Using Partnerships and Collaboration to Promote and Facilitate Best Practice in Assessment of Work Integrated Learning in Speech Pathology: The COMPASS™ Project.

Category: Educational partnerships and collaborations with other organisations

Synopsis

Speech pathology is the first health discipline to successfully implement a national workplace based competency assessment. Every final year student in speech pathology in Australia is required to meet the same standards of clinical competency. These standards are reliably and validly assessed using the tools and resources developed by the COMPASS™ Team. This national approach ensures that all people with communication difficulties receive quality speech pathology services from competent graduates. In the seven years of the Project, the Team has developed and tested the competency based assessment and supported Australian speech pathology programs to embed COMPASS™ into their curricula. This has included training students and speech pathologists in the workplace to use the tool to assess and improve work integrated learning. Additionally, the Team has supported programs to use COMPASS™ data validly for research and benchmarking for quality improvement of curriculum. The Team also successfully engaged with speech pathology programs in New Zealand and Singapore.

The national adoption of COMPASS™ improves students’ university experience by allowing mobility to complete clinical placements in other states and internationally. A national tool also provides common concepts, language and standards of performance for students, academics and university programs to share, compare and evaluate their learning and teaching performance. The Project has developed a community of practice founded on mutual trust and respect and has created a strong framework for ongoing collaboration and innovation in speech pathology education.

These Project outcomes were achieved by the Team forming collaborative partnerships with staff from every speech pathology university program in Australia, New Zealand and Singapore. In turn university programs have used the knowledge, resources and training provided by the Project to facilitate the learning of speech pathologists in health and education workplaces. Speech pathology students have ultimately benefited from the increased knowledge and skills of their clinical educators in these settings.

The Speech Pathology Association of Australia (SPAA) has partnered with the Project continuously since 2001. The Project has assisted SPAA to fulfil its function of assessing and maintaining competency standards of speech pathology graduates nationally. The Australian Learning and Teaching Council (ALTC) supported the Team over the last two years with funding, networking opportunities and professional development. This enabled the Team to attend workshops and seminars that deepened their understanding of learning, teaching and assessment issues, and network with other academics facing similar challenges. This new knowledge was passed on to project partners and ultimately to students involved in the Project.
Background

The success of this project is founded on a history of over a decade of sustained national commitment by the speech pathology profession to improving work integrated learning practice. This commenced with the development of the Competency Based Occupational Standards for Speech Pathologists - entry level, (CBOS) (1994) through national consultation and collaboration across the profession. CBOS became the foundation of the process used to accredit speech pathology programs in Australia and profoundly influenced speech pathology curriculum. The Project Team recognised a need to develop an assessment of students’ work integrated learning that directly assessed the occupational competencies and was educationally sound.

The COMPASS™ Project was initiated in 2001 when the Project Team came together to submit an Australian Research Council, Strategic Partnerships with Industry-Research and Training (SPIRT) grant in 2001, with SPAA as the industry partner. This project was led by A/Prof Michelle Lincoln in collaboration with A/Profs Lindy McAllister and Alison Ferguson, with Dr Sue McAllister participating through a PhD scholarship. This partnership resulted in the development of the innovative and validated COMPASS™ Assessment System for assessment of student performance in the speech pathology workplace (McAllister, Lincoln, Ferguson, & McAllister, 2006). COMPASS™ was developed and tested through a national field trial, with over 107 clinical educators and 219 students from 7 different universities involved. This work was recognised with the awarding of a Carrick Citation for Outstanding Contributions to Student Learning in 2006 to the COMPASS™ Project team.

The Speech Pathology Association of Australia (SPAA) continued their support of the Project by providing all Australian speech pathology with the COMPASS™ Assessment System in 2006. Consequently all programs had access to a research designed and validated competency based assessment of speech pathology students’ performance in the workplace. The COMPASS™ Assessment System also includes a number of resources that effectively support learning and teaching. On its own, COMPASS™ had the potential to significantly enhance the assessment processes of universities. However the Team identified that the tool had potential to have a much broader positive impact upon speech pathology curricula and work integrated learning practice. The Team therefore sought and were successful in gaining two Carrick Institute Grants in mid 2006. The Leadership Grant and Priority Projects Grant were used to maximising the potential of COMPASS™ as a focus for curriculum renewal and innovation.

The funds were initially used to build the capacity of academic staff to roll out, embed and integrate COMPASS™ into their curricula. This included training of workplace based clinical educators across Australia and New Zealand. Later the Team were responsible for initiating internal and external benchmarking of COMPASS™ learning outcomes in all speech pathology university programs in Australia, New Zealand and Singapore. In order to achieve these outcomes the Team worked collaboratively with and facilitated networking across every speech pathology university program in Australia, New Zealand and Singapore (13 in total), SPAA and the Australian Learning and Teaching Council (formerly Carrick). This process has established an enduring foundation for ongoing quality learning, teaching and assessment practice and research through founding a sustainable community of practice. The culmination of the efforts of the Team was the formation of a collaborative alliance of speech pathology academics, the Asia Pacific Education Collaboration in Speech Language Pathology (APEC SLP), in mid 2008. This new organisation will ensure ongoing scholarly engagement in teaching and learning practice.

While the Team has been engaged in facilitating the COMPASS™ Project since 2001, this award application focuses on the demonstrated achievements of the Team since the citation in 2006. The impact of the leadership initiatives undertaken, and the nature of the whole of sector engagement and benefit by academics, students and clinicians in project activities and outcomes will be described.

**Project Aims and Methods**

The overall purpose of the COMPASS™ Project was simple; to promote learning and teaching excellence in speech pathology curricula. The initial Project goal (2001 to 2005) was the development of a validated competency based assessment of work integrated learning. This goal was achieved in 2006 when SPAA published COMPASS™ and made it freely available to university programs in Australia. The subsequent Project goals from 2006 to 2008 were as follows:

1. Build the capacity of speech pathology education leaders to integrate COMPASS™ within their learning, teaching and assessment practices across curriculum. Aims related to this goal were to:
   a. Enhance learning and teaching by leading and supporting the integration of COMPASS™ within the curricula of speech pathology professional education programs nationally.
   b. Build the capacity of speech pathology leaders to use COMPASS™ to enhance learning and teaching for the development of clinical competence in the discipline.
   c. Improve student learning outcomes on clinical placements by providing an assessment tool that effectively supports their learning.
   d. Build the leadership capacity of speech pathology educators to develop the research base for future enhancement of learning and teaching.

2. To ensure COMPASS™ was used within programs to generate valid data and enable programs to evaluate and monitor quality over time through within and cross institutional benchmarking. Aims related to this goal were to:
   a. Embed COMPASS™ within Speech Pathology curricula nationally.
   b. Develop threshold performance standards of student learning outcomes from clinical education subjects within institutions.
   c. Development and trial of policies and procedures for cross institutional benchmarking of student clinical competency.
   d. Establish within and cross institutional research projects investigating approaches to learning and teaching in clinical education.

3. To maintain COMPASS™ as an innovative and relevant tool for the speech pathology discipline through ongoing collaboration with SPAA. Aims related to this goal were to:
   a. Promote the development of a web based version of COMPASS™ through liaison with SPAA regarding the feasibility and subsequent development of COMPASS™ Online.
   b. Share resources and outcomes of project activities that could be used by SPAA to improve the utility of the COMPASS™ resource.

The Team adopted a combination of methods over 2006 to 2008 to meet these goals. Strategies included face-to-face summits with representatives from participating universities, individually tailored field visits to all programs in Australia and New Zealand, regular reference group meetings and collaborative trialling and development of resources. A strong focus on collaboration was

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3 COMPASS™ Online is an online version of COMPASS™ that has been developed by SPAA in collaboration with the COMPASS™ Project team, and will greatly enhance the efficiency of conducting and collecting data from COMPASS™ assessments, as well as manage the administrative aspects of practicum topics. This tool is currently under trial and will be available from Semester 1 2008.
maintained throughout, supported by face-to-face, email, web and internet based strategies. Consultation was supported by cycles of feedback and sequential development of discussion papers, and conducted with respect for all perspectives and concerns. The values of trust, respect and openness were enacted at all times. The Team also ensured that they contributed to all participants' professional development through training and support that met their expressed priorities.

**Selection Criteria**

1. **Distinctiveness, coherence and clarity of purpose**

The Project's distinctiveness rests on the achievement of a national, consistent approach to competency based assessment in speech pathology and the tools and strategies that were used to meet this aim. These included using assessment of work integrated learning as a focus, the innovative use of assessment data and successful engagement of all speech pathology programs in Australia, New Zealand and Singapore. The research process used to develop COMPASS™ ensured that students and the clinical discipline were central to the design and trial of the tool and this collaborative approach has continued. These strategies have ensured a focus on learning, teaching and assessment issues of relevance to the community of practice it has facilitated and served. The Team's strategy of using an assessment innovation as a focus for change created a coherency of purpose. This Project has three distinctive features.

1.1. **The allied health discipline to achieve complete national up take of an empirically developed and tested, valid, reliable and authentic tool for assessing work integrated learning**

The COMPASS™ Project not only succeeded in supporting the adoption of COMPASS™ by all 13 universities offering speech pathology programs in Australia, New Zealand and Singapore but also maximised the potential of COMPASS™ as a tool for enhancing learning and teaching practice within these programs. Evaluation at the end of the ALTC funded Project activities by all Australian and New Zealand university programs identified that COMPASS™ was being used for clinical assessment of students in their degree programs. In addition clinical coordinators indicated that they were using COMPASS™ terminology and concepts to define performance standards in clinical education subjects. Clinical coordinators reported that a mean of 85% of clinical education subjects had performance standards incorporating COMPASS™ terminology and concepts.

The evaluation also found that there was evidence at all levels of leadership (professional, academic, clinical and student) of effective integration of COMPASS™ within learning, teaching and assessment practices. These professional leaders reported that the project had resulted in rapid dissemination and embedding of the tool nationally. Furthermore, some programs were beginning to cross-map the tool's Generic and Occupational competencies against University graduate attributes/outcomes more generally across their curricula. The feedback from academic and clinical leaders was strongly positive, with comments endorsing the quality of support and assistance provided throughout the Project. Several Heads of Program reported that one of the major outcomes of the project for them had been development of the program's clinical education coordinator's leadership skills. The Project actively supported these staff members as they took on the role and responsibility of rolling-out COMPASS™ in the program (both in training other staff, and in curriculum review and adaptation), and leading State-wide training for the speech pathology clinical educators.

Feedback from One Head of Program encapsulated much of the feedback generally during a telephone interview in relation to the outcomes of the project:
I have staff who were well trained and able to use it. A more reliable, valid assessment of students’ competence. Because had to train people, reconnected with a lot of educators who hadn’t come to CE workshops for a while. Continued positive relationship with SPAA. Anticipating accreditation might be easier. Re-established the connection with other University clinical educators. Learned how to use Eluminate. Modules fantastic, FAQs, resources fantastic saved time. Like showing COMPASS off with other University disciplines, and internationally.

1.2. Collaborative engagement with all levels of the Speech Pathology Discipline to achieve Project outcomes

This project was highly strategic in its approach to facilitating change. It utilised a multi-level model of leadership, distributed both across and within higher education institutions and the professional community of speech pathologists as well as students. The Team represented 3 Universities offering 4 of the 13 speech pathology programs in Australia, and comprised academics with established reputations and skills with regard to research and practice in work integrated learning. The involvement of all universities offering speech pathology programs in Australian (13 programs in 9 universities) and New Zealand universities (3 programs in 3 universities) was actively sought, with the University of Singapore auditing later project activities.

The project also involved collaboration with the professional community, both directly and via SPAA. In order for COMPASS™ to effectively facilitate student learning while on clinical placement it was critical that workplace clinical educators (practicing speech pathologists) were adequately trained and resources to complete this task. At the centre of the approach were speech pathology students who were the end users of COMPASS™ and the future leaders in its use. Throughout the Project students were involved by using the COMPASS™ resources to set learning objectives and self evaluate their clinical performance. Students across Australia received summative and formative assessment information from their workplace clinical educators and many students graduated knowing they had achieved a national standard of clinical competency in speech pathology. Below is a quote from a student evaluation that illustrates the impact of COMPASS™ upon work integrated learning.

I felt I wasn’t competing for marks to prove myself as a clinician but rather it became more holistic. Rather than thinking about what I could do to get the next mark, I was thinking of how to improve myself overall on the scales. Also when a placement was over the COMPASS helped in seeing how far I still have to go and it reinforced the concept of lifelong learning.

Figure 1 (below) provides an overview of the layers of the project and illustrates the embedding of disciplinary capacity building. This multi-layered approach was reflected in the project management processes which involved a nested set of consultative groups, with national reference groups for each set of stakeholders: students, speech pathology clinical educators, and university clinical education coordinators. The already established national ‘Heads of Speech Pathology Programs’ group meetings with the SPAA President and Chief Executive Officer acted as a reference group. Representatives from each of these groups made up the membership of the Steering Committee with the members of the Project Team, with the addition of Professor Joy Higgs (Strategic Research Professor in Professional Practice and Director of The Education for Practice Institute at Charles Sturt University) and Ms Gail Mulcair (CEO, Speech Pathology Australia).

Institutional support from Associate Deans for Learning and Teaching and Heads of Programs was achieved by providing extensive and sustained professional development in learning and teaching for university clinical education staff. A deeper collaborative and participatory relationship was developed with those responsible for the embedding and implementation of COMPASS™. This was achieved through collaborative problem solving, resource sharing and professional development. Professional development opportunities were provided via face-to-face summits, field visits by the project manager, regular telephone and web based conferencing, and circulating discussion papers. This was both new and important for this level of leadership, as speech
pathology education leaders rarely have the opportunity to review curriculum and assessment processes with academic development support provided by experts in work integrated learning. Prior to the Leadership project, the exchange of curriculum and clinical assessment information was restricted to formal presentations at discipline conferences, occasional published papers, and chance discussions in the conduct of other matters. The extensive set of materials produced as a part of this project can be viewed by accessing the Edna Website for this project (See Supplementary Material No 1). The website functioned as a repository for resources, a venue for sharing materials and engaging in discussion.

![Diagram of multi-level model of leadership]

**Figure 1: Multi-level model of leadership**

This Project provided the ‘pathway’ for a shared journey of deepening understanding and changing practice in work integrated learning in the discipline. All activities were conducted in an atmosphere of trust, by enacting the values of respect and openness, and focusing on consensus building and partnership. This approach was highly successful in gaining and maintaining large scale cross-institutional collaboration. The following comment from a Head of a Speech Pathology Program underscores the model of leadership in this Project:

*Leadership is...* Building a framework that engages stakeholders and fosters growth and development. In the context of COMPASS™, the collaborative and nurturing approach appears to have been key factors in the success of integrating COMPASS™ across 13 speech pathology programs.

These aspects of this unique and successful process are illustrated in the following comments in response to evaluation of Project activities and outcomes:

*This process is also likely to assist us to enhance our programs because of the cross-institutional interaction and collaboration that has already occurred. (Feedback from a Head of Program during a phone interview)*
This project helped staff to feel connected with what was happening at other universities and to know that we are on a similar track, not outliers in the field. (Feedback from a Head of Program from a regional university on a written survey)

This project built capacity and developed our CE coordinators’ ability to be a leader within their system. (Feedback from a Head of Program on a written survey)

We were refocused back on learning rather than teaching through this project (Feedback from a clinical academic on a written survey)

Clear, democratic, efficient, i.e. there was adequate time and opportunity for debate on issues that were inevitably complex (i.e. purpose, process and parameters of benchmarking), with clarification of concerns (e.g. confidentiality) and regular explicit summaries of the discussions throughout, based to a large extent upon excellent minute taking (Feedback from a face to face Summit participant)

Aside from the vast benefit of the tool itself, the involvement and interaction with the other programs and establishment of networks was great. (Feedback from a clinical academic on a written survey)

The highlight for me has been the involvement in a community of learning around clinical education facilitation through the COMPASS™ forum and Edna groups. (Feedback from a clinical academic on a written survey)

1.3. The first Project in the Higher Education Sector to establish a national commitment to internal and cross institutional benchmarking of learning outcomes.

This Project is at the forefront of current educational practice. We utilised COMPASS™ data to extend knowledge regarding learning on clinical practicum through the innovative application of benchmarking strategies. It was found that benchmarking could indeed be effectively established within programs and used to improve curriculum. Moreover agreement and processes were established to enable benchmarking student data across universities. A model and resources to enable cross institutional benchmarking of student data was developed and is available for use by other disciplines.

Benchmarking student performance within and across professional education programs as a strategy to examine learning and teaching practices is an entirely new endeavour within the higher education sector. Where benchmarking has occurred previously programs or universities have compared ‘inputs’ such as content and processes. Success has been measured by degree of adherence to predetermined standards (e.g. documentation of curriculum) or improved cost-benefit outcomes, rather than directly measuring ‘outputs’ in terms of student learning/performance (Higgs & McMeeken, 1997; WFME, undated; CHEMS, 1998).

Our evaluation shows clearly that programs are now able to fully utilise the measurement capability of COMPASS™ to set internal benchmarks for student performance. In fact, six clinical coordinators indicated that they had gone a step further and were using or intending to use internal benchmarking data to modify and/or refine aspects of their clinical education units. They commented:

We are currently investigating what learning experiences best develop competencies in intermediate level students.

We will use assessment data to review teaching methods and sequences of experiences for students

Below are some examples of the insights reported.

We now have clear evidence of what we do well e.g. clinical reasoning and professionalism and what we need to improve e.g. students assessment, analysis and interpretation skills.

It has made us look into how we facilitate the development of some generic skills such as clinical reasoning

Differences in learning in sessional and block placements has been highlighted

Clinical coordinators were asked whether they thought external (cross institutional) benchmarking of COMPASS™ data would be beneficial to them or their program. All clinical coordinators
indicated that they believed external benchmarking would be very useful. This unanimous response represents a major shift in thinking by this group. At the beginning of the Project it was apparent from discussions and evaluations that many of the coordinators were unclear what benchmarking was and how it could assist development of learning and teaching methods. Moreover some coordinators had significant concerns about the ethical and strategic implications of benchmarking results. In contrast, below are some of the clinical coordinators’ descriptions at the end of this Project about how benchmarking will be beneficial to them or their program:

*It will ensure we are developing students with strong professional competencies.*

*Benchmarking may assist us in better planning for the future.*

*It will be interesting to see the difference and if there are things we can do differently.*

*Should have a spin off benefit for professional accreditation.*

*To assist in learning and teaching review and clinical education program quality improvement.*

Consequently this Project resulted in a substantial shift in university staff’s attitudes and knowledge about cross institutional benchmarking to the point that the majority of universities have committed to engaging in benchmarking.

In summary this Project was both rigorous and innovative in its approach and had a major impact on maximising the national adoption and effective integration of COMPASS™ within curricula and use of its data for benchmarking and research.

2. *Influence on student learning and student engagement*

Assessment drives student learning, so learning, teaching, and assessment are inextricably intertwined. This Project directly influenced the quality of work integrated student learning and engagement through the development of COMPASS™, a validated and authentic assessment process that assesses students’ performance in the real world speech pathology workplace.

COMPASS™ is founded on best practice assessment and learning principles. Students were directly engaged in its development through focus groups and participation in the research trial (McAllister, 2005). The COMPASS™ Assessment Tool and associated resources can be viewed on the Edna Website (See Supplementary Materials No.1). As COMPASS™ assessments are predominantly completed in the workplace by field clinical educators, students’ learning from the workplace placement and assessment are heavily influenced by the field clinical educators’ skills in conducting the assessment and providing both formative and summative feedback on competency development. Hence this Project’s outcomes with regards to training of field clinical educators are significant and important for student learning.

A key outcome of the Project was the informed adoption of COMPASS™ by field clinical educators. These professionals are workplace based speech pathologists who provide “real world” learning experiences for speech pathology students in hospitals, schools, community health centres and non government organisations. Field clinical educators also assess students’ competency and as such needed to be trained in educationally sound assessment practices using COMPASS™. Close to 1,000 speech pathology clinical educators received training from their local University by the end of the Project period. This extensive level of training is testimony to the success of the “train the trainer” approach adopted by the Team. In addition 4 universities partnered to provide education for rural clinical educators in two states.

The training presented in the first 8 workshops held by 8 of the 9 Australian universities was evaluated. These workshops involved 240 participants of whom 214 responded to the evaluation questionnaire (89% response rate). The Project manager provided specific written reports to each university on the evaluation outcomes and training needs, and these evaluations informed the
development of resource material and recommendations. The evaluation indicated that the training was well understood, most respondents demonstrated full or partial understanding and the ability to apply the main concepts (across the 8 workshops, range = 90-99.6%) and over 98% of respondents reported feeling capable of using the tool. At Project end, 33 speech pathologists who provide clinical education as a major part of their duties also responded to a questionnaire seeking feedback about the Project as a whole. There was a strong positive response for their perceptions of whether they understood the main concepts associated with COMPASS™. Qualitative feedback highlighted that they were finding the new tool easy to use and helpful in promoting students' learning. A complete list or resources that were developed during the Project to support student, clinical educator and academic learning can be found in the Supplementary Materials.

The Project also directly engaged students as part of the Project management structure, and also in evaluation of resources to assist educators to induct students into the use of COMPASS™. A lecture format and materials for students were developed and feedback from students was sought via questionnaire and contributed to a revision of these materials. A high proportion (99%) of students who received the revised version (N= 50 of 55) indicated full or partial understanding of the concepts and their application, with only a few not entirely sure about particular aspects of the tool. Also, students from three University programs with experience of other assessment tools were asked for feedback at the end of the Project period. A summary of the key results from this and the clinical educator version is illustrated in Figure 3.

![Figure 3](image)

Figure 3. Key results from questionnaires re understanding of COMPASS™ concepts - speech pathology clinical educators and students

Formal and informal evaluation of the outcomes of the Project have shown that both clinical educators and students are positive about the COMPASS™ training and the impact of COMPASS™ on students' work integrated learning.

3. Breadth of impact

The impact of the COMPASS™ Project is wide reaching, deep and long lasting; wide in the sense that outcomes have been achieved for speech pathology programs in Australia, New Zealand and Singapore. These outcomes will affect approximately 1,000 students per year who will set learning goals, receive formative and summative feedback and assessment results from COMPASS™. The national and international implementation of COMPASS™ will also facilitate interstate and international workplace placements for students, previously difficult to organise when each university used a unique clinical assessment tool. Project impact has been wide also with regard to
the dissemination of its findings (See Supplementary Materials No.4), strategies and resources across the higher education sector at 9 conferences and 6 seminars across 2006 to 2008. Informal and regular contacts have also been maintained with physiotherapy, pharmacy and nursing with regard to competency based assessment in the workplace, with this Project viewed as ‘leading the way’ (Megan Dalton (physiotherapist), personal communication, March 2008). The speech pathology discipline has also benefited from the reciprocal learning these types of contact yield.

The impact of this Project is deep in that it has profoundly influenced thinking in speech pathology education about how competency is developed and assessed through work integrated learning, and the reciprocal connections between university and workplace based learning. Not only do assessment tools shape the way students learn, but they also change the way educators design their curriculum and teaching practices. The Project provided the opportunity for academics to interact directly with the COMPASS™ designers, and also with each other in collaboratively exploring teaching and learning issues that were raised during the integration of COMPASS™ into curriculum. While COMPASS™ is well validated as adequately sampling and measuring authentic performance (McAllister, 2005), the Project supported university staff in understanding the appropriate use and interpretation of the data yielded. This ensured that any related adjustments to curriculum and teaching practices would increase the authenticity and relevance of teaching and learning, and prevent negative ‘washback’ (Shohamy, 2001) where the testing process results in inappropriate teaching and learning processes. In fact, the Project enabled university staff to engage in ‘deep’ learning regarding work integrated assessment and learning and the potential role of COMPASS™ rather than ‘surface’ learning that was likely to occur otherwise.

This Project has also had a significant impact on speech pathology students nationally. Students now have access to a high quality learning and assessment tool to support their work integrated learning. Students from all programs can be secure in the knowledge that upon graduation they will have met the national standards for clinical competency. Students can also be confident that they will receive a fair and valid assessment of their competency development. The outcomes of the Project also allow students to complete interstate and international clinical placements without risking receiving an invalid or unfair assessment result.

The impact of the Project has also been deep with regards to the maintenance of competency standards by SPAA. SPAA can now have confidence in universities’ abilities to accurately assess students’ competency levels at the point of graduation. The maintenance of standards by SPAA protects the general public from exposure to incompetent practice by speech pathologists in the workplace. This is important given that speech pathologists typically work with clients and patients who due to their communication difficulties are particularly vulnerable. From SPAA’s perspective, it was reported that the effective embedding of COMPASS™ as a result of the Project had greatly increased the efficiency of the Course Accreditation Process, as accreditors did not have to familiarise themselves with a range of different assessment processes. It was also reported that the effective use of the tool was proving useful in the Association’s ongoing mutual recognition negotiations with other professional associations internationally, since it allowed for clear statements as to national standards. The Project was also seen by SPAA to have greatly increased the rate and extent of uptake of the new tool, and so to have provided a fast return on their investment in publishing and providing COMPASS™ to Australian university programs. In addition, the Project has yielded a number of resources and findings that have been formally communicated and shared with SPAA with a view to maintaining the tool as a quality learning, teaching and assessment resource.

The impact of the Project will also be long lasting. The establishment of five collaborative research projects was supported by the Team over the life of the Project with three completed, and the remaining projects underway (See Supplementary Materials No.3). Speech pathology academics are
now familiar with COMPASS™ as a measurement tool, and the Project has developed a number of
resources that further elaborate on this aspect of the tool to sustain future research. The Project has
also positively influenced the design and development of COMPASS™ Online by SPAA through
the project manager’s consultative participation and facilitating access to university, field clinical
educators and students. This has resulted in immediate integration of learning from the Project, and
incorporation of fields to enable collection of data to support benchmarking activities in the future.
This will enable future development of automated benchmarking data collection and reporting and
thus increase and sustain participation in learning and teaching quality assurance activities.

The final outcome has been the formalizing of the learning community of speech pathology
educators established during the Project into an organisation named The Asia Pacific Education
Collaboration in Speech Language Pathology (APEC SLP). A chair and sub-committee leaders
volunteered to establish the APEC SLP structure, and membership currently consists of universities
from Singapore, Malaysia, New Zealand and Australia, with other universities in the Asia Pacific
region expressing interest. Work has already begun on progressing international benchmarking
using COMPASS™ and research collaborations. Additionally Heads of Speech Pathology Programs
nationally have committed to supporting staff participation in APEC SLP, and have in fact indicated
their wish to convene a subcommittee within this community of practice. The APEC SLP will foster
sustained activities to support work integrated learning, teaching and assessment and reciprocal
links between the university based and workplace based curriculum.

These outcomes illustrate the high positive impact that this Project has had on the speech pathology
academic community; indeed these outcomes have surpassed the initial expectations of the Project
Team and participants.

4. Concern for equity and diversity

Speech pathology programs have been accredited on the basis of demonstrating competency based
outcomes for their students since 1993. This outcome, rather than input, based approach has enabled
programs to adopt a wide range of strategies and approaches for enabling students to develop
sufficient competency to practice as speech pathologists. Program structures are quite diverse with
undergraduate and post graduate entry, and curriculum approaches ranging from traditional
approaches through to case based and problem based learning pedagogies, with varying types,
combinations and lengths of workplace experience. In addition many programs have developed a
specific focus such as preparation of rural and remote clinicians, primary health care or research
based practice. This diversity is highly valued by the community of practice and is believed to be
beneficial for the profession, students and users of speech pathology services.

In this context, the introduction of a national assessment tool was perceived by some as a potential
threat to this diversity. The Project was highly successful in openly and honestly addressing these
concerns and ensuring that COMPASS™ was used as a tool in service of diverse curriculum, rather
than as a prescriptive ‘one size fits all’ approach to assessment and learning. Consequently, all
universities were able to openly address and problem solve these concerns and remain actively
engaged in the Project. The Project evaluation found that COMPASS™ is being effectively
embedded into all university programs, regardless of size, location, and curriculum structure. The
Project has supported appropriate use of a valid and reliable work integrated competency
assessment and high quality learning support materials for all speech pathology students regardless
of the characteristics of the program they are enrolled in. This has supported the learning and
assessment of a diverse range of students and ensured equity of access to the COMPASS™
Assessment System. This diverse and flexible implementation of COMPASS™ is a significant
achievement of this program.
Similarly the learning resources developed as part of the Project (See Supplementary Materials No.2) will promote student success in achieving the required competency levels on work based placements. The resources assist clinical educators to promote student learning as well as students to self assess their competency levels and set appropriate learning goals.

Summary

The COMPASS™ Project has significantly influenced assessment, learning and teaching in speech pathology both nationally and internationally. It has markedly increased the capacity of speech pathology educators to identify and implement innovative educational approaches to work integrated learning. These outcomes have been achieved through partnership and collaboration with every speech pathology university program in Australia, New Zealand and Singapore, The Speech Pathology Association of Australia and the Australian Learning and Teaching Council.

References


*Competency Based Occupational Standards for Speech Pathologists - entry level (revised).* (2001.). Melbourne, VIC: Speech Pathology Australia.


