

EU Education of Fluency Specialists



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Background

- Evolution in the field of SLT

Broadening of SLT field

More specialized knowledge available

- Specifically for fluency disorders

ASHA 2001 Omnibus Survey: SLT caseload

For SLT in all settings combined,

65% see fluency cases

45% voice

27% aphasia

For SLT in school settings, 78% report to see fluency cases.

=> stuttering is a disorder that SLTs commonly treat

BUT Absolute numbers of individuals seen for a specific disorder

Fluency: absolute lowest of all conditions that SLTs treat: 2,4% (Bernstein-Ratner 2006)

Background

- Public expects SLTs to treat fluency disorders **but**
 - Bernstein Ratner (2006) “effective fluency treatment is not a skill that can be learned on the job since the absolute numbers of cases per clinician is the lowest of all disorders, allowing little opportunity to hone skills.”
 - Sommers & Caruso (1995) “stuttering is one of the least understood of all communicative disorders and SLTs feel less comfortable in treating this disorder...”
 - Leahy et al., (2003) there is a small number of students in each year of education who show a specific interest in stuttering and fluency disorders
 - Yaruss & Quesal (2002) “There is an accompanying sense in graduate curricula that it is an uncommon disorder and thus not merit a prominent place in the curriculum & clinical training”
 - Brisk, et al (1997) “The profession as a whole needs to offer quality continuing education programs, particularly in the area of treatment for preschool children and adolescents who stutter...”

Background

- Erasmus/Socrates SLT network
 - (EU Socrates grants: Intensive Programme)
 - >12 years
 - 17 departments in 11 EU countries
- Harmonization of ‘fluency courses’ in core curricula
- Need for specialization post-qualification

Background: EU specific

- **Bologna declaration** (European Higher Education Area; Bologna, '99)
 - 1. System of easily readable and comparable degrees**
 - 2. HE in 2 cycles: UG (3Y.,> employment) & PG (MA/ PhD.)**
 - 3. Credit system (ECTS) to ensure student mobility**
 - 4. Student mobility and free movement shall be promoted**
 - 5. European co-operation in quality assurance shall be established**
 - 6. European dimension@ curricula, interinstitutional co-operation, and student/teachers mobility schemes**

Goals ECSF - project

- 8 > 10 partners in 5 > 7 EU countries
 - Belgium Lessius U College, U of Leuven, U College Bruges, Artevelde U College
 - Finland U of Oulu
 - Germany RWTH & U Clinic Aachen
 - Ireland Trinity College Dublin
 - Malta U of Malta
 - Netherlands U Appl. Sc. Utrecht
 - Sweden U of Gothenburg
- **Goals:** Harmonize fluency courses in curricula **BUT** with individual differences
 - Development of a clinical specialization course
- **Procedure:** Erasmus curriculum development project:
 - Grant: 28095-IC-1-2005-1-BE-ERASMUS-MODUC-1
 - 2 year development ('06-'08) & implementation of Ac. Year ('07-'08)

Project management

- **Structure:** Steering committee
Workgroups



Project management

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Workgroups
- **2y development phase**
 - * 8 two-day general meetings: preparation, discussion, development
 - * 3 two-day steering committee meetings: in between evaluation & steering measures
 - * In between subgroup meetings & development of work packages/ course content
 - * Evaluation: Students, EU commission, external specialists evaluator
- **Steps**
 - * Acquaintance with partner's curricula: learning outcomes: knowledge, skills & competencies
> entrance levels specialization course
 - * Core course: Unified learning outcomes (based on professional, CPLOL, & IALP profiles)
 - * Specialization course: Unified course

Specific competencies related to fluency for the Ba/Ma-course

The graduate must demonstrate proficiency in:

Prevention

1. Detecting high risk in an early stage, by means of screening.
2. Carrying out, processing, interpreting appropriate detection instruments.
3. Giving relevant information concerning speech-language development and disorders.
4. Coaching, training or advising individuals or groups.

Assessment

5. Planning, executing, evaluating and adjusting various assessments of the client and client system using standardized procedures where possible.
6. Processing, analyzing and interpreting qualitative and quantitative information.
7. Formulating, adjusting and reporting on the (differential) diagnosis and referral to appropriate services.

Intervention

8. Developing an intervention plan, adapted to the needs of the client and client system.
9. Applying appropriate interventions, based on available evidence, in a systematic way, following methodological procedures, evaluating and adjusting appropriately.
10. Reporting on the intervention outcomes, future management, and prognosis.

The graduate must also demonstrate proficiency in:

11. Self-evaluation and discussion of one's own professional acts.
12. Participation on a regular basis in professional development opportunities.
13. Cooperating with colleagues and working in a multidisciplinary context.
14. Scientific reading of clinical and research literature.

To acquire these competencies, students must demonstrate:

A. Knowledge of:

Phenomenology

Definitions on fluency and fluency disorders (developmental, neurogenic, & psychogenic stuttering, and cluttering).

Fluency development.

Overt and covert features of fluency disorders

Psychosocial impact of fluency disorders

Onset and development of stuttering.

Prevalence and incidence (diff. populations).

Causal and maintaining variables

Neurological factors.

Genetic factors.

Linguistic factors.

Psychosocial factors.

Learning factors.

Assessment, evaluation, and diagnosis

Screening.

Interview procedure.

Qualitative and quantitative assessment of overt and covert features of fluency disorders and related behaviors in different age groups (preschool & school-age children, adolescents & adults).

Data analysis (interpreting and determining the functional relation between assessment data).

ICF implementation.

Diagnosis.

Post-assessment interview (communicating assessment information to the client and significant others, e.g. parents, teachers).

Evaluation report writing.

Intervention

Historical and contemporary treatment approaches, including fluency shaping and stuttering modification approaches

Direct vs. indirect treatment, individual vs. group treatment, client system, treatment in different age groups (preschool & school-age children, adolescents & adults).

In depth knowledge of at least 1 specific intervention approach.

Intervention plan.

B. Initial therapeutic skills in:

Prevention

Analyzing disfluency and discriminating normal disfluency from a fluency disorder.

Applying screening procedures.

Providing appropriate information.

Development specialization course

- Search for:
 - optimal learning environment
 - compatibility with current SLT workload
 - cost efficient
 - optimal student recruitment
- Needed to include: lecturing + self-study
clinical internship
evaluation
- Different possible models:
 - Model 1: Uniform course taught at all participating institutes: pros-cons
 - Model 2: One period of intensive lecturing (e.g., 2-3 weeks) at location X followed by clinical internship: pros-cons
 - Model 3: Several periods of intensive lecturing at different locations with simultaneous clinical internship: pros-cons

Development specialization course

- Model 3:
 - 2 intensive weeks at 2 different locations
 - In between home-follow-up sessions
 - Clinical internship to start after week 1: observation + documented therapy
 - More efficient learning: preparatory reading & home assignments
 - Evaluation system that best assesses acquired competencies
 - Several therapeutic models

Stage	Content		Place
<i>Phase 0</i>	Student enrolment Entrance levels		Participant's home country
<i>Phase 1</i>	Preparatory reading and assignments for intensive week 1		
	Intensive week 1		Abroad (Lessius University College, Belgium)
<i>Phase 2</i>	Home assignments	Clinical practice part 1	Participant's home country
	1 Follow up session end of May 1 Follow up session end of August/ beginning September		
<i>Phase 3</i>	Preparatory reading and assignments for intensive week 2	Clinical practice part 2	Participant's home country
	Intensive week 2 September		
<i>Phase 4</i>	Home assignments	Clinical practice part 2	Participant's home country
	1 Follow up session December 1 Follow up session March		
<i>Phase 5</i>	Submitting documents Portfolio evaluation May/June '10 Supplemental/Repeats August/September '10		

Specialization course (ECSF)

- **Content:** defined in competencies 'enhanced proficiency'
'extra competencies'
learning outcomes
- **Knowledge & skills:** 'in depth', extra
international fluency experts

Intensive week 1				
Monday	Tuesday	Wednesday	Thursday	Friday
Phenomenology Causal & maintaining variables	Assessment, evaluation and diagnosis	Intervention (children)	Intervention (adults)	Intervention
Intensive week 2				
Monday	Tuesday	Wednesday	Thursday	Friday
Causal & maintaining variables	Assessment, evaluation and diagnosis	Intervention	Intervention	Intervention

Learning modules

MODULE 1: Theoretical knowledge and specific therapeutic skills 12 ECTS*

Phenomenology, causal and maintaining variables	3 ECTS
Assessment, evaluation and diagnosis	3 ECTS
Intervention	6 ECTS

MODULE 2: Clinical training and portfolio 8 ECTS*

Clinical training (min. 120 hours) a maximum of 20 hours observation a minimum of 100 hours therapy	
Portfolio	

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Specialization course (ECSF)

- Specialized clinical training under supervision of a fluency specialist
min. 120 h. (max 20 observation)
- External mentor: senior professional (or peer mentoring)
after formal approval (criteria)
min. 8 sessions
- ECSF-coach: guiding & steering of learning process
portfolio follow up & evaluation
min. 4 sessions
oral case presentations during final session
- E-learning platform


- Mededelingen
- Cursusinformatie
- Docenteninformatie
- Cursusdocumenten
- Oprachten
- Communicatie
- Discussieruimte
- Externe koppeling
- Tools


- Tools**
- Communicatie
 - Cursustools
 - Cursusoverzicht
 - Configuratiescherm
 - Vernieuwen
 - Detailweergave


 **ECSF COURSE 2: 2009-2010**


 **Lectures intensive week 1 Antwerp**


 **Student coach mentor overview**
[Candidates coach mentor 09.pdf](#) (70,14 kB)


 **Portfolio mentor coach manual 2009-2010**
[Portfolio mentor coach manual 2009-2010_2.pdf](#) (75,435 kB)
[Portfolio mentor coach manual 2009-2010_3.pdf](#) (184,709 kB)
[Portfolio mentor coach manual 2009-2010.pdf](#) (380,335 kB)

 **Student's course manual 2009-2010**
[Word-format assessment forms task 4](#) (163 kB)
[Student's course manual 2009-2010.pdf](#) (1,784 MB)

 **Article by Korthagen & Kessels (1999). Linking theory and practice.**
[Korthagen.pdf](#) (1,781 MB)
This article may give you some additional insights in the 'Korthagen model' that is used in the portfolio manual.

 **Suggested DVDs**
[Suggested DVDs.pdf](#) (16,975 kB)

 **How to upload documents?**
All tasks for the 2009-2010 course have to be uploaded to the learning platform and NOT sent to individual lecturers.
Steps:
1. Click on 'Course tools' under 'Tools' (left column on the page)>'Digital dropbox'>'Add file'
2. After 'adding' the file you will have to 'send' it. This will automatically send it to the course instructors.
3. IMPORTANT: Since several people will be submitting documents, all documents have to be named in a specific way. Always start your filename with the task number followed by your family name & name: example: TASK1simpsonbart.
Task numbers can be found under 'course tools' (left column on the page)>tasks.
Texts should always be submitted in Word-format, using Verdana 11. Word limits and more details can be found in the portfolio or course manuals.

 **Mentor approval forms**
Mentor approval documents should be uploaded to the platform as soon as possible. Please scan the completed forms.
Filename: MENTORAPPROVAL followed by family name & name: example: MENTORAPPROVALsimpsonBar

EU, participant and external review

- **EU commission:** “a very well performed and managed project where all planned outcomes are being fulfilled”
- **Participants:** Overall session formats: all averaged ‘very good’ to ‘excellent’
 - Practical & useful information: “
 - Lecturer’s ability to present information: “
 - Overall course evaluation: “
 - Working points: ‘long lecturing days’, timely feedback, ...
- **ASHA fluency specialist**
 - very suitable pedagogical approach
 - Redundancies in some of the lectures, readings

Overall: *“It is simply a miracle to see the level of organization, content and commitment that has gone into this effort.”*

Current Development & goals

- Partnerships with EU representative organizations both for clinicians and for clients
 - CPLOL:** Standing Liaison Committee of Speech and Language Therapists
 - ELSA:** European League of Stuttering Associations ELSA: to ensure that PWS are involved as consumers, advisors....

Associate members now include: **Michael Palin Centre** (London, UK) and **Stammering Support Centre**, north of England.

- To increase involvement of interested parties from universities around Europe
- To develop content in light of research and practice

Current Development & goals

- To invite evaluations from outside groups
- Setup of follow up system of continuing education of graduates
- Possibly future recognition of EU fluency specialists
- Biennial EU symposium on Fluency Disorders



FLUENCY SPECIALIZATION

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Education and Culture

Socrates



With the support of the Socrates Programme
of the European Union

Welcome to ECSF

The 'European Clinical Specialization in Fluency Disorders' is a groundbreaking initiative in the field of fluency disorders. The program was developed by eight different universities and colleges in five European countries. The 'ECSF' is a one-year program - compatible with the workload of an SLT - for speech-language therapists wanting to become European Fluency Specialists.

Graduates of this course will distinguish themselves by their outstanding ability, in-depth knowledge and expertise in the field of fluency disorders. This program provides specialist knowledge and skills, that can be recognized by your local professional body as important criteria leading to clinical specialization.

» Subscribe to the mailing list Newsletter

To receive the latest news in your mailbox.

subscribe

ECSF - Latest news

15 MAY 2009

» Application procedure

Interested in applying for the specialization course? [Read more](#)
New call for applications '10-'11.
Funding underdeveloped countries.

» Feedback of the current students

"I felt privileged to be part of the course..."
"Very invigorating but challenging..."

» Login Students Ba/Ma Course

[Click here to login](#)

» Login Students Specialization Course

[Click here to login](#)

» European Symposium on Fluency Disorders

The biennial European Symposium on Fluency Disorders is an initiative of the ECSF-consortium and focuses on causal and contributing factors as well as on intervention related topics.

2010

More information will be posted soon.

Q&A

Thanks for your attention!