



XAVIER
UNIVERSITY *of* LOUISIANA

Department of Speech Pathology

**XAVIER UNIVERSITY SPEECH AND HEARING CENTER
GRADUATE STUDENT CLINIC HANDBOOK
2019-2020**

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Section I: Introduction

Dear Speech-Language Pathology Graduate Student,

Welcome to the graduate program in the Department of Speech Pathology in the Division of Biological & Public Health Sciences in the College of Arts and Sciences at Xavier University of Louisiana! The mission of the clinical education program in speech-language pathology is to produce well-rounded, competent clinicians who, by the completion of this program can work independently as clinical fellows in the field of speech-language pathology in any practice setting. The clinical faculty and I will be your guides throughout your clinical education experience. Additionally, the clinical manual will be a resource to help you achieve your clinical goals. We will refer to this manual throughout your time here. Over the course of the next two years, you will complete both academic and in-house clinical requirements, take comprehensive examinations or complete a thesis with a faculty member, and participate in externships outside the department. It will be an exciting two years, and you will be amazed at how much you know and can do by the time you leave here.

This handbook was developed to provide you with an ongoing resource to be used throughout your graduate studies. The information in this document is designed to facilitate a smooth transition from undergraduate to graduate clinical practicum, and to provide the clinical policies and procedures of this program. You will gain clinical knowledge and skills with client populations across the life span and from culturally and linguistically diverse populations. You will work with people who have various types and severities of communication and swallowing disorders, differences and disabilities. Our clinical faculty has a wealth of clinical expertise and experiences. We are excited to share this with you and support you in the clinical education process.

Please note that there may be additional costs associated with your program. Some clinical sites require special attire while others require additional background screenings or immunizations. These costs, as well as transportation to your clinical sites, are your responsibility.

The faculty and staff members in the Department of Speech Pathology are honored that you have chosen our program. We are dedicated to your success. We look forward to guiding you in developing your clinical and professional skills in speech-language pathology!

Best Wishes,

A handwritten signature in black ink, appearing to read 'C. Parker', with a long, sweeping horizontal line extending to the right.

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DEPARTMENT MISSION AND GOALS

The mission of the Master's Program in Speech/Language Pathology at Xavier University of Louisiana is to produce professionals who are clinically competent as defined by the American Speech-Language-Hearing Association (ASHA) to respectfully and compassionately address the needs (i.e., prevention, identification, treatment) of individuals across the life span with communicative disorders, differences or those who are at-risk of such problems within and across diverse communities, settings, and contexts.

The strategic plan has identified four focal areas each having a specific goal that relates to the mission of the program as well as its success.

These are:

- Student Recruitment and Retention – The Program will attract and retain a pool of high achieving post-baccalaureate students each year in order to become a premiere graduate program;
- Cultural and Linguistic Sensitivity – The Program will expose students to individuals from culturally and linguistically diverse communities during training so that its graduates will become competent in recognizing and addressing the unique needs of underserved populations;
- Oral and Written Language Competence – The Program will ensure that all students are competent speakers and writers of the English language as expected of speech and language professionals; and
- Research – The Program will utilize evidence-based practice (EBP) in its didactic coursework and in at least one clinical experience.

ACCREDITATION STATUS

The master's program in speech-language pathology at Xavier University of Louisiana is a Candidate for Accreditation by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700. Candidacy is a "preaccreditation" status with the CAA, awarded to developing or emerging programs for a maximum period of 5 years

ABOUT THE XAVIER UNIVERSITY SPEECH AND HEARING CLINIC

The Xavier University Speech and Hearing Clinic (XUSHC) in the Department of Speech Pathology at Xavier University of Louisiana is an educational and training facility for our undergraduate and graduate clinicians who are preparing to enter the profession of speech-language pathology. Our services are open to the public in order to provide clinical education to students enrolled in its Bachelor and Master of Science degree programs in Speech Pathology to provide clinical services to individuals with speech and language deficits assigned to this clinic and/or other clinical agencies during the matriculation through either program.

Student clinicians provide screenings, diagnostic evaluations, and therapeutic services to toddlers, children, adolescents, and adults with various disorders of speech, language, and hearing such as voice, articulation, fluency, language, cognitive and swallowing disorders, aural rehabilitation and related services. All diagnostic and therapy services are performed under the direct supervision of an instructional staff member or faculty member who holds the Certificate of Clinical Competence in Speech-Language Pathology or Audiology that is awarded by ASHA, and who is licensed by the Louisiana Board of Examiners for Speech-Language Pathology and Audiology.

GOALS AND OBJECTIVES

The Department of Speech Pathology's objective is to help students acquire the knowledge and skills of their discipline through in-depth academic content, sequential structured clinical education experiences, and learning assignments. The clinical education component is viewed as a dynamic process where students participate actively in learning to apply academic information to clinical practice while working with clients who have varied types of communication disorders. The goal is to prepare clinicians who demonstrate strengths in the following:

- The ability to analyze and synthesize information from a broad base of knowledge in communication science and disorders
- A problem-solving attitude of inquiry and decision-making using evidence-based practice

- Clinical competency in prevention, screening, evaluation, diagnosis, and treatment of patients with varied communication disorders
- The ability to communicate effectively and professionally
- Self-evaluation skills resulting in active steps to develop/refine clinical competencies & extend their knowledge base
- Ethical and responsible professional conduct
- Skills to work in interprofessional settings

The long term result of clinical education is to prepare students with a solid foundation to succeed in diverse educational, healthcare and rehabilitation environments

LOCATION AND CONTACT INFORMATION

The XUSHC is located at Xavier University of Louisiana's Xavier South campus in Suite 510.

Address:

Xavier University Speech and Hearing Clinic

909 S Jefferson Davis Pkwy

New Orleans, LA 70125

Phone: 504-520-5087

Fax: 504-520-7982

SERVICES OFFERED

Student clinicians provide screenings, diagnostic evaluations, and therapeutic services to toddlers, children, adolescents, and adults with various disorders of speech, language, and hearing such as voice, articulation, fluency, language, cognitive and swallowing disorders, aural rehabilitation and related services.

Services may address the following, but are not limited to those listed:

- Articulation and Phonological Disorders
- Acquired Neurogenic Communication Disorders

- Augmentative and Alternative Communication
- Aural Rehabilitation
- Autism
- Fluency Disorders
- Language Disabilities
- Language Enrichment
- Swallowing Disorders
- Traumatic Brain Injury
- Voice and Resonance Disorders

Section II: Clinical Program Overview

KNOWLEDGE AND SKILLS

Graduate students in Speech-Language Pathology (SLP) will be expected to meet all knowledge and skill competencies required for certification by the Council on Clinical Certification (CFCC) of the American Speech-Language-Hearing Association. The 2014 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology can be found at the ASHA website.

ESSENTIAL FUNCTIONS/TECHNICAL STANDARDS

Graduate students are required to review the below Essential Functions. These Essential Functions must be demonstrated, in addition to other academic and clinical requirements, to successfully complete the SLP graduate program.

Graduate degrees in Speech-Language Pathology from Xavier University of Louisiana signify that the holder will be able to satisfy the academic and clinical requirements for practice in the profession of Speech-Language Pathology. As such, graduate students enrolled in the master's program in Speech-Language Pathology are required to complete onsite and external clinical practicum experiences as well as didactic requirements. Graduate students must have the knowledge and skills to function in a broad variety of clinical, community, medical, and educational environments and to render a wide spectrum of speech-language pathology services. These skills enable a student to meet graduate and professional requirements as delineated by state licensure and national certification requirements. All students admitted to the SLP graduate degree program at Xavier University of Louisiana must meet the abilities and expectations outlined below.

In order to acquire the knowledge and skills requisite to the practice of speech-language pathology, individuals must possess skills and attributes in five primary areas:

Communication, motor, intellectual-cognitive, sensory-observational, and behavioral-social: The University will NOT discriminate against students with verifiable disabilities who are otherwise qualified, but will expect applicants and students to meet certain minimal technical standards (essential functions) as set forth herein with reasonable accommodation. In adopting these

standards, the program policy is that it must keep in mind the ultimate safety of the clients/patients served by its students and graduates. The standards reflect what the XULA SLP graduate program holds as reasonable expectations required of students and practitioners in performing the essential functions of the profession.

- *Communication*: Students must be able to communicate proficiently in all languages of service delivery. This means at minimum, students should be able to:
 - Communicate proficiently in both oral and written English. Prior to admission, international students must complete TOEFL-IBT (Test of English as a Foreign Language Internet Based Test) with an overall score of 79 or higher, and a total score of 26 or higher on the spoken English subtest of the TOEFLIBT. International students who do not have access to the TOEFL-IBT may take the TOEFL paper-or computer-based tests for admission into a graduate program; however, they must also take the Test of Spoken English (TSE) and pass with a score of 50 or higher.
 - Communicate professionally and intelligibly with clients, colleagues, other healthcare professionals, community or professional groups, and others.
 - Effectively, confidently, and sensitively converse with clients and their families. This includes the ability to modify communication style to meet the communication needs of clients, caregivers, and other persons served.
 - Possess reading and writing skills sufficient to meet curricular and clinical demands. This includes the ability to
 - Read course texts, journal articles, test manuals, clinical protocols, and client charts.
 - Write effectively, and legibly, completing client documentation, clinical reports, and scholarly papers and assignments required as a part of course work and professional practice.
- *Motor*: A student must possess adequate motor skills to:
 - Sustain necessary physical activity level in required classroom and clinical activities including participation in classroom and clinical activities for the defined workday.
 - Respond quickly to provide a safe environment for clients in emergency situations

including fire, choking, etc.

- Efficiently manipulate equipment (e.g., audiometers, computerized speech programs, etc.) treatment materials, and client- utilized medical equipment (e.g., hearing aids, AAC devices) within the testing and treatment environments, without violation of testing protocol and best therapeutic practice.
- Travel to numerous clinical sites for practical experience.
- *Intellectual/Cognitive:* A student must possess adequate intellectual and cognitive skills to:
 - Comprehend, retain, integrate, synthesize, infer, evaluate and apply written and verbal information sufficient to meet curricular and clinical demands.
 - Identify significant findings from history, evaluation, and data to formulate a diagnosis and develop a treatment plan and solve problems, reason, and make sound clinical judgments in patient assessment and treatment.
 - Evaluate, identify, and communicate limits of one's own knowledge and skills to appropriate professional level and identify and utilize resources in order to increase knowledge.
 - Utilize detailed written and verbal instruction in order to make unique and independent decisions, and demonstrate an understanding of the rationale and justification for one's performance.
 - Critically evaluate one's own performance and be flexibly able to change to promote professional and clinical process, accept appropriate suggestions and constructive criticism, and respond by modification of behaviors.
 - Manage the use of time to complete clinical and academic assignments within reasonable constraints.
 - Conduct oneself in an ethical and legal manner, uphold the ASHA Code of Ethics, patient privacy policies and comply with administrative, legal, and regulatory policies.
- *Sensory/Observational:* A student must possess adequate vision, hearing, and tactile senses to:
 - Visually and auditorily identify normal and disordered communication, including fluency, articulation, voice, resonance, respiration characteristics, oral and written

language in the areas of semantics, pragmatics, syntax, morphology and phonology, hearing and balance disorders, swallowing, cognition, and social interaction related to communication.

- Visualize, identify, and palpate anatomic structures such as the head, neck, and external ears.
 - Visualize and discriminate imaging findings, text, numbers, tables, and graphs associated with diagnostic instruments and tests.
 - Observe demonstrations and learn from experiences in the classroom, laboratory, and clinical situations.
 - Observe and respond to subtle cues of patient's moods, temperament, and social behavior, and nonverbal communication.
- *Behavioral/Social:* A student must possess adequate behavioral and social attributes to:
 - Display mature, empathetic, and effective professional relationships by exhibiting compassion, integrity, and concern for others.
 - Recognize and show respect for individuals with disabilities and for individuals of different ages, genders, race, religions, sexual orientation, and cultural and socioeconomic backgrounds.
 - Maintain general good physical and mental health and self-care in order not to jeopardize the health and safety of self and others in the academic and clinical setting.

The description above is intended to reflect the essential functions in a general manner. It is not all-inclusive, and is not a contract, expressed or implied. The description also attempts to describe functions in multiple contexts from the didactic experience to the fieldwork/externship experience. Keeping this in mind, the importance of some essential functions may increase or decrease depending on the context. The department will not discriminate on the basis of race, color, creed, national origin, ancestry, citizenship, gender, sexual orientation, religion, age, or disability. Any student who feels s/he may need academic accommodations or access accommodations based on the impact of a documented disability should contact and register with Office of Disability Services (ODS) during the first week of class. The ODS is the official office to assist students through the process of disability verification and coordination of appropriate and reasonable accommodations.

GRADUATE CLINICAL CURRICULUM

The academic and clinical curriculum of the Department of Speech-Language Pathology at Xavier University of Louisiana are designed to guide the student to achieve the knowledge and skills required for independent practice as a speech-language pathologist (SLP), and to meet all standards for certification set out by the Council on Clinical Certification of the American Speech-Language-Hearing Association (ASHA). This is accomplished through a carefully designed series of courses and clinical practica that enable the student to develop the critical analysis skills to evaluate the best available evidence to support practice decisions, balanced with content and courses that emphasize both the scientific and humanistic aspects of the lives of their future clients.

SUPERVISION

Course work in communication sciences and disorders and research design is combined with a minimum of at least 375 clock hours of hands-on clinical practicum experience and 25 hours of observation time. All clinical practica and observation hours will be supervised by individuals holding ASHA Certificate of Clinical Competence (CCC) and current state licensure, as required. Students in clinical practicum will be provided with a minimum of 25% percent of direct supervision per client, with the exact amount of supervision commensurate with the skill level of the student clinician. The nature and amount of clinical supervision will be adjusted to the experience and ability of the student. As a student progresses through the clinical levels, the expectations for independent clinical activity will increase. Additionally, students will be expected to have a broader base of knowledge to apply to the clinical setting, and to implement clinical strategies more independently, efficiently and effectively as they progress through the clinical program.

The following scale for supervision will be used.

- 100% Supervision: Direct 1:1 Supervision for the entirety of the session, including significant assistance with selecting and administering standardized tests, lesson planning and implementation, and documentation and record keeping.
- 75% Supervision: Supervision is provided for 75% of the session's duration, including moderate assistance with selecting and administering standardized tests, lesson planning

and implementation, and documentation and record keeping.

- **50% Supervision:** Supervision is provided for 50% of the session's duration, including minimal assistance with selecting and administering standardized tests, lesson planning and implementation, and documentation and record keeping.
- **25% Supervision:** Supervision is provided for 25% of the session's duration; the student is able to select and administer standardized tests, complete lesson planning and implementation, and complete documentation and record keeping nearly independently with only occasional input or review required from the clinical CE. This is the minimum amount of supervision to be provided.

In the case where the client's payer source (i.e. Medicare, Medicaid, or Private Insurance) or the policies of the clinical site requires a greater amount of supervision by the licensed clinician per regulatory guidelines, the greater amount of supervision required will prevail.

CLINICAL SETTINGS/SITES

The clinical education program is designed to give students multiple opportunities for practicum in various clinical settings in the community. Clinical practica are provided each semester throughout the program and offer opportunities for students to integrate and apply academic learning at progressively higher levels of performance and independence. Clinical sites include public schools, hospitals, rehabilitation centers, skilled nursing facilities, specialty private schools, private practice, early intervention programs and other clinical sites serving individuals with speech-language needs.

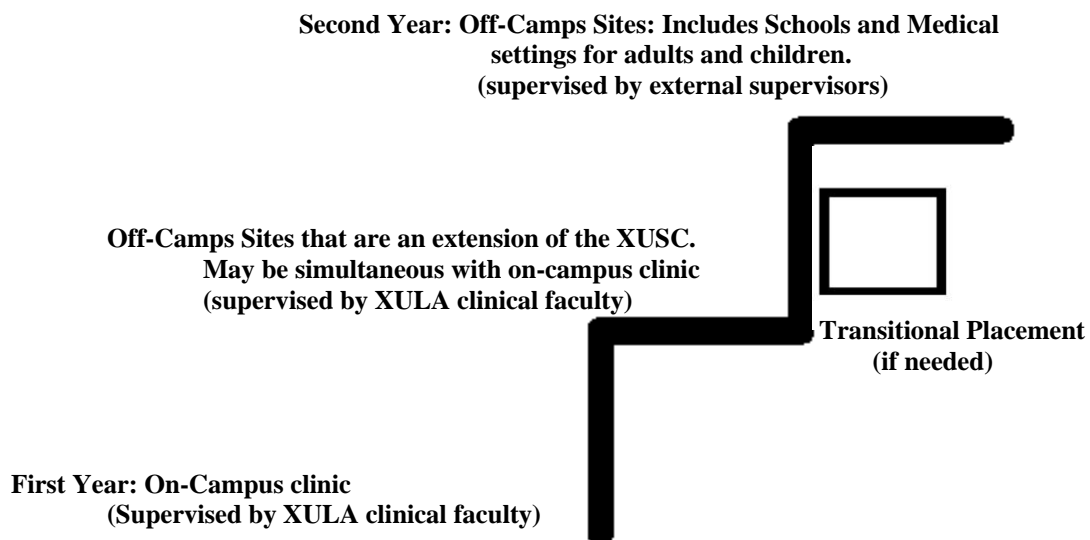
According to the 2014 Standards for the Certificate of Clinical Competence in Speech-Language Pathology

- ***Standard V-C:*** The applicant for certification in speech-language pathology must complete a minimum of 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Twenty-five hours must be spent in clinical observation, and 375 hours must be spent in direct client/patient contact.
- ***Standard V-D:*** At least 325 of the 400 clock hours must be completed while the applicant is engaged in graduate study in a program accredited in speech-language pathology by the Council on Academic Accreditation in Audiology and Speech-Language Pathology.

In 2016, the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) made a revision to the [2014 Standards for the Certificate of Clinical Competence in Speech-Language Pathology](#) to include the use of clinical simulation (CS) as part of Standard V-B. The CFCC gave programs accredited by the Council for Academic Accreditation in Audiology and Speech-Language Pathology (CAA) the option of obtaining up to 75 hours of direct clinical contact through the use of CS, which allows students to obtain a sufficient variety of supervised clinical experiences in different work settings, with different populations, regardless of geographic location. The use of CS is optional; it is another tool available to students to develop clinical knowledge and skills. Only the time spent in active engagement with the CS may be counted. CS may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). Debriefing activities may not be included.

Students will be expected to adhere to the rules and regulations regarding clinical services that ensure the welfare of clients served at the site, including ethical practice and compliance with state and federal regulations.

TYPICAL CLINICAL PROGRESSION



Section III: Departmental Clinical Education Policies and Procedures

CLINICAL PRE-REQUISITES

HEALTH AND IMMUNIZATION REQUIREMENTS

The following requirements are to be completed prior to the initiation of any clinical practicum. Proof of completion of the requirements designated by an asterisk (*) must be completed prior to clinical orientation. The remaining trainings will be completed before or during clinical orientation. The cost of all immunizations, proof of immunity (titers), and required trainings not provided by XULA staff will be the responsibility of the student.

REQUIREMENTS

- ***Yearly physical exam** by healthcare provider documenting the student is physically and mentally able to participate in practicum.
- **Titers and Immunizations:** All students are required to get titers – please note that this is different from vaccinations as a titer verifies immunity to particular diseases. If results of any titers are non-immune, documentation of an additional series of vaccinations are required.
 - ***Measles (Rubeola):** There must be documentation of a positive antibody titer for Measles (Rubeola).
 - ***Mumps:** There must be documentation of a positive antibody titer for Mumps.
 - ***Rubella:** There must be documentation of a positive antibody titer for Rubella.
 - ***Hepatitis B:** There must be documentation of a positive antibody titer or signed declaration declining the vaccine.
 - ***Varicella (Chicken Pox):** There must be documentation of one of the following:
 - 2 vaccinations
 - Positive antibody titer (lab report or physician certification required)
 - Medically documented history of disease
 - ***TB Skin Test:** There must be documentation of one of the following within the past year:
 - 2 step TB Skin test (PPD)
 - If positive results, provide a clear Chest X-Ray (lab report required).
 - Following the initial 2 step PPD, a one-step PPD Skin Test must be completed yearly.
 - ***Tetanus:** There must be documentation of a Tetanus vaccination within the past 10 years.

- **Flu vaccine:** There must be documentation of flu vaccination provided yearly no later than November 1, or signed waiver. *Be advised that some fieldwork sites require Flu Vaccination and do not accept the waiver; therefore, if you waive the flu vaccination for any reason, this may eliminate clinical opportunities at particular fieldwork sites.*

If any of the listed vaccinations, titers or screenings are deemed to be medically contraindicated by a health care provider, documentation of contraindication by the provider must be given to the Director of Clinical Education (DCE) before the start of the program.

OBSERVATION HOURS

Log of Observation Hours – According to the 2014 Standards for the Certificate of Clinical Competence in Speech-Language Pathology in Standard V-C: Twenty-five hours must be spent in clinical observation.

Observation hours must be signed by a licensed and certified speech pathologist or audiologist. Verification of observation hours from your undergraduate program is acceptable.

REQUIRED TRAININGS, BACKGROUND CHECKS, AND CERTIFICATIONS

The following are additional trainings, background checks and certifications that are required as part of participation in the clinical education program.

- Fingerprinting/Criminal Background Check completed by the State Of Louisiana
- HIPAA Training via Collaborative Institute Training Initiative (CITI) that can be found at www.citiprogram.org
- Valid CPR/AED/First Aid for healthcare providers certification from American Red Cross or American Heart Association
- All students will show proof of identification and evidence of valid health insurance as required by the university.
- Every student must provide documentation of professional liability insurance at the beginning of each academic year *before* the student is allowed to start practicum. Insurance coverage is generally issued for periods of one year and must be kept current. Students must maintain coverage of at least \$100,000 per incident and \$300,000 aggregate. Liability insurance may be obtained from any insurance agency.

Be advised that some outside clinical sites may have additional immunization and/or training requirements. You will be informed of these requirements by the practicum site and/or DCE upon application to those clinical sites.

If a student fails to complete any component of the immunization, titers, background check and training requirements, or an immunization or other required item has lapsed, he/she will not be allowed to complete clinical practicum until the missing or lapsed component is completed. As a result, the student may receive a failing grade for that practicum sequence, which may result in the need for clinical practicum to be repeated, extension of the student's graduate program, and/or dismissal from the graduate program.

ELECTRONIC CLINICAL EDUCATION PORTFOLIO

The SLP program requires students to document their progress toward completion of the graduate degree and professional credentialing requirements and makes this information available to assist students in qualifying for certification and licensure through the CALIPSO electronic platform. All incoming students will be required to set up an electronic portfolio through CALIPSO. A one-time student license fee is required to be paid by each student directly to CALIPSO. Training for use of CALIPSO will be scheduled during Clinical Orientation.

The following student information will be tracked through CALIPSO:

- Progress toward Knowledge and Skills required for Certificate of Clinical Competence
- Clinical competencies
 - Clinical midterm and final evaluations
 - Clock hours
 - Client populations
 - Clinical settings
- Clinical Site Information
- Clinical Practicum Student/Clinical Educator Agreements
- Supervisor Feedback

POLICIES AND PROCEDURES

CLINICIAN ATTENDANCE POLICY

Attendance at clinics is mandatory. Tardiness will not be tolerated. The only acceptable reasons for missing clinic are a death or crisis in the immediate family, documented illness (requires physician note if 3 days or more), active military duty or jury duty, or religious holy days. All other absences (weddings, family reunions, vacations, etc.) will be considered unexcused. One unexcused absence will be allowed each semester. More than one unexcused absence will result in a reduction in the practicum course grade. Multiple absences may result in termination of the placement. If for any reason you cannot attend a clinic, notify your supervisor as soon as possible, both by email and by phone. You should also notify the DCE, Dr. Celeste R. Parker, (crparker@xula.edu) of your absence by email and CC the clinical secretary.

PROFESSIONALISM/TIMELINESS

Each student clinician is to be present and completely set up for screenings, diagnostic evaluations and therapy sessions at least 15 minutes before the scheduled appointment time unless otherwise authorized by the supervisor. If you choose your own transportation for off-campus sites, you must be on-site at the time the supervisor says. Clinicians must contact the supervisor if they are going to be late for clinic. Tardiness will have a negative impact on the clinician's grade.

TRANSPORTATION AND ARRIVAL TO CLINICAL PRACTICA

All students are responsible for arranging their own transportation to and from their clinical site and understand that they do so at their own risk. Transportation expenses (e.g., fuel, parking, etc.) are the responsibility of the student and should be taken into consideration by the student when accepting a clinical assignment. All students are to arrive on time for clinical assignments. In many situations, this may mean arrival at least 30 minutes or more before you are scheduled to see a client to allow for preparation, planning, and any scheduled meetings. Allow adequate time for travel for the possibilities of getting lost, parking, and traffic. If a student experiences

difficulty arriving at and departing from clinical sites on a timely basis, the result may be academic warning, probation, or dismissal. Graduate students may need to travel up to 90 minutes for clinical placements. It is expected that you arrive earlier and/or stay later to fulfill your clinical responsibilities such as session planning and documentation.

CONFIDENTIALITY

Students are required to follow departmental policies and Health Insurance Portability and Accountability Act (HIPAA) of 1996 policies regarding confidentiality. The requirements of HIPAA apply to the use, storage and/or electronic transmission of patient related information, and are intended to ensure patient confidentiality for all health care related information. Students must complete HIPAA training designated by the XULA SLP program in order to initiate clinical assignments.

1. All information concerning clients is confidential.
2. Clients may be discussed with supervisors, SPTH faculty members, and SPTH students only when such discussions serve a clinical or educational purpose.
3. Clients are not to be identified or discussed with friends, roommates, or any other person outside of the clinic.
4. Extreme care should be taken when having conversations in the Clinic facility as clients and families are likely to be within hearing distance. Please follow confidentiality guidelines.
5. Information in the client's chart(s)/file(s) may never be taken from the designated/appropriate areas or left unattended.
6. Materials from a client's folder MAY NOT BE PHOTOCOPIED or captured using a smart phone or tablet.
7. Written drafts of reports and other client information must be destroyed. Take these items to the shredder or give to the clinic secretary for proper disposal.
8. Student clinicians are not to exchange information regarding clients with other agencies without permission from the supervisor, clinic coordinator, and without obtaining a signed release form from the client/guardian.
9. At no time should student clinicians be engaging in speech/language-related discussions about and/or regarding clients outside of the Clinic facility. Nor should

suggestions/materials be provided to the client or family unless done so under the direction of the supervisor during the time therapy services are being provided at the Clinic.

10. At no time, should a student clinician contact a client without prior approval from the clinic coordinator.

MATURITY

Because students will be working with people from the community, a certain level of maturity must be maintained and students are encouraged to think of solutions to problems as they arise and handle all situations in a mature, professional manner.

ATTITUDE

Each student is expected to exhibit a positive, cheerful attitude around supervisor, clients, and clients' family members. Students are expected to accept directions and positive criticism from their supervisors in a mature manner. Supervisors may come into therapy/diagnostic sessions at any time.

DRESS CODE

The following guidelines must be adhered to for both on and off-campus screenings, diagnostic, and therapy sessions. Student clinicians are expected to be groomed and dressed in a professional manner when they are providing clinical services regardless of whether the services are provided in the Clinic or at any external clinical site. Clothing must be neat, clean and appropriate for a particular site. The dress code is expected to be observed by all students present in the clinic on clinical practicum days. Males are expected to wear clinical shirts and khaki pants or professional dress slacks. Females are expected to wear clinical polo shirts and khaki pants or professional dress slacks or skirts. Violation of the dress will have a negative impact on the clinician's grade. You will be asked to leave the clinic premises and will receive a grade of "F"

for the day if you fail to comply with the dress code.

The following items are not allowed during observations or clinical practicum and will result in immediate removal of the student from the site:

- Blue jeans, overalls, pants with low waist bands, shorts; capris or cropped pants must extend to mid-calf
- Mini-skirts; skirts must be knee-length or longer – any skirts that fall more than 2 inches above the knee are unacceptable.
- Sweats and workout/athletic clothing of any kind
- Spandex or other tight fitting clothing. Leggings are acceptable only under a dress, skirt, or tunic-length top
- Midriff shirts, tank tops, low cut shirts, halter tops without appropriate article of clothing that covers the shoulders
- Flip flops and extremely high heels higher than 2 inches. Open-toed shoes are acceptable in school-based settings only.
- Visible undergarments
- Ripped or torn clothing
- Hats (except for religious or medical reasons)
- T-shirts with large brand names or messages (regardless of meanings)
- Visible piercings other than ears
- Large, dangling jewelry that could be caught on equipment, grabbed by a client, or potentially injure a client
- Tattoos must be covered
- Perfume/cologne due to possible allergic reactions and sensitivity of clients
- Artificial nails or nails that extend more than ¼ inch past the fingertip
- Chewing gum is not allowed
- No food is allowed unless it is a part of a therapeutic activity

Should a student be unsure about his/her attire, he/she should check with the Director of Clinical Education and/or clinical supervisor prior to entering the clinic area for treatment or diagnostics. Note that the dress code should be followed in all clinical settings, including the clinic waiting room.

If a practicum site has a particular dress code for SLP Staff (for example, Gray Scrubs, Khaki Pants and Blue Polo Shirts, Lab Coats, etc.), the graduate student clinician must abide by these regulations, including purchasing appropriate attire at his/her own expense.

E-MAIL ETIQUETTE

Professional courtesy and professional behaviors are expected of students in the classroom, in fieldwork and site visits, and in online communications. In the online learning environment, you are not face-to-face with classmates and instructors and your primary method of communication will be e-mail or online discussion boards. The relationships between students, the department of speech pathology, and external clinical sites and their clinical educators (CEs) are vital for success of the program. It is of utmost importance that any communication between you and external sites demonstrate the highest degree of professionalism. All email correspondence should contain an appropriate and professional salutation, well-written and grammatically correct body, respectful closing, and your full signature.

Please check XULA email at least twice daily and check Blackboard daily for announcements, deadline reminders, and new course materials. **All program correspondence must occur through your dedicated XULA email account;** messages received from external accounts (such as Yahoo, Gmail, etc.) will not be returned. Clinical faculty members will respond to emails within 24 hours with the exception of weekends. Keep in mind that the clinical faculty members are frequently providing supervision to your colleagues, and may not be available to return emails for large portions of the day. Unless your issue is truly emergent, please allow a full 24 hours for your recipient to respond via email before sending another email or attempting to contact another faculty member about your issue. In the case of truly emergent matters, please contact a full-time member of the clinical faculty via their office phone and leave a voice mail if there is no answer.

RECORDING AND OBSERVATION POLICY

XUSHC has five (5) treatment rooms, each equipped with observation windows. Videotaping (assessment and treatment) for the purpose of further evaluation of performance, and to provide the student feedback on his/her clinical skills is permitted. Students must discuss video recording options with clinical supervisor prior to implementation. All clients should sign a release form before clinical work is initiated. It is courteous to inform the client that video recording will occur before each session is started.

Video recordings and audiotapes/digital files of clients are kept with the client's file and are checked out as needed. Students should review tapes in the Student Workroom or in a clinical supervisor's office. At the end of the semester, the tapes will be filed for reference or erased for re-use.

Prior to video recording any Clinic activity, a Video Release form must be signed by the client or parent and placed in the client's file. If the client or parent refused to sign this form, it should be noted on the form and placed in the client's file. The Clinic Secretary should be made aware that the form was not signed. Also, if the client/parent has expressed that no one other than the Clinical Supervisor can observe the session, this should be noted in the client's file and indicated in the therapy room by placing a note on your therapy room observation window.

Students who are observing therapy sessions must adhere to confidentiality and professional behavior standards at all times. Failure to do so will constitute dismissal from practicum. While observing using the observation windows, talking, laughing, and other loud noises must be avoided to prevent clients from hearing activity in the observation suites.

Students observing in the XUSHC are required to maintain the dress code of the program, act professionally and maintain confidentiality.

POLICY FOR STUDENT GRIEVANCES WITHIN CLINICAL EDUCATION

In some cases, a student may disagree with a faculty member or CE to the extent that the situation warrants communication and action to reach an optimal resolution. The following

policies and procedures have been established to guide the students and clinical faculty members:

1. Students are encouraged to meet with the specific clinical faculty member who is directly involved in the situation. Both parties will discuss the concern and attempt to come to an agreement of the appropriate way to handle the situation. The student and/or clinical faculty member may invite the DCE to this meeting.
2. If the issues are not able to be resolved at this level, the student should meet with the DCE to share the concerns. The DCE and the student can then discuss the situation and attempt to come to an agreement of the appropriate way to resolve the situation.
3. In situations that are not resolved satisfactorily following the meeting with the DCE, a student may meet with the Chair of the Department of Speech Pathology.

Students have the option to appeal any decisions made by the Director and/or faculty of the Department of Speech Pathology by following the Appeals Procedures outlined in the Student Manual.

COUNCIL ON ACADEMIC ACCREDITATION IN AUDIOLOGY AND SPEECH-LANGUAGE PATHOLOGY (CAA) POLICES

COMPLAINTS

A. Complaints Against Graduate Education Programs

A complaint about any accredited program or program in candidacy status may be submitted by any individual(s).

Criteria for Complaints

Complaints about programs must meet all of the following criteria:

- a. be against an accredited graduate education program or program in candidacy status in audiology or speech-language pathology;
- b. relate to the [Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology](#) [PDF] in effect at the time that the conduct for the complaint occurred , including the relationship of the complaint to the accreditation standards;
- c. be clearly described, including the specific nature of the charge and the data to support the charge;
- d. be within the timelines specified below:
 - if the complaint is being filed by a graduate or former student, or a former faculty or staff member, the complaint must be filed within one year of separation* from the program, even if the conduct occurred more than 4 years prior to the date of filing the complaint;
 - if the complaint is being filed by a current student or faculty member, the complaint must be filed as soon as possible, but no longer than 4 years after the date the conduct occurred;
 - if the complaint is being filed by other complainants, the conduct must have occurred at least in part within 4 years prior to the date the complaint is filed.

**Note: For graduates, former students, or former faculty or staff filing a complaint, the date of separation should be the date on which the individual was no longer considered a student in or employee of the graduate program (i.e., graduation, resignation, official*

notice of withdrawal or termination), and after any institutional grievance or other review processes have been concluded.

Complaints also must meet the following submission requirements:

- a. include verification, if the complaint is from a student or faculty/instructional staff member, that the complainant exhausted all pertinent institutional grievance and review mechanisms before submitting a complaint to the CAA;
- b. include the complainant's name, address, and telephone contact information and the complainant's relationship to the program in order for the Accreditation Office staff to verify the source of the information;
- c. be submitted using the CAA's [complaint form](#) [DOC]
- d. must be complete at the time of submission, including the complaint and all appendices;
- e. append documented evidence in support of the complaint, including as appropriate relevant policies/procedures, relevant correspondence (including email), timelines of referenced events, etc. Complainants should not enclose entire documents; only the specific pages should be included that present content germane to the complaint. Page numbers to these appendices should be referenced in the complaint. Materials may be returned to the complainant if not properly organized to support the complaint.
- f. must submit all complaints and supporting evidence in English, consistent with the business practices of the CAA;
- g. be signed and submitted in writing via U.S. mail, overnight courier, or hand delivery—not via email or as a facsimile—to:

Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology

American Speech-Language-Hearing Association

2200 Research Boulevard, #310 Rockville, MD 20850

The complainant's burden of proof is a preponderance, or greater weight, of the evidence. These procedures do not prevent the CAA from considering a complaint against an accredited or candidate program if the program is involved in litigation or other actions

by a third party.

B. Complaints Against the Council on Academic Accreditation

Complaints against the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) may be filed by any individual(s).

Criteria for Complaints

Complaints against the CAA must meet the following criteria:

- relate to the content or the application of the [Standards for Accreditation of Entry-Level Graduate Education Programs in Audiology and Speech-Language Pathology](#) [PDF], or the policies, procedures, and operations that were in use by the CAA at the time the conduct being complained about occurred;
- be clearly described, including the specific nature of the charge and the documentation to support the charge;
- must be filed within 1 year of the date the conduct being complained about occurred

Complaints also must meet the following submission requirements:

- include the complainant's name, address, and telephone contact information in order for the Accreditation Office staff to verify the source of the information;
- must be complete at the time of submission, including the complaint and all appendices;
- append documented evidence in support of the complaint, including as appropriate relevant policies/procedures, relevant correspondence (including email), timelines of referenced events, etc. Complainants should not enclose entire documents; only the specific pages should be included that present content germane to the complaint. Page numbers to these appendices should be referenced in the complaint. Materials may be returned to the complainant if not properly organized to support the complaint.
- submit all complaints and supporting evidence in English, consistent with the business practices of the CAA;
- be signed and submitted in writing via U.S. mail, overnight courier, or hand delivery— complaints will not be accepted via e-mail or as a facsimile— to the

following address:

Vice Presidents for Academic Affairs

American Speech-Language-Hearing Association

2200 Research Boulevard, #310

Rockville, MD 20850

The complainant's burden of proof is a preponderance or greater weight of the evidence.

XAVIER UNIVERSITY OF LOUISIANA POLICIES
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STUDENTS WITH DISABILITIES

The Department of Speech Pathology at Xavier University of Louisiana is committed to its moral, educational and legal responsibilities with the Americans with Disabilities Act and Section 504 of the Rehabilitation Act of 1973. If you have a disability or believe you may have a disability, the faculty will work with you, upon your disclosure, to establish appropriate and reasonable accommodations.

The **Office of Disability Services (ODS)** provides support and assistance to students with medical, physical, emotional and/or learning disabilities, especially those experiencing problems in such areas as academic program, and adjustment to the college experience and campus environment. Among the services provided, are those related to accessibility of campus facilities, individual counseling, reasonable classroom accommodations, advocacy for student needs, referral to appropriate governmental and community agencies. Students requiring special assistance or consideration in order to meet program or degree requirements should advise their dean's office of the nature of their disability as soon as they have been admitted or the need for assistance is known to exist. Students should also contact the ODS to arrange access to services available. Office of Disability Services (ODS) is located in St. Joseph Academic/ Health Resource Center, Bldg. 13, 2nd floor, Counseling and Wellness Center. If there are any questions about the process, call the Office of Disability Services at (504) 520-7315.

All information provided by students is strictly confidential and will not be released without the written consent of the student. Xavier University of Louisiana's Department of Speech Pathology faculty/staff do not disclose a student's declared disability status or need for accommodations to fieldwork CEs or any other entity without your written permission. All students who wish accommodations at practicum sites or for taking the Praxis examinations are responsible for disclosing their disability status and needs for accommodations directly to the on-campus and/or off-campus practicum CE and/or instructor. Students may enlist the assistance and support of the ODS or faculty in this process.

REPORTING A STUDENT CONCERN / FILING A FORMAL COMPLAINT

Complaints/Grievances

Students with general complaints are urged to resolve the concern informally by discussing with the party identified as causing or contributing to the grievance (student, faculty member, administrator, staff, other) or their supervisor. If the student is unable to resolve the matter at the informal level, a written complaint may be filed with any University administrator (e.g., Department Chairs or Hall Directors) within 10 working days of the alleged incident. That party will then forward the written complaint to the administrative officer (1) responsible for the area of the complaint, or (2) who is the immediate supervisor of the person about whom the complaint is being filed. The appropriate administrative officer will meet with the complainant and attempt to resolve the complaint within a reasonable time. If the resolution is not satisfactory to the complainant, the complainant may appeal the decision to the next highest administrative level. The office of the appropriate Vice President is the highest level to which appeals may be made, and the decision of that office is final. The current policy for non-academic complaints and grievances is available in its entirety online at <http://www.xula.edu/student-handbook> and in the Policy Statement section of this handbook.

Complaints Alleging Sexual Harassment or Discrimination

It is the policy of XULA that harassment or discrimination of any form is prohibited and will not be tolerated. Each student, faculty and staff member has a responsibility to maintain a collegial environment that is free of any form of harassment or discrimination. For more information, please contact the Dean of Students at 504-520-7357 or Director of Human Resources, at 504-520-7537.

Please visit <http://www.xula.edu/student-life/reporting/index.html> for additional information

(MISUSE OF) SOCIAL MEDIA

Posting misleading or derogatory information about the University, students, faculty, staff or administrators that is considered to be illegal, abusive, unethical, or defamatory in nature will be considered in violation of the Student Code of Conduct and will be grounds for disciplinary action, up to and including, dismissal from the university. Additionally, students posting personal

content exhibiting attitudes and/or behaviors that are not consistent with the high expectations (sexually explicit, substance use/abuse, unethical, dishonest, etc.) are also at risk of disciplinary action. This also extends to taunting or making sexual slurs about a person's gender orientation or sexual status; name-calling, joking, or making offensive remarks about a person's religion, gender, ethnicity, or socioeconomic status.

CODE OF CONDUCT

The authority over student behavior, academic and non-academic, rests with the Vice President of the respective division of the University. The Vice President for Academic Affairs delegates authority over academic behavior to the Dean of the college or school. In all other areas, whether on or off campus, the Vice President for Student Services delegates authority in matters of conduct to the Associate Vice President/ Dean of Students and the Student Conduct system of the University. The Vice President for Student Services is responsible for formulating appropriate procedures and regulations concerning student behavior and for the conduct consideration of violations.

The Student Code of Conduct applies to all students enrolled at Xavier University and incidents occurring on campus and in most situations off the campus, if an infraction involves a student or a student organization that has an affiliation with the University. If an enrolled student is charged with a violation of the Code, he/she may have to resolve the charge(s) before registering for a subsequent term or receiving a transcript or diploma. If a student is granted withdrawal from the University, including a retroactive one, he/she may still be required to resolve the charge(s) arising from an alleged violation of the Code while enrolled. Incidents and events that violate this Code and that involve Xavier University students or organizations occurring at institutions part of a Xavier University consortium are subject to Xavier University student conduct action.

Please refer to the Statement on Student Rights and Responsibilities that appears in the beginning of this Handbook [page 9 of the Xavier University of Louisiana Student Handbook, http://www.xula.edu/student-handbook/documents/Student%20Handbook_1617.pdf]. These guidelines cannot specify every circumstance, but define the practices necessary for an orderly educational environment and are subject to change without notification.

Section IV: Implementation of Clinical Practicum

PRACTICUM EXPERIENCES

Each student will participate in four (4) practicum experiences and a full-time clinical externship as detailed in the curriculum. Clinical experiences will be assigned by the Director of Clinical Education. Students may not contact practicum sites, prior to assignment, without the permission of the DCE. You will be on-site between 10 and 20 hours a week, depending on the semester. Transportation to and from clinical sites is the responsibility of the student.

Students will participate in at least one pediatric and one adult setting during their course of study in order to obtain clinical experience across the life-span. The last semester will be a fulltime clinical experience of the student's preference pending site availability. Thesis students will be assigned to a part-time practicum during their last semester.

CLINIC POPULATIONS

Graduate students will have practicum experience with client populations across the life span and from culturally and linguistically diverse populations, in addition to populations with various types and severities of communication disorders, differences and disabilities, including articulation, fluency, voice and resonance, receptive and expressive language, hearing, swallowing, cognitive and social aspects of communication, and augmentative/alternative modalities of communication. (Standard IVF)

SELECTION OF PRACTICUM SITES

The DCE is responsible for assigning students to clinical sites in an effort to ensure that all students are placed in an appropriate setting and have the opportunity to meet the skill competencies required for the Certificate of Clinical Competence. Students may not contact sites and arrange their own practicum; however, a student may speak with their advisor regarding interest in particular sites. An attempt will be made to consider the student's clinical interests when planning the semester practicum, however, the clinical faculty reserves the right to assign the student to any appropriate practicum site pending availability, clinical hour requirements, and clinical performance needs. There are no guarantees for any clinical site.

The SLP program maintains a relationship with a large variety of external sites for clinical practicum. Due to competitiveness of placing students at clinical sites, graduate students may

need to travel up to 90 minutes for clinical placements. Although your location of residence may be considered when assigning placements, we cannot guarantee placements based on proximity to your home. The DCE will make a list of currently available clinical sites accessible to students so that they may review them if requested. Reviews will also contain student feedback and information forms provided by previous students who were placed at a particular site. If a particular site does not currently have a contract with XULA SLP, but a student is interested in completing a practicum there, the student may submit a request to the DCE that a contract be established for the possibility of eventual student placement. This request must be placed at least six months in advance of the proposed placement in order to allow for contact with the site, legal review, and execution of the agreement. In cases where the clinical site has an application and interview process for students, the clinical faculty will alert the student of the interview process.

EXTERNSHIP GUIDELINES

Graduate Students complete one or two externship placements to fulfill requirements for certification during the spring semester of the second year of the Speech Pathology graduate program. Following are the expectations and guidelines for the externship placements.

General Rules for Externships

1. Externship obligations can include the following:
 - A. Single-site placement: provides about 35-40 hours of workplace experience per week over one 14-week or three-month placement.
 - B. Two-site placement: provides about 35-40 hours of workplace experience per week over seven weeks or one and a half months in one site and the same in the second site.
 - ❖ Student externs should be able to accomplish all obligations related to the externship requirements during regular work hours including such tasks as:
 - Patient contact: evaluations, interventions, communications, chart reviews
 - Collaboration: extern supervisors, families, professionals, staffings
 - Paperwork: lesson plans, progress notes, reports, billing
 - Preparation: supplies, materials, equipment
 - Reading: texts,

journals, manuals

- Research: assignments, projects, presentations, in-services
2. Student externs may agree to work more than 35-40 hours, but should not be required to do so. If concerns regarding excessive overtime arise, contact the University Clinical Director.
 3. Student externs will begin externship placements as stipulated by the Externship contract. Commencement and completion dates may be modified to accommodate scheduling or to earn additional clock hours if agreed to by all parties concerned. In some cases externships may be arranged in the summer or fall semester.
 4. Student externs may obtain all of their hours on-site or may obtain some of their hours off-site. For example, a student may go with their supervisor to a client's home.
 5. Student externs are expected to follow the schedule of the externship site and extern supervisor as opposed to the University schedule.
 6. ASHA and XULA require that supervision be provided by an individual who holds current ASHA CCC and Louisiana Board of Examiners for Speech-Language Pathology and Audiology licensure. Direct supervision must be in real time and must never be less than 25% of the student extern's total contact with each client/patient and must take place periodically throughout the externship. An extern supervisor who holds a current certification and licensure must be on-site and readily available to consult with the student extern at all times.

CLOCK HOURS

Graduate students must complete a minimum of 400 clock hours of supervised clinical experience in the practice of speech-language pathology. Twenty-five hours must be spent in clinical observation, and 375 hours must be spent in direct client/patient contact. A minimum of 325 hours of direct client/patient contact must be obtained at the graduate level. The Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) defines 1 clinical practicum hour as equal to 60 minutes. When counting clinical practicum hours for purposes of ASHA certification, experiences/sessions that total less than 60 minutes (e.g., 45 minutes or 50 minutes) cannot be rounded up to count as 1 hour.

Clock hours can be obtained only for the time during which the student clinician is providing direct evaluation or treatment services for clients who present communication disorders or with the client's family. Only direct contact with the client or the client's family in assessment, management, and/or counseling can be counted toward the practicum requirement. Ancillary activities such as writing lesson plans, scoring tests, transcribing language samples, preparing treatment activities, and meetings with practicum CEs may not be counted as clock hours. (Standard IV-C). In March 2016, the 2014 standards and implementation procedures for the Certificate of Clinical Competence in Speech-Language Pathology were revised which expanded the definition of supervised clinical experiences:

Supervised clinical experiences should allow students to:

- interpret, integrate, and synthesize core concepts and knowledge;
- demonstrate appropriate professional and clinical skills; and
- incorporate critical thinking and decision-making skills while engaged in identification, evaluation, diagnosis, planning, implementation, and/or intervention.

2014 standards were also revised to define alternative clinical experiences (ACE), which may also be included for up to 20% (75 hours) of direct client hours. ACE may include the use of standardized patients and simulation technologies (e.g., standardized patients, virtual patients, digitized mannequins, immersive reality, task trainers, computer-based interactive). Only the time spent in active engagement with the ACE may be counted.

The CALIPSO Database represents the official record of Clock Hours for the student's clinical program. It is the responsibility of each student to enter their clock hours into CALIPSO at the end of each practicum day and then are required to submit to the CE at least weekly. It is recommended that students also keep track of their Clock Hours on paper as a hard copy and back-up, but it will not be collected and will not constitute an official record of Clock Hours earned. CEs will review and approve Clock Hours in CALIPSO at least weekly. Failure to enter clock hours on a weekly basis may result in hours not being approved by your CE.

The student should be aware of the total number and distribution of Clock Hours across content areas and client populations at all times during the graduate program. The DCE will also monitor this information. If at any time the student has a concern that she/he will not achieve the required 375 Clock Hours or that she/he lacks distribution in a certain content area or client population, he/she should make an appointment to meet with the DCE as soon as possible.

GRADING

EVALUATION OF STUDENT IN CLINICAL PRACTICUM SCORING RUBRICS

Skills rated on a 5--point scale:

5 = Consistent: Skill is consistent and well developed. (Skill is present >90% of the time)

4 = Adequate: Skill is developed/implemented most of time (Skill is present 76-90% of the time)

3 = Present: Skill is present and needs further development (Skill is present 51-75% of the time)

2 = Emerging: Skill is emerging, but is inconsistent. (Skill is present 26-50% of the time)

1 = Not Evident: Skill not evident most of the time. (Skill is present <25% of the time)

SPEECH-LANGUAGE PATHOLOGY CLINICAL GRADING SCALE

As with other academic courses, students enrolled in Clinical Practicum receive a letter grade with their midterm and final evaluations. This letter grade will assist the student and the clinical faculty in determining if satisfactory achievement is being made in the development of clinical skills, and any potential need for remediation. CEs will evaluate students at midterm and the end of the practicum. While the skill ratings provided by the direct CE factor strongly in the calculation of the letter grade awarded to the student, ultimately the full-time clinical faculty assumes all responsibility for determination of the student's final grade. Clinical skills evolve during a student's course of study and each new clinical placement brings with it a different set of required knowledge and skills. As students move through the master's program at Xavier University of Louisiana, they are expected to develop increased levels of clinical independence. The clinical grading scale takes into account this progression. Students in the first one to two semesters are not expected to be as independent as students during an externship experience. The grading scale reflects the increasing expectations as students move through their 5 clinical placements. Grades below a B are unacceptable. If you receive a C in a clinical placement, clinical hours received in that placement will not be included in your total clinical hours. Any student earning a grade below this level will be counseled by a faculty committee and a plan for remediation will be implemented.

1ST YEAR POINT SYSTEM (SPTH 5070, 5075, 5080)

$4.25 - 5.0 = 90\% - 100\% \rightarrow A$

$3.25 - 4.24 = 80\% - 89\% \rightarrow B$

$2.25 - 3.24 = 70\% - 79\% \rightarrow C$

$1.25 - 2.24 = 60\% - 69\% \rightarrow D$

1ST SEMESTER - 2ND YR POINT SYSTEM (SPTH 5085)

$4.5 - 5.0 = 90\% - 100\% \rightarrow A$

$3.5 - 4.49 = 80\% - 89\% \rightarrow B$

$2.5 - 3.49 = 75\% - 79\% \rightarrow C$

$2.0 - 2.49 = 70\% - 74\% \rightarrow D$

2ND SEMESTER - 2ND YR POINT SYSTEM (SPTH 5090)

$4.5 - 5.0 = 90\% - 100\% \rightarrow A$

$4.0 - 4.49 = 80\% - 89\% \rightarrow B$

$3.5 - 3.99 = 75\% - 79\% \rightarrow C$

$3.0 - 3.49 = 70\% - 74\% \rightarrow D$

CLINICAL PRACTICUM ADVANCEMENT

All students who achieve a letter grade of B or better in Clinical Practicum will automatically advance to the next level of Clinical Practicum in the sequence. Students who achieve a grade of C or lower in Clinical Practicum may not advance to the next level of Clinical Practicum, will be placed on academic probation, and referred to their academic advisor to develop a remediation plan.

CLINICAL INTERVENTION

Students who are experiencing difficulty acquiring and/or demonstrating satisfactory clinical skills during the course of a practicum will have the opportunity to have a structured and individualized clinical remediation program with intensive input from clinical faculty to improve clinical competency and ability to advance to the next level of practicum.

If a remediation plan is necessary, the following steps will take place:

1. The Director of Clinical Education will meet with the clinical educators (CEs) and the Graduate Program Director to determine areas of deficit.
2. A plan will be created by the DCE, CE, and student. The plan will outline the activities and/or experiences the student must complete to demonstrate adequate improvement in the area of concern. This plan must include measurable goals that can be completed within one semester, specification of persons who will be responsible for monitoring and implementing plans to achieve each goal, and specific consequences of failure to meet the plan.
3. This plan will be signed by the student, CE, and the DCE. Each person will receive a copy of the plan. A copy will be placed in the student's file.

Section V: Clinical Documentation

It is the responsibility of the Clinic Secretary to gather all initial vital information, such as name of client, names of parents, address, birth date, school, referral source, and statement of problem. This information is then placed in the temporary or permanent file.

It is the student's responsibility to ensure that all appropriate documents are completed: Consent Form, Service Agreement, Release of Information, Request for Therapy, Request for Continued Therapy, Case History, etc.

CLINICAL ATTENDANCE LOG FOR CLIENTS

Students providing clinical services are required to ensure that their clients sign in upon arrival at the Clinic. Their record of attendance enables the Clinic to maintain a record of service activities.

If the student knows in advance that a client has canceled, he/she must call and notify the supervisor, clinic supervisor and/or Director of Clinical Education immediately. The absence should be noted in the client's SOAP note.

CLIENT FILES

All therapy and diagnostic clients will have a permanent file kept in a "working" file cabinet in the clinic file office. These files contain all confidential information such as; evaluations, copies of test, final case summaries, correspondence, and records of telephone contacts related to the client. These files can be checked out from the Clinic Secretary and reviewed in the Clinic only. Under no circumstances are these folders or any information from them to leave the general clinic area. Students may use files in the Student Workroom, Audiology areas, Material Room, and Therapy rooms. All files must be returned to the Clinic Secretary's office no later than 15 minutes prior to the close of business each day.

CLINICAL WORK FOLDERS

Copies of initial case summaries, lesson plans, and other information pertinent to the client's clinical sessions are to be filed on a clinic-only jump drive and maintained in that client's work folder. Work folder should be stored in the clinician's locked locker. These folders are not to leave the Clinic. At the end of each semester, those materials in the Clinic Work Folders, which

are not placed in the Permanent Clinic file, must be destroyed. Clinicians cannot keep copies of any clinical documentation for their own records.

CLINICAL DOCUMENTATION

Planning and report writing are important aspects of a clinician's work. Students must follow the guidelines provided below in complying with the requirements of this Clinic and Program.

- Reports and/or plans that are submitted late will result in deductions from the student's clinical practicum grade. Any student who does not complete all clinical course requirements and/or does not turn in all clinical work for a practicum to the clinical supervisor by the appointed deadline will automatically receive a grade of "F" for that practicum, regardless of the probable grade discussed in the final evaluative conference, except under extenuating circumstances approved by the supervisor and Director of Clinical Education. Delinquent paperwork will result in a letter grade reduction. Off-campus supervisors should communicate issues related to untimely submission of clinical documentation to the Clinical Coordinator as well as indicate concerns of the student's evaluation.
- Planning and report writing are important aspects of a clinician's work. Students must follow the guidelines provided in this manual or by the off-campus site.

The following clinical documentation is expected to be completed by graduate students who are training in the XUSHC. Students are taught how to do each form of clinical documentation in SPTH 5070. A brief description is provided below and examples are available in the clinic with the templates found in the index of this manual.

CLINICAL SESSION NOTEBOOK

For each client in the Clinic students should create a binder. This binder should be no larger than 1 inch, and it should be flimsy. Student's Name, Client's Initials, Date & Time of session should be on the front of the binder, preferably in the top right corner. The binder should be divided into the following sections and clearly labeled.

1. *Semester Treatment Summary* (once completed) - This document provides a clear and comprehensive assessment of the client in relation to biographical information, status at the beginning of the treatment, objectives, recommendations, and comments.
2. *Session Therapy Plan* {newest on top}- This document provides the clinician the opportunity to outline their session based upon objectives, activities, materials, and data/comments
3. *S.O.A.P. notes* (newest on top) - This document provides the clinician the opportunity to provide subjective, objective, assessment, and plans for next session.
4. *Clock hours* {if applicable}. This document provides the clinician a concrete understanding of therapy hours that were obtained.
5. *Student Clinician Session Feedback* {if applicable} - This document provides the Supervisor the opportunity to rate the performance of the clinician on a scale of 0 (not evident) to 5 (Consistent).

LESSON PLAN

Lesson plans that indicate treatment goals/objectives for the session and specifically describe the activities and materials are due every Friday by noon for the upcoming week. Supervisors are required to review the lesson plans and approve them prior to the session. Supervisors should feel free to require as much detail and information about the plan for the session as he/she desires.

SEMESTER TREATMENT PLAN

This document is completed at the beginning of the semester and serves as a general outline for the course of therapy. The client's goals and objectives should be identified and the evidenced-based approaches that will be used should be documented. Specific therapy procedures and techniques, as well as the reinforcement schedules and behavior management plans that will be implemented should be described.

Approximately 2 weeks after the start of the clinic, a treatment plan for the semester is due. Examples can be retrieved from the DCE. Plans should be reviewed and suggested edits and revisions should be provided to the student. The student is responsible for working to get the

plan finalized as soon as possible. Final plans are printed on XUSHC letterhead and placed in the client's file.

SEMESTER SUMMARY

This document will be completed in portions, but will culminate with the final document being submitted at the end of the semester. This document will include a summary of the client's relevant history, essential background pertaining to recent assessment information, and the client's goals/objectives will be documented. Additionally, a synopsis of therapy, documentation of the client's response to intervention, a record of family involvement and generalization as well as future recommendations should be included.

Approximately 2 weeks before the end of the semester, students should begin working on a Semester Summary. The Semester Summary is due at the end of the semester – prior to the final evaluation meeting with the student. Examples can be retrieved from the DCE. Summaries should be reviewed and suggested edits and revisions should be provided to the student. The student is responsible for working to get the summary finalized as soon as possible. Final Semester Summaries are printed on XUSHC letterhead and placed in the client's file.

WEEKLY SOAP NOTES

A SOAP note is due for each client and for each session every Friday by noon. SOAP notes are typed on a form that has been created by the program. SOAP should be reviewed and suggested edits and revisions should be provided to the student. The student is responsible for working to get SOAP noted finalized as soon as possible.

DIAGNOSTIC REPORT

Two weeks after a diagnostic session, a Diagnostic Report is due. Examples can be retrieved from the DCE. Reports should be reviewed and suggested edits and revisions should be provided to the student. The student is responsible for working to get the report finalized within 2 weeks of the diagnostic session. Final reports are printed on XUSHC letterhead. Completed testing forms, questionnaires, etc. should be attached to the report. The final report and supporting documentation are placed in the client's file.

DISCHARGE SUMMARY

This document will be completed in portions, but will culminate with the final document being submitted at the end of the semester. This document will serve as a discharge from services through the XUSHC and will include a summary of the client's relevant history, essential background pertaining to recent assessment information, and the client's goals/objectives. Additionally, a synopsis of therapy, documentation of the client's response to intervention, a record of family involvement and generalization as well as future recommendations should be included. Summaries should be reviewed and suggested edits and revisions should be provided to the student. The student is responsible for working to get the summary finalized as soon as possible. Discharge Summaries are printed on XUSHC letterhead and placed in the client's file.

<h3>GUIDELINES FOR DOCUMENTATION DURING OFF-CAMPUS PRACTICUM</h3>
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When a student is placed with an external CE in a 1:1 practicum, externship or student teaching experience, the student is required to follow the direction of their CE regarding the specific requirements for documentation at their practicum site.

Appendices



XAVIER

UNIVERSITY of LOUISIANA

Department of Speech Pathology

Practicum Policy & Procedures Agreement

I, _____, have read the Graduate Student Clinic Handbook of the Department of Speech Pathology at Xavier University of Louisiana, understand the contents, and agree to abide by the policies and procedures as outlined and amended.

Additionally, I have (please check each box)

- ☐ read the Essential Functions document in the manual; I am committed to the policies expressed therein; and that I may be advised to discontinue the program should I fail to demonstrate all of the Essential Functions despite reasonable accommodations and reasonable levels of support from the faculty.
- ☐ read and agree to abide by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Code of Ethics of the American Speech-Language-Hearing Association (ASHA)
- ☐ read the Policy Statement on Criminal Background Checks/Drug Screening and Fingerprinting and agree to abide by its policies and procedures.
- ☐ read and understand that I need to develop my documentation skills for diagnostics, IEPs, monthly treatment plans, weekly treatment plans, SOAP Notes and therapy summaries in diverse settings.
- ☐ read and acknowledge that I must attend my assigned practicum placement for the established duration. Failure to complete the established practicum duration will result in an incomplete (I) and/or failing grade (C or below). Completion of the practicum requirements will be scheduled the following semester and your graduation will be delayed.
- ☐ read and I understand a student must demonstrate an appropriate level of knowledge and skills during a clinical practicum that is consistent with his/her current academic level.
- ☐ read and understand that all clinical practica and observation hours will be supervised by individuals holding ASHA Certificate of Clinical Competence (CCC) and current state licensure, as required.

Student Signature

Date

Printed Name



CALIPSO INSTRUCTIONS FOR STUDENTS

<https://www.calipsoclient.com/xula>

Step 1: Register as a Student User on CALIPSO

- Before registering, have available the PIN provided by your Clinical Coordinator via e-mail.
- Go to <https://www.calipsoclient.com/xula>
- Click on the “Student” registration link located below the login button.
- Complete the requested information, being sure to enter your “school” e-mail address, and record your password in a secure location. Click “Register Account.”
- Please note: **PIN numbers are valid for 40 days.** Contact your Clinical Coordinator for a new PIN if 40 days has lapsed since receiving the registration e-mail.

Step 2: Login to CALIPSO

- To login, go to <https://www.calipsoclient.com/xula> and login to CALIPSO using your school e-mail and **password that you created for yourself during the registration process (step one.)**
- Upon logging in for the first time, you will be prompted to pay the student fee and to provide consent for the release of information to clinical practicum sites.

Step 3: Enter Contact Information

- Click on “Student Information”
- Click on “Contact Info” and then “Edit” for each corresponding address.
- Enter your local, permanent, and emergency contact info. Enter “rotation” contact info when on externships. Return to this link to update as necessary.
- Click “Home” located within the blue stripe to return to the home page.

Step 4: View Immunization and Compliance Records

- Before each semester, click on “Student Information” and then “Compliance/Immunizations” to view a record of compliance and immunization records.
- Missing or expired records are highlighted in red.
- To create a document to save and/or print, click “PDF” located within the blue stripe.
- An electronic file of the original documents can be accessed, if uploaded by the Clinical Coordinator, by clicking “Files” located within the blue stripe.
- Click “Home” located within the blue stripe to return to the home page.

Step 5: View/Upload Clinical Placement Files

- The file management feature allows you to upload any type of file (e.g. Word, PDF, JPEG, audio/video) to share with your clinical supervisor or clinical administrator.
- Click on “Student Information” and then “Clinical Placement” to upload your own file and/or view a file uploaded by your supervisor or clinical administrator.
- **First, select a folder by clicking on the folder name or create a new folder or subfolder.** To create a new folder or subfolder, type in desired folder name in the "Add folder" field and press "create."
- **Upload a file** by pressing the “Browse” button, selecting a file, completing the requested fields, and clicking "upload." The upload fields will display if you have selected an unrestricted folder. **Set the file permission** by choosing “public” for supervisor and clinical administrator access or “private” for clinical administrator access only.
- **Move files** by dragging and dropping from one folder to another.
- **Rename folders** by clicking the "rename" link to the right of the folder name.
- **Delete files** by clicking the “delete” button next to the file name. **Delete folders** by deleting all files from the folder. Once all the files within the folder have been deleted, a “delete” link will appear to the right of the folder name.

Step 6a: Enter Daily Clock Hours

- Click on the “Clockhours” link located on the lobby page or the “Student Information” link then “Clockhours.”
- Click on the “Daily clockhours” link located within the blue stripe.
- Click on the “Add new daily clockhour” link.
- Complete the requested information and click “save.”
- Record clock hours and click “save” located at the bottom of the screen. You will receive a “Clockhour saved” message.

To add clock hours for a ***different*** supervisor, clinical setting, or semester:

- Repeat above steps to enter additional clock hours gained under a different supervisor, clinical setting, or semester.

To add additional clock hours to the ***same*** record:

- Click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, course, and setting) from the drop-down menu and click “Show.”
- Click the “Copy” button located next to the date of a previous entry.
- Record the new clock hours (changing the date if necessary) and click “save” located at the bottom of the screen. You will receive a “Clockhour saved” message.
- To **view/edit** daily clock hours, click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, course, and setting) from the drop-down menu and click “Show.”
- Select the desired entry by clicking on the link displaying the entry date located along the top of the chart. Make desired changes and click save.
- Please note: Supervisors are not notified and are not required to approve daily clock hour submissions.

Step 6b: Submit Clock Hours for Supervisor Approval

- Click on the “Daily clockhours” link located within the blue stripe.
- Select the record you wish to view (posted by supervisor, semester, and course) from the drop-down menu and click “Show.”
- Check the box (located beside the entry date) for all dates you wish to submit for approval then click “Submit selected clockhours for supervisor approval.” Clock hours logged for the dates selected will be consolidated into one record for supervisor approval. The designated supervisor will receive an automatically generated e-mail requesting approval of the clock hour record.
- Please note: Daily entries cannot be edited once approved. However, if you delete the entry from the “Clockhour list” link prior to approval, daily hours may be resubmitted.
- View consolidated clock hour entries by clicking “Clockhours list” located within the blue stripe.

Step 7: View Clinical Performance Evaluations

- Click on “Student Information” and then “Evaluations.”
- As clinical performance evaluations are completed on you by your supervisors, the evaluations will automatically post to this link.
- View a desired evaluation by clicking on the “current evaluation” link highlighted in blue.

Step 8: View Cumulative Evaluation

- Click on “Student Information” and then “Cumulative evaluation” to view a summary of your clinical competency across the 9 disorder areas.
- Upon graduation, you must demonstrate competency for all clinical competencies listed on the form.
- Please make note of any areas of deficiency which are highlighted in orange.

Step 9: View Performance Summary

- Click on “Student Information” and then “Performance summary” to view a summary of your clinical performance across all clinical courses to date.

Step 10: View My Checklist

- Click on “Student Information” and then “My Checklist” to view your progress in meeting the clinical requirements for graduation.
- Upon graduation, all requirements should have been met, represented with a green check mark.

Step 11: Complete Self-Evaluation

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete a self-evaluation.
- From the lobby page, click on the “Self-evaluations” link.
- Click on “New self-evaluation.”
- Complete required fields designated with an asterisk and press “save.”
- Continue completing self-evaluation by scoring all applicable skills across the Big 9 using the provided scoring method and saving frequently to avoid loss of data.
- Once the evaluation is complete, check the “final submission” box and click “save.”
- Receive message stating “evaluation recorded.”
- Please note: you may edit and save the evaluation as often as you wish until the final submission box is checked. Once the final submission box is checked and the evaluation saved, the status will change from “in progress” to “final”.
- To view the evaluation, click “Evaluations list” located within the blue stripe.

Step 12: Complete Supervisor Feedback Form

- At the completion of each clinical course or as directed by your Clinical Coordinator, complete feedback for each clinical supervisor.
- From the lobby page, click “Supervisor feedback forms.”
- Click “New supervisor feedback.”
- Complete form and click “Submit feedback.”
- Your completed feedback form will be posted for Clinical Coordinator approval. Once approved, feedback will be posted for the clinical supervisor to view. Until approved, the feedback may be edited by clicking on “View/edit.”

Step 13: View Site Information Forms

- The “Site Information Forms” link located on the lobby page displays pertinent information on the sites/facilities that your school affiliates with for clinical placements.
- To view available information, identify the desired site and click “View” located in the fifth column under submitted.

Please note: “In progress” forms are not accessible to students; only “submitted” forms are accessible to students.

Clinical Clock Hour Experience Record

	Child	Adult	Total
Observation - Evaluation	HH:MM	HH:MM	HH:MM
Speech (articulation, fluency, voice, swallowing, communication modalities)	:	:	
Language (expressive/receptive language, cognitive aspects, social aspects)	:	:	
Hearing	:	:	
Total Observation - Evaluation Hours			
Observation - Treatment	HH:MM	HH:MM	HH:MM
Speech (articulation, fluency, voice, swallowing, communication modalities)	:	:	
Language (expressive/receptive language, cognitive aspects, social aspects)	:	:	
Hearing	:	:	
Total Observation - Treatment Hours			
Evaluation	HH:MM	HH:MM	HH:MM
Articulation	:	:	
Fluency	:	:	
Voice and resonance	:	:	
Expressive/Receptive language	:	:	
Hearing	:	:	
Swallowing	:	:	
Cognitive aspects of communication	:	:	
Social aspects of communication	:	:	
Communication Modalities	:	:	
Total Evaluation Hours			
Treatment	HH:MM	HH:MM	HH:MM
Articulation	:	:	
Fluency	:	:	
Voice and resonance	:	:	
Expressive/Receptive language	:	:	
Hearing	:	:	
Swallowing	:	:	
Cognitive aspects of communication	:	:	
Social aspects of communication	:	:	
Communication Modalities	:	:	
Total Treatment Hours			
Total (non-Observation)			



My Graduation/Certification Checklist

Mee, Minnie (Demo)

Requirements for successful completion of the clinical education program

- ☐ Completed the cumulative evaluation with average scores of 3.0 or higher in each block [View cumulative evaluation](#)
- ☒ Completed the Knowledge and Skills Acquisition (KASA) Summary Form [View KASA Summary](#)
- ☒ Obtained minimum required hours in the speech, language, and hearing clockhour areas:
 - ☒ Child Speech Dx (20:00)
 - ☒ Child Language Dx (20:00)
 - ☒ Child Speech Tx (20:00)
 - ☒ Child Language Tx (20:00)
 - ☒ Hearing (20:00)
 - ☒ Adult Speech Dx (20:00)
 - ☒ Adult Language Dx (20:00)
 - ☒ Adult Speech Tx (20:00)
 - ☒ Adult Language Tx (20:00)
- [View exp. record](#)
- Gained clinical clock hours across the disorder areas:
 - ☐ Children (optional)
 - ☐ Adult (optional)
 - ☒ Total
- [View exp. record](#)
- ☒ Obtained a minimum of 25:00 observation hours [View exp. record](#)
- ☐ Obtained a minimum of 375:00 total clinical hours [View exp. record](#)
- ☐ Obtained at least 325:00 clinical clock hours while engaged in graduate study [View clockdb](#)
- ☒ Received a minimum of 50:00 hours in each of 3 distinct clinical settings [View clockdb](#)
- ☒ Obtained supervisor approval for all clock hour entries [View clockhours](#)
- ☒ Gained clinical experience with all 4 patient populations (young child, child, adult, older adult) [View clinical performance summary](#)
- ☒ Completed clinical experiences with at least two different Multicultural Aspects
- ☒ Completed clinical experiences with at least two different Linguistic Diversities
- ☒ Received experience that included patients with various types and severities of disorders
- ☐ Provided (student) signature for all clinical performance evaluations

Download and save the following documents for your files:

- [Clinical Clock Hour Database](#) ([View clock hour database](#))
- [Clinical Experience Record](#) ([View XP Record](#))
- [Cumulative Evaluation](#) ([View Cumulative Evaluation](#))
- [Clinical Performance Summary](#) ([View Clinical Performance Summary](#))
- [KASA Summary](#) ([View KASA Summary](#))

thored by: Laurel H. Hays, M.Ed., CCC-SLP and Satyajit P. Phanse, M.S.



CALIPSO for Speech-Language Pathology Clinical Performance Evaluation Form

Revised 5/4/17

Evaluation

	Artic	Fluency	Voice	Language	Hearing	Swallow	Cognition	Social Aspects	AAC
1. Conducts screening and prevention procedures (std IV-D, std V-B, 1a)									
2. Collects case history information and integrates information from clients/patients and/or relevant others (std V-B, 1b)									
3. Selects appropriate evaluation instruments/procedures (std V-B, 1c)									
4. Administers and scores diagnostic tests correctly (std V-B, 1c)									
5. Adapts evaluation procedures to meet client/patient needs (std V-B, 1d)									
6. Possesses knowledge of etiologies and characteristics for each communication and swallowing disorder (std IV-C)									
7. Interprets, integrates, and synthesizes test results, history, and other behavioral observations to develop diagnoses (std V-B, 1e)									
8. Makes appropriate recommendations for intervention (std V-B, 1e)									
9. Completes administrative and reporting functions necessary to support evaluation (std V-B, 1f)									
10. Refers clients/patients for appropriate services (std V-B, 1g)									
Following evaluation, student appropriately refers patients for speech-language pathology services and/or other professional services. An "appropriate" referral constitutes referring when necessary and not referring when not necessary. Please note: Student should receive a score, as verification of his/her skill, in each of the 9 disorder areas of which are being evaluated.									
Comments:									

Intervention

	Artic	Fluency	Voice	Language	Hearing	Swallow	Cognition	Social Aspects	AAC
1. Develops setting-appropriate intervention plans with measurable and achievable goals. Collaborates with clients/patients and relevant others in the planning process (std V-B, 2a, std 3.1.1B)									
2. Implements intervention plans (involves clients/patients and relevant others in the intervention process) (std V-B, 2b, std 3.1.1B)									
3. Selects or develops and uses appropriate materials/instruction (std V-B, 2c)									
4. Sequences tasks to meet objectives									
5. Provides appropriate introduction/explanation of tasks									
6. Measures and evaluates clients'/patients' performance and progress (std V-B, 2d)									
7. Uses appropriate models, prompts or cues. Allows time for patient response									
8. Modifies intervention plans, strategies, materials, or instruction to meet individual client/patient needs (std V-B, 2e)									
9. Completes administrative and reporting functions necessary to support intervention (std V-B, 2f)									
10. Identifies and refers patients for services as appropriate (std V-B, 2g)									
During intervention, student identifies the need and makes appropriate recommendations for continued speech-language pathology management and/or other professional services. Please note: Student should receive a score, as verification of this particular skill, in each of the 9 disorder areas of which are being managed.									
Comments:									

Professional Practice, Interaction and Personal Qualities

Score

1. Demonstrates knowledge of and interdependence of communication and swallowing processes (std IV-B, std 3.1.6B)	
2. Uses clinical reasoning and demonstrates knowledge of and ability to integrate research principles into evidence-based clinical practice (std IV-F, std 3.1.1H)	
<ul style="list-style-type: none"> • Uses valid scientific and clinical evidence in decision-making regarding assessment and intervention • Applies current knowledge, theory, and sound professional judgment in approaches to intervention and management of individuals served • Uses clinical judgment and self-reflection to enhance clinical reasoning • Accesses sources of information to support clinical decisions regarding assessment and intervention/management • Critically evaluates information sources and applies that information to appropriate populations • Integrates evidence in provision of speech-language pathology services 	
3. Adheres to federal, state, and institutional regulations and demonstrates knowledge of contemporary professional issues and advocacy (includes trends in best professional practices, privacy policies, models of care) (std V-B, 3a, std 3.1.1B)	
<ul style="list-style-type: none"> • Adheres to federal, state, and institutional regulations and policies that are related to services provided by speech-language pathologists • Understands and uses best professional practices related to maintenance of confidentiality for all individuals in accordance with HIPAA and FERPA requirements • Understands the fiduciary responsibility for each individual served • Understands the various models of delivery of speech-language pathology services (e.g., hospital, private practice, education, etc.) • Understands the health care and education landscape and how to facilitate access to services 	
4. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic differences of the patient, family, caregiver, and relevant others (std V-B, 3a, std 3.1.1B)	
<ul style="list-style-type: none"> • Understands the impact of his or her own set of cultural and linguistic variables on delivery of effective care. These include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation • Understands the impact of the cultural and linguistic variables of the individuals served on delivery of care. These include, but are not limited to, variables such as age, ethnicity, linguistic background, national origin, race, religion, gender, and sexual orientation • Understands the interaction of cultural and linguistic variables between the caregivers and the individuals served in order to maximize service delivery • Understands the characteristics of the individuals served (e.g., age, demographics, cultural and linguistic diversity, educational history and status, cognitive status, and physical and sensory abilities) and how these characteristics relate to clinical services 	
5. Establishes rapport and shows care, compassion, and appropriate empathy during interactions with clients/patients and relevant others (std V-B, 3a)	
6. Uses appropriate rate, pitch, and volume when interacting with patients and relevant others	
7. Provides counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others (std V-B, 3c, std 3.1.6B)	
8. Collaborates with other professionals in case management (std V-B, 3c, std 3.1.1B, 3.1.6B)	
<ul style="list-style-type: none"> • Understands how to apply values and principles of interprofessional teamwork • Understands how to work on interprofessional teams to maintain a culture of mutual respect and shared values • Understands how to perform effectively in different interprofessional roles to plan and deliver care centered on the individual served that is safe, timely, efficient, effective, and equitable 	
9. Displays effective oral communication with patient, family, or other professionals (std V-A, std 3.1.1A)	
<ul style="list-style-type: none"> • Communicates with clients/patients, families, communities, and interprofessional team colleagues and other professionals caring for individuals in a responsive and responsible manner that supports a team approach to maximize care outcomes 	
10. Displays effective written communication for all professional correspondence (std V-A, std 3.1.1B)	
<ul style="list-style-type: none"> • Communicates with clients/patients, families, communities, and interprofessional team colleagues and other professionals caring for individuals in a responsive and responsible manner that supports a team approach to maximize care outcomes 	
11. Adheres to the ASHA Code of Ethics and Scope of Practice document and conducts him or herself in a professional, ethical manner (std IV-E, V-B, 3d, std 3.1.1B, 3.1.6B)	
<ul style="list-style-type: none"> • Uses the highest level of clinical integrity with each individual served, family members, caregivers, other service providers, students, other consumers, and payers 	
12. Demonstrates professionalism (std 3.1.1B, 3.1.6B)	
<ul style="list-style-type: none"> • Engages in self-assessment to improve his or her effectiveness in the delivery of services • Uses self-reflection to understand the effects of his or her actions and makes changes accordingly • Understands the roles and importance of professional organizations in advocating for rights to access to speech-language pathology services • Understands the role of clinical teaching and clinical modeling as well as supervision of students and other support personnel • Understands the roles and importance of interdisciplinary/interprofessional assessment and intervention and be able to interact and coordinate care effectively with other disciplines and community resources • Understands and practice the principles of universal precautions to prevent the spread of infectious and contagious diseases • Understands and use the knowledge of one's own role and those of other professions to appropriately assess and address the needs of the individuals and populations served 	
13. Demonstrates openness and responsiveness to clinical supervision and suggestions	
14. Personal appearance is professional and appropriate for the clinical setting	
15. Displays organization and preparedness for all clinical sessions	