jennifer Dibb ²⁰¹⁸	Audrey Lattz ²⁰¹⁸	Martha Betty Smith ^{LM}
Elle Dellinger ²⁰¹⁸	Linda Wortman Lowe ^{LM}	Crystal Leigh Shearin ²⁰¹⁹
Jennifer Dibb ²⁰¹⁸	Lyn Mankoff ^{LM}	Liza Stahnke ²⁰¹⁹
Amber Dollyhigh ²⁰¹⁸	Vicki McCready ^{LM}	Natalie Stokes ²⁰¹⁸
Rebecca Eaton ²⁰¹⁸	Lisa McDonald ²⁰¹⁸	Sherry Street-Tobin ²⁰¹⁹
Colette Edwards ^{LM}	Christie Montalvo ²⁰¹⁸	Janice Swilley ²⁰¹⁸
Tracy Furr ²⁰¹⁸	Margie Motsinger ²⁰¹⁸	Therese Torres ²⁰¹⁸
Charisse Gainey ²⁰¹⁸	Stefanie Nance ²⁰¹⁹	Patricia Toglia-Brown ²⁰¹⁹
Joan Gormley ²⁰¹⁹	Rachel Ogonowski ²⁰¹⁸	Beth Ussery ²⁰¹⁹
Crystal Graybeal ²⁰¹⁸	Beverly Overton ²⁰¹⁹	Jennifer Van Gilder ²⁰¹⁹
Holly Hanley ²⁰¹⁹	Angie Pharr ²⁰¹⁸	Megan Whited ²⁰¹⁸
Holly Harris ^{LM}	Kristin Phillips ²⁰¹⁹	Paige Williams ²⁰¹⁹
		Debbie Ziegler ²⁰¹⁸

For questions or more information about membership, please contact:

Jennifer P. Van Gilder, MA, CCC-SLP

Appalachian State University

ASU Box 32041

Boone, NC 28608

Email: ncasspa@gmail.com

LM = Lifetime Member



North Carolina Association of
Supervisors in Speech-Language
Pathology and Audiology

Transformation Through
Supervision

Office Use Only

Amount Paid: _____
Check #: _____
Expires: _____
____ Memb List ____ Database
____ Detailed List ____ Email Recpt

Membership Form

CONVENTION SPECIAL-Join at NCSHLA Spring Convention and receive a free NCASSPA tote!
Your membership starts the day you pay and runs through June 30th of the following year!

Check One:

_____ \$15.00 = 1 year option	(July 1, 2018 to June 30, 2019)
_____ \$30.00 = 2 year option	(July 1, 2018 to June 30, 2020)
_____ \$0.00 = <i>Lifetime Membership*</i>	<i>*NCASSPA Board approval required.</i> <i>*Must be 60 years of age or older and a *NCASSPA member for at least 10 years.</i>

Name: _____ **Date:** _____

Mailing Address: _____

City _____ State _____ Zip _____

Home Phone: _____ **Work Phone:** _____

Cell Phone: _____ **Fax Number:** _____

Email Address: _____

Place of Employment: _____

Highest Degree Earned: _____ **CCC-SLP?** _____ **CCC-AUD?** _____

Please specify the type of supervision (e.g., graduate students) and/or leadership role(s) with which you are *or* would like to be INVOLVED: _____

What would you like to derive from your membership in NCASSPA? _____

How might you be interested in volunteering within the organization?

_____ Serve on the NCASSPA board _____ Membership _____ Newsletter articles
_____ Presentation for convention _____ Web site management
_____ Other _____

Mail completed form and payment to:

Jennifer Van Gilder
ASU Box 32041
Boone, NC 28608

Questions? Inquire at:

Email: ncasspa@gmail.com



NCASSPA SUPERVISOR OF THE YEAR AWARD

Deadline for Applications: January 15, 2018

NOMINATE SOMEONE WHO YOU FEEL DESERVES SOME RECOGNITION AS A CLINICAL SUPERVISOR

PLEASE TAKE THE OPPORTUNITY TO RECOGNIZE A COLLEAGUE OR MENTOR BY NOMINATING THEM FOR THE NCASSPA SUPERVISOR OF THE YEAR AWARD.

The North Carolina Association of Supervisors in Speech/Language Pathology and Audiology (NCASSPA) Is seeking nominations for the **Supervisor of the Year Award**. The award will be presented during the NCSHLA Annual Business Meeting at the Spring Convention held at the North Raleigh Hilton/Midtown, March 7-9, 2018.

All NCSHLA members, NCASSPA members, and graduate clinicians are invited to submit the name of a person considered to have made outstanding contributions to his/her local program and to have actively promoted the discipline of supervision.

**The outstanding supervisor may supervise students or colleagues in
speech-language pathology and/or audiology.**

The recipient of the award will also be recognized in the NCSHLA and NCASSPA newsletters following the event and will receive a free membership in NCASSPA for 2018-2019.

IT'S EASY!

The guidelines for nomination and form can be found at the link below:

<http://www.ncasspa.com>

If you have questions, please contact Lisa McDonald at lgmcdona@uncg.edu

