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INTRODUCTION TO
Clinical Methods IN **Communication Disorders**
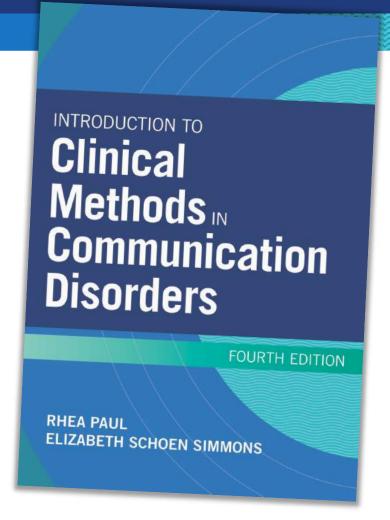
FOURTH EDITION

RHEA PAUL
ELIZABETH SCHOEN SIMMONS

NEW EDITION
of bestselling core text for clinical methods courses!

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Contents

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About *Introduction to Clinical Methods in Communication Disorders, Fourth Edition*

About the Book

Fully updated and revised based on the 2020 ASHA standards and recent AAA standards, the new edition of this bestseller is *the* **core textbook** for all students in clinical methods courses—and a **reliable reference** for practicing SLPs and audiologists.

Leading authority **Rhea Paul** and up-and-coming expert **Elizabeth Schoen Simmons** bring together more than 20 academics and clinicians for a state-of-the-art guide to contemporary evidence-based practice.

About the Book

Covering a broad range of disorders and developmental levels, this text helps professionals **master all the fundamentals of practice**, from conducting effective assessment and intervention to ensuring that practices are family-centered and culturally competent.

Tomorrow's clinicians will use this foundational textbook to **guide their professional decision-making** and provide the best possible services for people with communication disorders.

About the Editors

Rhea Paul, Ph.D., CCC-SLP

Dr. Paul is a professor and founding director of the speech-language pathology graduate program at Sacred Heart University in Fairfield, Connecticut, an affiliate at Haskins Laboratories, and Professor Emerita at Southern Connecticut State University.

Read Dr. Paul's full bio

Elizabeth Schoen Simmons, M.S., CCC-SLP

Ms. Simmons is a Ph.D. candidate in Cognitive Psychology at the University of Connecticut. She is a National Science Foundation fellow and recipient of a predoctoral training grant funded by the National Institute of Health to evaluate language processing using eye tracking and electroencephalography in late talking toddlers.

Read Ms. Simmons' full bio

Invited Contributors

- David Andrews, M.S., CCC-SLP
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- Mary Beth Schmitt, Ph.D., CCC-SLP

Interior Features

About the Features

Introduction to Clinical Methods in Communication Disorders, Fourth Edition includes a variety of features designed to enhance reader understanding.

Examples include:

- Learning objectives
- Case examples
- Key terms

- Boxes, tables, and figures
- Chapter conclusions
- Study and problem-solving questions

- Further reading
- References
- Appendices

Learning Objectives

2

Ethical Practice in Communication Disorders

Barbara H. Jacobson and Arlene E. Carney

Learning Objectives

After reading this chapter, students will be able to

- Discuss potential ethical issues in communication and swallowing disorders
- Describe the principles of ethics for audiology and speech-language pathology
- List the primary elements of Health Insurance Portability and Accountability Act (HIPAA) of 1996 (PL 104-191) and Family Educational Rights and Privacy Act (FERPA) of 1974 (PL 93-380)
- Outline the process for decision making when ethical dilemmas occur

Each chapter begins with learning outcomes to orient readers to the key content of that particular chapter.
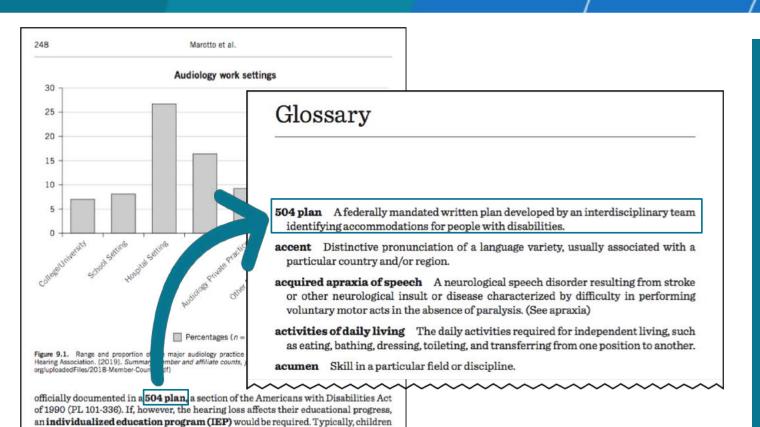
Case Examples

Case Example 1

Dora is a 10-year-old, third-grade student with autism, who is placed in an alternative curriculum special education classroom. Dora presents with significant delays in the area of social pragmatic communication, which has a negative impact on her ability to interact with adults and peers in the educational setting. Her specific speech-language objectives address perspective taking, problem solving for everyday school situations, and conversational skills. Dora also presents with below-average skills in the areas of reading, writing, and math. In addition, she is on a behavioral plan to address the use of appropriate behaviors throughout the school day and works with social work services to address peer interaction skills.

Based on this information, what would you recommend for Dora's service delivery plan, and why? Remember to incorporate your decisions about aspects of service delivery, such as which service providers will be involved, the service delivery model(s) used, dosage, functional impact, and progress monitoring.

Throughout the book, situational examples help bring alive the conditions and issues discussed in the chapter.

Key Terms

As key terms pertaining to a specific chapter are introduced in the text, they appear in boldface type at their first use; definitions for these almost 300 terms appear in the Glossary.

Boxes, Tables, and Figures

Evidence-Based Decision Making in Communication Assessment and Intervention   71

STEP 1:
Develop a four-part clinical question that explicitly focuses on PICO.

STEP 2:
Find the internal evidence.

STEP 3:
Find the external or published research evidence.

STEP 4:
Critically evaluate the external evidence.

STEP 5:
Integrate the internal and external evidence.

STEP 6:
Apply and evaluate the outcome of the decision.

Figure 3.1. Six-step model for evidence-based practice decision making.

Table 5.1. Sample transcription format
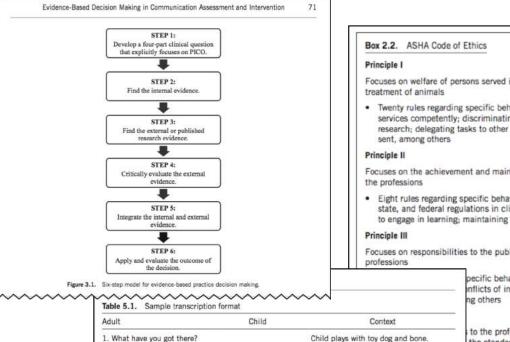
Adult	Child	Context
1. What have you got there?		Child plays with toy dog and bone.
2. Is it a doggy?	1. Uh-huh.	
3. I have a dog at home.		
4. Tell me about who's at your house.	2. We have kitty.	Child leaves toy and looks up at examiner.
5. Oh, cool!		
6. I like cats.		
7. Tell me about yours.	3. Black.	
	4. It have white foots.	
8. I'll bet it's pretty!		Child returns to playing with toy dog.

Source: Retherford, 2006.

Box 2.2. ASHA Code of Ethics

Principle I

Focuses on welfare of persons served in clinical and research settings and humane treatment of animals

- Twenty rules regarding specific behaviors/activities such as providing clinical services competently; discriminating against populations in service delivery or research; delegating tasks to other personnel or students; obtaining informed consent, among others

Principle II

Focuses on the achievement and maintenance of the highest levels of competence in the professions

- Eight rules regarding specific behaviors/activities such as complying with local, state, and federal regulations in clinical service provision and research; continuing to engage in learning; maintaining technology, among others

Principle III

Focuses on responsibilities to the public in advocacy and communication about the professions

specific behaviors/activities such as accurately representing onflicts of interest; avoiding fraud in clinical service provising others

to the professions, including interprofessional and intrapro-the standards of the professions

specific behaviors/activities such as working collaboratively; ceit, or negligence; avoiding plagiarism or failure to credit utions; self-reporting criminal activity or sanctions from ies, among others

(ASHA, 2016)

More than 100 boxes, tables, and figures reinforce important concepts and provide ways to more easily understand the material.

Chapter Conclusions

CONCLUSION

This chapter introduced concepts related to EBP in speech-language intervention. In addition, guidelines for what clinicians can do to begin their EBP initiatives have been recommended. This presentation should lead readers to three broad conclusions:

1. EBP principles do *not* limit SLPs to the use of clinical practices shown by the external evidence to be efficacious. Decisions based on understanding both theory and research, as well as attention to available internal evidence, are likely to maximize benefit to the clients and families served.

2. EBP principles *do* require SLPs to critically examine their own practices to determine what types and what level of evidence supports current treatments. Recognizing situations in which current practices are *not* supported by strong evidence is as important as identifying practices that are.

3. EBP principles *do* require SLPs to be skeptical about the use of all intervention practices. EBP clinicians monitor the outcomes of their interventions, actively seek evidence in the literature that is relevant to their clinical questions, and work with members of the research community to design studies that address their most important questions. Knowledge of the literature relevant to clinical decisions puts clinicians in the best position to make and defend their decisions, to evaluate the outcomes of those decisions, and to deal effectively with stakeholders who have a vested interest in ensuring that SLPs are accountable for what they do.

Each chapter closes with a final section that summarizes its key elements and provides readers with an abstract of the covered material.

Study and Problem-Solving Questions

Study Questions

1. Why was evidence-based practice an important element of Mari's case?

2. What is interprofessional practice? Have you ever observed it?

3. What are the qualities, in addition to a strong science background, that contribute to effective clinical practice?

4. Compare and contrast the standards for clinical certification in speech-language pathology and audiology.

Problem-Solving Questions

Child: Considering the key concepts of a family systems perspective, how do Boeden and his family differ from a traditional family? What must a clinician consider prior to meeting with his family?

Adult: Now that Boeden's grandmother, Barb, has had a stroke, how does the family system change? How might the roles of family members change?

The study questions included at the end of each chapter and problem-solving questions in Chapter 12 address key concepts to aid reader comprehension.

Further Reading

FURTHER READING

American Speech-Language-Hearing Association. (n.d.). *Evidence maps*. A current compilation of internal and external evidence available for a range of topics, populations, and diagnoses. https://www.asha.org/Evidence-Maps/

Evidence-based practice briefs (13 volumes). Examples of evidence-based practice decisions across a range of topics. https://www.pearsonassessments.com/professional-assessments/featured-topics/speech—language/ebp-briefs.html

Goldstein, B. A. (Ed.). (2006). Clinical forum on evidence-based practice. *Language, Speech, and Hearing Services in Schools, 37*(4).

Justice, L. M., & Fey, M. E. (2004). Evidence-based practice in schools: Integrating craft and theory with science and data. *The ASHA Leader, 4–5*, 30–32.

At the conclusion of each chapter, the Further Reading section lists helpful resources that provide more information on the topics discussed.

References

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American Speech-Language-Hearing Association. (n.d.). *Speech sound disorders: Articulation and phonology.* Retrieved from https://www.asha.org/Practice-Portal/Clinical-Topics/Articulation-and-Phonology/

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Dunn, L. M., & Dunn, D. M. (2018). *Peabody Picture Vocabulary Test* (5th ed.). Minneapolis, MN: Pearson.

Early Hearing Detection and Intervention (EHDI) Act of 2017, PL 115-71, §§ 652, 115 U.S.C.

Ehrler, D. J., & McGhee, R. L. (2008). *PTONI: Primary Test of Nonverbal Intelligence.* Austin, TX: PRO-ED.

Enderby, P., & Palmer, R. (2008). *Frenchay Dysarthria Assessment* (2nd ed.). Austin TX: PRO-ED.

Fenson, L., Marchman, V. A., Thal, D. J., Dale, P. S., Reznick, J. S., & Bates, E. (2007). *MacArthur-Bates Communicative Development Inventories (CDIs)* (2nd ed.). Baltimore, MD: Paul H. Brookes Publishing Co.

Citations include review articles, reports of study findings, research findings, and other key references that can be used to find additional information.

Appendices

Appendix 1A

2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Audiology

Appendix 1B

An Outline of Standards for the Certificate of Clinical Competence in Speech-Language Pathology

Appendix 2A

American Speech-Language-Hearing Association Code of Ethics (ASHA, 2016)

Appendix 2B

American Academy of Audiology Code of Ethics

Appendix 7A

Oregon Standard Individualized Education Program (IEP)

Appendix

Suggested Projects for Students

In addition to the Glossary, there are six other helpful appendices included.

New Content

BROOKES

About the Content

In the new edition, you'll find the following:

- New chapter on **using principles of observation** to gather accurate, valid data in clinical settings and more deeply understand clinical processes and procedures

- Expanded information on **intervention principles**, with **case studies** highlighting practical applications and an emphasis on evidence-based practice

- More on **counseling in communication disorders**, **clinical documentation**, **relationships with supervisors**, and **single-case experimental design**

About the Content

- Updated information on **technology in clinical practice**

- New emphasis on **automated analysis of communication samples**

- Chapters on **clinical competence** and **family-centered practice** by renowned experts

- New **student-friendly text features**, such as:
  - learning objectives
  - study questions
  - problem-solving questions

About the Content

- **Case studies** and **clinical examples** throughout

- Reflects most recent **ASHA and AAA standards**

Table of Contents

Table of Contents

Table of Contents

|		
Chapter 10	**Issues of Cultural and Linguistic Diversity** *Aquiles Iglesias, Raúl Rojas, and Brian A. Goldstein*	
Chapter 11	**Technology and Communication Disorders** *Elizabeth Schoen Simmons and Brandon Eddy*	
Chapter 12	**Family-Centered Practice** *Patricia A. Prelock and Ashley R. Brien*	
Chapter 13	***Principles of Clinical Observation*** *Nancy E. Hall*	
Appendix	**Suggested Projects for Students**	
Glossary		
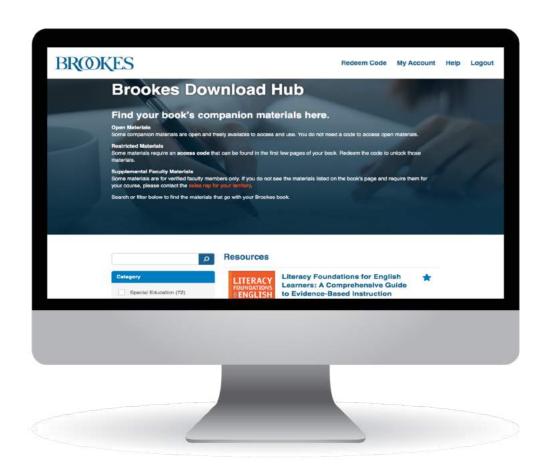
Online Faculty Materials

About the Materials

Faculty can access, download, and print the following from the Brookes Download Hub:

- a test bank for each chapter

- suggested projects that can be assigned to students to practice the principles outlined in each chapter

Visit the Brookes Download Hub ▶

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