

**Speech-Language Pathology  
Master's Degree Student  
Handbook**



**Division of Speech-Language Pathology  
Indiana University - South Bend  
2025-26**

This handbook is intended to provide all students in the speech-language pathology master's degree program with basic information about academic degree requirements for the major. Read it carefully and see the Graduate Program Director if you have any questions about any part of what is written here. This handbook supplements, but does not supersede, the degree requirements found in the Graduate School Bulletin. The program reserves the right to change and to make exceptions to the provisions of this Handbook at any time and to apply any change or to make an exception applicable to any student without regard to the date of admission, application, or date of enrollment. This Handbook is neither a contract nor an offer to enter into a contract. (CONTAINS ALL REGULATIONS PASSED BY THE FACULTY AS OF May 2025)

## Contents

MISSION STATEMENT .....	4
PROGRAM LEARNING OUTCOMES .....	4
PREPARING FOR THE PROFESSION .....	4
UNDERGRADUATE PREPARATION .....	5
PREREQUISITE COURSEWORK.....	5
PROGRAM REQUIREMENTS .....	6
ENROLLMENT STATUS.....	8
TRANSFER CREDIT .....	8
GRADING .....	9
THE CLINICAL EXPERIENCE .....	10
CLINICAL PRACTICUM.....	10
ESSENTIAL ABILITIES POLICY .....	11
EXTERNSHIPS .....	12
PRACTICUM AND EXTERNSHIP GRADES .....	12
DEGREE REQUIREMENTS .....	13
COMPLETION OF DEGREE REQUIREMENTS .....	13
COMPREHENSIVE EXAMINATION .....	13
CAPSTONE PROJECT .....	13
THESIS OPTION .....	14
INDEPENDENT STUDY.....	15
ACADEMIC PROGRESSION, PROBATION, DISMISSAL .....	15
ACADEMIC PROGRESSION .....	15
ACADEMIC PROBATION .....	17
DISMISSAL FROM THE PROGRAM .....	18
OUT OF PROGRESSION .....	19
RESUMING PROGRESSION/RETURN TO PROGRAM.....	19
PROCESS AND TIMELINE FOR GRADUATION .....	20
PETITION TO GRADUATE.....	20
TIMELINE FOR DEGREE CONFERRAL.....	20
NATIONAL EXAMINATION (PRAXIS) .....	20
SCHOOL AND PROFESSIONAL LICENSURE.....	21

CLINICAL FELLOWSHIP .....	21
STUDENT POLICIES AND PROCEDURES.....	21
MS-SLP PROGRAM POLICIES .....	22
CLINICAL POLICIES.....	24
CAMPUS, COLLEGE, AND UNIVERSITY POLICIES .....	24
STUDENT RESOURCES .....	25
APPENDICES.....	30
APPENDIX I: ASHA Standards for the Certificate of Clinical Competence .....	30
APPENDIX II: ASHA Code of Ethics <sup>1</sup> (Updated March 2023) .....	43
APPENDIX III: ASHA Scope of Practice for Speech-Language Pathology .....	44
APPENDIX IV: COUNCIL FOR CLINICAL CERTIFICATION BOARD INTERPRETATIONS ON CLINICAL PRACTICUM .....	45
APPENDIX V: Summary of Knowledge and Skills .....	47
APPENDIX VI: Calipso® Student Evaluation .....	48
APPENDIX VII: CAA COMPLAINT PROCEDURES .....	49

## MISSION STATEMENT

The MS-SLP program at Indiana University South Bend is dedicated to educating and training future leaders in the field of speech-language pathology through collaborative and community engaged classroom and clinical experiences. Students will develop clinical practices that embrace human dignity, preparing them for the evolving needs of the population.

## PROGRAM LEARNING OUTCOMES

At the end of their course of study, students will:

1. Demonstrate a wide theoretical base for understanding the basic human communication processes of both normal development as well as the nature, causes, evaluation and treatment of disorders of swallowing and communication across the lifespan.
2. Apply knowledge and theory of underlying processes related to communication to develop person-centered assessment and treatment plans.
3. Demonstrate awareness of different aspects of diversity, examine personal values and beliefs regarding culturally and linguistically diverse populations and translate that into the care continuum.
4. Serve as an effective team member with all relevant stakeholders, demonstrating professional standards of accountability, integrity, and privacy while interacting with individuals of varying backgrounds and duties.
5. Demonstrate critical thinking skills to formulate clinical hypotheses and make informed decisions using evidence-based information to write effective assessment and intervention plans.
6. Apply the processes of scientific inquiry to guide professional practice and promote life-long learning.

## PREPARING FOR THE PROFESSION

The Certificate of Clinical Competence (CCC) of the American Speech-Language-Hearing Association (ASHA) is the only professional credential for speech-language pathologists recognized in every state. Currently, candidates for the CCC must have completed a master's degree or its equivalent and nine months of supervised professional experience and must pass a national exam. Although certification is a voluntary process, most clinics, hospitals, and other service facilities require their employees to have the CCC. All 50 states and the District of

Columbia now also require that speech-language pathologists be licensed. Licensure requirements vary by state, and it is the responsibility of the student to research and comply with licensure requirements in the state in which she/he wishes to practice.

Students should keep in mind that the licensure landscape is constantly evolving. They should look to ASHA and their respective state associations to maintain currency with changing legislation.

## UNDERGRADUATE PREPARATION

Students must have a bachelor's degree (typically in speech and hearing sciences or communication sciences and disorders) with a preferred GPA of 3.0 from an accredited college or university (or its equivalent from a foreign institution) to be eligible for admission into the master's degree program. Students must also complete undergraduate coursework in the areas listed below with a minimum grade of C in each course. Non-majors who have not completed work in these areas will be required to take these classes before the graduate courses described on subsequent pages.

## PREREQUISITE COURSEWORK

Course	Credits
Phonetics (must include IPA transcription)	3
Speech Anatomy and Physiology	3
Child Language Development	3
Audiology/Hearing Science*	3

\*Must include audiological testing and treatment. This requirement may also be fulfilled with separate courses in audiological assessment and treatment.

In addition to required professional coursework, students hoping to achieve the Certificate of Clinical Competence in speech-language pathology must document, according to ASHA requirements (Standard IV-A), coursework (at least one course in each of the four areas) in the following basic sciences with a minimum grade of C in each course (coursework with a grade below C will not fulfill these requirements):

- Coursework in **biological sciences** taken outside the field of speech and hearing science (e.g., biology, human anatomy and physiology, neuroanatomy and neurophysiology, human genetics, veterinary science, etc.).
- Coursework in **physical sciences**: Students **must** take Physics or Chemistry. (CFCC 2020 standards).

- Coursework in **behavioral and/or social science** taken outside the field of speech and hearing science (e.g., psychology, sociology, anthropology, public health, etc.).
- Coursework in **statistics** taken outside the field of speech and hearing science. The statistics requirement cannot be met by a research methods course in speech and hearing science.

This coursework may be carried forward from the undergraduate degree, or taken for credit at an accredited college or university as a continuing education student or at the graduate level; if they are taken at the graduate level, they may not be counted to satisfy any requirements for the master's degree. Students are encouraged to visit the ASHA website to review the above as well as additional certification requirements, as it is ultimately **their responsibility to ensure they have fulfilled certification requirements** (see "Certification/Licensure" in this manual for more information).

## PROGRAM REQUIREMENTS

The graduate program in Speech-Language Pathology is accredited by the Council on Academic Accreditation of the American Speech-Language-Hearing Association. Graduate speech-language pathology students will take five semesters (including summer) to complete the master's degree. All graduate students must complete the following requirements:

- 41 credit hours of required academic coursework beyond the bachelor's degree,
- 12 credit hours of required clinical coursework including on and off-campus part-time clinical practicums,
- 14 credit hours of off-campus full-time externships (summer II and spring II),
- Pass a comprehensive examination,
- Completion of a Capstone project or thesis option,
- Optional thesis for a minimum of 7 additional credit hours.

If a student does not pass the Capstone project, they are not eligible to switch to a thesis. See Capstone requirements for more details.

The graduate speech-language pathology curriculum content and sequence is revealed in the following table.

<b>COURSE</b>	<b>CREDIT HOURS</b>
<b>FALL I</b>	
SLHS-G 520 SPEECH SOUND DISORDERS	3
SLHS-G 505 CLINICAL METHODS IN SLP AND AUDIOLOGY	2
SLHS-G 521 EARLY CHILDHOOD LANGUAGE DISORDERS AND AUTISM	3
SLHS-G 504 MULTICULTURAL DIVERSITY AND COUNSELING	3
SLHS-G 501 NEUROANATOMY	3
SLHS-G 575 CLINICAL PRACTICUM I	1
SLHS-G 570 DIAGNOSTIC PRACTICUM I	1
<b>TOTAL</b>	<b>16</b>
<b>SPRING I</b>	
SLHS-G 522 SCHOOL AGE LANGUAGE AND LITERACY	3
SLHS-G 537 ADULT ACQUIRED LANGUAGE DISORDERS	3
SLHS-G 544 DYSPHAGIA	3
SLHS-G 511 BEST PRACTICES FOR SCHOOL SLPS	1
SLHS-G 502 RESEARCH METHODS AND EBP	3
SLHS-G 503 CAPSTONE PROJECT/RESEARCH	2
SLHS-G 585 CLINICAL PRACTICUM II	1
SLHS-G 580 DIAGNOSTIC PRACTICUM II	1
<b>TOTAL</b>	<b>17</b>
<b>SUMMER I</b>	
SLHS-G 535 CLEFT PALATE AND RESONANCE DISORDERS	1
SLHS-G 550 FLUENCY DISORDERS AND MANAGEMENT	2
SLHS-G 512 MEDICAL SPEECH-LANGUAGE PATHOLOGY	1
SLHS-G 510 AUDIOLOGY AND THE SLP	1
<b>TOTAL</b>	<b>5</b>
<b>SUMMER II</b>	
SLHS-G 680 FIELDWORK I	5
<i>SLHS-G 600 OPTIONAL THESIS</i>	1-3
<b>TOTAL</b>	<b>5</b>
<b>FALL II</b>	
SLHS-G 560 AUGMENTATIVE AND ALTERNATIVE COMMUNICATION	3
SLHS-G 555 MOTOR SPEECH DISORDERS	3
SLHS-G 610 PROFESSIONAL REGULATION AND ISSUES	1
SLHS-G 540 VOICE DISORDERS	3
SLHS-G 531 COGNITIVE-COMMUNICATION DISORDERS IN BRAIN INJURY AND DISEASE	3

<b>SLHS-G 670 DIAGNOSTIC &amp; CLINICAL PRACTICUM III</b>	2
<b><i>SLHS-G 600 OPTIONAL THESIS</i></b>	3
<b>TOTAL</b>	<b>15</b>
<b>SPRING II</b>	
<b>SLHS-G 700 FIELDWORK II</b>	9
<b><i>SLHS-G 600 OPTIONAL THESIS</i></b>	TBD
<b>TOTAL</b>	<b>9</b>

## ENROLLMENT STATUS

All degree seeking graduate students must register each semester during the dates and times posted by the University's Registrar. Students are expected to enroll as full-time status for the duration of the program (6 semesters). Indiana University South Bend defines full time and half-time enrollment status in the following manner:

Status	Fall/Spring	Summer
Full time	8 credits	4 credits each session (total 8)
Part time	7 or fewer	3 or fewer per session (7 or less)

## TRANSFER CREDIT

The program may accept graduate coursework completed at another accredited college or university toward meeting its degree requirements. Official transcripts must be submitted to Graduate Admission from the records office where the credits were earned. A student may transfer graduate credits at another accredited college or university only if all the following requirements are satisfied:

- The student has graduate degree-seeking status at Indiana University South Bend,
- The courses taken were graduate courses that are appropriate for their graduate program at IUSB and grades of B or higher were achieved,
- The courses to be transferred were completed within a five-year period prior to admission to the graduate program,
- The transfer must be approved by the Program Director at the time of admission.

Typically, no more than six semester graduate credits may be transferred into the MS-SLP program. Grades for accepted transfer courses are not included in the student's IUSB GPA. The post-secondary institution must have candidacy status or accreditation by a regional accrediting association.



## GRADING

All courses in the Graduate Program in Speech-Language Pathology utilize the following grading scale. An attainment of at least a B- is required to successfully pass an academic course. Failure to receive a final grade of "B-" will require the student to retake the course, be placed on academic probation, and fall out of progression. Clinical practicums are graded on a pass/fail basis. Students should refer to the clinical handbook for details regarding what factors might contribute toward a failing grade in clinic. Failed clinical coursework must also be repeated and the hours obtained are not eligible to count toward the ASHA requirement.

100-97	A+	89-87	B+	79-77	C+	69-67	D+
96-93	A	86-83	B	76-73	C	66-63	D
92-90	A-	82-80	B-	72-70	C-	62-60	D-
						59 & below	F

If a student is unsuccessful in a course, refer to the IU South Bend Bulletin and this handbook for progression guidelines.

## GRADE GRIEVANCES

If a student disputes their final course grade, the student must discuss the matter with the faculty member assigning the grade. Further information regarding grade grievances can be found in the current IU South Bend **Bulletin** and **Code of Student Rights, Responsibilities, and Conduct**. Assistance may also be obtained from a Student Services Advisor. The following link has further information about the grade grievance process.

<https://students.iusb.edu/registrar/grades/grievances.html>

## WITHDRAWALS

Withdrawals prior to the last day to drop a course (see official calendar for each semester) are automatically marked W. According to university regulations, withdrawal after this date is permitted only with the approval of the Dean of the student's school for urgent reasons related to the student's health or equivalent distress. In all such cases, the student must submit a request for late withdrawal to the graduate program director. This request must be supported by the instructor of the course, the graduate program director, and then be forwarded to the dean with an accompanying statement outlining the reasons for the request. If the dean approves the request, the student's mark in the course shall be W, if the work completed up to the point of withdrawing is passing (B- or above); otherwise a grade of F shall be recorded. Failure to complete a course without an authorized withdrawal results in the grade of F.

## THE CLINICAL EXPERIENCE

### CLINICAL PRACTICUM

Graduate students are required to enroll in 5 semesters of clinical practicum to obtain 400 clinical hours. Students must complete and provide documentation of 25 observation hours in the field of speech-language pathology or audiology prior to beginning a clinical placement. These hours must have been obtained under an ASHA certified SLP. It is increasingly imperative to ensure the certification status of the SLP a student is observing. Students enrolled in clinical practicum in speech-language pathology will be required to attend class meetings and participate in assigned clinical practicum unless alternative arrangements have been made in advance with the Speech-Language Clinic Director. Students at Indiana University South Bend who desire certification to practice as speech-language pathologists will be provided with the opportunity to obtain the proper number and distribution of supervised clinical contact hours. The hours of supervised clinical practicum required by ASHA are, however, to be regarded as minimum hours. It is the policy of this training program that students should have the maximum possible amount of supervised clinical practicum before leaving the program. For this reason, no students should regard the number of hours required by ASHA as the total number of hours she or he is expected to acquire. Only direct contact with the client or the client's family in assessment, management, and/or counseling can be counted towards practicum in speech-language pathology. Students transferring from other institutions should arrange to have any previously obtained practicum hours verified and sent to the Speech-Language Clinic Director.

Additionally, our department's policy is that students who are working and counting hours toward certification also need to be admitted and enrolled in the master's program while they are working. The department is not permitted to be accountable for hours that were acquired when it was not a partner in the "contract" between the student and his or her work site; there is no way the department can stipulate, after the fact, that ASHA supervision as well as other standards were met under those conditions. ASHA policy was established to permit students who were employed with a bachelor's degree to work toward the master's degree and certification without needing to leave employment completely to do so. The word "practicum" above is an important one because it implies status as a student and therefore, admission/enrollment in a graduate program. Therefore, the hours that a student accrued during the time between his or her undergraduate and graduate degrees cannot be counted within the 400 for certification because there was no university link for the student during that time period.

Indiana University South Bend's Division of Speech-Language Pathology makes every effort to help students obtain sufficient clinical practicum across the age span and across disorders (typically exceeding the minimum hours specified by ASHA) on a timely basis prior to exiting the program. However, if special circumstances arise that cause a student to obtain fewer clinical contact hours than recommended in one or more semesters, that student may need to extend

her or his clinical training program to fulfill all the academic and clinical requirements for the master's degree. Special circumstances may include, but are not limited to, poor academic or clinical performance, as well as situations related to personal necessity, such as pregnancy, extended illness, or emotional difficulties. In some of these special circumstances, documentation from the Office of Accessible Educational Services (AES) or a physician may be required. Another special circumstance may occur when a student requests externship experiences knowing in advance that the experience will be too limited in scope (e.g., exclusively pediatric) to fulfill the requirements of the clinical training program and possibly ASHA certification requirements.

Students may be assigned by the Clinic Director to the on-campus clinic for all or part of their practicum assignment for a semester. Students may be assigned to part-time, off-campus sites as part of their clinical practicum. In addition, students will complete two full-time (35-40 hour per week) practicum experiences in Summer IIB and Spring II. Off-campus practicum assignments during the academic semesters are made within commuting distance of the campus, but the full-time practicums can be arranged, with Department approval, outside of the commuting radius. See externship information below. Reliable transportation provided by the student is an expectation of the program. Travel liability to and from clinical assignment and community activities sites is the sole responsibility of the student. Indiana University South Bend does not provide travel liability insurance. Such travel has inherent risks and these risks are accepted by the student.

## ESSENTIAL ABILITIES POLICY

Students must demonstrate these essential abilities to succeed in their program of study. Qualified applicants are expected to meet all admission criteria and matriculating students are expected to meet all progression criteria, as well as these essential abilities (technical standards) with or without reasonable accommodations.

Essential judgment skills to include: ability to identify, assess, and comprehend conditions surrounding patient situations for the purpose of problem-solving around patient conditions and coming to appropriate conclusions and/or course of actions.

Essential physical/neurological functions to include: ability to use the senses of seeing, hearing, touch, and smell to make correct judgments regarding patient conditions and meet physical expectations to perform required interventions for the purpose of demonstrating competence to safely engage in the practice of speech-language pathology. Behaviors that demonstrate essential neurological and physical functions include, but are not limited to observation, listening, understanding relationships, writing, and psychomotor abilities consistent with course and program expectations.

Essential communication skills to include: ability to communicate effectively with fellow students, faculty, patients, and all members of the healthcare team. Skills include verbal, written, and nonverbal abilities as well as information technology skills consistent with effective communication.

Essential emotional coping skills: ability to demonstrate the mental health necessary to safely engage in the practice of speech-language pathology as determined by professional standards of practice.

Essential intellectual/conceptual skills to include: ability to measure, calculate, analyze, synthesize, and evaluate to engage competently in the safe practice of speech-language pathology.

Other essential behavioral attributes: ability to engage in activities consistent with safe speech-language pathology practice without demonstrated behaviors of addiction to, abuse of, dependence on alcohol or other drugs that may impair behavior or judgment. The student must demonstrate responsibility and accountability for actions as a student in the School of Rehabilitation Sciences and as a developing professional speech-language pathologist consistent with accepted standards of practice.

## EXTERNSHIPS

Students will be expected to complete 2 full-time externships during the program as outlined above. A medical setting is the target experience for the Summer IIB externship, while there is flexibility in the practicum site for Spring II. During Spring II, students who wish to become certified to work as speech-language pathologists in the schools will be assigned full-time, to a 12-week practicum in the public schools as this is a licensure requirement for most states. Graduate students who come from other schools where they have already completed the school practicum do not need to repeat that assignment but may receive an additional hospital or rehabilitation placement if available. These assignments may be any place where a site and a certified supervisor can be identified. Students are advised that some hospitals/rehabilitation facilities now require a 12-week externship and thus should clarify the length of the externship when making plans for their off-campus clinical placements. Due to changing landscapes with reimbursement, medical sites can no longer be guaranteed. The program is committed to providing experience across the lifespan and will work diligently to ensure this standard is met.

Please note: Many sites are assigned over a year in advance, so it is imperative that planning for full-time practicums be done early. The Clinic Director will present information needed to begin this process during the first semester of the program. Students should plan for, and secure placement offers by midterm of the first semester of graduate school.

## PRACTICUM AND EXTERNSHIP GRADES

Students should be aware that satisfactory clinical performance is a part of the department's expectation of them. Every graduate student must enroll in clinical practicum each semester, beginning in Fall I. Only the Clinic Director can waive this requirement. To have the Department Chairperson sign the application for the ASHA Certificate of Clinical Competence, students must complete clinical practicum without having obtained a failing clinic grade in more than one semester (i.e., you must obtain a pass in clinic for four of the five semesters for which you are

enrolled). In addition, should students have one semester with a failing clinic grade, the practicum hours completed during that semester cannot be counted toward ASHA certification. Without the signature of the Department Chairperson on your application, students will be unable to obtain clinical certification to practice as a speech-language pathologist.

Finally, students who receive a failing practicum grade in any clinical assignment as indicated on the Calipso® Student Performance Evaluation will be placed on clinical probation. For further information about any of the above clinical requirements as well as further information of clinical practicum policies (e.g., when and how a student may be placed on a Student Success Plan), students should consult this Handbook and the Clinical Handbook.

## DEGREE REQUIREMENTS

### COMPLETION OF DEGREE REQUIREMENTS

A student who successfully meets the Program Requirements listed below is eligible for conferral of the MS degree in Speech-Language Pathology.

1. 67 total credit hours of academic coursework, clinical coursework, and off-campus externships.
2. A passing grade on the comprehensive examination.
3. Completion of a Capstone project or thesis option (minimum of 7 additional credit hours).

### COMPREHENSIVE EXAMINATION

All students must successfully pass a comprehensive examination to meet the degree requirements outlined in the Bulletin. This examination will occur during the final spring semester of study, but a practice attempt with feedback and revision will occur in the fall semester before. Students out of sequence will require a modification of this timeline according to their revised course of study. Students will obtain access to a Canvas course for the Comprehensive Examination in the second fall semester and will retain access through their degree completion. This course will contain the information students need to be successful on this component of their degree completion.

### CAPSTONE PROJECT

All students not pursuing a thesis option will be required to complete a Capstone Project to fulfill the degree requirements outlined in the Bulletin.

Students will register for SLHS-G 503 Capstone Project (2 credits) in their first spring semester. In SLHS-G 503, students will work through the components of the project and submit it for grading at the end of that term. Details regarding the components of the Capstone are available through the course syllabus and the Canvas course assigned.

## THESIS OPTION

Students choosing to write a thesis must select a thesis committee consisting of at least three academic faculty members from the Department. One of these faculty members will be chosen by the student to chair the committee. Students may choose to include clinical faculty as additional members of the thesis committee. The thesis committee shall:

1. Approve the thesis topic based upon a written proposal.
2. Assist in guiding the research.
3. Conduct an oral defense of the completed project.
4. Accept the properly written thesis.

Steps to completing a thesis typically include:

1. Identifying a thesis advisor/chair and committee.
2. Completing a thesis prospectus and obtaining committee approval of that prospectus.
3. Completing the thesis project.
4. Passing the oral defense.
5. Submitting the final copy of the thesis to the department, and committee members. Students are expected to provide committee members with hard copies of the prospectus and the final copy of the thesis.

The “use of human subjects” guidelines must be applied to ALL research utilizing human subjects. Approval of the research must be granted by the “Committee on Human Subjects.” Please consult your thesis advisor for complete information. Style and documentation will correspond to the professional journals of the American Speech-Language-Hearing Association and the Indiana University Graduate School (see <http://graduate.indiana.edu/theses-dissertations/formatting/index.shtml> for guidelines—students are advised that these guidelines vary from semester to semester).

The following thesis options are available:

1. Experimental Group or Single Subject Research Design. The traditional type of thesis completed in this department. Replication of key studies in the literature is encouraged.
2. Library Research Design. The project will include minimally:
  - Comprehensive review of pertinent English language literature.
  - Critique and discussion of unresolved issues in the field.
  - Conclusion and implications for theory/therapy and further research.
3. Individual Case Study Design.
  - Client must present evaluation, management, and treatment of problem(s) sufficiently interesting to warrant research attention.
  - Thesis supervisor and the clinical director must approve client choice and assessment/intervention procedures prior to data collection.
  - Student must research the literature for relevant diagnostic tools, treatment considerations, assessment strategies, interdisciplinary referral and consultation needs, and theoretical considerations. A written report of the literature as applied to the client is required.

Students completing a thesis will typically register for 3 semester credit hours of SLHS-G600. Students may elect to register for 3 credits in Summer II and 1-3 credits in Fall II. Students who elect to complete a thesis will typically begin the process of identifying a topic/mentor during their first (Fall I) semester in the program and then, depending on which thesis option is chosen, start working on the thesis in the Spring I session as SLHS-G502 (Capstone) or Summer II semester. Thus, the thesis process is often initiated prior to registering for thesis credits.

## INDEPENDENT STUDY

In some circumstances, students may transfer credit hours into the program that do not directly match the credit load assigned to our coursework. In this case, students will be required to register for an Independent Study (SLHS-G690) as 67 credit hours are required to graduate. This course is offered in variable credit from 1-3 hours. It will be designed and scheduled per student need and designed around student's preferred area of concentration and faculty availability.

## ACADEMIC PROGRESSION, PROBATION, DISMISSAL

### ACADEMIC PROGRESSION

It is the goal of the department's faculty that all students make satisfactory progress toward the master's degree. We have found that the transition into graduate school can be very difficult for some students because of the increased demands that accompany graduate school and clinical assignments. To avoid problems and in line with ASHA requirements, the academic and clinical faculty formally reviews the progress of each master's student at mid-semester throughout their program. Prior to midterm, faculty will first utilize the Student Engagement Roster embedded within the Canvas course to provide feedback to the student regarding performance. They also complete an internal form to alert the Program Director of academic concern. Off-site clinical supervisors will be asked to provide feedback to the clinic director at marked intervals about student skills and performance. This step is critical in the first few weeks of class and weekly SER feedback is the expectation of faculty. If a student is having trouble with academic content or with clinical skills and is in jeopardy of not meeting the course objectives, the faculty or clinical supervisor will be responsible for reporting this to the program director using the above-mentioned form.

Once the concern is identified, it is primarily the joint responsibility of the involved faculty member and the student to meet and create a plan for Student Success. In some cases, the Program Director of the Speech-Language Pathology Graduate Program will schedule a meeting with the student to help identify remedies for the problem (e.g., reduce clinical load, reduce credit hours). Referrals may be made to student support services on campus and the PD can assist in coordinating these referrals. In cases in which the primary concern is clinical progress, a meeting with the student, Program Director, and the Speech-Language Clinic Director will be scheduled.

Students are reminded that assessment of achievement is a joint effort and the responsibility of students, and clinical and academic faculty members. Students are therefore encouraged to carefully monitor their own academic and clinical progress, and if indicated, initiate discussion, action, or both to assure timely completion of their master's degree.

The program utilizes the following Student Success Plan to provide feedback to students and to develop a mutually agreed upon plan to ensure success:

#### Student/Faculty Student Success Plan

Student Name:  
Faculty Advisor:  
Date of Session:

Student concerns/questions:  
Faculty concerns:  
Additional comments:

Plan of Action:

Action Item	Individual responsible	Date to be completed
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At a minimum, the Student Success Plan should include

1. A description of the problem, program competencies or objectives not being achieved.
2. Goals to achieve to be successful.

It should also be mutually developed plan between the student and the faculty. The plan will also include deadlines by which these goals must be achieved. If a student is unable to fulfill the terms of this plan, it may prevent program progression.

This plan is developed between the faculty and student and then shared with the program director/clinical director who will monitor the student's progress in the coursework. A copy of this plan is placed in the student's file after it is shared with the student. In certain circumstances, the Program Director or Clinical Director may also document concerns and communication in AdRx, the advising record and students have access to these records.

The program is committed to on-time degree completion and the option of a Student Success Plan was devised to help the student identify areas for growth and to ensure programmatic support in overcoming obstacles to success.

## ACADEMIC PROBATION

There are occasions when student performance results in academic probation.

Graduate students must maintain at least a 3.0 overall GPA throughout the program. A student is placed on academic probation if one of the following occurs:

- The student earns a grade lower than a B- in a course or a failing grade in clinic.
- The student earns a single semester GPA lower than a 3.0.

If a grade lower than a B-/fail is obtained, the student must retake the course. The existing grade continues to count toward the student's cumulative GPA.

The following policies apply to academic probation:

1. Students who are placed on academic probation due to a grade lower than B- on a single academic course or a cumulative GPA of less than 3.0 in the semester may have clinical assignments reduced or eliminated during the next semester of graduate enrollment. Changes in clinic privileges will be made to help students focus on their academic work to increase their

GPA. Decisions about clinic involvement will be made with input from the student, Program Director, and Speech-Language Clinic Director. If clinic privileges are restricted, extended enrollment in the department may be necessary to offset the lost clinic hours.

2. Students placed on academic probation will meet with the Program Director to review the Student Success Plan established during the prior semester and determine what additional supports (if applicable) may be needed. Since students cannot receive a cumulative GPA below 3.0 in more than one semester without facing academic dismissal, this meeting and the plan crafted is of vital importance.

3. If the student does not receive a “pass” in a clinical practicum course, the Student Success Plan will be reviewed and discussed. Clinical assignments will also be reviewed as needed.

4. Students who are on academic probation may not register for the following semester until grades are received for the probationary semester. A letter will be placed in the student’s file indicating that she or he is on probation. Students must follow the pre-requisite guidelines for coursework when registering for the next semester.

## DISMISSAL FROM THE PROGRAM

A graduate student in speech-language pathology is dismissed from the program when, in the judgment of the program director and the Dwyer College of Health Sciences, there is a lack of progress toward the degree. Lack of progress includes, but is not limited to the following:

- i. Failure to achieve a cumulative GPA of 3.0 in any two semesters.
- ii. A grade lower than a B-/fail in two courses during any given semester.
- iii. Demonstration of repeated unethical behavior that violates the ASHA Code of Ethics. This may include academic dishonesty, falsification of records and reports, plagiarism, cheating on an examination, quiz, comprehensive examination, or any other assignment. Dismissal in these cases may occur without prior probation.

When a student is dismissed, he or she will receive a formal letter from the Dean of the College of Professional Studies and Graduate Program Director and/or Judicial Affairs. Dismissal from the program is a serious matter and procedural safeguards are in place to protect the student and the University. Students have a right to appeal decisions made by the program and should follow College Policies related to this.

## OUT OF PROGRESSION

The MS-SLP Program at IUSB is a cohort model program. Students are expected to continue to progress through the program full-time without interruption for 5 semesters. Students will fall out of progression if any of the following occur:

1. Receive a grade below B- in any academic course, resulting in course retake.
2. Receive a “fail” grade in clinical practicum, resulting in hours not counting toward 400 total and mandatory repetition of the practicum.
3. Withdrawal or a grade of an “Incomplete” from any course or semester for any reason during any given semester.

## RESUMING PROGRESSION/RETURN TO PROGRAM

Resuming study for out-of-progression students is not automatic. Students are advised that courses are only offered during specific semesters, so if a retake is required, the student will have to retake that course the following year thus delaying completion of the program. In addition, some graduate level courses have pre-requisites. Students may not enroll in coursework and clinical experiences that have pre-requisite coursework assigned to them. When enrollment in the program is disrupted for a semester or more, students who wish to reenter or progress in the program must submit a written request for reentry to the Program Director. This request requires a list of the specific courses in which the student wishes to enroll. All requests for resumption of study are evaluated based on available resources and, if appropriate, on satisfactory completion of any conditions and/or faculty recommendations that existed at the time progression was disrupted.

Students desiring to resume study must submit a written request in the form of an email or formal letter to the program director at least 2 weeks prior to the start of the semester during which they want to return.

Students who resume study must adhere to the policies in effect at the time of return.

An IUSB-SHS student may resume study only one time. Students will be dismissed from the IUSB-SHS upon failure of one additional program course, breach of the Code of Ethics for the program of their major, breach of the Critical Behaviors policy or the Essential Abilities policy, or the Indiana University Code of student rights, Responsibilities, and Conduct (see dismissal policy). Students who have been dismissed from the program are not eligible for return.

## PROCESS AND TIMELINE FOR GRADUATION

### PETITION TO GRADUATE

Students must complete a petition for graduation with Indiana University South Bend. This form is available through the school recorder within the Dwyer School of Health Sciences. Students should submit this form along with the application for degree to student services for processing. The Department's administrative support will help remind students of the deadline for this petition. However, it is ultimately the responsibility of the student to ensure that graduation requirements are met and that deadlines are adhered to. Failure to petition on-time will delay graduation until the August semester. Commencement ceremonies occur only in May. Attendance is optional although highly encouraged and requested. The student must complete the application form and submit to the advising center for processing by September 15 for December graduation and by January 15 for May, June, or August graduation.

### TIMELINE FOR DEGREE CONFERRAL

The registrar's office processes final grades and posts the degree earned on transcripts at set intervals throughout the academic year. The program abides by the May degree conferral, but there is also a June and August option if a student has not fully met requirements (i.e. required extended time in an externship, did not pass the comprehensive examination). Students should be aware that commencement does not automatically equal the ability to obtain a license to practice. Licensure boards require final transcripts to be sent with the degree listed. This will not occur until end of May. Likewise, the licensure board processes hundreds of applications from new graduates at the end of each academic year. There may be delays that are not within the program's control.

Students should be mindful of the timelines discussed above when negotiating a start date for employment. Under certain circumstances, the program will provide a letter certifying a student has met degree requirements prior to the date of commencement. These steps are outlined in Policy SLP-AO-01-A.

### NATIONAL EXAMINATION (PRAXIS)

All master's degree students should plan to take the examination at or near the completion of their coursework. Students may decide to take this at specific times during the year. If you fail the examination, it may be repeated, but a passing grade must be received before receiving ASHA certification.

The program is required to report annual Praxis pass rate to our accrediting body. For this reason, it is imperative that students send their PRAXIS scores to Indiana University South Bend and should do so at the time of the examination to avoid additional fees. It is also

recommended that students submit scores to ASHA and the state(s) in which they wish to obtain licensure. Further information regarding reporting of scores will be provided during clinical practicum in the Fall II semester.

## SCHOOL AND PROFESSIONAL LICENSURE

Special licensure must be obtained by those who wish to work in the schools. In addition to meeting the ASHA requirements for certification mentioned above, a full-time school externship must be completed to obtain licensure in some states. Additional coursework may be required for states outside of Indiana. Please see the Director of Clinical Education for specific licensing procedures in Indiana. It is the student's responsibility to research licensure requirements outside of the state of Indiana. This program meets all the degree requirements for professional licensure in Indiana.

## CLINICAL FELLOWSHIP

The Clinical Fellowship (CF) is usually completed after the degree is granted. It may be completed during the first year of actual employment as a clinician, or it may be accomplished in certain settings as a 9- to 18-month special position.

The CF must be supervised by a professional who holds CCC in the area you seek for yourself (speech- language pathology). Specific requirements for the CF can be obtained from ASHA.

## ASHA CERTIFICATION

Any student who completes the clinical program of the Department of Speech and Hearing Sciences with a clinical master's degree in speech-language pathology is eligible to apply for ASHA certification (CCC- SLP). To do so, they must complete the following:

1. Graduate coursework.
2. Supervised clinical practicum.
3. National Examination in Speech-Language Pathology (PRAXIS).
4. Clinical Fellowship Year (CF).

## STUDENT POLICIES AND PROCEDURES

The Vera Z. Dwyer School of Health Sciences has adopted numerous policies as they pertain to Student and Academic Affairs. These policies have been drafted and approved by the faculty in accordance with IU policies and affiliation agreements with our numerous clinical sites.

Students are expected to familiarize themselves with these policies and adhere to them. Questions regarding each policy can be directed to the Program Director who will consult with the Associate Dean for Student Success as needed for interpretation. In addition, some policies are program-specific but have been vetted by the faculty and are reviewed and updated annually or as need arises.

### Indiana University Code of Student Rights, Responsibilities, and Conduct

Each student is provided with a copy of the Indiana University Code of Student Rights, Responsibilities, and Conduct (formerly Indiana University Code of Ethics) upon admission. This document, which applies to all Indiana University students, contains the following sections: I. Student Rights and Responsibilities, II. Student Complaint Procedures, III. Student Misconduct, IV. Student Disciplinary Procedures, V. General Provisions, VI. Adoption Provisions, and VII. Appendix. It is available online at <http://studentcode.iu.edu/>

## MS-SLP PROGRAM POLICIES

All policies listed here are provided in Appendix VIII

### *SLP-AC-01 Five-Year Course Policy*

The purpose of this policy is to outline the requirements for completion of prerequisite coursework.

### *SLP-AC-02 Course Repeat Policy*

The purpose of this policy is to outline the course repeat process for students in the MS-SLP program of the IUSB Vera Z. Dwyer School of Health Sciences (IUSB-SHS).

### *SLP-AO-01 Early Licensure Policy*

The purpose of this policy is to outline the requirements to apply for early licensure before graduation but after degree requirements have been met.

### *SLP-AS-01 Essential Abilities Policy*

This policy is to specify the essential abilities (technical standards) critical to the success of students in the MS-SLP program.

### *SLP-AS-02 Student Progression Policy*

This purpose of this policy is to identify the strategies and tools used by the graduate program in SLP to help students succeed.

*SLP-AS-03 Academic Probation within the MS-SLP Program*

The purpose of this policy is to identify the policy for students being placed on academic probation within the MS-SLP program and the implications regarding degree progression.

*SLP-AS-04 Conditional Admit Policy*

The purpose of this policy is to outline the criteria for conditional admission into the MS-SLP program.

*SLP-AS-05 Resumption of Study Policy*

The purpose of this policy is to identify the process for students seeking to resume their coursework following out-of-progression status.

*SLP-AS-06 Dismissal Policy*

The purpose of this policy is to identify the reasons for dismissal from the MS-SLP program.

*SLP-AS-07 Zoom Policy*

This policy outlines when a student may be allowed to zoom into class due to absences.

*SLP-AS-08 Criminal Background Check*

This policy informs students regarding the annual background check required for clinical placements.

*SLP-AS-09 Immunizations Policy*

This policy provides students details regarding required immunizations for clinical placements.

*SLP-AS-10 CPR Policy*

This policy outlines the type of CPR certification required for clinical placements.

#### *SLP-AS-11-Drug Screen Policy*

This policy informs students of the required drug screen upon admission to the program.

#### *SLP-AS-12 Biosafety-Bloodborne Pathogens Policy*

This policy informs students of the annual requirement to complete training related to biosafety and bloodborne pathogens in compliance with affiliation agreements.

#### *SLP-AS-13 Student Health Insurance*

This policy informs students of the health insurance requirement mandated by affiliation agreements.

#### *GHP-AS-01-Student Appeals Policy*

The graduate programs at IU South Bend have a different committee for student appeals than the undergraduate programs. This policy outlines the committee make up and the procedures.

## CLINICAL POLICIES

Students should familiarize themselves with the policies and procedures outlined in the Student Clinic Handbook. All students are expected to adhere to both the clinical and program policies when enrolled in the program.

## CAMPUS, COLLEGE, AND UNIVERSITY POLICIES

Students can find the University policies at <https://policies.iu.edu/>. The following are the most common policies applicable to graduate students.

#### *STU-00 Student Code of Conduct*

This site outlines the code of student rights, responsibilities and conduct and all IU students are held to this code. <https://policies.iu.edu/policies/stu-00-student-code/index.html>

#### *UA-02 Americans with Disabilities Act (ADA) Policy*

This policy specifies the University's ADA accommodations and adjustments for its faculty, staff, and students.

#### *UA-18 Student Record Retention Policy*

Explains the University's policies regarding the maintenance and request of student records.



### *University Course Grievance Policy*

The program follows the policies outlined by the registrar for grade grievances  
<https://southbend.iu.edu/students/registrar/grades/grievances.html>.

### *AS-13-C Confidentiality Policy*

The purpose of this School of Health Sciences policy is to outline strict guidelines regarding patient information, including computer access, security and documentation, and confidentiality.

### *ACA-59 Religious Accommodations Policy*

For students seeking a religious accommodation for a religious observance.  
<https://policies.iu.edu/policies/aca-59-accommodation-religious-observances/index.html>.

### *AS-14-A Clinical Malpractice Insurance*

The School of Health Sciences requires enrolled students in clinical programs to carry malpractice insurance.

## STUDENT RESOURCES

### *ANTI-DISCRIMINATION POLICY*

Consistent with Indiana University's Equal Opportunity Policy, the IU South Bend Speech-language Pathology program confirms and conducts all aspects of its teaching, scholarship, and service activities without discrimination on the basis of race, color, gender, socio-economic status, marital status, national or ethnic origin, age, religion or creed, disability, or political or sexual orientation or other characteristics protected by federal, state or local statute or ordinance.

Questions pertaining to discrimination may be directed the program director, Jennifer Essig, or the American Speech-Language-Hearing Association, Council on Academic Accreditation (CAA) at 10801 Rockville Pike, Rockville, MD 20852, telephone 888-321-ASHA

### *FERPA: FAMILY EDUCATION RIGHTS & PRIVACY ACT*

What are the basic rules? As a student you and your family need to be informed about this law. For more information about this law please go to: <https://students.iusb.edu/registrar/policies/ferpa.html>.

## *AFFIRMATIVE ACTION*

Responds and provides resolutions to those who are experiencing personal discomfort as a result of their race, sex, sexual orientation, age, religion, ethnicity, national origin, disability, or veteran's status. Further information can be found <https://iusb.edu/affirmative-action/index.html>

## *ACCESSIBLE EDUCATIONAL SERVICES*

Prospective students are encouraged to contact AES early in the admissions process with any questions or concerns and for assistance tracking paperwork through the admissions office. Students taking the placement exams may request special testing accommodations. Students requesting this service must provide documentation of their disability prior to receiving assistance.

Current Students: Ensuring the best possible academic experience for each of our students, regardless of their disability, means we provide accommodations, resources and referrals, and programs that meet the unique needs of each student. Students requesting services will be asked to sign a disclosure form acknowledging they understand AES's policy regarding the disclosure of disability information. It is the student's responsibility to meet with faculty to discuss accommodations for each class. Accommodations do not continue into the externship site.

More information can be found at <https://southbend.iu.edu/students/student-support-services/aes/index.html>

## *STUDENT ENGAGEMENT AND SUCCESS: STUDENT SUPPORT SERVICES*

<https://students.iusb.edu/student-support-services/index.html>

Resources include the Student Counseling Center, Disability Support Services, Office of Student Conduct, Office of Veteran Student Services, and Office of International Student Services.

## *FINANCIAL AID*

Additional information can be found at <https://students.iusb.edu/financial-aid/index.html>

## *HOUSING*

Information regarding housing can be found at <https://www.iusb.edu/housing/>

## *CAREER SERVICES*

<https://students.iusb.edu/career-services/index.html>

Provides resources and support regarding career counseling, resumes, interviews, and hosts a career/job fair annually.

### *LIBRARY SERVICES*

For full range of services that the IUSB Library offers, please go to

<https://library.iusb.edu/index.html>

### *SEXUAL MISCONDUCT (TITLE IX)*

What you should know about sexual misconduct: IU South Bend does not tolerate acts of sexual misconduct, including sexual violence. If you have experienced sexual violence, or know someone who has, the University can help. It is important to understand that federal regulations and University policy require faculty to immediately report complaints of sexual misconduct known to them to the IU South Bend Deputy Title IX Coordinator to ensure that appropriate measures are taken, and resources are made available. IU South Bend will work with you to protect your privacy by sharing information with only those that have a legitimate administrative or legal reason to know. If you are seeking help and would like to speak to someone confidentially, you can make an appointment with a Mental Health Counselor on campus through the Student Counseling Center. Find more information about sexual violence, including campus and community resources, at <http://stopsexualviolence.iu.edu>.

### *PLAGIARISM*

All students are expected to adhere to the IU Code of Conduct regarding plagiarism and use of AI. The course syllabus will contain the most current information in this area.

### *CLASSROOM ETIQUETTE*

In order to maintain a respectful environment, collegial behavior is required. Students who do not demonstrate professional, collegial behavior will be asked to leave the classroom and must meet with the instructor prior to the next class session. Any student who continues to demonstrate intimidating and/or disruptive behavior that interferes with a respectful environment conducive to learning may not be permitted to return to the classroom and will be referred to the Indiana University South Bend Office of Student Conduct.

Following IU South Bend policy, children are not permitted in the classroom, lab or clinical setting at any time.

Lecture content is presented beyond reading assignments and not all reading assignments are covered in the lecture—please plan accordingly when studying.

As a courtesy, students are to request permission of the instructor conducting the class to tape/digitally record the class.

All handouts and test questions are the intellectual property of the course instructor. Students are prohibited from posting and/or sharing handouts or test questions with other students. Sharing test questions with other students is considered as cheating and will be dealt with according to IU South Bend policy.

PowerPoint handouts are often provided for each lecture on Canvas. It is not mandatory for students to print out the handouts, which are provided as a courtesy to students. Students should be prepared to take detailed notes. These handouts are intended as a tool for students and should not be distributed for uses beyond the class note-taking.

#### LAB & SIMULATION RULES:

1. Children are not allowed in the labs at any time.
2. Clean up after your practice or lab time, returning the lab to the state you found it in.
3. Expensive, high-tech equipment is in the labs and should be cared for appropriately; assure that the doors are closed if you are the last one to leave.
4. Simulation sessions are treated as clinicals and require expected professional behavior.
5. If you do not know how to use the equipment, please seek assistance.
6. Simulations provide essential learning (or evaluation) and are to be taken seriously including any assigned preparation.
7. Inappropriate use of the lab and equipment can result in disciplinary action.

#### PROFESSIONAL ATTIRE/APPEARANCE

While on clinical rotations, including the on-campus clinic, your appearance is a direct reflection of Indiana University, therefore professional attire/appearance is of the utmost importance. Time will be spent during the first semester reinforcing the dress code appropriate for clinical practicum, but students should also review the guidelines below. Students who arrive at a clinical not appropriately dressed will be sent home and those clinical hours will need to be made up. The laboratory space at Elkhart Center is a working clinical space. There may be clients present in the building even if you are not scheduled with them. Please make sure your appearance is tidy and appropriate if visiting the lab space to review materials, plan a therapy session, or observe.

Students should follow these guidelines:

Clothing should be neat and clean. Individual supervisors may identify specific dress criteria for student clinicians, and student clinicians in an off-campus site should follow the site's dress code. Some examples of inappropriate clothing include, but are not limited to: shorts, spaghetti straps, halter tops, casual tee-shirts, workout clothes, sweat shirts, and sweat pants. **With any clothing you choose, students should be mindful of how the body may be exposed during different clinical activities (i.e. bending over table, sitting or kneeling on the floor with a child, reaching up, etc.).**

In general, careful consideration should be given to wearing jewelry during clinical experiences as it may pose a safety hazard. Jewelry that can be easily grabbed and pulled should not be worn (e.g., hoop or dangling earrings, long necklaces). This may include facial jewelry such as eyebrow and nose rings. For working with some clients, it may also be best to avoid decorative scarves around the neck. Your supervisor may require you to remove jewelry or accessories if they are a distraction to the client or a safety risk for you. Student clinicians are encouraged to wear a wristwatch while providing therapy services to assist in time management.

Some placements, particularly those in healthcare settings, may require closed-toed shoes and may discourage or prohibit the use of artificial fingernails, as these can harbor dirt and pathogens even after handwashing. It is the student's responsibility to determine the regulations of his/her site.

If you have a visible tattoo, please consider each of your client's ages, difficulties, and cultural considerations, and cover any tattoo that a client may consider scary or controversial.

Perfume, strongly scented lotion, cologne, etc. are discouraged as some clients may have allergies or be sensitive to the smell.

Clinic name tags will be ordered upon arrival and should be worn when participating in sessions at the on-campus clinic. Students should adhere to policies related to identification badges when at off-campus sites. These badges typically must be turned in upon completion of the clinical.

Some agencies, especially schools, require you to show a driver's license upon check-in. If you are visiting a school for any reason, be sure to bring a driver's license into the building.

## APPENDICES

### APPENDIX I: ASHA Standards for the Certificate of Clinical Competence

Council for Clinical Certification in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association. (2018). *2020 Standards for the Certificate of Clinical Competence in Speech-Language Pathology*. Retrieved from <https://www.asha.org/certification/2020-SLP-Certification-Standards>.

The Standards for the CCC-SLP are shown in bold. The CFCC implementation procedures follow each standard.

- [Standard I—Degree](#)
- [Standard II—Education Program](#)
- [Standard III—Program of Study](#)
- [Standard IV—Knowledge Outcomes](#)
- [Standard V—Skills Outcomes](#)
- [Standard VI—Assessment](#)
- [Standard VII—Speech-Language Pathology Clinical Fellowship](#)
- [Standard VIII—Maintenance of Certification](#)

#### **Standard I: Degree**

The applicant for certification (hereafter, “applicant”) must have a master's, doctoral, or other recognized post-baccalaureate degree.

#### **Standard II: Education Program**

All graduate coursework and graduate clinical experience required in speech-language pathology must have been initiated and completed in a speech-language pathology program accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology (CAA).

Implementation: The graduate program of study must be initiated and completed in a CAA-accredited program or a program with candidacy status for CAA accreditation. The applicant’s program director or official designee must complete and submit a program director verification form. Applicants must submit an official graduate transcript or a letter from the registrar that verifies the date on which the graduate degree was awarded. The official graduate transcript or letter from the registrar must be received by the ASHA National Office no later than one (1)

year from the date on which the application was received. Verification of the applicant's graduate degree is required before the CCC-SLP can be awarded.

[Applicants educated outside the United States or its territories](#) must submit documentation that coursework was completed in an institution of higher education that is regionally accredited or recognized by the appropriate regulatory authority for that country. In addition, applicants outside the United States or its territories must meet each of the standards that follow.

### **Standard III: Program of Study**

The applicant must have completed a program of study (a minimum of 36 semester credit hours at the graduate level) that includes academic coursework and supervised clinical experience sufficient in depth and breadth to achieve the specified knowledge and skills outcomes stipulated in Standards IV-A through IV-G and Standards V-A through V-C.

Implementation: The minimum of 36 graduate semester credit hours must have been earned in a program that addresses the knowledge and skills pertinent to the [ASHA Scope of Practice in Speech-Language Pathology](#).

### **Standard IV: Knowledge Outcomes**

#### **Standard IV-A**

The applicant must have demonstrated knowledge of statistics as well as the biological, physical, and social/behavioral sciences.

Implementation: Coursework in statistics as well as in biological, physical, and social/behavioral sciences that is specifically related to communication sciences and disorders (CSD) may not be applied for certification purposes to this category unless the course fulfills a general the university requirement in the statistics, biology, physical science, or chemistry areas.

[Acceptable courses](#) in biological sciences should emphasize a content area related to human or animal sciences (e.g., biology, human anatomy and physiology, neuroanatomy and neurophysiology, human genetics, veterinary science). Chemistry and physics are important for the foundational understanding of the profession of speech-language pathology. For all applicants who apply beginning January 1, 2020, courses that meet the physical science requirement must be in physics or chemistry. Program directors must evaluate the course descriptions or syllabi of any courses completed prior to students entering their programs to determine if the content provides foundational knowledge in physics or chemistry. Acceptable courses in social/behavioral sciences should include psychology, sociology, anthropology, or public health. A stand-alone course in statistics is required. Coursework in research methodology in the absence of basic statistics cannot be used to fulfill this requirement.

#### **Standard IV-B**

The applicant must have demonstrated knowledge of basic human communication and swallowing processes, including the appropriate biological, neurological, acoustic, psychological, developmental, and linguistic and cultural bases. The applicant must have demonstrated the ability to integrate information pertaining to normal and abnormal human development across the life span.

**Standard IV-C**

The applicant must have demonstrated knowledge of communication and swallowing disorders and differences, including the appropriate etiologies, characteristics, and anatomical/physiological, acoustic, psychological, developmental, and linguistic and cultural correlates in the following areas:

1. Speech sound production, to encompass articulation, motor planning and execution, phonology, and accent modification.
2. Fluency and fluency disorders.
3. Voice and resonance, including respiration and phonation.
4. 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.
5. Hearing, including the impact on speech and language.
6. 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.
7. Cognitive aspects of communication, including attention, memory, sequencing, problem solving, and executive functioning.
8. Social aspects of communication, including challenging behavior, ineffective social skills, and lack of communication opportunities.
9. Augmentative and alternative communication modalities.

Implementation: It is expected that coursework addressing the professional knowledge specified in this standard will occur primarily at the graduate level.

**Standard IV-D**

For each of the areas specified in Standard IV-C, the applicant must have demonstrated current knowledge of the principles and methods of prevention, assessment, and intervention for persons with communication and swallowing disorders, including consideration of anatomical/physiological, psychological, developmental, and linguistic and cultural correlates.

**Standard IV-E**

The applicant must have demonstrated knowledge of standards of ethical conduct.

Implementation: The applicant must have demonstrated knowledge of the principles and rules of the current [ASHA Code of Ethics](#).



#### **Standard IV-F**

The applicant must have demonstrated knowledge of processes used in research and of the integration of research principles into evidence-based clinical practice.

Implementation: The applicant must have demonstrated knowledge of the principles of basic and applied research and research design. In addition, the applicant must have demonstrated knowledge of how to access sources of research information and must have demonstrated the ability to relate research to clinical practice.

#### **Standard IV-G**

Implementation: The applicant must have demonstrated knowledge of professional issues that affect speech-language pathology. Issues may include but are not limited to trends in professional practice; academic program accreditation standards; [ASHA practice policies and guidelines](#); cultural competency and diversity, equity, and inclusion (DEI); educational legal requirements or policies; and reimbursement procedures.

#### **Standard IV-H**

The applicant must have demonstrated 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.

### **Standard V: Skills Outcomes**

#### **Standard V-A**

**The applicant must have demonstrated skills in oral and written or other forms of communication sufficient for entry into professional practice.**

Implementation: Applicants are eligible to apply for certification once they have completed all graduate-level academic coursework and clinical practicum and have been judged by the graduate program as having acquired all the knowledge and skills mandated by the current standards.

The applicant must have demonstrated communication skills sufficient to achieve effective clinical and professional interaction with persons receiving services and relevant others. For oral communication, the applicant must have demonstrated speech and language skills in English, which, at a minimum, are consistent with ASHA's current position statement on [students and professionals who speak English with accents and nonstandard dialects](#). In addition, the applicant must have demonstrated the ability to write and comprehend technical reports, diagnostic and treatment reports, treatment plans, and professional correspondence in English.

#### **Standard V-B**

The applicant must have completed a program of study that included experiences sufficient in breadth and depth to achieve the following skills outcomes:

1. Evaluation

- a) Conduct screening and prevention procedures, including prevention activities.
- b) Collect case history information and integrate information from clients/patients, family, caregivers, teachers, and relevant others, including other professionals.
- c) Select and administer appropriate evaluation procedures, such as behavioral observations, nonstandardized and standardized tests, and instrumental procedures.
- d) Adapt evaluation procedures to meet the needs of individuals receiving services.
- e) Interpret, integrate, and synthesize all information to develop diagnoses and make appropriate recommendations for intervention.
- f) Complete administrative and reporting functions necessary to support evaluation.
- g) Refer clients/patients for appropriate services.

2. Intervention

- a) Develop setting-appropriate intervention plans with measurable and achievable goals that meet clients'/patients' needs. Collaborate with clients/patients and relevant others in the planning process.
- b) Implement intervention plans that involve clients/patients and relevant others in the intervention process.
- c) Select or develop and use appropriate materials and instrumentation for prevention and intervention.
- d) Measure and evaluate clients'/patients' performance and progress.
- e) Modify intervention plans, strategies, materials, or instrumentation as appropriate to meet the needs of clients/patients.
- f) Complete administrative and reporting functions necessary to support intervention.
- g) Identify and refer clients/patients for services, as appropriate.

3. Interaction and Personal Qualities

- a) Communicate effectively, recognizing the needs, values, preferred mode of communication, and cultural/linguistic background of the individual(s) receiving services, family, caregivers, and relevant others.
- b) Manage the care of individuals receiving services to ensure an interprofessional, team-based collaborative practice.
- c) Provide counseling regarding communication and swallowing disorders to clients/patients, family, caregivers, and relevant others.
- d) Adhere to the ASHA *Code of Ethics*, and behave professionally.

Implementation: The applicant must have acquired the skills listed in this standard and must have applied them across the nine major areas listed in Standard IV-C. These skills may be developed and demonstrated through direct clinical contact with individuals receiving services in clinical experiences, academic coursework, labs, simulations, and examinations, as well as through the completion of independent projects.

The applicant must have obtained a sufficient variety of supervised clinical experiences in different work settings and with different populations so that the applicant can demonstrate skills across the *ASHA Scope of Practice in Speech-Language Pathology*. *Supervised clinical experience* is defined as clinical services (i.e., assessment/diagnosis/evaluation, screening, treatment, report writing, family/client consultation, and/or counseling) related to the management of populations that fit within the [ASHA Scope of Practice in Speech-Language Pathology](#).

These experiences allow students to:

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

Supervised clinical experiences should include interprofessional education and interprofessional collaborative practice and should include experiences with related professionals that enhance the student's knowledge and skills in an interdisciplinary, team-based, comprehensive service delivery model.

Clinical simulations (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). These supervised experiences can be synchronous simulations (real-time) or asynchronous (not concurrent in time) simulations.

Clinical educators of clinical experiences must hold current ASHA certification in the appropriate area of practice during the time of supervision. The supervised activities must be within the [ASHA Scope of Practice in Speech-Language Pathology](#) in order to count toward the student's ASHA certification requirements.

### **Standard V-C**

Implementation: The guided observation and direct client/patient contact hours must be within the [ASHA Scope of Practice in Speech-Language Pathology](#) and must be under the supervision of a clinician who holds current ASHA certification in the appropriate profession and who, after earning the CCC-SLP, has completed (a) a minimum of 9 months of post-certification, full-time experience (or its part-time equivalent) and (b) a minimum of 2 hours of professional development in the area of clinical instruction/supervision.

Applicants should be assigned practicum only after they have acquired a knowledge base sufficient to qualify for such experience. Only direct contact (e.g., the individual receiving services must be present) with the individual or the individual's family in assessment, intervention, and/or counseling can be counted toward practicum. When counting clinical practicum hours for purposes of ASHA certification, only the actual time spent in sessions can be counted, and the time spent cannot be rounded up to the nearest 15-minute interval.

#### *Guided Clinical Observations*

Twenty-five (25) hours of guided clinical observation hours must be completed in the undergraduate or graduate program and generally precede direct contact with clients/patients. Guided clinical observations may occur simultaneously during the student's observation or afterwards through review and approval of the student's written reports or summaries. Students may use video recordings of client services for observation purposes. Examples of guided clinical observations with a clinical educator who holds the CCC-SLP may include but are not limited to the following activities:

- debriefing of a video recording
- discussion of therapy or evaluation procedures that had been observed
- debriefings of observations that meet course requirements
- written records of the observations

It is important to confirm that there was communication between the clinical educator and observer, rather than passive experiences where the student views sessions and/or videos. The student is encouraged to (a) observe live and recorded sessions across settings with individuals receiving services for a variety of disorders and (b) complete debriefing activities as described above. The graduate program will determine how the guided observation experience should be documented. Evidence of guided observations includes signatures from the clinical educator and documentation of hours, dates, and activities observed.

#### *On-Site and In-Person Graduate Supervised Clinical Practicum*

A minimum of 250 hours of supervised clinical practicum within the graduate program must be acquired through on-site and in-person direct contact hours.

Although several students may be present in a clinical session at one time, each graduate student clinician may count toward the supervised clinical practicum only the time that they spent in direct contact with the client/patient or family during that session. Time spent in preparation for or in documentation of the clinical session may not be counted toward the supervised clinical practicum. The applicant must maintain documentation of their time spent in supervised clinical practicum, and this documentation must be verified by the program in accordance with Standards III and IV.

#### *Undergraduate Supervised Clinical Practicum*

At the discretion of the graduate program, up to 50 hours of on-site and in-person direct contact hours obtained at the undergraduate level may be counted toward the 400-hour supervised clinical practicum requirement.

#### *Clinical Simulations (CS)*

At the discretion of the graduate program, up to 75 direct contact hours may be obtained through CS. Only the time spent in active engagement with 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 as clinical clock hours.

### *Telepractice Graduate Supervised Clinical Practicum*

At the discretion of the graduate program and when permitted by the employer/practicum site and by prevailing regulatory body/bodies—and when deemed appropriate for the client/patient/student and the applicant’s skill level—the applicant may provide services via telepractice. The clinical educator/supervisor who is responsible for the client/patient/student and graduate student should be comfortable, familiar, and skilled in providing and supervising services that are delivered through telepractice. Provided that these conditions are met, telepractice may be used to acquire up to 125 contact hours, in addition to those earned through guided clinical observations (25 hours) or on-site and in-person direct contact hours (250 hour minimum).

<b>Supervised Clinical Practicum Options</b>	<b>Required</b>	<b>Minimum Toward the 400 Hours</b>	<b>Maximum Toward the 400 Hours</b>
Guided Clinical Observations	Yes	25	25
On-Site and In-Person Direct Contact Hours	Yes	250	No maximum
Undergraduate Hours	No	0	50
Clinical Simulations	No	0	75
Telepractice	No	0	125

### **Standard V-D**

At least 325 of the 400 clock hours of supervised clinical experience must be completed while the applicant is enrolled in graduate study in a program accredited in speech-language pathology by the CAA.

Implementation: A minimum of 325 clock hours of supervised clinical practicum must be completed while the student is enrolled in the graduate program. At the discretion of the

graduate program, hours obtained at the undergraduate level may be used to satisfy the remainder of the requirement.

### **Standard V-E**

Supervision of students must be provided by a clinical educator who holds ASHA certification in the appropriate profession, who has the equivalent of a minimum of 9 months of full-time clinical experience, and who has completed a minimum of 2 hours of professional development in clinical instruction/supervision after being awarded ASHA certification.

The amount of direct supervision 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. Supervision must be sufficient to ensure the welfare of the individual receiving services.

Implementation: Effective January 1, 2020, supervisors for ASHA certification [must complete 2 hours of professional development/continuing education](#) in clinical instruction/supervision. The professional development/continuing education must be completed after being awarded ASHA certification and prior to the supervision of a student. Direct supervision must be in real time. A clinical educator must be available and on site to consult with a student who is providing clinical services to the clinical educator's client. Supervision of clinical practicum is intended to provide guidance and feedback and to facilitate the student's acquisition of essential clinical skills. In the case of CS, asynchronous supervision must include debriefing activities that are commensurate with a minimum of 25% of the clock hours earned for each simulated individual receiving services.

### **Standard V-F**

Supervised practicum must include experience with individuals across the life span and from culturally/linguistically diverse backgrounds. Practicum must include experience with individuals with various types and severities of communication and/or related disorders, differences, and disabilities.

Implementation: The applicant must demonstrate direct clinical experiences with individuals in both assessment and intervention across the lifespan from the range of disorders and differences named in Standard IV-C.

### **Standard VI: Assessment**

The applicant must have passed the national examination adopted by ASHA for purposes of certification in speech-language pathology.

Implementation: Results of the [Praxis® Examination in Speech-Language Pathology](#) must be submitted directly to ASHA from the Educational Testing Service (ETS). The certification standards require that a passing exam score be earned no earlier than 5 years prior to the submission of the application and no later than 2 years following receipt of the application. If the exam is not successfully passed and reported within the 2-year application period, the applicant's certification file will be closed. If the exam is passed or reported at a later date, then

the applicant will be required to reapply for certification under the standards in effect at that time.

### **Standard VII: Speech-Language Pathology Clinical Fellowship**

The applicant must successfully complete a Speech-Language Pathology Clinical Fellowship (CF).

Implementation: The CF experience may be initiated only after completion of all graduate credit hours, academic coursework, and clinical experiences required to meet the knowledge and skills delineated in Standards IV and V. [The CF experience](#) must be initiated within 24 months of the date on which the application for certification is received. Once the CF has been initiated, it must be completed within 48 months of the initiation date. For applicants completing multiple CFs, all CF experiences related to the application must be completed within 48 months of the date on which the first CF was initiated. Applications will be closed for CFs that are not completed within the 48-month timeframe or that are not submitted to ASHA within 90 days after the 48-month timeframe. The Clinical Fellow will be required to reapply for certification and must meet the standards in effect at the time of re-application. CF experiences more than 5 years old at the time of application will not be accepted.

The CF must be completed under the mentorship of a clinician who held the CCC-SLP throughout the duration of the fellowship and must meet the qualifications described in Standard VII-B. It is the Clinical Fellow's responsibility to identify a CF mentor who meets ASHA's certification standards. Should the certification status of the mentoring SLP change during the CF experience, the Clinical Fellow will be awarded credit only for that portion of time during which the mentoring SLP held certification. It is incumbent upon the Clinical Fellow to verify the mentoring SLP's status periodically throughout the CF experience. Family members or individuals related in any way to the Clinical Fellow may not serve as mentoring SLPs to that Clinical Fellow.

### **Standard VII-A: Clinical Fellowship Experience**

**The CF must consist of clinical service activities that foster the continued growth and integration of knowledge, skills, and tasks of clinical practice in speech-language pathology consistent with ASHA's current *Scope of Practice in Speech-Language Pathology*. The CF must consist of no less than 36 weeks of full-time professional experience or its part-time equivalent.**

Implementation: At least 80% of the Clinical Fellow's major responsibilities during the CF experience must be in direct client/patient contact (e.g., assessment, diagnosis, evaluation, screening, treatment, clinical research activities, family/client consultations, recordkeeping, report writing, and/or counseling) related to the management process for individuals who exhibit communication and/or swallowing disabilities.

*Full-time professional experience* is defined as 35 hours per week, culminating in a minimum of 1,260 hours. Part-time experience should be at least 5 hours per week; anything less than that will not meet the CF requirement and cannot be counted toward completion of the experience.



Similarly, work in excess of 35 hours per week cannot be used to shorten the CF to less than 36 weeks.

**For CF experiences beginning on or after January 1, 2023:** When permitted by the employer and prevailing regulatory body/bodies and deemed appropriate for the client/patient/student and Clinical Fellow's skill level, up to 25% of the direct client/patient contact hours may be earned through telepractice. (See Standard VII-B for guidelines for use of telesupervision.)

#### **Standard VII-B: Clinical Fellowship Mentorship**

**The Clinical Fellow must receive ongoing mentoring and formal evaluations by the CF mentor. Mentorship must be provided by a clinician who holds the CCC-SLP and who, after earning the CCC-SLP, has completed (1) a minimum of 9 months of full-time clinical experience (or its part-time equivalent), and (2) a minimum of 2 hours of professional development/continuing education in clinical instruction/supervision.**

Implementation: CF mentors for ASHA certification must (a) hold the CCC-A or CCC-SLP, (b) have completed a minimum of 9 months of full-time (or its part-time equivalent) clinical experience while ASHA certified, and (c) [complete 2 hours of professional development/continuing education](#) in clinical instruction/supervision. The Clinical Fellow may not count any hours earned toward the CF experience until their mentor has met all supervisory requirements.

Direct observation must be in real time. A mentor must be available to consult with the Clinical Fellow who is providing clinical services. Direct observation of clinical practicum is intended to provide guidance and feedback and to facilitate the Clinical Fellow's independent use of essential clinical skills.

Mentoring must include on-site, in-person observations and other monitoring activities, which may be completed by correspondence, review of video and/or audio recordings, evaluation of written reports, telephone conferences with the Clinical Fellow, or evaluations by professional colleagues with whom the Clinical Fellow works. (See below for guidelines on the use of telesupervision.) The CF mentor and the Clinical Fellow must participate in regularly scheduled formal evaluations of the Clinical Fellow's progress during the CF experience. The Clinical Fellow must receive ongoing mentoring and formal evaluations by the CF mentor.

The amount of direct supervision provided by the CF mentor must be commensurate with the Clinical Fellow's knowledge, skills, and experience, and must not be less than the minimum required direct contact hours. Supervision must be sufficient to ensure the welfare of the individual(s) receiving services.

The mentoring SLP must engage in no fewer than 36 supervisory activities during the CF experience and must include 18 on-site observations of direct client contact at the Clinical Fellow's work site (1 hour = one (1) on-site observation; a maximum of six (6) on-site observations may be accrued in 1 day). At least six (6) on-site observations must be conducted during each third of the CF experience. Direct observations must consist of the Clinical Fellow engaging in screening, evaluation, assessment, and/or habilitation/rehabilitation activities.



Additionally, supervision must include 18 other monitoring activities. *Other monitoring activities* include but are not limited to review of documentation written by the Clinical Fellow, conferences between the CF mentor and the Clinical Fellow, discussions with professional colleagues of the Clinical Fellow, and so forth, and may be completed by correspondence, telephone, or review of video and/or audio tapes. At least six (6) other monitoring activities must be conducted during each third of the CF experience.

#### **Use of Telesupervision for Mentorship**

For mentorship of CF experiences beginning on or after January 1, 2023: At least six (6) direct care observations are required per segment. Of those, mentoring must include at least three (3) on-site and in-person. Of the remaining three (3) direct observations, optional use of real-time, interactive video and audio-conferencing technology (telesupervision) are permitted.

If the Clinical Fellow began their CF experience on or before December 31, 2022: Although the CFCC prefers that the six (6) direct observations per segment be completed on site and in person, use of virtual observation may be used in place of on-site, and in-person observations of Clinical Fellows by CF mentors. The use of real-time telesupervision may be used when the CF is providing teletherapy with remote students/clients/patients/caregivers or with in-person care.

#### **Standard VII-C: Clinical Fellowship Outcomes**

The Clinical Fellow must demonstrate knowledge and skills consistent with the ability to practice independently.

Implementation: At the completion of the CF experience, the applicant must have acquired and demonstrated the ability to:

1. Integrate and apply theoretical knowledge.
2. Evaluate their strengths and identify their limitations.
3. Refine clinical skills within the *Scope of Practice in Speech-Language Pathology*.
4. Apply the *ASHA Code of Ethics* to independent professional practice.

In addition, upon completion of the CF, the applicant must demonstrate the ability to perform clinical activities accurately, consistently, and independently and to seek guidance as necessary.

The CF mentor must document and verify a Clinical Fellow's clinical skills using the *Clinical Fellowship Report and Rating Form*, which includes the [\*Clinical Fellowship Skills Inventory\*](#) (CFSI), as soon as the Clinical Fellow successfully completes the CF experience. This report must be signed by both the Clinical Fellow and CF mentor.

#### **Standard VIII: Maintenance of Certification**

Certificate holders must demonstrate continued professional development for maintenance of the CCC-SLP.

Implementation: Clinicians who hold the CCC-SLP must accumulate and report 30 Certification Maintenance Hours (CMHs) (or 3.0 ASHA continuing education units [CEUs]) of professional development, which [must include a minimum of 1 CMH \(or 0.1 ASHA CEU\) in ethics](#) during every [3-year certification maintenance interval](#) beginning with the 2020–2022 maintenance interval.

Intervals are continuous and begin January 1 of the year following the initial awarding of certification or the reinstatement of certification. [Random audits](#) of compliance are conducted. Accrual of professional development hours, adherence to the ASHA [Code of Ethics](#), submission of certification maintenance compliance documentation, and payment of annual membership dues and/or certification fees are [required for maintenance of certification](#).

If maintenance of certification is not accomplished within the 3-year interval, then [certification will expire](#). Those who wish to regain certification must submit a reinstatement application and meet the standards in effect at the time the reinstatement application is submitted.

## APPENDIX II: ASHA Code of Ethics<sup>1</sup> (Updated March 2023)

## APPENDIX III: ASHA Scope of Practice for Speech-Language Pathology

<https://www.asha.org/policy/sp2016-00343/>

#### APPENDIX IV: COUNCIL FOR CLINICAL CERTIFICATION BOARD INTERPRETATIONS ON CLINICAL PRACTICUM

1. Persons who hold the Certification of Clinical Competence (CCC) in speech-language pathology may supervise:
  - i. assessment, rehabilitation, and prevention of disorders of speech (e.g., articulation, fluency, voice) and language.
  - ii. assessment and rehabilitation of cognitive/communication disorders.
  - iii. assessment and rehabilitation of disorders of oral-pharyngeal function (dysphagia) and related disorders.
  - iv. assessment, selection, and development of augmentative and alternative communication systems and the provision of training for their use.
  - v. aural habilitative/rehabilitative services and related counseling services.
  - vi. enhancement of speech-language proficiency and communication effectiveness (e.g., accent reduction).
  - vii. pure tone air conduction hearing screening.
2. Persons who hold the CCC in Audiology may supervise:
  - i. assessment of the peripheral and central auditory system, including behavioral and (electro)physiological measurements of the auditory and vestibular functions as well as intraoperative monitoring.
  - ii. selection, fitting, and dispensing of amplification, assistive devices, and other systems (e.g., implantable devices).
  - iii. conservation of auditory system function, including development and implementation of environmental and occupational hearing conservation programs.
  - iv. aural habilitative/rehabilitative services and related counseling service.
  - v. screening for speech or language disorders.
3. Only direct client contact time may be counted as clinical practicum hours. Time spent in writing lesson plans, scoring tests, transcribing language samples, preparing activities, in-service training, and writing reports may not be counted.
4. Evaluation refers to those hours in screening, assessment, and diagnosis that are accomplished prior to the initiation of a treatment program. Hours to be counted in the evaluation category may also include reevaluation (another formal assessment). Periodic assessments during treatment are to be considered treatment.
5. Time spent with either the client or a family member while engaging in information seeking, information- giving, counseling, or parental education/involvement may be counted as clinical clock hours (provided the activity is directly related to evaluation and/or treatment).

6. Time spent in a multidisciplinary staffing, educational appraisal and review, or in meetings with professional persons regarding diagnosis and treatment of a given client may be counted up to 25 hours.
7. Conference time with clinical supervisors may not be counted.
8. If a client presents communication disorders in two or more of the disorder categories, accumulated clock hours should be distributed among these categories according to the amount of treatment time spent on each. For example, if a client with both language and articulation problems received 20 hours of treatment and approximately three quarters of each treatment session was spent on language and one quarter was spent on articulation, the student may receive credit for 15 hours of language treatment and 5 hours of articulation treatment.

**NOTE:** Students who are not yet professionals should not be reimbursed directly for the provision of clinical practicum services. However, students can receive traineeships, scholarships, and/or stipends.

## APPENDIX V: Summary of Knowledge and Skills

## APPENDIX VI: Calipso® Student Evaluation



## APPENDIX VII: CAA COMPLAINT PROCEDURES

### Procedures for Complaints against Graduate Education Programs

A complaint about any accredited program or program in candidacy status may be submitted by any student, instructional staff member, speech-language pathologist, audiologist, and/or member of the public.

### Criteria for Complaints

1. Complaints about programs must:

- a) Be against an accredited educational program or program in candidacy status in speech-language pathology and/or audiology.
- b) Relate to the standards for accreditation of education programs in audiology and speech-language pathology.
- c) Include verification, if the complaint is from a student or faculty/instructional staff member, that the complainant exhausted all institutional grievance and review mechanisms before submitting a complaint to the CAA.

All complaints must be signed and submitted in writing to the Chair, Council on Academic Accreditation in Audiology and Speech-Language Pathology, American Speech-Language-Hearing Association.

The complaint must clearly describe the specific nature of the complaint and the relationship of the complaint to the accreditation standards and provide supporting data for the charge. The complainant's burden of proof is a preponderance or greater weight of the evidence. Complaints will not be accepted by email or facsimile.

The complaint form must be signed and submitted with any relevant appendices via U.S. mail, overnight courier, or hand delivery—not via e-mail 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

For more information:

<http://caa.asha.org/programs/complaints/>

2. Determination of Jurisdiction

Receipt of a complaint is acknowledged and forwarded to the Executive Committee of the CAA within fifteen (15) days of receipt of the complaint. The original letter of complaint is placed in a National Office file separate from the program's accreditation file. The Executive Committee determines whether the complaint meets the above-specified criteria.

If the Executive Committee of the CAA makes the determination that the complaint does not meet the above-listed criteria, the complainant is informed within thirty (30) days of the letter transmitting the complaint to the chair that the CAA will not review the complaint.

### 3. Evaluation of Complaint

If the Executive Committee of the CAA determines that the complaint satisfies the above-listed criteria, the CAA will evaluate the complaint.

A. The chair of the CAA informs the complainant within thirty (30) days of the letter transmitting the complaint to the chair that the Council will proceed with an evaluation. Because it may be necessary to reveal the identity of the complainant to the affected program or to other potential sources of relevant information, the complainant will be required to sign a waiver of confidentiality within thirty (30) days of the letter indicating that the CAA will proceed with its evaluation. The complainant is given the opportunity to withdraw the complaint during that time. If the complainant does not wish to pursue the matter, the investigation is concluded. If the complainant does not wish to withdraw the complaint, the complainant is asked to keep the initiation of an investigation confidential.

B. Within fifteen (15) days of receipt of the waiver of confidentiality, the chair of the CAA notifies the program director and the institution's president or president's designee by certified return receipt mail that a complaint has been registered against the program. The notification includes a redacted copy of the complaint without revealing the identity of the complainant. The program's director and the institution's president or president's designee are requested to provide complete responsive information and supporting documentation that they consider relevant to the complaint within forty-five (45) days of the date of the notification letter.

C. Within fifteen (15) days of receipt of the program's response to the complaint, the chair of the CAA forwards the complaint and the program's response to the complaint to the CAA. The materials are redacted and the identity of the complainant and the program under investigation is not revealed to the members of the CAA or to recipients of requests for information, unless a majority of CAA members consider such disclosure necessary for the proper investigation of the complaint. If the majority of Council members conclude that individuals other than the complainant, the program director, and the institution's president or president's designee may have information relevant to the complaint, the chair of the CAA requests such information.

D. After reviewing all relevant information, the CAA determines the course of action within thirty (30) days. Such actions include, but are not limited to: dismissal of the complaint recommending changes in the program within a specified period of time as they relate to standards (except for those areas that are solely within the purview of the institution) continuing the investigation through an on-site visit to the program placing the program on probation withholding/withdrawing accreditation.

E. If the CAA determines that a site visit is necessary, the program director and the institution's president or president's designee are notified, and a date for the site visit is expeditiously scheduled. The program is responsible for expenses of the site visit. The site visit team is selected from the current roster of CAA site visitors. During the site visit, emphasis is given only to those standards with which the program is allegedly not in compliance. The site visit team submits a written report to the CAA no later than thirty (30) days following the site visit. As with all other site visits, only the observations of the site visitors are reported; site visitors do not make accreditation recommendations. The CAA forwards the report to the program director and the institution's president or president's designee within fifteen (15) days. The program or institution should provide a written response to the chair of the CAA within thirty (30) days of the date on which the report is postmarked to the program director and the president or president's designee. The purpose of the response is to verify the accuracy of the site visit report.

F. The CAA reviews all evidence before it, including the site visit report and the program's response to the report, and takes one of the following actions within twenty-one (21) days: dismisses the complaint, recommends modifications of the program within a specified period of time (except for those areas that are solely within the purview of the institution), places the program on probation, withholds/withdraws accreditation.

G. If the CAA withholds/withdraws accreditation, the program director and the institution's president or president's designee are informed within fifteen (15) days of the CAA decision that accreditation has been withheld/withdrawn. Notification also includes justification for the decision and informs the program of its option to request Further Consideration. Further Consideration is the mechanism whereby the program can present appropriate standards and ask the CAA to reevaluate its decision to withhold/withdraw accreditation. If the program does not exercise its Further Consideration option, the CAA's decision to withhold/withdraw accreditation is final and no further appeal may be taken. If accreditation is withheld/withdrawn, the chair of the CAA notifies the Secretary of the United States Department of Education at the same time that it notifies the program of the decision. If the program chooses to request Further Consideration, the CAA must receive the request within thirty (30) days from the date of the notification letter. With the request for Further Consideration, the program must submit additional written documentation to justify why accreditation should not be withheld/withdrawn. A hearing with the CAA is not provided for Further Consideration requests. The CAA will evaluate the request for Further Consideration and take one of the following actions within thirty (30) days: recommends modifications of the program within a specified period of time (except for those areas that are solely within the purview of the institution) places the program on probation withholds/withdraws accreditation

H. Within fifteen (15) days of its decision the CAA notifies the program and the complainant of its decision.

I. If the CAA decision after Further Consideration is to withhold/withdraw accreditation, the program may appeal the decision in accord with the Appeal Procedures described in the Accreditation Manual.

