Indiana University South Bend

# Speech-Language Pathology

Master's Program

# Clinic Handbook

2025-2026

# Contents

# Section 1: Introduction and Overview

## Welcome

Welcome to Indiana University South Bend's Master of Science in Speech-Language Pathology (IUSB MS-SLP) program! Throughout your graduate journey, you'll engage in a wide range of clinical and diagnostic practicum experiences that extend beyond the classroom. These experiences are designed to complement your academic coursework and help you grow into an independent, thoughtful, analytic, and confident clinician. Through our on-campus clinic- the IUSB Elkhart Speech-Language Clinic- and partnerships with the community, our program will provide you with challenging and transformative clinical experiences that begin in your very first semester.

This handbook is your go-to resource for clinical information, requirements, policies, and procedures. The appendices include essential forms and additional information to support your success. Please take time to review the contents carefully—you are responsible for understanding and following the guidelines outlined here. If you have any questions, I'm here to help. As Clinical Director, I also welcome your feedback on all aspects of the clinical program, including policies, procedures, materials, equipment, and community engagement.

Once again, welcome! I look forward to supporting your clinical development and celebrating your growth over the next two years.

Jerin Burch, Clinical Director

## Codes of Ethics

All student clinicians are responsible for reading [American Speech-Language Hearing Association's (ASHA's) Code of Ethics.](#) . The Code educates professionals in the discipline, as well as students, other professionals, and the public, regarding ethical principles and standards that direct professional conduct. As you begin clinical practicum, it is essential that you recognize the ethical obligations that you have assumed regarding clients and their families.

Student clinicians should also be aware that individual states may also have a code of ethics in statute or regulation. [Indiana Speech-Language Hearing Association's (ISHA's) Bylaws and Code of Ethics](#) should be reviewed by student clinicians.

## ASHA's Scope of Practice

ASHA's Scope of Practice in Speech-Language Pathology document is an official policy defining the breadth of practice within the profession of speech-language pathology. Students are encouraged to read the [Scope of Practice](#).

## 2020 Standards

The [2020 Standards and Implementation Procedures](#) for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP) went into effect on January 1, 2020 and did include some changes from the previous standards.

## Statement of Non-discrimination

The Indiana University South Bend Master of Science in Speech-Language Pathology (IUSB MS-SLP) department and clinical program operate within IU's non-discrimination policy that prohibits discrimination on the basis of age, color, disability, ethnicity, sex, gender identity, gender expression, genetic information, marital status, national origin, race, religion, sexual orientation, or veteran status.

Violation of the non-discrimination policy will result in disciplinary action.

## Non-Standard Dialect

At IUSB, inclusiveness and respect for linguistic differences is extended to practitioners and students from culturally and linguistically diverse populations who may not speak Mainstream American English (MAE).  In cases where a student has an accent and/or dialect, the department references ASHA's position statement, Students and Professionals Who Speak English with Accents and Nonstandard Dialects: Issues and Recommendations.

## Accommodations

Students who need accommodations are encouraged to speak with IUSB's Accessible Educational Services Office (AES). The clinical education team aims to support reasonable accommodations recommended by AES, within the scope of clinical training requirements. It is important to note that the standards cannot be modified and all students must be able to demonstrate competency in these standards by the time of graduation.

Additionally, IU is dedicated to supporting students who are pregnant or have experienced other conditions related to pregnancy (termination of pregnancy, miscarriage, lactation, or related medical conditions). To register for accommodations due to pregnancy or a related medical condition, please contact our campus Accessible Educational Services (AES) office at iusbdss@iusb.edu. To learn about the rights and resources available to students, such as academic accommodations, please visit pregnancy.iu.edu or email oie@iu.edu for more information.

## Structure of Clinical Practicum

Fall 1:  For clinical practicum, student clinicians will complete a part-time, supervised placement at the IUSB Elkhart Speech-Language Clinic, or at a site in the community.  Caseload generally consists of 1-3 clients and may include assignment to a support group. Clinical placements will generally target pediatric experiences or gender-affirming voice, though other experiences may occur.  For the first diagnostic practicum, emphasis will be on completion of preschool and kindergarten speech and language screenings as well as hearing screenings; some full evaluations of in-house clinic clients may occur.  Diagnostic opportunities may take place in the on-campus clinic or at a community site.

Spring 1:  Clinical practicum opportunities will continue to occur in the IUSB Elkhart Speech-Language Clinic and/or at a community sites on a part time basis.  Students can expect to take on

a greater load than in Fall 1.  Diagnostic practicum will focus on full pediatric and adult evaluations, though screenings may still occur.  Students will not participate in an evaluation each week.  Diagnostic opportunities may take place in the on-campus clinic or at a community site.  Additionally, students participate in simulated and didactic diagnostic opportunities to enhance clinical reasoning and diagnostic proficiency.

Summer:  Students will complete a 10 week, full time fieldwork placement (Fieldwork I; also referred to as "externship") at a community site.  It is anticipated that students should work up to carrying approximately 60-75% of the caseload by the time this externship ends.  Medical placements are targeted during this placement.

Fall 2:  For clinical and diagnostic practicum III, student clinicians will complete a part-time placement at a community site.  Students can anticipate spending approximately 6-8 hours, 2-3 days per week on site.  Site placement will be assigned based on each student clinician's remaining needs regarding competencies and hours, student preferences, and available opportunities.  Additionally, there may be opportunity for participation in a support group.

Spring 2:  Students will complete a 12-16 week, full time externship at a community site (Fieldwork II).  This is the final clinical experience before graduation. Students will work up to carrying their supervisor's caseload by the end of this experience.  This will generally be a pediatric assignment in a school setting.

By graduation, student clinicians must be able to document attainment of at least 375 clinical clock hours of supervised clinical experience in the practice of speech-language pathology and 25 guided observation hours.  Up to 75 of the direct contact hours may be obtained through clinical simulation. If adequate documentation is provided, up to 50 clinical clock hours from undergraduate training may be counted toward the 375 hours.  The clinical and diagnostic practicum experiences will provide students opportunities for the following, which are specified in ASHA's 2020 standards:
- 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 prevention, identification, evaluation, diagnosis, planning, implementation, and/or intervention.

For the part-time clinical practicum experiences, sites and experiences may be up to one hour away from The Elkhart Center, or from a student's home. The full-time fieldwork sites have the option to be nationwide.

Across clinical experiences, the amount of direct supervision provided must be commensurate with the student's knowledge, skills, and experience; must not be less than 25% of the student's total contact with each client/patient; and must take place periodically throughout the practicum. A clinical educator must be on site and readily available to assist the student with in-person care. All supervisors are to be licensed and ASHA certified and will have been verified by the Clinical Director to have met the 2020 standards for supervision.  The Clinical Director

verifies this information by using ASHA's "Find a Professional" website.  Clinical placements are at the discretion of the Clinical Director and faculty team, and will be assigned in such a manner so that student clinicians are able to gain experience across ASHA's "Big 9" competency areas. More information on ASHA's Big 9 competencies can be found in the "Competencies" section of Part 7 of this handbook.  Students are to keep ongoing detailed record of their clinical experiences, including populations served, tests administered, evidence-based treatments utilized, trainings completed/certifications earned, etc.  This record should be updated at the conclusion of each semester at the very least. Students are responsible for tracking and entering their clinical clock hours.

### Process of Determining Placements

Student clinicians may refer to the program's Process of Determining Clinical Placements Policy for full details regarding this topic.

Before beginning the program, or in fall of the first year, student clinicians complete a Placement Request form (found in the Appendix of this handbook).  This form includes opportunity for a student to indicate: the types of populations he/she/they ultimately hope to work with after graduate school (if known), support group preferences, specific sites requested, willingness to travel and/or requests for geographical areas for full-time placements, as well as the anticipated city of residence during the student's session 2 of the summer semester and second spring.  To ensure the integrity and fairness of clinical placements, students are required to disclose any potential conflicts of interest prior to placement assignments.  SLP faculty who are familiar with the student clinicians' clinical and academic skills will also be asked to provide the Clinical Director with input regarding placements.  In some cases, students may be asked to assist in the process of securing a placement; however, students should not contact community sites for a placement unless directed to do so by the Clinical Director.

The Clinical Director seeks a balance of experience for all students, and ultimately placements depend on a site's ability to accept a student for a given semester.  Additionally, some placements must be earned by a student clinician based on resume and/or an interview that the sites themselves conduct.  Therefore, while attempts are made to accommodate each student's needs and preferences, this is not always possible.

## Section 2:  Clinical Policies and Procedures

Brief descriptions of the MS-SLP Clinical Policies and Procedures, as well as selected Indiana University and Vera Z. Dwyer School of Health Sciences policies that are particularly important for our clinical experiences, can be found in Section 2.  Students should familiarize themselves with the full policies, which are found online at https://healthscience.iusb.edu/policies/policies-and-forms.html for the Dwyer policies and https://healthscience.iusb.edu/speech-pathology/policies.html for the program policies. The program's full clinical policies are also found the SLP Hub course in Canvas.  Links are provided below for the policies that are IU-wide. Students should also familiarize themselves with the Program policies that are found in the

Program Handbook.  Any questions regarding Clinical Policies and Procedures can be directed to the Clinical Director.

## Americans with Disabilities Act (ADA) Policy

This policy specifies the University's ADA accommodations and adjustments for its faculty, staff, and students; it can be found here: https://policies.iu.edu/policies/ua-02-americans-disability-act/index.html#:~:text=Indiana%20University%20provides%20reasonable%20accommodations,the%20nature%20of%20a%20university

## Indiana University's Non-Discrimination Policy

This policy specifies the University's commitment to the achievement of equal opportunity and provides Title IX contacts within the University; it can be found here: https://policies.iu.edu/policies/ua-01-non-discrimination/index.html

## Information and Information System Incident Reporting, Management, and Breach Notification

This policy details the University's approach to identifying, investigating, and handling potential information and information system breaches as well as specifies procedures for reporting suspected or actual incidents; it can be found here: https://policies.iu.edu/policies/ispp-26-information-system-incident-reporting/index.html

## Biosafety / Bloodborne Pathogens

The program's exposure/infection control policy and procedures is based on the concept of Standard Precautions and is in compliance with the current recommendations of the United States Public Health Service and Occupational Safety and Health Administration.  This policy outlines the SLP program's Biosafety/Bloodborne Pathogen practices.

## Clinical and Affiliated Site Compliance: Students

This Dwyer School of Health Sciences policy outlines compliance prerequisites for student participation with affiliation institutions and clinical sites.

## Confidentiality

This Dwyer School of Health Sciences policy outlines the strict guidelines regarding patient information, including computer access, security and documentation, and confidentiality.

## Cardiopulmonary Resuscitation (CPR)

This policy outlines the program's guidelines for professional-level CPR requirements.

## Criminal Background Check

This program policy informs students that Criminal Background Checks are required and details the procedures for meeting this requirement.

## Student Drug Screens

This program policy informs students of drug testing requirements for purposes of both on-campus and clinical affiliation experiences, and details the procedures for meeting this requirement.

## Immunizations

This program policy outlines the immunization requirements for students prior to entering the clinical portion of their programs.

## Elkhart Center Student Lounge

This Rehabilitation Sciences policy outlines the procedures that all students of graduate programs housed in the Elkhart Center are to follow in order to maintain a clean and confidential student lounge space.

## Cancellations and Tardy Clinic Clients

This policy outlines the guidelines students should follow when a client is tardy or cancels a session.

## Clinical Clock Hours

This policy describes the criteria in which clinical clock hours may be counted toward the 400 minimum required by ASHA.

## Client Files

This policy details the guidelines that students must follow when handling confidential client files and when working in the electronic medical record.

## Client Gifts and Gratuities

This policy informs students on gifts and gratuities that are not to be accepted from clients and families.

## Clinic Materials Checkout

This policy instructs students on the proper procedure for checking out the program's clinical materials.

## Clinician Absences and Cancellations

This policy outlines the guidelines for what a student should do if ill when they have a clinical obligation.

## Formal Complaint Process

This policy applies to students, faculty and staff, as well as community members, and provides details on the procedures for voicing concerns about clinical issues and/or submitting a complaint.

## Injury in Clinic

This policy provides information on how to report and document an injury to a client or student clinician if it occurs on campus and/or during client-care affiliated with IUSB's MS-SLP program.

## Locked Areas

This policy alerts students to be aware that certain areas within the Elkhart Center are locked to protect client privacy, and details what students can/cannot do in regard to accessing these areas.

## Observation

This policy outlines the guidelines that all students must follow regarding observation of clinical sessions.

## Cleaning of Rooms and Materials

This policy outlines the specific cleaning procedures that all students are to follow within the clinic and when using clinic materials.

## Process of Determining Clinical Placements

This policy provides information on the procedures that the Clinical Director follows when assigning clinical and diagnostic placements.

## Professional Attire

This policy provides additional information regarding guidelines for professional dress and presentation. Students are to wear their name badge for all clinical activities.

## Professional Liability Insurance

MS-SLP students participating in any clinical practicum or diagnostic experience must obtain and maintain professional liability insurance, at their expense, for the duration of the graduate program. This policy provides additional information on this, as well as states the required limits.

## Recording Sessions

This policy details the guidelines students must follow when accessing and handling recorded clinical sessions.

## Socializing with Clients

This policy informs students on various guidelines related to socializing with clients.

## Supervision

This policy informs students about the supervision that will occur throughout their clinical and diagnostic practicum experiences.

## Test Checkout and Reservation

This policy details the procedures students must follow when reserving and checking out the program's tests.

## Verification of Clinical Experience

This policy specifies procedures that students must follow for recording their clinical clock hours, as well as details procedures that the Clinical Director follows to track and verify hour attainment for each student.

## Client Dismissal

This policy outlines the procedural indicators that guide client dismissal from group therapy and/or support groups at the IUSB SLP Clinic.

## Referrals and Waitlist

This policy details the procedures followed in regard to scheduling prospective clients for various clinical activities, and includes information on referrals and waitlisting.

## Professionalism in Academic and Clinical Experiences

This policy informs students of how standards set forth by the Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) and the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA) inform the program's definition of professionalism. It also provides guidance on how issues of professionalism and/or life circumstances will be considered and handled.


# Section 3:  Record Keeping and Reporting

## FERPA

The Family Educational Rights and Privacy Act (FERPA) is a Federal law that protects the privacy of student education records.  Students completing a clinical placement in a school setting should be aware of FERPA. Some graduate students are employed as students in a clerical setting where they have access to limited information about education records.  Students should be prepared to complete FERPA training as indicated. Please see the Confidentiality Policy in Section 2 of this handbook for more information.  Information on FERPA, including the history of related legislation, may also be found here.

## HIPAA

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) regulates protection and privacy of certain health information.  Each student clinician must successfully complete HIPAA training prior to accessing clinical files or participating in any type of clinical client contact. Please see the Confidentiality Policy in Section 2 of this handbook for more information. Information on HIPPA, including the history of related legislation, may also be found here.

## EMR Overview

The MS-SLP program utilizes ClinicNote for the electronic medical record (EMR).  All documentation of clinical activity that takes place within the IUSB Elkhart Speech-Language Clinic

will be completed securely in the EMR.  Students are not to download any part of a client's medical record onto their personal device. Student clinicians are not permitted to access the electronic records of clients for whom they are not treating.  Please refer to the HIPAA, FERPA, and Confidentiality policies within this handbook for information on following privacy guidelines.

## VALT Overview

The MS-SLP program utilizes VALT software for video recording of diagnostic and clinical sessions.  This offers student clinicians a valuable learning tool to go back and watch a session.  To access the VALT system, students must be in specified locations within the Elkhart Center, and permissions are restricted to only allow viewing of specific sessions.  Students may not download videos.  Keep in mind that the policies on HIPAA and Confidentiality apply to use of the VALT software.

## Report Formats

Templates for evaluation reports, session SOAP notes, treatment plans, progress reports, and discharge summaries can be found in the EMR.  Student clinicians in a clinical placement at an off-campus site will document according to the preferences of that site.

### SOAP Note Format

SOAP notes are a common format for documentation, and though documentation procedures will generally be guided by the site placement, student clinicians should be comfortable documenting in this manner.  SOAP stands for:

S: Subjective- Describe relevant client behaviors or status which may have influenced performance that session.

O: Objective- Record objective data collected for each task during the session.

A: Assessment- Interpret data collected for current session and compare to client's previous levels of performance.  Report any discussions or education provided to family or caregiver.

P: Plan- Identify proposed therapy targets for the next session; report any changes or adjustments made to the plan of care.

## Client/Family/Medical Provider Contacts

For clients seen in the on-campus clinic, conferences with clients and/or families and care providers should be recorded in the EMR.  The date and time of the meeting and the attendees should be documented, as well as a summary of the purpose of the conference, the discussion and/or education provided, results/recommendations, and outcome of the conference.  Contacts via phone should be documented also, as well as documenting any time a report or progress note is shared with a client's other care providers.  No information is to be shared unless the client has a current Release of Information Authorization form on file for the intended recipient.  Refer to the HIPAA, FERPA, and Confidentiality policies for detailed information.

## Shredding

Per confidentiality guidelines, all notes and papers containing sensitive data are to be shredded as soon as they are no longer needed.  Notes about a client should either be kept in the client's

file in the locked cabinet or placed in the designated shred containers within the Elkhart Center. A client's name should never be used on datasheets or observation notes from supervisors; rather, the client's initials are to be used. Even then, these notes should be shredded once no longer needed.

Storage containers designated for shredding shall be placed in non-public locations throughout the administrative space. Student clinicians can shred their own papers or may leave papers in these specified shred bins. The Administrative Coordinator will periodically shred all papers placed within these designated bins.

Please refer to Indiana University's policy on Management of Institutional Data for additional information.

## Guidance Regarding A.I. in Clinical Experiences

As artificial intelligence (AI) tools are becoming increasingly integrated into healthcare and education, our program seeks to provide students with appropriate guidance on the use of AI in clinical education. At this time in our program, graduate students are *not permitted* to use AI to generate or write clinical documentation, including SOAP notes, evaluation reports, treatment plans, or progress summaries. These documents should reflect the student's own clinical reasoning, professional judgment, and developing competencies. However, students may use AI tools responsibly for other clinical support purposes, such as organizing schedules, generating therapy activity ideas, reviewing evidence-based practices, or enhancing understanding of complex topics. Supervisors are encouraged to model and reinforce ethical, transparent, and appropriate use of AI in ways that support—rather than replace—critical thinking and clinical skill development in graduate clinicians. Students should be aware that if a clinical site uses AI-assisted tools for documentation or record-keeping, the supervisor is encouraged to contact the Clinical Director to ensure alignment with program guidelines and to support appropriate student engagement.

# Section 4: On-Campus Practicum Experiences

## Clinical Compliance

Student clinicians must provide documentation of immunization history, tuberculosis testing (TB testing), drug testing, background check, professional liability insurance, and CPR certification prior to beginning clinical activities in their first fall semester. Student clinicians need to obtain BLS Provider CPR certification. Beginning in summer 2023, the program is utilizing CastleBranch for compliance tracking. Failure to meet compliance requirements or deadlines is an issue of professionalism and will result in inability to participate in clinical activities until requirements are met.

## Clinical Assignments

On-campus clinical assignments may include individual or small group therapy and/or assignment to a support group.  Please note that therapy and groups offered may change as the program continues to develop and based on the needs of the community.

## Diagnostic Practicum Experiences

Student clinicians will complete supervised diagnostic practicums in speech-language pathology throughout the graduate program.  Diagnostic practicum experiences may include hearing screenings, pediatric speech/language screenings, full pediatric speech or language evaluations, adult cognitive-linguistic screenings, full adult speech, language, and/or cognitive evaluations, as well as evaluations of swallowing and/or voice.  Some of these evaluations will occur in the on-campus clinic, or they may be completed at sites off-campus.  For off-campus diagnostic experiences, transportation may be required and policy indicates that placements may be up to one hour away from The Elkhart Center.  Student clinicians are to participate in that which they are assigned.

## Clinical Simulation

Throughout the duration of the program, students may also be assigned simulated evaluation and intervention cases to be completed on Simucase.  These simulated clinical experiences offer valuable opportunity to gain additional clinical knowledge and practice as well as target low-incidence populations.

## Meeting with Supervisors

As part of the practicum experiences, student clinicians will meet with their supervisors on a basis determined by the supervisor and the placement.  It is likely that meetings will be more frequent early in the program and each semester, and decrease as a student progresses through the program and through a semester.  These meetings can address development of a therapy plan, session preparation, evidence based practice, strategies for working with clients, professionalism, problem solving, self-reflection, etc.  Student clinicians are encouraged to do their best to research and work through a question first before meeting with a supervisor.  Supervisors may meet with student clinicians individually or in small groups.  Student clinicians are encouraged to discuss any clinical issues with their supervisor(s).

## Client Check-In and Waiting Room

Upon their arrival to the Elkhart Center, clinic clients will ideally check in for the session in the front office area.  Student clinicians are to be near the waiting area when they anticipate a client's arrival and must remain/wait nearby if a client is tardy.  IUSB student clinicians, faculty, and staff must all work together to ensure that the waiting area is a confidential, clean, and inviting place for our clients and families.  Discussions of progress or session events should not occur in the waiting area or hallways.  Student clinicians are to alert someone on staff, or the Clinical Director, if you notice an issue with cleanliness of the waiting area.

## Clinic Rooms

The IUSB Elkhart Speech-Language Clinic housed in the Elkhart Center has three treatment rooms. Diagnostic sessions and therapy sessions will be assigned a clinic room.  Check the clinic schedule in ClinicNote for information on which room your session is assigned and do not change rooms without permission from your clinical supervisor.  Clinicians are not to have their own food or drinks in the therapy sessions, though an exception to this is having water during voice sessions.  Otherwise, only food or drink that is to be used during therapy is permissible.  Student clinicians are to avoid having personal cellular phones in the sessions; if an electronic device is needed for time-keeping, use of a timer, etc. in the session, students should utilize one of the department's Time Timers or iPads, which are kept in the technology storage area.  Students may see the Administrative Coordinator, Clinical Director, or their supervisor for access.

## Observation

Family members of clients, SLP faculty supervisors, graduate student clinicians, and qualified undergraduate students utilize the on-campus clinic observation area to observe therapy. According to fire and building codes, the observation area is limited to eight occupants at a time. Interested graduate and undergraduate clinicians are encouraged to observe, however, supervisors and parents/caregivers have top priority for observing therapy sessions.  Beyond supervisors and family/caregivers, additional observation spots for students are first come first serve until the max occupancy is reached.  Confidentiality practices must be followed when observing, including use of the curtain and divider for privacy.  Please see the Observation policy for specific procedures to follow while observing.

## Maintenance of Equipment

Certain pieces of clinical equipment require consistent maintenance.  The audiometers, Alpha OAE, and tympanometer require check and calibration at least every twelve months.  Efforts will be made to schedule this maintenance during low-usage times, and when possible, students and faculty will be given advanced notice of when these items will be unavailable.

## Empowering Students in Clinical Decision-Making

The MS-SLP program seeks to foster authentic student pride and engagement within our on-campus clinic.  Students are actively encouraged to participate in clinical decision making whenever possible. Beginning in the 2025-26 school year, second year graduate students will be dynamically involved in determining select clinical procedures for the first year students to follow and implement. While guided by the Clinical Director and supervising faculty, this active student role is meant to empower student learning regarding clinic administration and supervisory matters, increase students' sense of accountability to the clinic and community, and foster connection and mentoring between first and second year graduate students.

# Section 5:  Offsite Clinical Practicum Experiences

## Goals of the Experiences

The MS-SLP offsite clinical experiences are intended to provide student clinicians with challenging, real-world opportunities to develop their clinical skills and independence while also working to meet therapeutic need in the surrounding community.  It is intended that students will feel supported both by their assigned supervisor(s) as well as the Clinical Director as they progressively take on clinical duties in their placement(s).  By working with a variety of supervisors from the program and the community over the course of the graduate semesters, students are exposed to varied approaches and philosophies to professional practice in the field of speech-language pathology.  The immersive nature of offsite placements also provides authentic opportunity for interaction with, and learning from, professionals in related disciplines. With all sites who host a student clinician, the Clinical Director will complete at least one site visit per semester, either virtually or in-person depending on need, Supervisor's and site's preferences, and geographical location. Affiliation agreements are required for participation with off-campus clinical partner sites.

## Clinical Site Compliance and Minimum Requirements

In accordance with the policy on Clinical and Affiliation Site Compliance: Students, students enrolled in the MS-SLP program are required to achieve and maintain minimum compliance status with all identified requirements, and must follow requirements of their clinical site(s). Student clinicians must maintain accurate and up-to-date documentation of immunization history, tuberculosis testing (TB testing), drug testing, background check, professional liability insurance, and CPR certification for all clinical rotations.  All compliance tracking is housed in CastleBranch.  Failure to meet or maintain a site's compliance requirements may result in a student's inability to participate in a placement, and in the event of this, on-time program completion cannot be guaranteed.  Please refer to the program's Process of Determining Clinical Placements Policy for detailed information regarding procedures and consequences if a student is unable to participate in an assigned placement.

Some sites specify certain coursework or other requirements be completed prior to placement. If a student clinician is assigned to a placement where he/she/they will work with clients with disorders for which coursework has yet to be completed, the student may be required to complete assigned reading(s) and/or complete a learning module with an overview of the relevant disorder type(s) and/or placement, with 85% pass rate required for in-module questions.  Additionally, whenever possible students will be given the opportunity to interact with relevant equipment prior to using it with clients.  Supervisors will be made aware before the placement begins if a student clinician has not yet completed relevant coursework; in some instances it may be appropriate for the student clinician to exclusively observe his/her/their supervisor.

## Part-Time Placements

During first fall, first spring, and second fall semesters, student clinicians will be assigned a part-time clinical placement.  Some of these placements are in the community.  Transportation may be required and policy indicates that placements may be up to one hour away from the target starting point, which is either the Elkhart Center or student's preferred location.  Student clinicians will take on caseloads and responsibilities commensurate with their progression through the program.  Refer to Section 1: Structure of Clinical Practicum, for more details.

## Full Time Externships

In the summer semester and second spring semester, student clinicians are at their clinical placement to the extent mirroring a supervisor's time and hours.  There are no in-person didactic classes during these externships, therefore these placements could take place nationwide.  If a student is able to live with family or friends outside of the Michiana area during a full time externship, this should be communicated to the Clinical Director on the Placement Request form, as it may open up additional placement opportunities.  Refer to Section 1: Structure of Clinical Practicum, for more details.

## Participants of the Clinical Experience

The Clinical Director, MS-SLP faculty, and site supervisors will work together with each student to help students develop their clinical skills throughout the clinical practicum.  To ensure that the experience is successful in developing students' competence and confidence within the field of speech-language pathology, all parties must create and maintain an atmosphere of trust, open communication, and teamwork.  Time must be provided for setting goals, reflecting on practice, and incorporating constructive feedback.

# Section 6:  Clinical Grades and Evaluation

## Clinical Feedback

Student clinicians are encouraged to reflect on and be aware of his/her/their learning preferences and are encouraged to share this information with their Clinical Supervisors each semester, though it must be stressed that supervisors are not obligated to utilize this information.  Supervisors typically provide informal written and/or verbal feedback on a frequent basis.  If student clinicians are looking for feedback on a particular clinical skill, they should discuss this with their supervisor.  Student clinicians are continually developing clinical skills throughout the duration of the program and should work to incorporate feedback and constructive criticism as it is provided.  Student clinicians, you will make mistakes.  It is how we all learn.  Some of the best things you can do are willingly accept a supervisor's feedback, analyze your mistake, and learn from it.

Beneficial clinical feedback stems from adequate supervision.  For detailed information on the MS-SLP program's procedures and guidance related to supervision, please refer to the program's Supervision Policy.

## Clinical Grading

The site supervisors and supervising MS-SLP faculty formally evaluate each student clinician twice a semester: around mid-term of the placement and at the end of each practicum experience, using the CALIPSO© Student Performance Evaluation and a specified rating scale. The midterm evaluation is used to formally document and discuss the student clinician's progress and guide the student in any areas that need improvement.  If significant concerns are expressed by any party in the clinical experience, at any point in the semester, a meeting will be held with the student clinician, supervisor, and Clinical Director. A Clinical Support Plan (CSP) will be initiated if indicated. The final CALIPSO© evaluation guides a student clinician's clinical practicum grade and contributes toward a student's Cumulative Evaluation.

All students are evaluated using the same CALIPSO© skills evaluation and designated rating scale. Students are evaluated on: development of appropriate clinical diagnostic and intervention skills, quality of documentation abilities, appropriate approach to clinical work, treatment planning skills, clinical reasoning and decision making, professional behavior and communication skills, etc. Please see the CALIPSO© Evaluation template in the Appendix for all standards and skills assessed.

Each semester, there are supportive assignments and supplemental clinical work that are tracked in Canvas and factored in to a student's final grade.  The weighting of the CALIPSO© evaluation to the supplemental work to determine the final grade varies by semester and is detailed in each practicum syllabus. Additionally, repeated or frequent unprofessional behavior(s) may impact the student's ability to pass his/her/their placement; please refer to the Professionalism in Academic and Clinical Experiences Policy for details.

The CALIPSO© evaluation score, final score on the Canvas work, and any professionalism considerations form a student's final grade in practicum and fieldwork courses, and this will be a score on a 5.00 scale.  From that score, the MS-SLP program utilizes Pass/Fail for the clinical practicum and diagnostic practicum grades.  As student clinicians progress though the program, the expected performance proficiency increases to meet the expectation of developing clinical and professional competency.  The pass/fail cutoff scores by semester/course follow:

| 1st Fall Semester, G575 and G570 | | 1st Spring Semester, G585 and G580 | |
|---|---|---|---|
| 2.60-5.00 | PASS | 2.70-5.00 | PASS |
| 2.59 and below | Fail | 2.69 and below | Fail |

| Summer Semester, G680 | |
|---|---|
| 3.00-5.00 | PASS |

2.99 and below   Fail

  <u>2<sup>nd</sup> Fall Semester, G670</u>

  3.30-5.00   3.30-5.00

 3.29 and below   3.29 and
           below

  <u>2<sup>nd</sup> Spring Semester, G700</u>

  3.75-5.00   PASS

 3.74 and below   Fail

## Clinical Support Plans and Clinical Probation

A Clinical Support Plan (CSP) is for students who are not making sufficient progress toward meeting their competencies during a practicum experience, and/or those who have demonstrated repeated unprofessional behavior(s).  There are multiple ways in which a student can be put on a CSP:  A failing score at mid-point of a clinical experience with associated supervisor concern, identification of the need for a CSP by the supervising faculty member(s), failure of a prior clinical practicum or fieldwork experience, and after two reports of problematic issues in professional behavior during a placement. A student can also initiate this discussion if they feel a CSP is needed.

The CSP will identify specific areas of concern and goals/action items will be written by the supervising faculty member(s), the Clinical Director, and the student.  Once a student has been placed on a CSP the following procedures may be implemented:

- caseload expectations may be reduced
- supervision may be increased
- student and supervisor meetings should increase, to a frequency determined at the remediation meeting to best encourage student success
- other faculty members may assist the primary supervisor(s) by providing additional supervision.

At the end of the semester in which the CSP was in place, a meeting will be held between the student and Clinical Director to determine next steps; the Program Director (PD) may be present as well.  A student clinician may be taken off of a CSP if he/she/they meet all goals of the CSP and obtain a passing score in that semester's practicum experience(s).  Inability to meet the goals/action items of a CSP may result in a failure for that practicum experience.

If a student clinician earns a grade lower than the criterion score in a practicum experience (resulting in a "fail" for that practicum) or demonstrates significant unprofessional behavior within the clinical practicum experience, he/she/they will be placed on clinical probation. The student clinician must attend a remediation meeting with the Clinical Director and Program Director to discuss standards and essential functions not being demonstrated, and to develop strategies to promote the student clinician's success. A student clinician has the greater part of the responsibility for creating intervention strategies. Clinical hours accumulated during a failed practicum experience will not count towards the required 375 clinical clock hours, which may delay a student's graduation.

# Section 7: Documenting Clinical Hours and Tracking Knowledge and Skills

## CALIPSO© Overview

The MS-SLP program uses the secure, web-based program CALIPSO© for the tracking of your clinical experiences, including your clinical competencies, clinical clock hours, clinical evaluations, and academic standards. It allows for seamless communication between a graduate clinician, supervising SLP, and the Clinical Director. Student clinicians will have access to this system over the course of their graduate education and then for one year after graduation to allow and ensure access to clinical hours.

## Competencies

Per the 2020 Standards and Implementation Procedures for the Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP), competencies are sought across the lifespan and across the following "Big 9" areas:

- Speech sound production, to encompass articulation, motor planning and execution, phonology, and accent modification
- Fluency and fluency disorders
- Voice and resonance, including respiration and phonation
- Receptive and expressive language, including phonology, morphology, syntax, semantics, pragmatics (language use and social aspects of communication), prelinguistic communication, paralinguistic communication (e.g., gestures, signs, body language), and literacy in speaking, listening, reading, and writing
- Hearing, including the impact on speech and language
- Swallowing/feeding, including (a) structure and function of orofacial myology and (b) oral, pharyngeal, laryngeal, pulmonary, esophageal, gastrointestinal, and related functions across the life span
- Cognitive aspects of communication, including attention, memory, sequencing, problem solving, and executive functioning
- Social aspects of communication, including challenging behavior, ineffective social skills, and lack of communication opportunities
- Augmentative and alternative communication modalities

## Hours: What Counts and What Doesn't

The Council for Clinical Certification in Audiology and Speech-Language Pathology (CFCC) defines one 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 one hour. Only direct contact with the client or the client's family in assessment, management, and/or counseling can be counted toward the practicum requirement.

Up to 75 hours can be obtained through approved simulation opportunities.

Preparation time (e.g., gathering or making materials, writing plans, scoring tests) and documentation time do not count toward clinical clock hours. Participation in clinically related activities such as staff meetings does not count.

The program at times assigns students in a team of two to an assessment or intervention. Following the guidelines that were updated in 2023, if working in a pair, each student is instructed to only count the time that they are actively involved and engaged with a client; withdrawing from participation to solely take data generally does not count for clinical clock hours. If students or supervisors have questions about a specific scenario regarding counting the time, they are instructed to ask the Clinical Director. Supervisors are also asked to carefully review hours submissions and send back to students any that appear to need correction.

Any questions about counting clock hours, or discrepancies that may occur at a placement site, should be brought to the attention of the Clinical Director.

## Daily Clinical Hours Log

Clinical clock hours should be entered into CALIPSO© daily and submitted for supervisor verification on a schedule approved by your supervisor, but not less frequently than once monthly. Weekly or biweekly is recommended. Clock hours must be signed off on by the SLP who was doing the supervision at that time. Supervisors may not sign clock hours for clinical experiences that were supervised by another individual. An example of the Clock Hours Log Form can be found in the Appendix.

## Completion

Each student clinician's attainment of academic and clinical standards as well as his/her/their clinical clock hours are tracked in CALIPSO© throughout the duration of the program. Throughout your progression but especially as you near graduation, you are encouraged to check CALIPSO© for your progress toward meeting competencies and be proactive toward addressing competencies that are unmet. Students should also refer to the program completion checklist within CALIPSO©. When a student is nearing graduation and has met all clinical competencies and requirements, the Clinical Director will report this to the Program Director.

Students will have access to CALIPSO© for one year following completion of the program.  At the time of your graduation, you will be prompted to download and archive key PDF documents from CALIPSO© for your own data retention; this is each student's responsibility.

# Section 8:  Risk Management

## Professional Liability Insurance

Student clinicians are to purchase and obtain their own professional liability insurance.  Limits should not be less than $1,000,000 per occurrence and $3,000,000 in aggregate.  Students will need to demonstrate proof of attainment prior to beginning a clinical practicum experience.

## Universal Precautions

Following universal precautions, clinicians approach infection control by treating all bodily fluids as if they ARE known to be infections. Whenever conducting client contact that may include contact with bodily fluids, all students and faculty are expected to follow standard universal precautions. Standard precautions include:

- Using barrier protection to cover/bandage cuts and wounds,
- Wearing appropriate protective equipment (gloves, gowns, masks) as needed,
- Washing hands before and after contact,
- Cleaning and disinfection areas and equipment thoroughly (see specific procedures),
- Using caution when handling sharp objects and waste,
- Discarding contaminated materials by following biohazard procedures for disposal.

More information on universal precautions can be found here.
In the event of an exposure incident, refer to the Biosafety / Bloodborne Pathogens policy for additional information.

## Emergency Preparedness

In the event of an emergency, dial 911.  Dialing 4239 from a campus phone will reach IUSB security.  (This number should not be used during an emergency.)  In the Elkhart Center, a first aid kit can be found in the speech-language clinic space (A132) as well as the OT labs (A128 and A131), and room A106 (in the office area); an AED can be found in the downstairs hall near the bathrooms.

## Weather Related Closures

If adverse weather conditions are widespread and extremely severe, designated University senior management may determine that the campus should be closed.  Students are encouraged to register on IU Notify to receive weather alerts and other emergency notifications.

The IUSB Elkhart Speech-Language Clinic follows both IU South Bend and Elkhart Community Schools for guidance regarding weather-related closures.  If Elkhart Community Schools is on a 2 hour delay due to adverse weather conditions, the Clinic will delay opening until 10:00am.  If

Elkhart Community Schools closes due to adverse weather conditions in the area, the Clinic will close.  The Clinic would also adhere to any weather-related closure guidance set forth by IU South Bend (see next paragraph).

IU South Bend *may* cancel *classes* at the IU South Bend Elkhart Center when Elkhart Community Schools cancels classes due to weather conditions.  In most cases, when the IU South Bend campus cancels classes due to weather conditions, the Elkhart Center will also cancel classes.  If classes are cancelled at the Elkhart Center due to weather, on-site clinical activities will also be cancelled.  If a clinical placement site such as a school has a cancellation due to weather, a student is encouraged to participate virtually with his/her/their supervisor if this is possible.

During severe weather conditions, students, faculty, staff, and clinic clients are encouraged to use their best judgement about whether travel is safe for them.

## Tornado Alarm
In case of a tornado alarm, students, clients, and family members/caregivers are to go to a safe area of the building.  The Elkhart Center has a basement which is accessible via the stairs located near the rear entrance of the building.  If the basement cannot be reached, safest areas above ground are the first floor restrooms and back stairs to the basement.

## Fire Alarm
Evacuate the building if there is a fire alarm.  If you discover a fire, explosion, or smoke in the building, activate the nearest fire alarm and proceed to evacuate.  The elevator is not to be used during a fire emergency.  Direct clients and family/caregivers out of the building using the Fire Exit plan on the wall.  Familiarize yourself with this plan.  Once out of the building, gather at the Marion St. parking garage, off the back parking lot of the Elkhart Center.

## Code for Shooter
Situations with an active shooter or aggressor are dynamic and evolve rapidly.  Indiana University recommends the concept Run-Hide-Fight.  This represents options to be considered and should not be thought to be sequential.  Select the best course of action according to the situation in which you find yourself.  Indiana University has a Run-Hide-Fight video, and all are encouraged to view this.  The Run-Hide-Fight video, as well as additional information, can be found here.

## Child and Adult Protective Services
Indiana state law requires any person who has reason to believe that a child is a victim of child abuse or neglect has an affirmative duty to make an oral report to Indiana Child Protective Services (CPS) 1-800-800-5556 or to their local law enforcement.  Failure to report may result in criminal charges.  Any suspected abuse or neglect of minors on IU property or as part of an IU program must be reported to the IU Superintendent of Public Safety.
A person who believes or has reason to believe an endangered adult is the victim of battery, neglect or exploitation is required to report the facts to Adult Protective Services or a law enforcement agency having jurisdiction over the endangered adult.  Individuals may file a report

online or by calling the state hotline or calling an APS field office.  The number for the state hotline is 800-992-6978.  Locally, individuals may call APS at 574-235-5092 (or toll free at 800-626-8320).

## Section 9:  Additional Information

### IU South Bend Counseling Center (SCC)

It's okay to ask for help! The Student Counseling Center offers in-person or Zoom telehealth counseling services to all students. There is NO fee for the services. Call 574-520-4125 to speak to a counselor and proceed with a brief phone screening.

IU also offers students access to TimelyCare, which provides free, round-the-clock virtual health and well-being services.  More information can be found at: https://www.iu.edu/mental-health/find-resources/timely-care.html

### Attendance and Calendars

Student clinicians are expected to attend all anticipated days through the duration of each clinical placement.  However, illnesses and emergencies do occur.  Absences are permitted for educational activities appropriate to a clinical experience, illness, or extenuating circumstances such as a death in the family.  There are no unexcused absences allowed.  In Fieldwork I, students may take up to two personal days, and may take three personal days in Fieldwork II. These must be approved in advance by the supervisor, and should be utilized for things like medical appointments, job interviews, and significant life events rather than being considered vacation days.  If a site has a different policy regarding student days off, students are to follow the policy of the site. Student clinicians may not alter their schedule according to their preferences throughout the duration of a placement.  Please see section 2 of this handbook for the policy and procedures related to clinician absences and cancellations.

If a site has a closure or observes a holiday and a student's supervising SLP will not be working, the student clinician does not have to work that day.  If a supervising SLP has scheduled time off, arrangements should be made for another qualified SLP to cover any necessary supervision during this time, or arrange some other activity (e.g., shadowing a different profession).  If this is a frequent occurrence and another qualified SLP is consistently not available to supervise you, please notify the Clinical Director.  Beginning in summer 2025, students will also be able to work through Simucase's Career Readiness modules as part of their clinical experiences and when met with absences from their site.

Student clinicians in a *part-time* placement will follow the IUSB calendar, with the following exceptions:
- for part-time school placements where the university's scheduled breaks differ from the site's breaks, student clinicians may be encouraged to follow their site's calendar to obtain optimal clock hours
- student clinicians who wish to work over a break if their site remains open (e.g., work over IUSB's fall break because site does not have a fall break) may work this out with

their supervisor; this may be particularly beneficial if the student clinician was ill and needs to make up hours

Student clinicians in their *full-time* externships are to follow the calendar of their placement site.

# Section 10:  Appendices

| Student Clinician | |
|---|---|
| Date* | |

*If you wish to update this form due to change in interest(s), contact the Clinical Director

Where are you from (city/state)? _____Where are you living during the program? _____

Undergraduate university: _____ Worked as an SLPA? ☐ No  ☐ Yes, ____ years at _____

Any other related work experience (e.g., BCBA, care aide, etc.): _____, ____ years at _____

Disclosure of any potential conflicts of interest: _____

Have you completed 25 guided *observation* hours? ☐ Yes  ☐ No; number completed thus far: _____

Number of undergrad *clinical* hours completed (do not count observation hours or SLPA hours): _____

**I am most interested in working with the following age groups (select all that apply):**

☐birth-3   ☐preschool   ☐elementary   ☐adolescents   ☐adults   ☐geriatric adults   ☐unsure

**I am most interested in the following disorders/practice areas (select all that apply):**

| | | |
|---|---|---|
| ☐speech- articulation | ☐motor speech (dysarthria, apraxia) | ☐fluency (stuttering) |
| ☐hearing | ☐pediatric language (receptive/expressive) | ☐social communication |
| ☐acquired language (aphasia) | ☐cognitive-communicative | ☐swallowing/feeding |
| ☐AAC | ☐voice | ☐transgender voice |

☐other/specific population: Please describe _____

**I see myself possibly wanting to work as an SLP in the following settings (select all that apply):**

| | | |
|---|---|---|
| ☐acute care hospital | ☐long-term acute care hospital | ☐in-patient rehab hospital |
| ☐skilled nursing facility | ☐outpatient clinic-pediatric | ☐outpatient clinic-adult |
| ☐preschool | ☐elementary school | ☐middle or high school |
| ☐private practice | ☐home health-early intervention (First Steps) | ☐home health-adult |
| ☐children's hospital | ☐VA hospital | ☐traveling SLP |

**Any specific site(s) you would like to request:** _____

**Are you open to doing a full time externship outside the Michiana area?  ☐ No    ☐ Yes**

**Specific cities/zip codes I would be interested in for the summer and second spring full time externships:**

**Anything else you would like to add regarding placement requests?** _____

_____

**What are 3-4 words that describe you?** _____
-------------------------------------------------------------------------------------------------------------------------------------

By signing this form, I confirm understanding that my requests are not guaranteed; rather, attempts are made to accommodate each student's needs and preferences while ensuring appropriate breadth and depth of clinical experiences. I confirm that I have disclosed any known or potential conflicts of interest. I understand that my top interests may not be available or may not satisfy experience requirements that I need at a given time in the program.  I understand that transportation may be required and part-time placements may be up to one hour from the Elkhart Center.  I agree to complete clinical placements as assigned, and agree not to contact sites without explicit instruction from the Clinical Director.

_____          _____

Signature                                                                                          Date

# Performance Evaluation

Supervisor: Burch, Jerin

**\*Student:**

**\*Site:**

**\*Evaluation Type:**

**\*Semester:**

**\*Course number:**

**\*Patient population (check all that apply):**

☐ Young Child (0-5)  ☐ Child (6-17)  ☐ Adult (18-64)  ☐ Older adult (65+)

**\*  Severity of Disorders (check all that apply):**

☐ Within Normal Limits
☐ Mild
☐ Moderate
☐ Severe

**Interprofessional (or collaborative) practice (IPP) includes (check all that apply): [?]**

☐ Audiologist
☐ Dentist
☐ Dietitian
☐ Family Member
☐ Interpreter
☐ Music/Creative Arts Therapist
☐ Nurse/Nurse Practitioner
☐ Occupational Therapist
☐ Pharmacist
☐ Physical Therapist
☐ Physician
☐ Physician Assistant
☐ Psychologist/School Psychologist
☐ Recreational Therapist
☐ Respiratory Therapist
☐ Social Worker
☐ Special Educator
☐ Teacher (classroom, ESL, resource, etc.)
☐ Vocational Rehabilitation Counselor
☐ Other

**Cultural and Linguistic Variables (check all that apply when the variables for the client/patient differ from that of the student): [?]**

☐ Age
☐ Bilingual/Multilingual
☐ d/Deaf and Hard of Hearing
☐ Disability
☐ Ethnicity
☐ Gender Expression
☐ Gender Identity
☐ National Origin
☐ Non-Verbal Language
☐ Race
☐ Religion
☐ Sex
☐ Sexual orientation
☐ Verbal Language
☐ Veteran Status
☐ Other

# PERFORMANCE RATING SCALE

Click to see Rating Scale

Please refer to the Performance Rating Scale for grading criteria.
Use a score between 1 and 5, in 0.25 increments (1.25, 1.5 etc.)

* If n/a, please leave space blank. Disorder area columns highlighted in light gray show where the student has logged clock hours for this experience.

1 - Early Emerging     4 - Developing Mastery
2 - Emerging     5 - Independent
3 - Present

| Evaluation Skills | Speech Sound Production [?] | Fluency [?] | Voice [?] | Language [?] | Hearing [?] | Swallowing [?] | Cognition [?] | Social Aspects [?] | AAC [?] |
|---|---|---|---|---|---|---|---|---|---|
| | Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box. | | | | | | | | |
| 1. Conducts screening and prevention procedures, including prevention activities (CFCC V-B, 1a) | | | | | | | | | |
| 2. Demonstrates current knowledge of the principles and methods of prevention and assessment, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates (CFCC IV-D) | | | | | | | | | |
| 3. Collects case history information and integrates information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals (CFCC V-B, 1b) | | | | | | | | | |
| 4. Selects appropriate evaluation procedures (CFCC V-B, 1c) [?] | | | | | | | | | |
| 5. Administers non-standardized and standardized tests correctly (CFCC V-B, 1c) [?] | | | | | | | | | |
| 6. Adapts evaluation procedures to meet the needs of individuals receiving services (CFCC V-B, 1d) | | | | | | | | | |
| 7. Demonstrates knowledge of communication and swallowing disorders and differences (CFCC IV-C) [?] | | | | | | | | | |
| 8. Interprets, integrates, and synthesizes all information to develop diagnoses (CFCC V-B, 1e) | | | | | | | | | |
| 9. Interprets, integrates, and synthesizes all information to make appropriate recommendations for intervention (CFCC V-B, 1e) | | | | | | | | | |
| 10. Completes administrative and reporting functions necessary to support evaluation (CFCC V-B, 1f) | | | | | | | | | |
| 11. Refers clients/patients for appropriate services (CFCC V-B, 1g) [?] | | | | | | | | | |
| Score totals: | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Total number of items scored:   0   Total number of points:   0   Section Average:   0

**Comments:**

| Treatment Skills | Speech Sound Production [?] | Fluency [?] | Voice [?] | Language [?] | Hearing [?] | Swallowing [?] | Cognition [?] | Social Aspects [?] | AAC [?] |
|---|---|---|---|---|---|---|---|---|---|
| | Refer to Performance Rating Scale above and place number corresponding to skill level in every observed box. | | | | | | | | |
| 1. Develops setting-appropriate intervention plans with measurable and achievable goals that meets client/patient needs, demonstrating knowledge of the principles of intervention and including consideration of anatomical/physiological, developmental, and linguistic cultural correlates. Collaborates with clients/patients and relevant others in the planning process (CFCC IV-D, V-B, 2a) | | | | | | | | | |
| 2. Implements intervention plans that involve clients/patients and relevant others in the intervention process (CFCC V-B, 2b) | | | | | | | | | |
| 3. Selects or develops and uses appropriate materials and instrumentation (CFCC V-B, 2c) | | | | | | | | | |
| 4. Measures and evaluates clients'/patients' performance and progress (CFCC V-B, 2d) | | | | | | | | | |
| 5. Modifies intervention plans, strategies, materials, or instrumentation to meet individual client/patient needs (CFCC V-B, 2e) | | | | | | | | | |
| 6. Completes administrative and reporting functions necessary to support intervention (CFCC V-B, 2f) | | | | | | | | | |
| 7. Identifies and refers patients for services as appropriate (CFCC V-B, 2g) [?] | | | | | | | | | |
| Score totals: | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |

Total number of items scored:   0   Total number of points:   0   Section Average:   0

**Comments:**

| Additional Clinical Skills | Score |
|---|---|
| 1. Sequences tasks to meet objectives | |
| 2. Provides appropriate introduction/explanation of tasks | |
| 3. Uses appropriate models, prompts or cues. Allows time for patient response. | |
| 4. Demonstrates effective behavior management skills | |

| | Score |
|---|---|
| 5. Practices diversity, equity and inclusion (CAA 3.4B) | |
| 6. Addresses culture and language in service delivery that includes cultural humility, cultural responsiveness, and cultural competence (CAA 3.4B) | |
| 7. Demonstrates clinical education and supervision skills. Demonstrates a basic understanding of and receives exposure to the supervision process. (CAA 3.1.6B) [?] | |

Total number of items scored: __0__ Total number of points: __0__ Section Average: __0__

**Comments:**

| Professional Practice, Interaction and Personal Qualities | Score |
|---|---|
| 1. Demonstrates knowledge of basic human communication and swallowing processes. Demonstrates the ability to integrate information pertaining to normal and abnormal human development across the life span (CFCC IV-B; CAA 3.1.6B) [?] | |
| 2. Demonstrates knowledge of processes used in research and integrates research principles into evidence-based clinical practice (CFCC IV-F; CAA 3.1.1B Evidenced-Based Practice) [?] | |
| 3. Demonstrates knowledge of contemporary professional issues that affect Speech-Language Pathology (CFCC IV-G; CAA 3.1.1B) [?] | |
| 4. Demonstrates knowledge of entry level and advanced certifications, licensure, and other relevant professional credentials, as well as local, state, and national regulations and policies relevant to professional practice (CFCC IV-H) | |
| 5. Communicates effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the individual(s) receiving services, family, caregivers, and relevant others (CFCC V-B, 3a; CAA 3.1.1B Effective Communication Skills, CAA 3.1.6B) [?] | |
| 6. Provides counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others (CFCC V-B, 3c; CAA 3.1.6B) [?] | |
| 7. Manages the care of individuals receiving services to ensure an interprofessional, team-based collaborative practice (CFCC V-B, 3b; CAA 3.1.1B) [?] | |
| 8. Demonstrates skills in oral and other forms of communication sufficient for entry into professional practice (CFCC V-A) [?] | |
| 9. Demonstrates skills in written communication sufficient for entry into professional practice (CFCC V-A) [?] | |
| 10. Demonstrates knowledge of standards of ethical conduct, behaves professionally and protects client welfare (CFCC IV-E, V-B, 3d; CAA 3.1.1B-Accountability; 3.8B) [?] | |
| 11. Demonstrates an understanding of the effects of own actions and makes appropriate changes as needed (CAA 3.1.1B - Accountability) | |
| 12. Demonstrates professionalism (CAA 3.1.1B - Professional Duty, 3.1.6B) [?] | |

Total number of items scored: __0__ Total number of points: __0__ Section Average: __0__

**Comments:**

| Met All | Not Met All | (N/A) All | Met/Not Met |
|---|---|---|---|
| ○ | ○ | ◉ | 1. Demonstrates openness and responsiveness to clinical supervision and suggestions |
| ○ | ○ | ◉ | 2. Personal appearance is professional and appropriate for the clinical setting |
| ○ | ○ | ◉ | 3. Displays organization and preparedness for all clinical sessions |
| ○ | ○ | ◉ | 4. Practices the principles of universal precautions to prevent the spread of infectious and contagious diseases (CAA 3.8B) |
| ○ | ○ | ◉ | 5. Differentiates service delivery models based on practice sites (e.g., hospital, school, private practice) (CAA 3.1.1B - Accountability) |
| ○ | ○ | ◉ | 6. Explains healthcare landscape and how to facilitate access to services in the healthcare sector (CAA 3.1.1B - Accountability) |
| ○ | ○ | ◉ | 7. Explains educational landscape and how to facilitate access to services in the educational sector (CAA 3.1.1B - Accountability) |
| ○ | ○ | ◉ | 8. Identifies and acknowledges the impact of both implicit and explicit bias in clinical service delivery and actively explores individual biases and how they relate to clinical services (CAA 3.4B) |
| ○ | ○ | ◉ | 9. Identifies and acknowledges the impact of how their own set of cultural and linguistic variables affects clients/patients/students' care (CAA 3.4B) [?] |
| ○ | ○ | ◉ | 10. Identifies and acknowledges the impact cultural and linguistic variables of the individual served may have on delivery of effective care (CAA 3.4B) [?] |
| ○ | ○ | ◉ | 11. Identifies and acknowledges the interaction of cultural and linguistic variables between caregivers and the individual served (CAA 3.4B) [?] |
| ○ | ○ | ◉ | 12. Identifies and acknowledges the social determinants of health and environmental factors for individuals served and how these determinants relate to clinical services (CAA 3.4B) [?] |
| ○ | ○ | ◉ | 13. Identifies and acknowledges the impact of multiple languages. Explores approaches to address bilingual/multilingual individuals requiring services, including understanding the difference in cultural perspectives of being d/Deaf and acknowledge Deaf cultural identities. (CAA 3.4B) |
| ○ | ○ | ◉ | 14. Recognizes that cultural and linguistic diversity exists among various groups (including d/Deaf and hard of hearing individuals) and fosters the acquisition and use of all languages (verbal and nonverbal), in accordance with individual priorities and needs (CAA 3.4B) |
| ○ | ○ | ◉ | 15. Engages in self-assessment to improve effectiveness in the delivery of clinical services (CAA 3.1.6B) |

**Strengths:**

**Improvements since last evaluation if applicable:**

**Opportunities for growth:**

**Recommendations for continued growth:**

**Considering the student's knowledge and experience obtained thus far in the program, is the student meeting your expectations? Is the student performing above expectations, meeting expectations or performing below expectations?:**

**Do you recommend an intervention or action plan for this student? If yes, what skills should be supported and what specific recommendations do you have for the intervention or action plan?:**

Total points (all sections included): __0 Adjustment: 0.0
divided by total number of items __0
Evaluation score: __0
Grade/Competency Summary__

By entering the student's name, I verify that this evaluation has been or will be reviewed and discussed with the student.

*Student name: [_____]     *Date reviewed: [_____]

I verify that this evaluation is being submitted by the assigned clinical educator/supervisor and that I have mentored/educated the above-named student.

*Clinical educator/supervisor name: [_____]     *Date completed: [_____]

☐ Final submission (if this box is checked, no more changes will be allowed!)

Standards referenced herein are those contained in the Membership and Certification Handbook of the American Speech-Language-Hearing Association. Readers are directed to the ASHA Web site to access the standards in their entirety: CFCC Standards | CAA Standards

# Clockhours for Student, Ima

Student: Bubblegum, Betty

Submitted:

*Supervisor: [                    ]

Approved:

*Site: [                    ]

*Date:

*Semester: [                    ]

*Course number: [                    ]

*Clinical setting: [                    ]

*Training level: [                    ]

*Completion month: [                    ]

*Year:

| OBSERVATION - Evaluation | Child HH:MM | Adult HH:MM | Total HH:MM |
|---|---|---|---|
| Speech (articulation, fluency, voice, swallowing, communication modalities) | | | |
| Language (expressive/receptive language, cognitive aspects, social aspects) | | | |
| Hearing | | | |

| OBSERVATION - Treatment | Child HH:MM | Adult HH:MM | Total HH:MM |
|---|---|---|---|
| Speech (articulation, fluency, voice, swallowing, communication modalities) | | | |
| Language (expressive/receptive language, cognitive aspects, social aspects) | | | |
| Hearing | | | |
| **Total Observation Hours** | | | |

| EVALUATION | Child HH:MM | Adult HH:MM | Total HH:MM |
|---|---|---|---|
| Articulation/Speech Sound Production | | | |
| Fluency and fluency disorders | | | |
| Voice and resonance | | | |
| Expressive/Receptive language | | | |
| Hearing | | | |
| Swallowing/Feeding | | | |
| Cognitive aspects of communication | | | |
| Social aspects of communication | | | |
| Augmentative and alternative communication modalities | | | |
| **Total EVALUATION Hours** | | | |

| TREATMENT | Child HH:MM | Adult HH:MM | Total HH:MM |
|---|---|---|---|
| Articulation/Speech Sound Production | | | |
| Fluency and fluency disorders | | | |
| Voice and resonance | | | |
| Expressive/Receptive language | | | |
| Hearing | | | |
| Swallowing/Feeding | | | |
| Cognitive aspects of communication | | | |
| Social aspects of communication | | | |
| Augmentative and alternative communication modalities | | | |
| **Total TREATMENT Hours** | | | |
| **Total (non-Observation)** | | | |