

University of Guelph
OVC
Department of Clinical Studies
COURSE OUTLINE
CLIN*6950 Special Topics: Professional Competencies
Fall/Winter 2018-19
0.5 Credits

Course Description

The course will assist learners in developing communication skills in several critical areas of professional veterinary practice: 1) to interact effectively with veterinary clients and other members of the veterinary team and enhance the veterinary-patient-client relationship, 2) preparation and delivery of a professional seminar including managing audience interaction, and 3) guidance and feedback in clinical teaching in small groups. The course will be comprised of several components including classroom components that will involve some didactic learning, small-group interactions, and exercises that encourage actualizing skills as well as online self-study modules. Rehearsal and feedback/coaching sessions will guide formative learning. Students will also complete videotaping assignments that require self-assessment and skills development goal-setting. Students will also be expected to regularly attend a professional seminar series (Grand Rounds) and deliver 1 seminar as part of this series. This is a 2-semester course that is restricted to graduate students registered in the Department of Clinical Studies.

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Course Resources

Some materials used in the course were produced by the Institute for Healthcare Communication with funding support from Bayer Animal Health, and will be available for learners through the Courselink shell. Online self-study materials were produced by OVC and College of Veterinarians of Ontario with permission of the Institute of Healthcare Communication. Materials are organized into thematic modules and will be presented as such. Supplemental readings will be provided through Courselink.

Course Goals and Learning Outcomes

Client Communication Skills

Module #	Module Title	Learning Outcomes
2	Getting the story: eliciting and understanding the client's perspective	<ol style="list-style-type: none">1. Describe a model that the veterinarian can use in getting the client's story2. Be able to identify at least 3 skills that are specific to getting the story3. Select at least 2 specific skills they wish to focus on for further development

Module #	Module Title	Learning Outcomes
4	Euthanasia: Guiding Clients through Difficult Decisions	<ol style="list-style-type: none"> 1. Identify research evidence about communication related to end-of-life and euthanasia discussions 2. Describe decision-making steps in client discussions about euthanasia 3. Identify skills to acknowledge clients' emotional and behavioral responses to euthanasia 4. Demonstrate at least 2 skills for use in client discussions related to the euthanasia process
5	Take 2 BID: Enhancing Adherence	<ol style="list-style-type: none"> 1. Explain at least 2 benefits of adherence 2. Describe a model to improve adherence 3. Demonstrate use of 2 literacy sensitive strategies with clients 4. Apply 2 strategies to enhance client conviction and confidence
6	It Goes Without Saying: Nonverbal Communication in Veterinarian-Client Relationships	<ol style="list-style-type: none"> 1. Identify at least 2 of the 4 categories of basic nonverbal behavior 2. Identify at least 2 skills for recognizing when clients verbal and nonverbal messages are incongruent (mixed messages) 3. Demonstrate at least 2 specific skills for addressing client's mixed messages
7	The Eye of the Beholder: Addressing Conflict	<ol style="list-style-type: none"> 1. Identify 2 factors that contribute to conflict in practice 2. Describe how thoughts and feelings regarding conflict influence behaviors/responses 3. Identify 2 approaches/styles for managing conflict 4. Describe at least 1 communication tool for addressing conflict in client relationship
8	"Elephant" in the Room: Money talk with Clients	<ol style="list-style-type: none"> 1. Identify emotional or behavioral responses to financial issues 2. Describe 3 factors which may influence discussion of financial issues with clients 3. Identify 2 skills to effectively communicate about financial issues with clients
9	Strangers in Crisis: Partners in Care	<ol style="list-style-type: none"> 1. Identify two skills for engaging with clients in emergency settings 2. Describe a 6-step communication protocol for sharing bad news 3. Demonstrate 2 strategies with examples for sharing bad news with clients
11	Breaking the Silence: Disclosing Medical Errors	<ol style="list-style-type: none"> 1. Describe a rationale for openness with clients following harm caused by error 2. Recognize and identify steps to take to respond ethically and constructively with clients 3. Demonstrate use of 2 specific communication techniques to rebuild trust with clients
12	Easy for You to Say: Communication within the Veterinary Healthcare Team	<ol style="list-style-type: none"> 1. Identify 4 fundamental components of a successful healthcare team 2. Identify at least 2 tools for resolving conflict 3. Practice 3 core communication skills essential for successful teams
13	Building TRUST with Clients	<ol style="list-style-type: none"> 1. Identify evidence-driven reasons why communication is important 2. Identify specific communication tools to increase confidence during client interactions 3. Practice applying these tools today 4. Commit to using 2 tools in practice
14	Compassion Fatigue: Caring until it Hurts	<ol style="list-style-type: none"> 1. Describe the nature and scope of Compassion Fatigue (CF) 2. Recognize symptoms of CF seen in the veterinary professional 3. Identify strategies for limiting the effects of CF on the veterinary professional 4. Select and commit to using at least 2 CF-reducing strategies in veterinary practice
15	Clear the Air: Tools for Managing Team Conflict and Enhancing Team Collaboration	<ol style="list-style-type: none"> 1. Awareness: Recognize the role of awareness in enhancing relationships, managing conflict and distinguishing observations from evaluations 2. Identification: Identify thoughts, feelings and needs 3. Response: Name 3 guidelines for making a request that fulfills needs 4. Apply the AIR communication model as a tool to promote and enhance relationships and manage conflict.

Scientific Presentation Skills

- Demonstrate effective preparation of a professional presentation with content aimed at professional peers/colleagues.

- Demonstrate effective delivery of a professional presentation using computerized presentation software.
- Identify 4 features of presentation slides that enhance presentation.
- Identify 2 features of presentation slides that could detract from presentation.
- Identify 2 features of data presentation (graphs, charts) that enhance audience understanding and clarity.
- Demonstrate effective handling of audience questions and responses as part of scientific presentation.
- Demonstrate effective introduction of a professional colleague prior to scientific presentation.

Clinical Small Group Teaching Skills

- Describe learning theories that are applicable to small-group clinical learning
- Understand the learning skills hierarchy and employ it in your teaching strategy
- Describe additional domains that can be explored that reinforce deeper learning
- Identify 3 approaches that disengage learners
- Identify 3 approaches that engage learners

Feedback in the Clinical Setting: Essential Characteristics and Strategies

- Describe 5 essential characteristics of effective feedback
- Describe learner's potential response to feedback
- Identify personal challenges with giving feedback
- Describe 3 tools/techniques that can be used when providing feedback in the clinical setting
- Demonstrate providing feedback using a feedback tool/technique in a simulated setting.

Course Schedule

Date	Time	Room	Topic	Lecturer
Sep 6, 2018	8-9:00	2106	Optimal design of a scientific presentation and effective data presentation	Jason Dodd
Sep 10, 2018	8-9:00	2106	Managing verbal and non-verbal elements of presenting	Jason Dodd
Sep 12, 2018	8-9:30	2152	Delivering engaging presentations/Software Options/Review	Jason Dodd/Bateman
Sep 14, 2018	8-9:30	2106	Small Group Clinical Teaching	Bateman/Oblak
Sep 20, 2018	8-9:30	2106	Feedback to Clinical Colleagues: Essential Characteristics and Strategies	Kerr/Coe
Sep 19, 2018	8:30-9:30	TBA	Ground Rounds Seminars Begin- Continue every Wednesday (according to schedule below) until end Winter 2019.	
Online		Self-study	Professional Introductions	
Online		Self-study	Building Trust with Clients: Why Communication Matters	

Online		Self-study	Building Trust: Essential Tools (Nonverbal Awareness)	
Online		Self-study	Building Trust: Essential Tools (Open-ended Questions, Active Listening, and Empathy)	
Online		Self-study	Building Trust with Clients: Final Quiz	
Online		Self-study	Euthanasia	
Online		Self-study	Elephant in the Room- Money Talk	
Online		Self-study	Strangers in Crisis, Partners in Care	
Online		Self-study	Breaking the Silence- Disclosing Medical Errors	
Online		Self-study	Enhancing Adherence	
Oct 18, 2018	6-7:30	TBA	Skills Building Lab 1- Modules 2, 13, 5 History, Adherence, Building Trust	Hewson
Oct 25, 2018	6-7:30	TBA	Skills Building Lab 2- Modules 6, 7, 4 Non-verbals, Conflict, Euthanasia	Bateman
Nov 1, 2018	6-7:30	TBA	Skills Building Lab 3- Modules 8, 9, 11 Money, Emergency Comm, Medical Errors	Pinard/Gaitero
Nov 8, 2018	6-7:30	TBA	Skills Building Lab 4- Modules 14 Compassion Fatigue, Feedback	Bateman/Gibson
Nov 15, 2018	6-7:30	TBA	Skills Building Lab 5- Modules 12, 15, Feedback Team Communication/Conflict, Feedback	Kerr/Coe
Dec 20/21, 2018	7:30-noon	TBA	Simulated Client Lab	Bateman/Coe/Winhall
Jan 7, 2019	8:30-9:30		Video Taping Assignment Expectations Meeting	
Feb 1, 2019	DEADLINE		Video Taping Assignment # 1 DUE	
Mar 1, 2019	DEADLINE		Video Taping Assignment # 2 DUE	
Apr 5, 2019	DEADLINE		Video Taping Assignment # 3 DUE	

Grand Rounds Seminar Schedule (Wednesday 8:30-9:30 am)

Date	Room	Presenter 1/Emphasis	Presenter 2/Emphasis
Sep 12, 2018		INTRO CLASSES SCHEDULED	
Sep 19, 2018		Sarah Bernard/ONCO DVSc	Monica Jensen/DI DVSc
Sep 26, 2018		Dustin Dennis/LAIM DVSc	Rodrigo Aguilera/ANES DVSc
Oct 3, 2018		Cancelled: Rames Salcedo/LAS DVSc—moved to Feb 27	Grand Rounds Cancelled
Oct 10, 2018		Chris Greenwood/SAIM DVSc	Claudia Kabakchiev/AVEX DVSc
Oct 17, 2018		Edouard Marchal/NEURO DVSc	Sherri Raheb/CARDIO DVSc
Oct 24, 2018		Xiu Ting Yiew/ECC DVSc	Tanya Wright/SAS DVSc
Oct 31, 2018		Lillian Cousto/ECC Resident	Tainor Tissot/ANES DVSc
Nov 7, 2018		Melanie Dickinson/SAIM DVSc	Chris Hagen/SAS DVSc
Nov 14, 2018		Mary Murphy- Legal Presentation	
Nov 21, 2018		Caitlin Grant/NUTR DVSc	Michal Hazenfratz/NEURO DVSc
Nov 28, 2018		Alex Beaulieu/DI DVSc	Shannon Wainberg/SAS DVSc
Dec 5, 2018		Massimo Delli-Rocili/LAS DVSc	Michelle Colpitts/CARDIO DVSc

Dec 12, 2018		HOLIDAY	
Dec 19, 2018		Jaqueline Scott/SAS DVSc	
Dec 26, 2018		HOLIDAY	
Jan 2, 2019		Jenny Stiller/SAIM DVSc	Laura Tucker/ANES DVSc
Jan 9, 2019		Laura Goodman/DI DVSc	Kaela Shaw/ECC DVSc
Jan 16, 2019		Alejandro Merchan Munoz/LAS DVSc	Trinita Barboza/AVEX DVSc
Jan 23, 2019		Hugo Leonardi/NEURO DVSc	Jennifer Wan/SAS DVSc
Jan 30, 2019		Chris Pinard/ONCO DVSc	Allison Collier/SAIM DVSc
Feb 6, 2019		Omar Zaheer/AVEX Resident	Manuel Gomez/LAIM DVSc
Feb 13, 2019		Jessica Aymen/AVEX DVSc	Christopher Drolet/ECC Resident
Feb 20, 2019		Jose Guerra/LA Intern	Sabrina Ayoub/CA Intern
Feb 27, 2019		Philippe C. Larose/CA Intern	Rames Salcedo/LAS DVSc
Mar 6, 2019		Patricio Peirano Hinojosa/LA Intern	Julianne McCready/AVEX Intern
Mar 13, 2019		Sarah Laliberte/ONCO Intern	Scott Gibson/CA Intern
Mar 20, 2019		Luiza Stachewski Zakia/LAIM Intern	Daniel Moreno/CA Intern
Mar 27, 2019		Emily Duane/CA Intern	Hanna Vermedal/LA Intern
Apr 3, 2019		Gibrann Castillo Escotto/NEURO Intern	Keaton Morgan/CA Intern
Apr 10, 2019		Andres Giraldo/LA Intern	Ananda Pires/CA Intern
Apr 17, 2019		Megan Forgan/CA Intern	Sarah Dodd/Nutrition Resident
Apr 24, 2019		Hannah Godfrey/MSc; Afrah Ahmed/MSc; Ann Ram/MSc; Angelie Shukla/MSc; Tyler O'Brien/MSc	

Seminar Guidelines

Arriving on time and presenting on the dates scheduled is your responsibility. If you are unable to deliver your seminar on the day you have been assigned, you must make arrangements to switch with another participant scheduled. These changes must occur at least 2 WEEKS prior to your scheduled timeslot and once confirmed, please let Aria and Dr. Oblak know via email. (Please do not ask the graduate assistant or course coordinator to change the dates for you).

The presenter must email the title and name of advisor for their presentation to Aria Easley (csgrad@uoguelph.ca), ONE WEEK prior to the presentation.

Seminars start on time! On dates with *two* presenters: Twenty minutes will be allowed for each presentation and 5-8 minutes for questions. On dates with *more than two* presenters: Fifteen minutes will be allowed for each presentation and no more than 5 minutes for questions. Presenters will be signaled with a 2-minute warning and stopped if they exceed their allotted presenting time. All residents, interns, faculty are expected to attend (even when off-clinics).

Students will also be responsible for introducing the other speaker giving a seminar on the date of their scheduled seminar. You are expected to plan ahead in order to gather relevant biographical information to create a brief and professional introduction of your colleague.

Faculty Advisors

Identification of a faculty advisor will be required for all presentations. This advisor is typically the supervisor on the case presented in your seminar. Presenters should seek the assistance of their faculty advisor at least 3-4 weeks prior to their presentation. The faculty advisor may assist with preparation of the seminar by providing ideas and literature sources, by helping with organization and other audiovisual preparation, and by acting as an audience for dry-run presentations of the seminar (e.g. asking questions and giving a critique).

**** Each learner must have her or his advisor's approval of their presentation before it is given at Grand Rounds. ****

Guidelines for Clinical Presentations (Interns/Residents/DVSc)

- The main outcome of this conference is continuing medical education for all and intern/resident training in particular. Although student veterinarians and other non-clinical graduate students will be in the audience, you should 'pitch' your seminar at the level of your peers. Approaches to difficult, unusual, or challenging cases should be emphasized with the goal that everyone learns or is reminded of something of value. The conference offers interns and residents learning experiences related to the interpretation of clinical, laboratory, and pathology-based examinations. Furthermore, presenters learn to prepare case presentations that are both succinct and complete. Participants can observe how specialists from various areas of practice approach problems. The importance of fundamental examination methods and of information derived from advanced medical technologies becomes evident in a well-designed presentation.
- Foremost, Grand Rounds is a clinical exercise, and that implies active participation by the attendees, notably the interns and residents (with "supervisory commentary" by the faculty). The conference should not become a lecture, but remain a dynamic exercise built around a case discussion.
- The presenter should first identify a case that is well defined and interesting for some reason. Examples of interest include disorders that are newly-discovered, cases that facilitate discussion about new diagnostic or therapeutic approaches, or patients that represent diagnostic or therapeutic dilemmas. Well worked-up cases with no clear answer can be reasonable subjects for this conference; conversely, incompletely-evaluated cases with no diagnosis create disappointment and should not be selected. You should present a case that YOU had an active and significant role in managing clinically.
- In preparing the case study, the presenter should ask: "What are my goals in this case presentation? What do I want to emphasize or bring out in discussion? How can I make the best use of the clinical materials available and the time allotted?" In some cases, you may wish to emphasize the differential diagnosis and approach to a particular problem; for example: recent onset of seizures in the older cat; mucocutaneous lesions in a dog; fever

and lymphadenopathy in a young dog; or perhaps a heart murmur in a puppy. In other cases, you may want to highlight diagnostic study results that require skillful interpretation. Others may wish to emphasize the clinical pathophysiology of a problem, as with a case of multiple-organ failure. Therapy may be the thrust for other presenters. An important point is that one can't emphasize everything because there isn't enough time! It will be better to cover one or two aspects well than to get bogged down in the differential diagnosis of 14 individual problems, especially if 10 of those problems are trivial to the main issue.

- Engagement of interns, residents and faculty members in discussion is fundamental to the case conference. Again, this is a clinical exercise, and each presenter is encouraged to engage their audience in multiple ways: you could call on interns and residents to interpret data and then follow up with your interpretation, or you can include polling questions (using software options presented in course) within the presentation as a form of audience participation, or you can do both.
- The goal of this exercise is for prepared presenters to engage their audience, and for commentary about the case to take place during or after presentation. Politeness is expected, but respectful discourse is required. Don't sit quietly through erroneous comments, whether made by an inexperienced intern or by the most senior of professors (though we should correct both, especially old professors, in a kindly manner!). If we disagree with a clinical approach or interpretation we should state so and explain why, and preferably provide some evidence to back up our opinion.

Guidelines for Non-clinical Presentations (MSc)

- The principles outlined above also apply to non-clinical presentations delivered by MSc students. It is understood that the content and main thrust of your presentation will not be of a clinical nature. Ideally, you should select some element of your research that poses an interesting question about societal trends, methodology of analysis, or larger questions about the implications of the research. Please do not exhaustively present your research findings. You might include several important findings, but your presentation should focus on the implications of these, not detailed methodologic analysis. The goal is for you to engage your audience and include various methods of stimulating audience participation in your seminar.

Pointers and Recommendations

- Pointers for presenters (in addition to those noted above):
 - Prepare in advance. Give yourself time to prepare your materials. Read the standard textbooks AND the current literature; be knowledgeable and well prepared to discuss relevant points of your case presentation. You will be more confident if you are prepared.
 - Computer projections will be used for the presentation. If you're planning to use your own laptop or tablet, note that the projector/computer in the room has a VGA input cable--but you might need a VGA adapter (as is the case for Apple components). Please, check in advance of your presentation and bring your own adapter if required, since there are not any available in the room.

- PLEASE make sure you've practiced setting up and adjusting the room prior to your presentation. Make sure you know how to manage the software and that your presentation looks correct on the screen and computer that will be used!!!
 - When appropriate, include a 'Problem List' slide. There is limited time to present all aspects of a case, so it will save time for more important issues if the initial problem list is among your initial presentation slides. Please do not ask the audience to recite the problem list—what we are looking for is interpretation of these problems.
 - Differential diagnosis (DDx): When appropriate, you should ask your audience to offer differential diagnoses and subsequently you should summarize this list or the most likely diagnoses for the patient's main problems. DDx lists should be constructed within the context of the case. For example, one might indicate that "I think the most likely rule outs in this case of acute renal failure are leptospirosis, ischemic renal injury related to volume depletion, ethylene glycol, or NSAID-induced nephropathy". Listing aminoglycoside toxicity if there is a zero chance of patient exposure to that drug won't be relevant to the case and shouldn't be presented unless you are trying to produce an exhaustive listing. Where interns and residents often get into problems is when the history, PE, and referral laboratory tests identify over a dozen problems and we then attempt a comprehensive differential diagnosis of each of these. In this situation, it's just not worth running the list for every one of these problems as it will eat up all of your presenting time. Instead, it would be wiser to ask your audience for three to five diagnoses that are most likely to explain ALL of the patient's main problems.
- Pointers for you as an audience participant:
 - Show up on time: All intern, residents and graduate students, whether on or off service, are expected at every conference. Plan ahead and have your case responsibilities managed before the conference is scheduled to begin.
 - Be prepared: Residents and interns are asked to interpret case findings on the fly, without prior study. Good responses are characterized by a familiarity with interpretation of commonly used tests and a logical approach to interpretation. An encyclopedic knowledge of all things clinical is always impressive but not expected of anyone. Don't memorize reference intervals for CBC, biochemical profile, and urinalysis before coming to this conference--these references should be provided by the presenter.
 - Don't list.....INTERPRET: Interpret the laboratory, imaging, and other identified abnormalities related to the patient under discussion! Don't tell us every differential diagnosis for a low calcium; instead, tell us the most likely considerations for the patient under consideration.
 - Clinical Laboratory Tests: Telling the audience that the PCV is "low" is not an interpretation. While it is fine to identify abnormalities, what is expected is this: "my interpretation of the CBC in this patient is". For serum biochemistries, you should first identify the abnormalities and then interpret the likely significance of these findings relative to the case under discussion. For example, you might state:

- “the ALT is moderately elevated while the bilirubin and ALP are normal; the BUN is low; there is mild hypochloremia but the other electrolytes are WNL; my interpretation of these findings is”. Interpretations may be as simple as “normal for age” or “explained by prior diuretic therapy”. However, many cases require more synthesis. For example: “the ALT elevation is likely due to hepatocellular injury, perhaps from the prior drug therapy, which is known to be hepatotoxic to cats. The elevated BUN and creatinine are probably pre-renal in origin; this assessment is based on the history of vomiting, normal renal size, elevated PCV/TP/albumin, and the concentrated urine SG. The anion gap in this case is probably from the renal failure and perhaps contributed by lactic acidosis. I’m not sure why the calcium is decreased in this patient, but possible reasons in this case might be pancreatitis, etc.....”.
- Imaging: If radiographs appear normal except for increased unstructured interstitial pattern in the caudal lungs, you should render an interpretation about these findings. Perhaps something as simple as “these are compatible with age-related fibrosis” is all that is needed, or perhaps something more interesting will be required such as “I cannot rule out interstitial inflammation related to rickettsial infection; this has been reported previously in a case series.” Similarly, for ultrasound images, if you have identified multifocal areas of mixed hyperechoic/anechoic ultrasound densities on the splenic ultrasound, you need to interpret, for example: “my interpretation is these areas are most likely regenerative nodules, but I can’t exclude neoplasia and would recommend aspiration cytology of a nodule.”
 - Pointers for faculty audience participants:
 - Faculty members should not sit passively if there are clear errors or omissions in a presentation or interpretations, or if they have important points to add. At the same time, the presenter should be given some latitude in his or her presentation, and faculty members may want to hold some comments until the end of the presentation.
 - Don’t sit quietly through erroneous comments, whether made by an inexperienced intern or by the most senior of professors (though we should correct both, especially old professors, in a kindly manner!).
 - Ask questions of the presenter and the audience to stimulate discussion and engagement.

Assignment Guidelines

Video Tape Assignment

- Completion of 3 video-taping assignments, and self-assessment and review is also required during Winter semester of the course. Detailed instructions are available on Courselink. Following completion of the video-taping session, students will review the tape and complete a ½ page self-assessment (see template on Courselink) and submit to the course-coordinators in the Courselink Dropbox. Students must also select 2 of the 3

video tape assignments and schedule an appointment with one of the instructors for a review/coaching/feedback session.

- Interns and residents will tape actual clients in the hospital. Non-clinical graduate students can tape an actual interaction with a friend, family member or colleague; or you can create a simulated communication challenge you've encountered in your study or work.

Grand Rounds Self-Assessment Assignment

- Following your Grand Rounds seminar, both the video tape of your seminar and feedback collected by the audience will be provided to you electronically. You should review this information, complete the self-reflection exercise (see template on Courselink), and meet with your seminar advisor to review your assessment and receive any additional feedback. Your advisor should sign the exercise and then you can submit it to the Courselink Dropbox.

Methods of Assessment

Attendance will comprise 40% of the final grade. Students who miss a scheduled classroom session (lectures, skills sessions) will be required to submit a written 1/2 page summary/reflection (1 inch margins, double-spaced, Times New Roman 10 pt font) that is focused on the content of the missed class session. The assignment must be submitted to the Dropbox in Courselink within 1 week following the missed class. Failure to do so will result in reduction of final grade by 5% for each instance. Students must also attend 20 of 28 seminars in the Grand Rounds Seminar Series. Failure to meet this requirement will result in reduction of final grade by 5% for each seminar (less than 20) missed. The simulated client laboratory is mandatory and provides formative feedback to the student. Failure to attend a scheduled simulated lab session will result in reduction of final grade by 15%.

Failure to complete the videotaping assignments by the deadlines noted above will result in a reduction of the final grade by 15% for each assignment not completed. This component of the grade will comprise 45% of the final grade.

Completion of the Grand Rounds seminar review and reflection assignment will comprise 15% of the final grade. Failure to complete the assignment within two weeks of receiving the tape and audience feedback will result in a reduction of 5% of this component of your grade (max 15%) for every day that it is late. If there are extenuating circumstances an extension may be granted- please contact one of the course co-ordinators.

Course and University Policies

When You Cannot Meet a Course Requirement

When you find yourself unable to meet an in-course requirement because of illness or compassionate reasons, please advise the course co-ordinator in writing, with your name, id#,

and e-mail contact. See the graduate calendar for information on regulations and procedures for [Academic Consideration](#).

Accessibility

The University of Guelph is committed to creating a barrier-free environment. Providing services for students is a shared responsibility among students, faculty and administrators. This relationship is based on respect of individual rights, the dignity of the individual and the University community's shared commitment to an open and supportive learning environment. Students requiring service or accommodation, whether due to an identified, ongoing disability or a short-term disability should contact Student Accessibility Services (formerly the Centre for Students with Disabilities) as soon as possible.

For more information, contact [Student Accessibility Services](#) at 519-824-4120 ext. 56208 or email csd@uoguelph.ca.

Academic Misconduct

The University of Guelph is committed to upholding the highest standards of academic integrity and it is the responsibility of all members of the University community – faculty, staff, and students – to be aware of what constitutes academic misconduct and to do as much as possible to prevent academic offences from occurring. University of Guelph students have the responsibility of abiding by the University's policy on academic misconduct regardless of their location of study; faculty, staff and students have the responsibility of supporting an environment that discourages misconduct. Students need to remain aware that instructors have access to and the right to use electronic and other means of detection.

Please note: Whether or not a student intended to commit academic misconduct is not relevant for a finding of guilt. Hurried or careless submission of assignments does not excuse students from responsibility for verifying the academic integrity of their work before submitting it. Students who are in any doubt as to whether an action on their part could be construed as an academic offence should consult with a faculty member or faculty advisor.

The [Academic Misconduct Policy](#) is detailed in the Undergraduate Calendar.

E-mail Communication

As per university regulations, all students are required to check their <uoguelph.ca> e-mail account regularly: e-mail is the official route of communication between the University and its students.

Drop Date

The last date to drop this course without academic penalty is Friday, November 2, 2018.

Copies of out-of-class assignments

Keep paper and/or other reliable back-up copies of all out-of-class assignments: you may be asked to resubmit work at any time.

Recording of Materials

Presentations which are made in relation to course work—including lectures—cannot be recorded or copied without the permission of the presenter, whether the instructor, a classmate or guest lecturer. Material recorded with permission is restricted to use for that course unless further permission is granted.

Consent forms for video-taping of client appointments will be provided on Courselink and should be delivered to the course coordinator without delay. Remember that all interactions recorded during client appointments are confidential and should not be shared with anyone. References to any video-taping activity or content of any videotape on social media is **strictly forbidden** and will be investigated as academic misconduct.

Grading

See above deadlines for submission of assignments for this course. Attendance at the Simulated Client Lab is expected and mandatory. Professional behavior is expected at all times during any class activity.

Campus Resources

If you are concerned about any aspect of your academic program:

Make an appointment with your academic advisor.

If you are struggling to succeed academically:

There are numerous academic resources offered by the [Learning Commons](#) including, Supported Learning Groups for a variety of courses, workshops related to time management, taking multiple choice exams, and general study skills. You can also set up individualized appointments with a learning specialist. The [Graduate Student Learning Initiative](#) also offers excellent support in a number of key areas related to graduate student performance.

If you are struggling with personal or health issues:

[Counselling services](#) offers individualized appointments to help students work through personal struggles that may be impacting their academic performance.

[Student Health Services](#) is located on campus and is available to provide medical attention.

For support related to stress and anxiety, besides Health Services and Counselling Services, [Kathy Somers](#) runs training workshops and one-on-one sessions related to stress management and high performance situations.

If you have a documented disability or think you may have a disability:

[Student Accessibility Services](#) (SAS) formerly Centre for Students with Disabilities can provide services and support for students with a documented learning or physical disability. They can also provide information about how to be tested for a learning disability.