

**Practicum III**

Code: 104191  
ECTS Credits: 6

Degree	Type	Year	Semester
2500893 Speech therapy	OB	4	A

**Contact**

Name: Melina Aparici Aznar  
Email: melina.aparici@uab.cat

**Use of Languages**

Principal working language: catalan (cat)  
Some groups entirely in English: No  
Some groups entirely in Catalan: No  
Some groups entirely in Spanish: No

**Teachers**

Juan Lorente Guerrero  
Melina Aparici Aznar  
Pedro Clavé i Civit  
Estefania Riera Nuñez  
Juan Fernando Fuentes Cabrera  
María Pujol Rodriguez  
Silvia Naches Solsona

**External teachers**

Viridiana Arreola  
Weslania Nascimento

**Prerequisites**

It is convenient for the student to have a precise knowledge of the anatomophysiology, clinical and diagnostic methods of both the auditory apparatus (ear and the central auditory pathways), as well as the phonatory (larynx, pharynx, oral cavity and nostrils) and swallowing. In addition to this knowledge, it is necessary for the student to have knowledge about the medical-surgical treatments usually carried out.

It is recommended to have taken and passed the following subjects: 101710-Language Neurology. 104143-Pathology of hearing, speech, voice and swallowing. 101711-Neurodegenerative diseases and dementias. 104147 - Deglució i trastorns relacionats: valoració i intervenció

**Objectives and Contextualisation**

The main objective is to complete the training of students in practical situations by providing professional training applied to the student as a future speech therapist in patients affected by pathologies of language,

speech, swallowing, hearing and voice, in children and adults. In addition to the general objective of knowing the terminology that allows him to interact effectively with other medical professionals or speech therapists, it is intended that students achieve the following specific objectives:

- 1. To bring students closer to the professional activity in order to put into practice the abilities and skills acquired throughout their academic training, thus completing their theoretical training.
- 2. Familiarize the student with the dynamics of personal and professional relationships in the work environment.
- 3. Know how to interpret and analyse a medical report in patients with pathologies of language, swallowing, hearing and voice, and be able to prepare and write a report of examinations, diagnosis, follow-up, completion and referral of the patient.
- 4. Perform speech therapy intervention tasks. Programming and realization of the sessions: objectives, resources, techniques, methods, interviews. Know how to explain and argue the chosen treatment.
- 5. Carry out research tasks in the field of Speech Therapy. Know and apply scientific methodology, analyse data, review publications.

A complementary objective is to know other professional areas of the exercise of the speech therapy practice or updates in these professional fields.

## Competences

- Act appropriately with respect to the profession's ethical code: respect professional confidentiality, apply professional criteria in the completion and referral of treatment.
- Adapt one's communication to various audiences in accordance with age, pathology, etc.
- Adapt to new situations.
- Advise users' families and their general social environment, thereby promoting their participation and collaboration in speech-therapy treatment.
- Appraise personal intervention and that of others so as to optimise this.
- Carry out patient-centered management in health economics and ensure the efficient use of health resources in addition to the effective management of clinical documentation, with particular attention to confidentiality.
- Demonstrate knowledge of the limits of competence and be able to identify whether interdisciplinary treatment is required.
- Design and carry out speech-therapy treatment, whether individual or at group level, establishing objectives and phases, with more efficient and suitable methods, techniques and resources, attending to the distinct developmental phases of human beings.
- Design, implement and evaluate actions aimed at preventing communication and language disorders.
- Establish interpersonal relationships with patients affected by communication, language, speech and voice disorders, and their caregivers.
- Ethically commit oneself to quality of performance.
- Explain and justify the selected treatment.
- Explore, evaluate, diagnose and produce a prognosis of development for disorders of communication and language, from a multidisciplinary perspective.
- Have a strategic and flexible attitude to learning.
- Identify, analyze and solve ethical problems in complex situations.
- Integrate the foundations of biology (anatomy and physiology), psychology (evolutionary processes and development), language and teaching as these relate to speech-therapy intervention in communication, language, speech, hearing, voice and non-verbal oral functions.
- Make decisions and take responsibility for them.
- Manage sociocultural diversity and the limitations associated with distinct pathologies.
- Observe and listen actively throughout the various processes of speech therapy intervention.
- Organise and plan with the aim of establishing a plan for development within a set period.

- Practise the profession, respecting patients' autonomy, their genetic, demographic, cultural and economic determinants, applying the principles of social justice and comprehending the ethical implications of health in a changing global context.
- Prepare and write reports on examination and diagnosis, monitoring, termination and referral
- Use non-verbal communication techniques to optimise communicative situations.
- Use the exploratory techniques and instruments pertaining to the profession, and register, synthesise and interpret the data provided by integrating this into an overall information set.
- Working in intra- and interdisciplinary teams.

## Learning Outcomes

1. Adapt the relationship with patients to their educational and cultural level as well as to the limitations caused by their pathology
2. Adapt to new situations.
3. Analyzing the diagnosis and intervention options available in each case, and their suitability.
4. Apply speech-therapy treatment under the supervision of a tutor.
5. Applying the most appropriate techniques for the evaluation of patients.
6. Appraise personal intervention and that of others so as to optimise this.
7. Avoid using unsuitable methods of diagnosis and intervention.
8. Carry out a clinical history that integrates data on structural, psychological and linguistic disorders in patients, and the impact of these on their family-based, social and educational situations in order to plan the most appropriate intervention in each case.
9. Demonstrate respect for the ethical code of the profession when carrying out professional practicals.
10. Describe the characteristics of language, speech, voice or deglutition in patients, on the basis of observation.
11. Design speech-therapy projects.
12. Establish guidelines that help in advising relatives to collaborate in the treatment.
13. Establish guidelines to prevent certain disorders or speech therapy to reduce the negative impact on language and speech, in some situations (eg, brain damage, hearing loss or adverse psychosocial environments).
14. Ethically commit oneself to quality of performance.
15. Explain to the patient both the characteristics of the disorder suffered and the distinct treatment options, respecting the patient's opinion on these.
16. Give opinion on the need to request the participation of other professionals.
17. Have a strategic and flexible attitude to learning.
18. Hold oral interviews with patients and their caregivers, in which issues concerning both speech-therapy symptoms and the impact of these on quality of life and family and social relationships arise.
19. Identify, analyze and solve ethical problems in complex situations.
20. Keep the identity of patients confidential and do not post photographs either of patients or other features that permit their identification in reports on their period of stay in the centres holding the practicals.
21. Make decisions and take responsibility for them.
22. Observe professional performance in the centre and describe that performance in the report on the work-placment period in the training centre.
23. Organise and plan with the aim of establishing a plan for development within a set period.
24. Participate in sessions discussing cases with teams of professional in centres holding the practicals and give opinion on possible treatment and its suitability depending on case characteristics.
25. Participate in sessions discussing cases with teams of professional in centres holding the practicals and give opinion on the relevance of terminating treatment or referral to other professionals.
26. Prepare and correctly write examination and diagnosis, monitoring, termination and referral reports.
27. Produce a diagnosis and prognosis of patient outcomes.
28. Use and interpret diagnostic tests.
29. Use appropriate paraverbal elements (gestures and prosody) during oral interviews with patients and their families.
30. Use communication strategies differentiated according to age (eg, children at different developmental stages), pathology (sensory disturbances, cognitive, etc.) and other situations that may hinder the communication process.
31. Use non-verbal communication techniques to optimise communicative situations.

32. Use verbal expressions indicative of active listening during oral interviews with patients and their families, including: expressing in one's own words what such patients appear to want to communicate ask clarifying questions provide words of re-enforcement or accomplishment, etc.
33. Working in intra- and interdisciplinary teams.

## **Content**

This is a subject organized in two blocks:

BLOCK I: Practicum with transversal content (otorhinolaryngological pathology, dysphagia and updating in speech therapy practice).

IA. SLT practice in otorhinolaryngological pathology. Hospital of the Valley of Hebrón. (Coordinator: Juan Lorente)

IB. Professional SLT experiences in the On-line Interuniversity Conference on Speech Therapy. Presentation of cases, assessment and intervention tools in the different areas of speech therapy by professionals. (Coordinator: Melina Aparici)

IC. SLT practice in oropharyngeal dysphagia. (Coordination: Pere Clavé and Stephanie Riera)

BLOCK II: Internships in external centers

You will choose from one of the following options:

IIA. Outpatient care centers

IIB. Hospital care centers

## **Methodology**

### METHODOLOGY

BLOCK I: Practicum with transversal content (otorhinolaryngological pathology, dysphagia and updating in speech therapy practice).

IA. The ORL block is performed in the Otolaryngology service of the Vall d'Hebrón University Hospital.

- Each student attends for two days the clinical activity of the ENT consultations of the Hospital de la Vall d'Hebrón, It is mandatory to go there in a dressing gown.

- Attendance is in small groups.

- The practices consist of attending, together with the teacher, the consultation where the symptomatology referred or presented by the patient is observed, the treatment he has received or will receive according to the clinic. The student will be present in the direct observation of all the ENT exploration, always accompanied by the appropriate explanations by the responsible teacher, insisting on the techniques that allow to obtain information from the reality, on everything that is related to the communication. oral.

- Clinical data through the anamnesis and exploration of the organs on which oral communication takes place, knowledge of the anatomy and physiology of the phonoarticulatory organs, in order for the speech therapist to learn to interpret a medical report.

- The distribution of the students does in agreement with Academic Management of the Faculty combining this assistance with the rest of practices.

IB. Online interuniversity conference on speech therapy practice.

The student will attend the On-line Interuniversity Conference on Speech Therapy, in which speech therapy professionals will give practical talks (presentation of cases, assessment tools, intervention techniques, etc.) and will carry out the activities of participation proposed by the speakers.

## 2nd Semester

IC. Oropharyngeal dysphagia. This block aims to expand the student's knowledge of oropharyngeal dysphagia (OD), its symptoms and clinical and instrumental diagnosis, potentially associated clinical complications, and the basics of compensatory and rehabilitative treatment. It is performed in the Digestive Motility Unit at the Maresme Hospital Consortium (Hospital de Mataró), in principle, in online format.

## 2nd Semester

### BLOCK II: Internships in external centers

- Students will choose a center in accordance with the Faculty's schedule. They will attend the assigned center in the morning (from 8 am to 2 pm) and / or in the afternoon (from 2.30 pm to 8 pm). Consult the offer of external internships for more information on the type of center and the activities in which you can participate.

- In these centers will participate actively in all the tasks of diagnosis and speech therapy intervention, discussing the cases with speech therapists. You may be required to wear a dressing gown.

- The student will have a tutor at the center who will supervise the whole learning process.

- Duties for students:

1. Attend assigned days and times.
2. Communicate to your tutor any problem that affects the development of the practice.
3. Know and respect the rules and structure of the operation of the center.
4. Keep professional secrecy with absolute rigor.

### IIA. Outpatient care centers:

Speech therapy centers in agreement with CatSalut, with which the Autonomous University of Barcelona has signed an agreement, as well as the School of Language Pathology (Hospital de Sant Pau) and other centers.

### IIB: Hospital care centers:

Hospital units that incorporate speech therapists among their professionals.

Note: The proposed teaching methodology and assessment may be subject to change depending on the attendance restrictions imposed by the health authorities. The teaching staff will detail through the moodle classroom or the usual media the face-to-face or virtual/on-line format of the different directed and evaluation activities, taking into account the indications of the faculty according to what allows the health situation.

Annotation: Within the schedule set by the centre or degree programme, 15 minutes of one class will be reserved for students to evaluate their lecturers and their courses or modules through questionnaires.

## Activities

Title	Hours	ECTS	Learning Outcomes
Type: Directed			
Block II. Presentation class and initial planification	3	0.12	1, 2, 4, 14, 9, 18, 24, 25, 21, 17, 29, 30, 31

Type: Supervised

Bloc IB Interuniversity online conference	12	0.48	3, 14, 9, 27, 7, 17
Block IA i II Tutoring in speech therapy in centers	56	2.24	2, 3, 4, 6, 14, 9, 10, 11, 8, 26, 16, 13, 12, 7, 15, 19, 20, 22, 23, 24, 25, 21, 33, 29, 32, 28
Block IC. Exploring sessions, diagnosis and planification of rehabilitation	25	1	1, 2, 4, 14, 9, 18, 24, 25, 21, 17, 29, 30, 31
Type: Autonomous			
Bloc IB. Summary of the Interuniversity online conference	8	0.32	3, 6, 9, 27, 7
Block I A i II. Production of therapeutic plans and reports	10	0.4	5, 10, 11, 26, 16, 27, 13, 23, 25, 17, 28
Block IC. Autonomous study and learning consolidation	36	1.44	2, 6, 14, 9, 11, 19, 20, 22, 33

## Assessment

The evaluation of the subject will be based on the following evidence (all evidences are individual):

BLOCK I: Practicum of transversal content (40% total subject)

IA. Speech therapy practice in otorhinolaryngological pathology. Attendance and presentation of the resolution of a case delivered by the tutor of the activity (10% of the total of the subject).

IB. Professional experiences in the Interuniversity Conferences. Minimum attendance at 6 conferences. The evaluation of the participation in the Interuniversity Conferences will be done on the basis of online reports/questionnaires (10% of the total of the subject).

IC. Speech therapy in oropharyngeal dysphagia. The evaluation will be carried out from the follow-up to the sessions and the completion of online reports/questionnaires (20% of the total subject)

BLOCK II: Internships in external centers (60% of the total subject)

The evaluation is based on the work done by the students in the internship center and is evaluated by the tutor of the center. The predisposition, interest and performance of the students are taken into account.

FINAL GRADE OF THE SUBJECT:

It will be the weighted sum of the grades of each block (Block IA 10% + IB 10% + IC 20% + Block II 60%).

Passing the subject: To pass the subject the mark of each sub-block must be at least 5 points (scale 0-10). In addition, assistance for the minimum amount of hours of internship is required.

Not assessable: A student who has given assessment activities with a weight of less than 4 points (40%) will be listed as "not assessable".

Recovery: The students that have been previously evaluated in a set of activities whose weight is equivalent to a minimum of two thirds of the total qualification of the asignatura have obtained a note of course between 3,5 and 4, 9 points may be eligible for a specific recovery plan for aspects where it has not been sufficient. Internships in external centers will not be subject to recovery.

General UAB regulations: <https://www.uab.cat/web/estudiar/graus/graus/avaluacions-1345722525858.html>

## Assessment Activities

Title	Weighting	Hours	ECTS	Learning Outcomes
Block IA. Practice in otorhinolaryngological pathology	10%	0	0	3, 9, 10, 26, 16, 27, 13, 20, 22, 23, 17, 33
Block IB. Report Jornadas Interuniversitarias	10%	0	0	1, 3, 5, 6, 10, 13, 12, 7, 30, 28
Block IC. Dysphagia clinical report	20%	0	0	1, 2, 4, 14, 9, 18, 23, 24, 25, 21, 17, 33, 29, 30, 32, 31
Block II Student's assessment done by the Professional tutor	60%	0	0	2, 3, 4, 6, 14, 9, 10, 11, 8, 26, 16, 13, 12, 7, 15, 19, 20, 22, 23, 24, 21, 33, 28

## Bibliography

### BLOCK Ia:

Bleeckk. (2004) Disfagia: Evaluación y reeducación de los trastornos de la deglución. Ed. McGrawHill.

Calais-Germain, B. - Germain, F(2014). Anatomía para la voz. entender y mejorar la dinámica del aparato vocal. Editorial: La liebre de marxo.

Casado J. C.(2002) La evaluación clínica de la voz. Fundamentos médicos y logopédicos. Ed. Aljibe. Malaga.

Casado J. C. Pérez A (2009). Trastornos de la voz: Del diagnóstico al tratamiento. Ed. Aljibe. Malaga.

Cobeta, I. - Nuñez, F. - Fernández, S (2014). Patología de la Voz. Editorial: Marge Books

I Cobeta, F. Nuñez, S Fernández (2014). Patología de la voz. Ponencia Oficial de la SEORL PCF Ed. Marge Méica Books

Jaume G, Tomas M.(2007) Manejo de la disfagia y aspiración. Ed. Ergon

Le Huche F, Allali A.(2004) La voz Tomo (1,2,3, 4). Ed. Massón. Barcelona

Menaldi J.(2002) La Voz Patológica. Ed. Panamerican

Mendizábal, N. - Santiago, R. - Jimeno, N. -García, N. - Díaz-Empanza, M (2013). Guía práctica para la elaboración de informes logopédicos. Editorial: Medica Panamericana

Núñez F., Maldonado, Suárez C. (2000) Cuidados y rehabilitación del paciente traqueotomizado. Servicio de publicaciones Universidad de Oviedo

Perello J.(2005) Trastornos del habla. Ed. Masson.

Puyuelo M.(1997) Casos Clínicos en logopedia. Ed. Massón

Ramírez C. (2008) Manual de Otorrinolaringología, Ed. McGrawHill. Madrid

Suárez A. Martínez J.D., Moreno J.M, García ME. (2003)Trastornos de la voz. Estudio de casos. Ed. EOS.

### BLOQUE Ic:

- Clavé P, Arreola V, Romea M, Medina L, Palomera E, Serra-Prat M. Accuracy of the volume-viscosity swallow test for clinical screening of oropharyngeal dysphagia and aspiration. Clin Nutr. 2008 Dec;27(6):806-15. doi: 10.1016/j.clnu.2008.06.011. Epub 2008 Sep 11. PMID: 18789561.

- Kertscher B, Speyer R, Palmieri M, Plant C. Bedside screening to detect oropharyngeal dysphagia in patients with neurological disorders: an updated systematic review. *Dysphagia*. 2014 Apr;29(2):204-12. doi: 10.1007/s00455-013-9490-9. Epub 2013 Sep 13. PMID: 24026520.
- Matsuo, K., & Palmer, J. B. (2008). *Anatomy and Physiology of Feeding and Swallowing: Normal and Abnormal*. *Physical Medicine and Rehabilitation Clinics of North America*, 19(4), 691-707. <https://doi.org/10.1016/j.pmr.2008.06.001>
- Costa, A., Carrión, S., Puig-Pey, M., Juárez, F., & Clavé, P. (2019). Triple adaptation of the mediterranean diet: Design of a meal plan for older people with oropharyngeal dysphagia based on home cooking. *Nutrients*, 11(2), 1-17. <https://doi.org/10.3390/nu11020425>
- Huckabee, M. L., McIntosh, T., Fuller, L., Curry, M., Thomas, P., Walshe, M., McCague, E., Battel, I., Nogueira, D., Frank, U., van den Engel-Hoek, L., & Sella- Weiss, O. (2018). The Test of Masticating and Swallowing Solids (TOMASS): reliability, validity and international normative data. *International Journal of Language and Communication Disorders*, 53(1), 144-156. <https://doi.org/10.1111/1460-6984.12332>
- Ortega, O., Bolívar-Prados, M., Arreola, V., Nascimento, W. V., Tomsen, N., Gallegos, C., Fuente, E. B. de La, & Clavé, P. (2020). Therapeutic effect, rheological properties and  $\alpha$ -amylase resistance of a new mixed starch and xanthan gum thickener on four different phenotypes of patients with oropharyngeal dysphagia. *Nutrients*, 12(6), 1-18. <https://doi.org/10.3390/nu12061873>
- Martin-Martinez A, Ortega O, Viñas P, Arreola V, Nascimento W, Costa A, Riera SA, Alarcón C, Clavé P. COVID-19 is associated with oropharyngeal dysphagia and malnutrition in hospitalized patients during the spring 2020 wave of the pandemic. *Clin Nutr*. 2021 Jun 15:S0261-5614(21)00297-1. doi: 10.1016/j.clnu.2021.06.010. Epub ahead of print. PMID: 34187698; PMCID: PMC8205257.

## Software

No specific software is needed