



# SPCH13010 *Dysphagia across the Lifespan*

## Term 1 - 2017

Profile information current as at 03/05/2024 05:49 pm

All details in this unit profile for SPCH13010 have been officially approved by CQUniversity and represent a learning partnership between the University and you (our student). The information will not be changed unless absolutely necessary and any change will be clearly indicated by an approved correction included in the profile.

## General Information

### Overview

This unit advances the student's competency in the assessment, analysis, planning and treatment of swallowing disorders across the lifespan. The aetiology, diagnosis and treatment of swallowing will be considered in the context of the International Classification of Functioning, Disability and Health (ICF) framework. Evidence based practice provides the foundation for student learning in all stages of diagnosis and treatment.

### Details

Career Level: *Undergraduate*

Unit Level: *Level 3*

Credit Points: 6

Student Contribution Band: 8

Fraction of Full-Time Student Load: 0.125

### Pre-requisites or Co-requisites

ALLH12006 Evidence Based Practice in Speech Pathology AND Successfully completed 42 credit points in SPCH coded units.

Important note: Students enrolled in a subsequent unit who failed their pre-requisite unit, should drop the subsequent unit before the census date or within 10 working days of Fail grade notification. Students who do not drop the unit in this timeframe cannot later drop the unit without academic and financial liability. See details in the [Assessment Policy and Procedure \(Higher Education Coursework\)](#).

### Offerings For Term 1 - 2017

- Rockhampton

### Attendance Requirements

All on-campus students are expected to attend scheduled classes - in some units, these classes are identified as a mandatory (pass/fail) component and attendance is compulsory. International students, on a student visa, must maintain a full time study load and meet both attendance and academic progress requirements in each study period (satisfactory attendance for International students is defined as maintaining at least an 80% attendance record).

### Website

[This unit has a website, within the Moodle system, which is available two weeks before the start of term. It is important that you visit your Moodle site throughout the term. Please visit Moodle for more information.](#)

## Class and Assessment Overview

### Recommended Student Time Commitment

Each 6-credit Undergraduate unit at CQUniversity requires an overall time commitment of an average of 12.5 hours of study per week, making a total of 150 hours for the unit.

### Class Timetable

#### [Regional Campuses](#)

Bundaberg, Cairns, Emerald, Gladstone, Mackay, Rockhampton, Townsville

#### [Metropolitan Campuses](#)

Adelaide, Brisbane, Melbourne, Perth, Sydney

### Assessment Overview

#### 1. **Practical Assessment**

Weighting: 50%

#### 2. **Practical Assessment**

Weighting: 50%

### Assessment Grading

This is a graded unit: your overall grade will be calculated from the marks or grades for each assessment task, based on the relative weightings shown in the table above. You must obtain an overall mark for the unit of at least 50%, or an overall grade of 'pass' in order to pass the unit. If any 'pass/fail' tasks are shown in the table above they must also be completed successfully ('pass' grade). You must also meet any minimum mark requirements specified for a particular assessment task, as detailed in the 'assessment task' section (note that in some instances, the minimum mark for a task may be greater than 50%). Consult the [University's Grades and Results Policy](#) for more details of interim results and final grades.

## CQUniversity Policies

**All University policies are available on the [CQUniversity Policy site](#).**

You may wish to view these policies:

- Grades and Results Policy
- Assessment Policy and Procedure (Higher Education Coursework)
- Review of Grade Procedure
- Student Academic Integrity Policy and Procedure
- Monitoring Academic Progress (MAP) Policy and Procedure – Domestic Students
- Monitoring Academic Progress (MAP) Policy and Procedure – International Students
- Student Refund and Credit Balance Policy and Procedure
- Student Feedback – Compliments and Complaints Policy and Procedure
- Information and Communications Technology Acceptable Use Policy and Procedure

This list is not an exhaustive list of all University policies. The full list of University policies are available on the [CQUniversity Policy site](#).

## Previous Student Feedback

### Feedback, Recommendations and Responses

Every unit is reviewed for enhancement each year. At the most recent review, the following staff and student feedback items were identified and recommendations were made.

#### Feedback from Teaching staff feedback. Student feedback.

**Feedback**

Technical difficulties and resource requirements in the new building impacted on the smooth running in the second half of term.

**Recommendation**

Closer consideration will be given to the room and resource requirements prior to timetabling for the next offering of this course.

**Action**

Discussions have taken place with IT to resolve ongoing technical difficulties. IT services were very responsive to addressing any IT issues.

#### Feedback from Student feedback. Teaching staff evaluation of the program.

**Feedback**

Assessment at beginning of term through an ungraded hurdle task should be graded.

**Recommendation**

Hurdle task will be removed from this course and aligned with SPCH12003 Anatomy of the Head, Neck and Thorax.

**Action**

Recommendation has been actioned and this hurdle task has been realigned.

#### Feedback from Student feedback. Industry feedback. Teaching staff evaluation.

**Feedback**

More industry-based observations would have benefited the students' learning.

**Recommendation**

Additional observations with industry partners will be investigated.

**Action**

Additional observational experiences with industry partners have been put in place to enhance student learning.

#### Feedback from Student feedback.

**Feedback**

Concern re two vivas assessing similar components.

**Recommendation**

Students will be informed of the range of practice requirements in this course.

**Action**

Students have been provided with information clarifying the range of practice requirements for this unit.

## Unit Learning Outcomes

### On successful completion of this unit, you will be able to:

1. Explain the mechanism and course of a safe swallow across the lifespan.
2. Analyse and interpret swallowing behaviour from both formal and informal assessment techniques and make appropriate recommendations for the management and rehabilitation of a swallowing disorder.
3. Provide information and necessary counselling to patients and families about the implications, for safety, nutrition and hydration of swallowing difficulties.
4. Summarise the speech pathologist's entry-level role, as defined by Speech Pathology Australia, and how to work within the interprofessional team so that ethical decisions are made.

### Range of Practice Area:

- Adult - swallowing
- Paediatric - swallowing

### Competency-based Occupational Standards for Speech Pathology (CBOS, 2011):

- Unit 1 Assessment - Elements 1.1, 1.2, 1.3, 1.4 (adult and paediatric) to intermediate level.
- Unit 2 Analysis and Interpretation - Elements 2.1, 2.2, 2.3, 2.4, 2.5 (adult and paediatric) to intermediate level.
- Unit 3 Planning evidence based speech pathology intervention - Elements 3.1, 3.2, 3.3, 3.4, 3.5, 3.6, 3.7 (paediatric and adult) to intermediate level
- Unit 4 Implementation of speech pathology practice - Elements 4.1, 4.2, 4.3, 4.4, (paediatric and adult) to novice level
- Unit 5: Planning, Providing and managing speech pathology services - Elements 5.4, 5.5, 5.6 and 5.8 to intermediate standard
- Unit 7 Lifelong learning and reflective practice - 7.2 and 7.4 to intermediate standard

### Competency Assessment in Speech Pathology (COMPASS) Generic Professional Competencies

- Unit 1 Reasoning - Units 1.1, 1.2, 1.3 (adult and paediatric) to intermediate standard
- Unit 2 Communication - Units 2.1, 2.2, 2.3 (adult and paediatric) to intermediate standard
- Unit 3 Learning - Units 3.1, 3.2, 3.3, 3.4 (adult and paediatric) to intermediate standard
- Unit 4 Professionalism - Units 4.1, 4.2, 4.3, 4.4, 4.5 (adult and paediatric) to intermediate standard

## Alignment of Learning Outcomes, Assessment and Graduate Attributes



### Alignment of Assessment Tasks to Learning Outcomes

Assessment Tasks	Learning Outcomes			
	1	2	3	4
1 - Communication		•	•	•
2 - Problem Solving	•	•	•	•
3 - Critical Thinking	•	•	•	•
4 - Information Literacy	•	•	•	•
5 - Team Work			•	•
6 - Information Technology Competence		•	•	•
7 - Cross Cultural Competence			•	•
8 - Ethical practice			•	•
9 - Social Innovation				
10 - Aboriginal and Torres Strait Islander Cultures				

### Alignment of Assessment Tasks to Graduate Attributes

Assessment Tasks	Graduate Attributes									
	1	2	3	4	5	6	7	8	9	10
1 - Practical Assessment - 50%	•	•	•	•			•	•		
2 - Practical Assessment - 50%	•	•	•	•	•			•		

## Textbooks and Resources

### Textbooks

SPCH13010

#### Prescribed

#### Dysphagia Following Stroke

Edition: 2nd (2014)

Authors: Daniels, S.K., & Huckabee, M.L.

Plural Publishing

San Diego, CA, USA

ISBN: ISBN-13: 978-1-59756-544-8

Binding: Paperback  
SPCH13010

### **Supplementary**

#### **Anatomy and Physiology for Speech Language and Hearing**

Edition: 5th (2016)

Authors: Seikel, J.A., Drumwright, D.G., & King D.W

Cengage Learning

Clifton Park , New York , USA

ISBN: 13: 978-1-285-19824-8

Binding: Hardcover

SPCH13010

### **Supplementary**

#### **Dysphagia: Clinical Management in Adults and Children**

Edition: 2nd (2015)

Authors: Groher, M.E., & Crary, M.A.

Elsevier

London , England

ISBN: 978-0-323-18701-5

Binding: Hardcover

SPCH13010

### **Supplementary**

#### **Dysphagia: Foundation, Theory & Practice**

Edition: 1st (2006)

Authors: Cichero, J., & Murdoch, B.

Wiley & Sons

Chichester , England

ISBN: 978-1--86156-505-1

Binding: Paperback

### **Additional Textbook Information**

For the dysphagia course, students will be required to have their own neonatal-sized stethoscope (or stethoscope that comes with adjustable diaphragms and bells) and a penlight torch - available from the bookshop.

The first edition of the Groher & Crary text may be used as an alternative version. The 2nd edition is also available in hardback or as an electronic resource.

The alternative online sources for the Cichero & Murdoch text will be discussed in Week 1 of this unit.

The Seikel et al text was prescribed for SPCH12003 Functional Anatomy of the Head, Neck and Thorax and will be an important reference for Year 3 unit in CB\*& Bachelor of Speech Pathology (Honours)

[View textbooks at the CQUniversity Bookshop](#)

## IT Resources

**You will need access to the following IT resources:**

- CQUniversity Student Email
- Internet
- Unit Website (Moodle)

## Referencing Style

All submissions for this unit must use the referencing style: [American Psychological Association 6th Edition \(APA 6th edition\)](#)

For further information, see the Assessment Tasks.

## Teaching Contacts

**Jenni-Lee Rees** Unit Coordinator

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## Schedule

### Week 1 - 06 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
<b>Introduction to Course</b> <ul style="list-style-type: none"> <li>• Discussion of SPCH13010 unit assessment requirements</li> </ul> <b>Introduction to Dysphagia</b> <ul style="list-style-type: none"> <li>• What is Dysphagia?</li> <li>• The typical swallow - practically listening to swallow</li> <li>• Prevalence of dysphagia</li> <li>• Classification of dysphagia</li> <li>• Causes of dysphagia</li> <li>• the dysphagia team</li> <li>• Introduction to assessment</li> </ul>	Speech Pathology Australia Clinical Guidelines-Dysphagia O'Donoghue C. & Redle E. (2014) Feeding and swallowing disorders. In L.M. Justice & E.E Redle (Eds) <i>Communication sciences and disorders</i> (3rd Edition; pp505-511, 521-527). Upper Saddle River, NJ: Pearson Education.	

### Week 2 - 13 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
<b>Assessment of Dysphagia in Adults</b> <b>Self Learning tutorial including:</b> <ul style="list-style-type: none"> <li>• Case History Taking</li> <li>• Oromotor examination techniques</li> <li>• Introduction to the clinical swallow assessment</li> <li>• Instrumental assessment - VFSS/FEES</li> <li>• Aged swallow characteristics</li> </ul>	Speech Pathology Australia Clinical Guidelines - Video Fluoroscopic Swallow Study (VFSS) and Fiberoptic Endoscopic Evaluation of Swallowing (FEES). Daniels S.K & Huckabee, M-L. (2014) <i>Dysphagia following stroke</i> . (2nd Ed) San Diego, CA: Plural Publishing. Chapters 11-13. Cichero J.A.Y. (2006) Swallowing from infancy to old age. In Cichero, J.A.Y. & Murdoch B.E. (Eds) <i>Dysphagia: Foundation, theory and practice</i> . (pp 38-46) West Sussex, England: John Wiley & Sons.	

### Week 3 - 20 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
<b>Week 3-Bedside Assessment</b> <ul style="list-style-type: none"> <li>• The Oromotor examination</li> <li>• The clinical swallow assessment</li> <li>• Review of Instrumental assessment</li> </ul> <b>Introduction to swallowing treatment</b> <ul style="list-style-type: none"> <li>• Texture modified diet/fluids</li> <li>• Compensatory swallowing strategies</li> <li>• Documentation of the dysphagic adult</li> </ul>	Daniels S.K & Huckabee, M-L. (2014) <i>Dysphagia following stroke</i> . (2nd Ed) San Diego, CA: Plural Publishing. Chapters 5-8 and 18-19.	

### Week 4 - 27 Mar 2017

Module/Topic	Chapter	Events and Submissions/Topic
<b>Week 4-Investigation of treatment strategies</b> <ul style="list-style-type: none"> <li>• Free water protocol</li> <li>• Swallowing rehabilitation</li> <li>• Swallowing compensatory strategies</li> <li>• Texture modified diet/fluids</li> <li>• Oral hygiene</li> <li>• Xerostomia</li> </ul>	Daniels S.K & Huckabee, M-L. (2014) <i>Dysphagia following stroke</i> . (1st Ed) San Diego, CA: Plural Publishing. Chapter 18: Compensatory management of oropharyngeal dysphagia. Daniels S.K & Huckabee, M-L. (2014) <i>Dysphagia following stroke</i> . (1st Ed) San Diego, CA: Plural Publishing. Chapter 19: Rehabilitation of oropharyngeal dysphagia.	<b>Formative Assessment - Video Fluoroscopic Swallow Study (VFSS).</b> <b>This activity in the form of a problem based learning task will assist your understanding of adult dysphagia in preparation for the summative adult simulation assessment.</b>

### Week 5 - 03 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic

### Review of entry level clinical competence skills

- The oromotor examination
- Clinical swallow assessment
- Case study examples reflecting a variety of clinical presentations
- Adults and palliative care
- Overview of impact of laryngectomy and tracheostomy on swallowing

Daniels S.K & Huckabee, M-L. (2014) *Dysphagia following stroke*. (2nd Ed) San Diego, CA: Plural Publishing. Chapters 5-8.

### Formative Assessment -

**Rehabilitation of Swallowing**  
**This activity in the form of a quiz will assist your understanding of adult dysphagia treatment in preparation for the summative adult simulation assessment.**

### Vacation Week - 10 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic
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### Week 6 - 17 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic
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### Review of professional clinical competence skills

- The oromotor examination
- Clinical swallow assessment
- Case study examples reflecting a variety of clinical presentations across different health settings
- Documentation

### Week 7 - 24 Apr 2017

Module/Topic	Chapter	Events and Submissions/Topic
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### Foundation principles to paediatrics

- Identify factors which influence mealtime behaviours in babies and children
- Explain the range of mealtime behaviours included in the paediatric mealtime assessment
- Review the anatomy and physiology of the infant and child
- Discuss the prevalence, causes and characteristics of dysphagia in paediatrics
- Anatomy and physiology of swallowing in infant and child
- Anatomy and physiology of cleft palate
- Developmental stages – typical milestones in the child's development of swallowing and mealtime skills

You should review your learning from:

- ALLH11006 Lifecourse Development for Allied Health
- SPCH12003 Anatomy and Physiology of the Head, Neck and Thorax

O'Donoghue C. & Redle E. (2014) Feeding and swallowing disorders. In L.M. Justice & E.E Redle (Eds) *Communication sciences and disorders* (3rd Edition; pp511-521). Upper Saddle River, NJ: Pearson Education.

Morgan A & Reilly S. (2006) Clinical signs, aetiologies, and characteristics of paediatric dysphagia. In Cichero, J.A.Y. & Murdoch B.E. (Eds) *Dysphagia: Foundation, theory and practice*. (pp 38-46) West Sussex, England: John Wiley & Sons.

Puntill-Sheltman J. & Taylor H. (2010) Special considerations in evaluating infants and children. In M.E. Groher & M.A. Crary *Dysphagia: Clinical Management in adults and children*. Missouri: Mosby Elsevier.

**Adult Swallowing Simulation Assessment - Week 7 & 8**  
**1pm-4pm.**  
**Each simulation assessment will take one hour.**

**(50%) Clinical Swallow Assessment Simulation and Written Recommendations Due:**  
Week 7 Friday (28 Apr 2017) 5:00 pm AEST

### Week 8 - 01 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
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### Paediatric Assessment

- describe how the ICF framework assists in assessing swallowing in infants and children
- identify assessments of swallowing for infants and children
- identify who else may be involved in the paediatric assessment team.
- Developing relationships with families
- Dominic - case study

Arvedson, J.C. & Brodsky, L. (2002) Paediatric Swallowing and Feeding: Assessment and Management. Clifton Park: Delmar Cengage Learning. Chapter 2, 3, 7.

Morgan A & Reilly S. (2006) Clinical signs, aetiologies, and characteristics of paediatric dysphagia. In Cichero, J.A.Y. & Murdoch B.E. (Eds) *Dysphagia: Foundation, theory and practice*. (pp 38-46) West Sussex, England: John Wiley & Sons.

Puntill-Sheltman J. & Taylor H. (2010) Treatment for infants and children. In M.E. Groher & M.A. Crary *Dysphagia: Clinical Management in adults and children*. Missouri: Mosby Elsevier.

### Adult Swallowing Simulation Assessment - Week 7 & 8

1pm-4pm.

Each simulation assessment will take one hour.

## Week 9 - 08 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
<b>Dysphagia in school age children with neurogenic disorders</b> <ul style="list-style-type: none"><li>• Consideration of school delivered mealtimes</li><li>• Communication at mealtimes</li><li>• Development of meal management plans</li><li>• Working with families and schools</li><li>• To eat or not to eat??</li><li>• Advocacy and safety in school settings</li><li>• Saliva management</li><li>• consumer decision making - introduction to ethical issues</li></ul>	<p>Avedson, J.C. (2013) Feeding children with cerebral palsy and swallowing difficulties. <i>European Journal of Clinical Nutrition</i>. 67, 509-512.</p> <p>Arvedson, J.C. &amp; Brodsky, L. (2002) Paediatric Swallowing and Feeding: Assessment and Management. Clifton Park: Delmar Cengage Learning. Chapter 6, 9, 11.</p> <p>Evans Morris, S. &amp; Dunn Klein, Marsha (2000) Pre-feeding Skills. Texas: Proed Inc. Chapters 10, 11, 12, 13, 16</p>	

## Week 10 - 15 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
<b>Feeding and Swallowing Treatment Strategies for Children</b> <ul style="list-style-type: none"><li>• General principles and stages of intervention</li><li>• Developing a meal management plan</li><li>• Changing the carer's role</li><li>• Managing craniofacial anomalies</li><li>• Managing oral-sensory difficulties</li><li>• Positioning and posture for different ages</li><li>• Direct oral-motor sensory treatments</li><li>• Oral facial techniques</li><li>• Alternative feeding techniques and readiness for oral feeds for infants</li><li>• transitional feeding techniques</li><li>• Case Study - Dominic</li></ul>	<p>These texts will provide similar information. Reading one of the texts will assist your learning.</p> <p>Arvedson, J.C. &amp; Brodsky, L. (2002) Paediatric Swallowing and Feeding: Assessment and Management. Clifton Park: Delmar Cengage Learning. Chapter 9, 13.</p> <p>Evans Morris, S. &amp; Dunn Klein, Marsha (2000) Pre-feeding Skills. Texas: Proed Inc. Chapters 3, 13, 14, 15, 17</p>	

## Week 11 - 22 May 2017

Module/Topic	Chapter	Events and Submissions/Topic
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### Integrating Treatment strategies for Specific Needs

- Gastroesophageal Reflux (GERD)
- Food refusal and selectivity
- Brain injury
- Deteriorating conditions
- Cleft palate

These texts will provide similar information. Reading one of the texts will assist your learning.

Arvedson, J.C. & Brodsky, L. (2002) Paediatric Swallowing and Feeding: Assessment and Management. Clifton Park: Delmar Cengage Learning. Chapter 10, 11, 12.

Evans Morris, S. & Dunn Klein, Marsha (2000) Pre-feeding Skills. Texas: Proed Inc. Chapters 21, 22, 23, 24, 25

**Formative assessment - practice analysing assessment information and writing therapy plans for children with swallowing difficulties.**

**You will be provided with feedback on your written plan. This activity and the feedback will assist your understanding of paediatric dysphagia treatment in preparation for the summative paediatric simulation assessment.**

### Week 12 - 29 May 2017

#### Module/Topic

#### Chapter

#### Events and Submissions/Topic

#### Review and practice for the simulation assessment

- feeding assessment
- development of treatment plan
- demonstration of treatment strategies

### Review/Exam Week - 05 Jun 2017

#### Module/Topic

#### Chapter

#### Events and Submissions/Topic

**Paediatric Swallowing Simulation Assessment**  
**Each simulation assessment will take one hour.**

**(50%) Paediatric Simulation Assessment and Treatment** Due: Review/Exam Week Friday (9 June 2017) 9:00 am AEST

### Exam Week - 12 Jun 2017

#### Module/Topic

#### Chapter

#### Events and Submissions/Topic

**Paediatric Swallowing Simulation Assessment**  
**Each simulation assessment will take one hour.**

## Term Specific Information

Welcome to Term 1, 2017 and your study in Dysphagia across the Lifespan.

In preparation for your study this term, you are strongly encouraged to review the following materials from earlier in your curriculum:

- Physical and cognitive changes in adulthood as discussed in ALLH11006 Lifecourse Development for Health Professionals.
- Developmental stages in childhood as discussed in ALLH11006 Lifecourse Development for Health Professionals and SPCH12002 Communication Development and Disorders in Early Childhood.
- Anatomy and physiology of the head and neck (including development of the foetus and all aspects of cranial nerves and the larynx) as discussed in SPCH12003.
- Justice, L. & Redle, E. (2014). *Communication Sciences and Disorders. A Clinical Evidence Based Approach* (3rd ed.). Boston; USA: Pearson. Specifically Chapter 15 on Feeding and Swallowing Disorders.

You are also reminded that the following resources are required for your study in this unit:

- penlight torch
- stethoscope with infant sized diaphragm and bell

## Assessment Tasks

### 1 (50%) Clinical Swallow Assessment Simulation and Written Recommendations

#### Assessment Type

Practical Assessment

#### Task Description

Full criteria will be posted on Moodle.

You will be required to complete :

- A real time clinical swallow simulation (role play) using a previously unseen case based scenario which includes completing a written summary (overall impression) and recommendations for ongoing management from the assessment of the client.
- A written summary of your findings and plan/recommendations for ongoing management. Clinical documentation guidelines and format apply. Appropriate writing conventions, including accurate spelling, grammar, and punctuation, with demonstrated cohesion, clarity, and organisation will be required.

#### The simulation assessment:

Times will be scheduled for each student and will occur in Weeks 7 & 8.

Each student will be assessed individually using different case studies.

Students can bring the following items to their assessment:

- blank note paper
- black pen
- own stethoscope and penlight torch
- oro-motor/swallow checklist
- documentation checklist

All checklists brought into the assessment must be approved by the assessor at the beginning of the simulation assessment.

All notes made during the simulation assessment and approved checklists must be submitted to the assessor prior to leaving the examination room.

#### Assessment Due Date

Week 7 Friday (28 Apr 2017) 5:00 pm AEST

Individual simulation assessment sessions will occur in Week 7 & 8 outside class sessions

#### Return Date to Students

Week 10 Friday (19 May 2017)

Students will be emailed practical feedback for ongoing learning purposes regarding their individual simulation assessment results.

#### Weighting

50%

#### Minimum mark or grade

Students must achieve a PASS (50%) in the Adult Swallow Simulation Assessment.

#### Assessment Criteria

**A marking rubric for the simulation assessment will be available on Moodle. The following criteria will form the rubric.**

##### **SIMULATION:**

##### **1. Structure and Organisation**

Clearly and logically explain the purpose and intent of the assessment based on the presenting information with a clear hypothesis of expected findings that are contextual and holistic.

Clarity of expression, succinctness, logical sequences; cohesion during verbal and written reporting.

Independently able to manage the client/carer, equipment and clinical environment.

##### **2. Content**

Identification of pertinent information from the interview including: physical, behavioural, motor, oral-motor, sensory, environmental and key risk factors.

independent interpretation of information gained from the case history and assessment and ability to draw appropriate conclusions about the client's presenting dysphagia.

Understanding of anatomical & physiological factors impacting on client's presentation

##### **3. Summary and Recommendations**

Highlights the most important information, in all relevant areas ( e.g. communication **and** feeding) succinctly and clearly links this information to recommendations which are holistic, client-centered, appropriate and practical.

Evidence of self learning evident during reporting using an evidence based practice approach and reflective practice to all aspects of client care.

Uses well ordered, clear, logical, grammatical and professional verbal and written language following usual clinical documentation guidelines.

### Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

### Submission

Offline

### Submission Instructions

The viva's written summary and recommendations must be submitted prior to leaving the examination room.

### Learning Outcomes Assessed

- Explain the mechanism and course of a safe swallow across the lifespan.
- Analyse and interpret swallowing behaviour from both formal and informal assessment techniques and make appropriate recommendations for the management and rehabilitation of a swallowing disorder.
- Provide information and necessary counselling to patients and families about the implications, for safety, nutrition and hydration of swallowing difficulties.
- Summarise the speech pathologist's entry-level role, as defined by Speech Pathology Australia, and how to work within the interprofessional team so that ethical decisions are made.

### Graduate Attributes

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Cross Cultural Competence
- Ethical practice

## 2 (50%) Paediatric Simulation Assessment and Treatment

### Assessment Type

Practical Assessment

### Task Description

This assessment is divided into two sections:

1. Simulation Assessment A,
2. Simulation Assessment B.

You will be required to:

Simulation Assessment A (the focus of this simulation is on Learning outcomes 2 and 4)

- Reflect on a case based history provided to you at the beginning of the simulation and identify gaps in your information (30 minutes)
- Complete a real time interview with a simulated carer to obtain additional information (30 minutes)
- Watch a real time video of a child with swallowing difficulties
- Provide verbal feedback to the assessor about your initial impressions
- Provide a written summary and initial impressions. Clinical documentation guidelines and format will be required.
- Answer 5 assessment target questions.

Simulation Assessment B (the focus of this simulation is on Learning outcomes 1, 3 and 4)

- Submit a therapy plan (which you have completed in your own time) to the assessor at the beginning of the simulation assessment. Clinical documentation guidelines and format will be required.
- Demonstrate reflective practice skills in discussing your plan with the assessor.
- Demonstrate 2 therapy techniques specific to the client's needs.
- Answer 5 treatment target questions.

The Simulation Assessments will occur during Review week. Each student will be assessed individually using different case studies.

Students can bring the following items to their assessment:

- blank note paper
- black pen
- own stethoscope and penlight torch
- oro-motor/swallow checklist
- developmental checklists
- documentation checklist

Written information provided at the beginning of the assessment must be submitted to the assessor prior to leaving the examination room.

### Assessment Due Date

Review/Exam Week Friday (9 June 2017) 9:00 am AEST

Simulation assessment sessions are scheduled during Review/Exam Week. Written component will need to be submitted by the commencement of simulation assessment B.

### Return Date to Students

Students will be provided with results within 2 weeks of their assessment

### Weighting

50%

### Minimum mark or grade

The 6 pass competencies MUST be met in order to PASS this assessment.

### Assessment Criteria

This Simulation Assessment has MUST PASS Criteria. You must PASS this assessment task in order to pass this unit of study.

You must demonstrate all the following 6 criteria in order to pass this assessment task:

1. Identify all the relevant risk factors.
2. Recommend appropriate strategies to address each risk factor.
3. Accurately describe and analyse the video of the child eating/drinking.
4. Write an accurate, coherent and logical summary of the presenting situation.
5. Develop an evidence based therapy plan consistent with the observations of the child and information obtained from the adult.
6. Demonstrate 2 evidence based treatment techniques.

You will receive a mark out of 100. This mark will form 50% of the grade for this unit.

Grading of this assessment will be weighted as:

Assessment Component	Weighting of this Test	Procedure
SIMULATION ASSESSMENT A: Interview parent and observe an associated mealtime on video	35% (17.5% of your overall grade for this unit)	You will be required to review the background information (30 minutes); gather more information from the simulated carer; analyse the video and write up assessment data which also identifies therapy goals. This will also involve answering key questions about the assessment of paediatric dysphagia.
Develop a treatment plan based on your assessment	30% (15% of your overall grade for this unit)	You will develop a written treatment plan based on your assessment, consultation with parent and analysis of the video. The plan will need to reflect current best evidence based practice relating to the assessed needs of the child and their family. The plan will need to be based on information obtained from Simulation Assessment A; completed prior to Simulation Assessment B; and submitted to the assessor at the commencement of Simulation Assessment B.
SIMULATION ASSESSMENT B: Demonstrate two treatment techniques relevant to the assessment data	35%(17.5% of your overall grade for this unit)	You will: provide accurate feedback to the carer regarding your findings from the assessment; demonstrate two appropriate techniques in a simulated treatment situation; answer questions related to the treatment of paediatric dysphagia. .

### Referencing Style

- [American Psychological Association 6th Edition \(APA 6th edition\)](#)

**Submission**

Offline Online

**Submission Instructions**

The simulation assessment components occur offline. The written therapy plan will need to be submitted online by the commencement of Simulation Assessment B

**Learning Outcomes Assessed**

- Explain the mechanism and course of a safe swallow across the lifespan.
- Analyse and interpret swallowing behaviour from both formal and informal assessment techniques and make appropriate recommendations for the management and rehabilitation of a swallowing disorder.
- Provide information and necessary counselling to patients and families about the implications, for safety, nutrition and hydration of swallowing difficulties.
- Summarise the speech pathologist's entry-level role, as defined by Speech Pathology Australia, and how to work within the interprofessional team so that ethical decisions are made.

**Graduate Attributes**

- Communication
- Problem Solving
- Critical Thinking
- Information Literacy
- Team Work
- Ethical practice

## Academic Integrity Statement

As a CQUniversity student you are expected to act honestly in all aspects of your academic work.

Any assessable work undertaken or submitted for review or assessment must be your own work. Assessable work is any type of work you do to meet the assessment requirements in the unit, including draft work submitted for review and feedback and final work to be assessed.

When you use the ideas, words or data of others in your assessment, you must thoroughly and clearly acknowledge the source of this information by using the correct referencing style for your unit. Using others' work without proper acknowledgement may be considered a form of intellectual dishonesty.

Participating honestly, respectfully, responsibly, and fairly in your university study ensures the CQUniversity qualification you earn will be valued as a true indication of your individual academic achievement and will continue to receive the respect and recognition it deserves.

As a student, you are responsible for reading and following CQUniversity's policies, including the [Student Academic Integrity Policy and Procedure](#). This policy sets out CQUniversity's expectations of you to act with integrity, examples of academic integrity breaches to avoid, the processes used to address alleged breaches of academic integrity, and potential penalties.

### What is a breach of academic integrity?

A breach of academic integrity includes but is not limited to plagiarism, self-plagiarism, collusion, cheating, contract cheating, and academic misconduct. The Student Academic Integrity Policy and Procedure defines what these terms mean and gives examples.

### Why is academic integrity important?

A breach of academic integrity may result in one or more penalties, including suspension or even expulsion from the University. It can also have negative implications for student visas and future enrolment at CQUniversity or elsewhere. Students who engage in contract cheating also risk being blackmailed by contract cheating services.

### Where can I get assistance?

For academic advice and guidance, the [Academic Learning Centre \(ALC\)](#) can support you in becoming confident in completing assessments with integrity and of high standard.

### What can you do to act with integrity?



#### Be Honest

If your assessment task is done by someone else, it would be dishonest of you to claim it as your own



#### Seek Help

If you are not sure about how to cite or reference in essays, reports etc, then seek help from your lecturer, the library or the Academic Learning Centre (ALC)



#### Produce Original Work

Originality comes from your ability to read widely, think critically, and apply your gained knowledge to address a question or problem