



# **MASTER OF SCIENCE**

## **Communication Sciences and Disorders**

### **PRACTICUM HANDBOOK**

**August 2018**

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**SPEECH-LANGUAGE-HEARING CLINIC  
DEPARTMENT OF COMMUNICATION SCIENCES AND DISORDERS  
ELMHURST COLLEGE  
ELMHURST, ILLINOIS**

**MISSION STATEMENT OF THE DEPARTMENT**

The mission of the Program in Communication Sciences and Disorders at Elmhurst College is to prepare speech-language pathologists to achieve the highest standards of academic learning, clinical service, scientific inquiry, and creative work. The focus of the faculty and staff is to uphold and foster integrity in all areas of the profession and to promote the use of evidence-based decisions while providing a mutually respectful environment in which scholarship and intellectual curiosity are promoted, sensitivity to issues of diversity is maintained, responsible service to others is fostered, and the impact of communication disorders on individuals and significant others is emphasized. The ultimate goal of the program is to satisfy the institution's requirements for a master's degree in speech-language pathology and to fully prepare students for national certification as speech-language pathologists by the American Speech-Language-Hearing Association (ASHA) and for other related credentials as licensed speech-language pathologists in the State of Illinois, and as licensed public school speech-language pathologists by the Illinois State Board of Education (Professional Educator License).

**HISTORY AND DESCRIPTION OF THE SPEECH-LANGUAGE PATHOLOGY PROGRAM**

The Speech-Language Pathology Program was established in 1946 as a program in speech correction. Both the program and the clinic were established by Marjorie Cochran-Hessler with the support of C.C. Arends, Chairman of the Speech Department. Ms. Cochran had just completed her master's degree under the direction of Helmut Myklebust at Northwestern University. The Program and the Clinic were moved from Kranz Hall to Irion Hall in 1979 and then to one of the College's newest buildings, Circle Hall, dedicated in the fall of 2004. The clinic contains seven treatment rooms with adjacent observation rooms, faculty offices, a well-equipped materials room, student resource room and child-size restroom.

The clinic provides a full range of services in the evaluation and treatment of adults and children who exhibit communication disorders. The clinic practicum in the Speech-Language Pathology Program includes instruction in a wide variety of communication disorders, across the life-span, as specified by ASHA.

The Master of Science (M.S.) program in speech-language pathology through the Department of Communication Sciences and Disorders at Elmhurst College is accredited by the Council on Academic Accreditation in Audiology and Speech-Language Pathology of the American Speech-Language-Hearing Association, 2200 Research Boulevard, #310, Rockville, MD 20850, 800-498-2071 or 301-296-5700. The program is accredited through June 30, 2022.

The Master of Science (M.S.) program in speech-language pathology through the Department of Communication Sciences and Disorders at Elmhurst College is also approved by the Illinois State Educator Preparation and Teacher Licensure Board of the Illinois State Board of Education.

**MISSION STATEMENT OF THE ELMHURST COLLEGE SPEECH-LANGUAGE-HEARING CLINIC**

The Elmhurst College Speech-Language-Hearing Clinic is dedicated to becoming a widely recognized provider of quality services for individuals with speech, language and hearing problems. The clinic works in conjunction with the Communication Sciences and Disorders Program (CSD), which is dedicated to providing quality education for students preparing for certification in speech-language pathology and audiology. The clinic abides by the American Speech-Language-Hearing Association (ASHA) Code of Ethics. All clinicians and clinical educators must be familiar with the ASHA Code of Ethics, maintain professional standards, and show respect for human dignity.

The Communication Sciences and Disorders Program and the Speech-Language-Hearing Clinic serve two major functions:

- 1) To provide training for students in speech-language pathology and audiology; and
- 2) To provide clinical services for clients with speech, language, and hearing problems.

All services, whether part of the clinical practicum, part of an academic course, or related to private practice, are the responsibility of the Speech-Language-Hearing Clinic and fall under its direct review.

### **Observation Hours**

Graduate clinicians must complete 25 observation hours prior to starting their first practicum experience on campus. Original documentation signed by an ASHA-certified speech-language pathologist verifying that these hours have been successfully completed must be submitted to the Clinic Director before students can begin practicum experiences. The speech-language pathologist must also include his/her ASHA membership number with the signature on the observation form. An original signed letter from the department chair or clinic director of an ASHA-accredited program with his/her ASHA number on college/university letterhead may also serve as documentation of observation hours.

Students should also submit original signed documentation of undergraduate clinical hours, to the Clinic Director, if these have been completed. These should be submitted with the observation hours to help determine appropriate practicum assignments.

### **Practicum Assignments**

Clinical faculty are responsible for all scheduling within the clinic. The off-site clinic coordinator is involved in determining external placement assignments, with input from the Clinic Director, the appropriate clinical educators, and faculty members. Numerous factors are considered when making assignments, including student needs, academic proficiency, level of clinical experience and client and/or site availability. Therapy assignments will be made **ONLY** with consideration of the student's class schedule. Other personal and/or work commitments will not be considered.

On-campus therapy and diagnostic sessions are held Monday through Thursday from 9:00 am to 6:00 pm and Fridays from 9:00 am to 4:00 pm. The Clinic is open for three sessions: fall - 12 weeks, spring - 12 weeks, summer – 5 weeks. Clients are scheduled for one to three sessions each week for 30, 45, or 60 minutes. The majority of clients are scheduled between 3:00 and 6:00 pm. Diagnostic appointments will be scheduled based on client availability during the term. In addition, evaluations may be scheduled between semesters. This includes January, late May, and early June.

Off-site placements will be discussed frequently during each term. Additional information can be found in course syllabi (CSD 503, 504, 513, 514, 523, and 524). Keep in mind that when placed in an external practicum site, students are required to maintain the same daily schedule (including start and end time) as the cooperating site supervisor. Once a student is assigned an off-site placement, it is at the discretion of the off-site coordinator **ONLY** to make any changes. Student requests related to location are not considered appropriate reasons to modify a placement. Any time period, that a student is not in an assigned class, is considered an available time for therapy. A student's personal plans **must not** interfere or alter a proposed practicum assignment. Please be aware that requests for documentation (resume, transcripts, etc.) must be submitted promptly to the off-site coordinator. If documentation is not submitted in a timely manner, a placement may be reassigned.

All clinical assignments on campus and off-site will take into account completed clinical hours, and areas of need relative to the KASA standards. This includes experiences within disorder areas across the lifespan specified by ASHA. It is important to develop clinical skills across the categories designated in ASHA Standard IV-C.

The program ensures that graduate students meet clinical requirements for the ASHA Certificate of Clinical Competence in Speech-Language Pathology (CCC-SLP). The following overall requirements need to be met:

**TOTAL CLIENT CONTACT:.....400 hours**

Guided Clinical Observation.....25 hours

Client Contact.....375 hours

(325 direct client contact hours must be obtained at the graduate level)

All graduate students must purchase CALIPSO (a web-based tracking program). Enrollment will occur **PRIOR** to the first fall semester. The fee is \$85.00. This is a one-time fee.

It is ultimately the responsibility of the student to acquire at least 400 direct contact hours by the end of the practicum sequence. Refer to the Calipso – Cumulative Evaluation often to determine areas of need. Students should make sure that hours are documented and approved appropriately in Calipso. CHECK CALIPSO OFTEN!

Only direct contact with the client or the client's family in assessment, management, and/or counseling can be counted toward practicum requirements. Up to 20% (75 hours) of direct contact hours may be obtained through Alternative Clinical Education (ACE) methods. This includes Simucase experiences completed as part of class assignments and Sim Lab exercises at Elmhurst Memorial Hospital.

## **Certification and Licensure**

**ASHA CCC Requirements.** The implementation procedures for the Certificate of Clinical Competence in Speech-Language Pathology require completion of the Standards listed below. ([www.asha.org](http://www.asha.org))

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

**Illinois Licensure Requirements in Speech Language Pathology.** The requirements for an Illinois State license in speech-language pathology are indicated below.

Also see the Illinois Department of Financial and Professional Regulation website ([www.idfpr.com](http://www.idfpr.com)) and ASHA website ([www.asha.org/advocacy/state/info/IL/licensure/](http://www.asha.org/advocacy/state/info/IL/licensure/))

Master's or doctoral degree in speech-language pathology or audiology from a program approved by the CAA.

1. Four hundred hours clinical practicum
2. Passage of the Praxis exam
3. Completion of the equivalent of nine months of supervised experience.
4. ASHA Certificate of Clinical Competence (CCCs)
5. A complete work history since completion of an educational degree program

### **Illinois Teacher Requirements for Speech-Language Pathologists (PEL)**

See Graduate Program Handbook for updated requirements. ELIS (Educator Licensure Information System) will be discussed in CSD 500.

## **Clinic Procedures**

### **Criminal Background Policy for Graduate Students**

Graduate students enrolled in clinical practicum must complete a criminal background investigation during the summer PRIOR to the first fall semester of enrollment. Students will receive written information and instructions regarding this procedure in the summer before starting the program.

Criminal history records check result (CBI) are required prior to the first fall of enrollment and prior to off-site placements. It is the students' responsibility to ensure that these required investigations are performed in a timely manner and to assume any costs associated with such investigations. This requirement is consistent with Illinois law that requires Illinois school districts to conduct criminal history records checks on applicants for licensed and non-licensed positions for employment. Additional off campus locations (private clinics, medical settings) that are used for placements also have similar requirements. The CSD Department will assist students by providing them with information about obtaining background investigations and opportunities to obtain them through outside companies and agencies.

Refer to the CSD Graduate Program Student Handbook (2018-2019) for specific policies and procedures related to criminal background investigations.

### **Immunizations**

Graduate students must provide evidence of the following prior to participating in the clinic each fall term:

    TB test (within the last year). Students may contact the Wellness Center on campus if needed (630-617-3565).

In addition, students should be aware that external sites may have their own requirements related to immunizations. It is the student's responsibility to comply with the requirements of a site in the timeframe designated by the site supervisor. This may require additional cost which is the student's responsibility.

### **CPR Certification**

Students must take the **American Heart Association BLS for Healthcare Professionals** course. Submit the certification card to the off-site coordinator. You must take this specific course—NO exceptions.

### **Permanent Client Files**

Permanent client files are kept in a locked cabinet and can only be accessed during posted hours in room 213. Students can review files in the file room, in therapy rooms, or in supervisor offices. Specific procedures will be reviewed at the beginning of each term in Practicum class.

### **Supervisor Meetings (See Forms V, EE, EE-I, JJ and KK)**

A mandatory supervisory meeting will be held prior to the initial therapy session. It is the student's responsibility to contact the assigned clinical educator(s) in order to schedule an initial meeting. Before this initial supervisory meeting, students must be familiar with all material in the client's permanent folder. This includes information regarding primary disorder, etiology, prior and/or concurrent treatment and evaluations, specific communication strengths and areas of deficit. It is expected that the student will come to the meeting with tentative long-term goals for the semester, ideas for a lesson plan for the first session, and written questions. **Form EE** and/or **Form I** (Background Information) should be completed (typed) prior to initial meeting with your clinical educator.

Students must meet with the clinical educator for each of their clients at least once a week throughout the term. Students need to be prepared to discuss specific therapy plans, goals, procedures, etc. for each client. The time/day of these meetings will be determined by the clinical educator. These are mandatory meetings. **Form KK and Form JJ (see form for specific term)** should be completed according to the directions on the top of the page. A percentage of the Practicum grade is based on attendance at and participation in these meetings. If a student does not come to the meeting prepared, with forms completed, ready to discuss the previous and upcoming session, and data analyzed the meeting will be postponed and scheduled at a time designated by the supervisor. This will impact your practicum grade related to following the Essential Functions for professional responsibilities.

In general, students are assigned clinical cases once they have completed or are concurrently taking the appropriate coursework. However, since undergraduate preparation is variable, it is the practice of the program to provide the following support to all students:

    Every student will be provided with individual teaching, clinical modeling/teaching and may also participate in co-treatment with the clinical educator.

    Evidence based practice will be identified for each client and reviewed by the student and the clinical educator in development of the treatment program.

    Specific readings will be recommended/provided to increase knowledge for certain areas of need identified by the clinical educator and/or graduate clinician.

    Articles and book chapters addressing various diagnoses, treatment strategies, etc. will be provided/recommended as needed.

    Supervision of each individual graduate clinician is based upon his/her knowledge and skills. A greater amount of supervision will be provided to the new clinician and gradually be decreased as appropriate.

    Weekly supervisory meetings will allow for discussion, evaluation of progress, and further development of the critical thinking skills needed within the clinical setting.

## **Client Contracts**

The clinic administrative assistant will prepare a Contractual Agreement Regarding Speech and/or Language Therapy (**Form B**) for each of your clients and will place the contracts in your mailbox. Check the contract for accuracy of names, time, day, and length of sessions. Report any errors, discrepancies, etc. to the clinic administrative assistant before the first session. It is critical to make sure that the contract is free of any errors and is given to the correct client. It is violation of HIPAA policies if the correct document is not provided appropriately. Any errors related to this procedure will impact your practicum grade related to following the Essential Functions. Prior to the start of the first session, give the contract to the assigned clinical educator, if your client is a MINOR. Clinical educators will review the contract with the parents/caregivers and return the signed contract to the clinic administrative assistant.

If your client is an ADULT, review the contract with them during the first session and return the signed document to the clinic administrative assistant.

## **Name Badges**

The State of Illinois requires all licensed individuals who provide health related services to wear a name badge in all activities that involve clients. This requirement also applies to students. Consequently, ALL individuals (clinical educators and students) who provide treatment to clients or supervise and students who observe treatment activities, MUST wear a name badge during all interactions within the clinic. Name badges will be placed in your clinic mailbox (in the Computer Lab –Circle Hall 250) prior to the start of clinic in the first fall term. The first badge is provided at no cost. You will be charged for replacement name badges. IT MAY HELP TO STORE YOUR PERMANENT NAME BADGE IN YOUR MAILBOX WHEN NOT IN USE.

If you come to clinic to provide therapy, you MUST wear your **permanent** name badge. If you forget this name badge, the clinic administrative assistant will issue a temporary badge at your expense. If you need a permanent replacement, please let the clinic administrative assistant know, and she will make a permanent replacement name badge for you at your expense.

## **Professional Dress and Behavior**

Students are asked to remember that the clinic is a functioning business. Every interaction with faculty members, clients, caregivers, community members, and other students reflects upon the ECSLHC. For this reason students are asked to be aware of their language, conversation, body language, overall communication, and HIPAA guidelines in the clinic. Student clinicians and student observers are expected to maintain professional dress standards. These standards are expected during ANY AND ALL clinical situations. This includes screening activities, diagnostic evaluations, and therapy sessions. This also includes ANY time that you are in the clinic area (meeting with supervisors, working on projects, or looking at materials). Remember that the student work room is very close to the clinic lobby. Keep conversations at an appropriate volume level and engage in only professional communication. The door to the work room should be open at all times.

- A. **When setting up for and conducting therapy:** Student clinicians will be required to wear the designated clinic uniform. This consists of the Elmhurst College Speech-Language-Hearing Clinic shirt, black trousers, black socks, black close-toed shoes, name badge and watch. Apple watches are not permitted. Neatness and cleanliness, especially of hair, nails, hands, and teeth, is essential. In addition, hair should be kept off of the face so that it does not interfere with clinical work and will not be accessible for clients to pull. Jewelry should be kept to a minimum. Do not wear large and/or hanging earrings that a client could pull. Glasses, watches, and other functional accessories should be plain and appropriate to a professional setting.
- B. **When in the main clinic reception area and/or clinic resource room, and when attending supervisor meetings but not conducting therapy:** The clinic uniform is not required; however, you must wear “clinic appropriate” attire. See the list below.

The following items are **NOT** acceptable for students while in the clinic area:

1. Ripped jeans, stretch pants, low-cut pants exposing the midriff or back, spandex/leggings, or shorts
2. Strapless or transparent dresses or tops
3. Skirts more than 2 inches above the knee
4. Shirts or tops that expose the chest, back or midriff
5. T-shirts, low cut tops, tank tops, or spaghetti strap tops
6. Flip flops, work boots or excessively high heels
7. Inappropriate fingernail polish (dark purple, blue, green, black, stripes, dots)
8. Face jewelry other than earrings (nose, tongue, eyebrow, and cheek rings are not appropriate)
9. Long jewelry or lanyards worn around the neck, elaborate or large jewelry, elaborate glasses

10. Excessive make-up or perfume
11. Exposed tattoos on any part of the body

**Practicum grades will be impacted if professional dress standards are not maintained. Violations will be documented within Calipso related to meeting the Essential Functions.**

### **Day of Session**

All therapy materials should be fully prepared (example: pictures cut out, games set up) after the lesson plan is approved. Allow at least **30 minutes** prior to the start of your session to have all therapy materials ready in your therapy room (if there is not another session in the room). Supervisors may look for you immediately prior to your session to check your materials and to see if you are appropriately prepared. Any last-minute changes to a lesson plan must be approved by your supervisor and then amended in your typed lesson plan. Your grade will be impacted if you are not fully prepared for sessions. Make sure you are dressed appropriately.

### **Meeting the Client**

Graduate clinicians are required to meet the client in the reception area promptly at the designated time for therapy or a diagnostic evaluation. At the first meeting, your clinical educator will accompany you. Introduce yourself and your clinical educator to the client and family. Identify yourself as a graduate student clinician. All clients and clinicians should wash their hands prior to each session. When the session is completed, escort your client back to the reception area or to the adult responsible for the client's care. Do NOT leave a child unsupervised in the reception area. The student clinician is responsible for the client's welfare until an adult meets the client. Locate your clinical educator or Clinic Director if assistance is needed.

### **Absences**

All absences, either the clinician's or the client's, are to be recorded on the CLIENT ATTENDANCE SHEET (**Form X**). This form is to be kept in your working folder and filled in weekly. It is imperative that this be done in order to maintain an official attendance record for billing, semester reports and certification records.

#### Client's Absence

When a client telephones to say he/she is unable to keep an appointment, the clinic administrative assistant or person taking the message, will contact the clinician and clinical educator by telephone and/or email, and will place a purple note on the CANCELLATIONS bulletin board in the drawer in the outer reception desk. Since contact cannot always be made, it is the clinician's responsibility to check the Cancellation bulletin board upon entering the clinic prior to therapy room set up on days when therapy or a diagnostic evaluation is scheduled. If a graduate clinician has an undergraduate student assisting them, they should let them know if a therapy session has been cancelled.

If your client cancels a session, you are still required to attend the weekly meeting unless directed otherwise by your clinical educator.

*NOTE: In the case of illness, clients should be symptom free for 24 hours before returning to the clinic.*

It is the responsibility of the clinician to wait fifteen minutes for a client to arrive. You are not required to see a client who arrives more than 15 minutes late, although you may decide to do so. Consult immediately with your clinical educator regarding any change in the time of your session. You also must make sure a room is available for use. A client, who misses more than one session without notifying the clinician or clinic, may be dismissed. Remind the client of this policy after the first absence, following a discussion with the clinical educator.

#### Clinician's Absence

It is the responsibility of the student clinician to be present for each session with the client. If it is necessary to be absent from a session due to illness or emergency, **the student is responsible for notifying the client and clinical educator as soon as possible**. Contact your clinical educator FIRST. It is also the clinician's responsibility to notify any undergraduate students who may be assisting that the therapy session has been cancelled. Students are responsible for notifying the clinical educator in writing of any time change or cancellation of therapy for any reason. Students must keep all of their clients' and assistants' phone numbers and emails with them at all times in a secure location, and be prepared to contact them and the clinical educator should an emergency arise. Any violations to this policy will be reflected within Calipso and will impact your final practicum grade.

### Make-up Sessions

If the client is absent, make-up sessions are arranged at the discretion of the clinical educator. Bear in mind that you must accumulate clock hours, and that the client pays a flat fee for the term. It is of mutual benefit for the client and clinician to make-up canceled sessions whenever possible.

If the clinician is absent, the therapy time must be re-scheduled. You must also sign up to use a therapy room indicating the date needed. See the Clinic Director regarding this immediately.

Shortage of space makes it very important to keep the therapy room schedules accurate.

### Failure to Meet the Client

Clinicians who fail to attend a therapy session or cancel a client's therapy without notifying the clinical educator, or arrive more than five minutes late for a therapy session are subject to severe disciplinary action, including removal from the client assignment.

## **Permanent Clinic Folder**

The Permanent Clinic Folder is a legal document and can be used in a court of law as evidence. The rules governing materials in the folders are important and must be adhered to. Our clinic files must reflect the highest professional standards, yet must be flexible enough to be used as training and research tools. With many students needing access to the contents of the files, the problem of monitoring becomes a serious one requiring strict rules.

Important forms in the permanent clinic folder:

#### a. Inventory Sheet for Permanent Clinic Folder

Each Permanent Clinic Folder should have an Inventory Sheet (**Form C**) located in the left inside cover. Each time a report is filed, it must be entered on the Inventory Sheet. Each entry must be dated and the name of the clinical educator and student entered. Each time a copy of a report is sent out, a notation must be made indicating the date and the person or agency to whom the report was sent.

The Inventory Sheet also includes a place to mark whether a signed Release Form is on file. No reports can be released without a signed release form specifically indicating where the report may be sent.

#### b. Release of Information

A client or parent may be asked to sign a Release of Information form (**Form D-1**) authorizing the Elmhurst College Speech-Language-Hearing Clinic to release and receive information obtained about the client with other designated professionals. The Consent to Release Information form (**Form D-2**) authorizes an outside agency to release information to our clinic. These forms are located on the left inside cover of the folder, under the Inventory Sheet. If a request for a report comes from another agency, the student clinician must immediately notify the clinical educator. Reports may, of course, be provided to the client or parent without a signed Release of Information form. If the parent or client declines to sign the Release form, this must be indicated on the Inventory Sheet. Signed permission must be obtained if, at a future date, the client wishes to have information from the file shared with other professionals.

#### c. Record of Telephone or Personal Contacts

Frequently, information about the client is obtained through parent conferences, telephone calls, school visits, emails, etc. At all times, pertinent information derived from these sources should be recorded, dated and signed for placement in the Permanent Clinic Folder. All communications to or from other agencies should be completed by clinical educators. **Form E**, located on the left side of the client's folder, should be used for recording all contacts.

#### d. Contents of Clinical Folder Checklist

**At the beginning of each term the student clinician is responsible for completing a Content of Clinical Folder Checklist (Form F) for each client's folder.** Use the checklist to indicate which documents are included in the client's folder and which documents are missing from the client's folder. Arrange all existing documents in reverse chronological order (with the most recent document on top). Any reports or forms having multiple pages must be stapled together. Loose sheets and paper clips are not acceptable. After completing the checklist and organizing the folder, obtain your clinical educator's initials on the Contents of Clinical Folder Checklist form. The Contents of Clinical Folder Checklist should be located on the left inside cover of the folder, under the Record of Contact form.

#### e. Disposition Form

When a client is temporarily or permanently discharged from the clinic at the completion of a term of therapy, this discharge is indicated in the Therapy Progress Report and a Disposition form (**Form J**) is not required.

However, when a client is discharged or elects to discontinue therapy subsequent to the writing of a Therapy Progress Report, then a Disposition Form (**Form J**) is completed. Specific information should be given as to the reasons therapy is being discontinued.

The clinic administrative assistant is notified so that billing and any other paperwork can be finalized and the client's file can be moved from the active to the inactive file location. Discharge of a client must be discussed with the clinical educator before discussing it with the client.

#### f. HIPAA

In 1996, the *Health Insurance Portability and Accountability Act (HIPAA)* was passed. The ECSLHC and the Department of Communication Sciences and Disorders consider client confidentiality a high priority. Secondary to this, ALL students who are engaged in observation hours, clinical practice, or off site placements will be trained in HIPAA by clinical faculty. Students will sign an acknowledgment and agreement to maintain HIPAA directives. This signed document will be maintained by the Clinic Director and renewed at the beginning of each term.

- HIPAA Guidelines: (See **Appendix F**)  
HIPAA guidelines will be reviewed at the beginning of each semester. Graduate students must pass a quiz on HIPAA guidelines in CSD 500.
- HIPAA Privacy Officer:  
Dr. Jay is the HIPAA Privacy Officer for the CSD Department. If you observe any violations of HIPAA guidelines, inform her immediately.
- HIPAA form (**Form HH**):  
This form pertains to The Health Insurance Portability and Accountability Act. Clients are required to sign this form when they begin therapy at ECSLHC. It explains the clinic's policies regarding HIPAA.
- HIPAA Authorization for Family Members/Friends form (**Form HH-1**):  
Adult clients may be asked to sign the HIPAA Authorization for Family Members/Friends, so that the Elmhurst College Speech-Language-Hearing Clinic (ECSLHC) can obtain written authorization to release protected health information to designated family members and/or friends. This permission may include details about speech therapy sessions, speech language evaluation, therapy updates, conferences, or billing.

#### **Student Working Folder**

The Student's Working Folder is established by the student clinician for his/her own use. A clean two-pocket folder should be used. The contents should include Lesson Plans, SOAP notes, clinical educator's notes, client attendance sheets, and any information the clinician wishes to keep at hand about the client. Keep all written work from all sessions in this folder. The same rules regarding confidentiality apply to Student Working Folders. Do not leave working folders within view of anyone. On the outside of the folder, indicate YOUR name, day and time of the session, and supervisor name. Failure to observe these guidelines will impact your practicum grade.

**IMPORTANT:** Reports from other agencies and all test results or other pertinent information must be immediately placed in the Permanent Clinic Folder. Please ensure your clinical educator sees any new reports from outside agencies. **Do not use a client's name or any other information protected by HIPAA anywhere on or within a student folder.**

#### **Lesson Plans and SOAP Notes**

Lesson Plans (**Form H-1**) and SOAP or follow-up notes (**Form G**) must be completed for each session by all students providing treatment in the clinic. In order to assure client confidentiality, clients are to be identified only by XX or "the client" on lesson plans and SOAP notes. Due dates for Lesson Plans and SOAP notes should be discussed with individual clinical educators. Lesson Plans and SOAP notes are to be typed using a professional writing style. You may be asked to write your lesson plan by hand if the cut/paste function is not used appropriately. Lesson Plans, SOAP notes, observation notes made by the clinical educator, and other work requested by the clinical educator are to be kept in

reverse chronological order in the Student's Working Folder for each client. The entire file should be placed in the clinical educator's "In" box by the designated time, and will be placed in the student's clinic mailbox after it is reviewed by the clinical educator and all session follow-up information has been received and approved. To facilitate the supervisory process, please ask your clinical educator where he/she would like your lesson plan placed just prior to your therapy session with the client.

### **Evidence-Based Practice**

ASHA's position is that current research be integrated into all clinical practice and decision making. Students will be guided through this process as part of practicum course work. Evidence from current literature will be reviewed and discussed in practicum classes. Students are also expected to integrate information they are receiving in academic course work into the clinical setting.

### **Semester Treatment Progress Reports**

Components of the Semester Treatment Progress Report (**Form I**) must be submitted to the clinical educator on the designated due date. No identifying information should be included. **Each revision is due no later than 2 days (or when your clinical educator indicates) after the corrected draft has been returned by the clinical educator, and all previously corrected drafts must be returned at the same time.** All drafts, except the final report, MUST be double spaced.

After the final typed Treatment Progress Report has been approved, two copies need to be printed **IN THE CLINIC** from a secure computer with your clinical educator. This final copy will contain all identifying information related to the client, therefore, it must be printed ONLY on a secure computer in the clinic.

The report is signed by the clinician and the clinical educator and filed in the Permanent Clinic Folder. Your responsibilities for the term are not completed until the report is placed in the client's Permanent Clinic Folder and the Inventory Sheet is completed (enter date, student name, and clinical educator name).

**Failure to meet a deadline for Semester Progress Reports will negatively impact your practicum grade.**

### **Communication Evaluation Report**

**Form Y** should be used to write up the results of evaluations conducted at the ECSLHC. Specific information regarding writing communication evaluation reports will be discussed in Practicum classes.

It is expected that clinicians conducting an evaluation should be able to:

- conduct an appropriate interview
- administer and score tests according to standardized procedures
- elicit and analyze a spontaneous speech and language sample, if appropriate
- observe and record all significant speech, language, and social behavior
- report results and provide education to client, family, caregiver, etc.

### **Resource Room**

The Elmhurst College Speech-Language-Hearing Clinic is extremely fortunate to have a well-equipped Resource Room for use by student clinicians. Your cooperation is necessary to keep this room organized and well-equipped. Use of the items in the Resource Room is a privilege afforded to all students enrolled in practicum. Out of consideration for your fellow students, please return all borrowed materials at the end of each therapy session. Clinic materials may not be left in therapy rooms or in lockers between sessions or overnight. In addition, all materials should be returned to the exact spot from which they were borrowed. Further, all parts of various materials should be returned together. For example, all puzzle and game pieces should be put together in the appropriate box or container, dolls should be returned with the appropriate clothing, markers should be returned with the caps on, etc.

Materials need to be **signed out and checked in** using the binder located in the Resource Room. No materials are to leave the building **or be kept in student lockers**. The same rules apply to diagnostic tests. Specifics regarding the use of test kits and forms will be addressed in more detail in practicum classes that utilize diagnostic materials. In addition, there are several I-pads available for student use in treatment sessions. Check out procedures will be discussed in class.

Students who are unable to comply with these procedures will be asked to supply their own materials for therapy. It is suggested that you purchase a PLAIN clip board to use for data collection within your sessions. The door to the resource room should remain open at all times. Professional communication should be exhibited.

### **Therapy Rooms**

Therapy rooms will be open during clinic hours and will be locked at the end of the day by Campus Security. When you are finished with your last session, please turn off the lights and close the door. Tables must be sanitized following each treatment session. All electrical outlets must be covered with plastic outlet covers when not in use. Please leave therapy rooms as you found them. Periodically check all material located in the therapy rooms using the checklist that is in each

room. Let Dr. Jay or your supervisor know if you need any items that are supposed to be in the room and may have been used. Therapy rooms are to be used ONLY for treatment. They are not study areas or places to meet with other students. Eating in therapy rooms is prohibited. You CAN use therapy rooms when you need to review a client file during the term. See the clinic administrative assistant to determine which room is available.

All non-disposable items (toys, etc.) that come in contact with the client's saliva must be washed with soap, bleach, and water before use with another client. **DO NOT RETURN THESE MATERIALS TO THE MATERIALS ROOM SHELF WITHOUT FIRST DISINFECTING THE MATERIALS.** See Dr. Jay for cleaning supplies and information on disinfecting.

### **Clinician Evaluation and Practicum Grades**

At midterm and at the end of each semester an evaluation of each student's clinical performance is made by the clinical educators who have observed the student's clinical work. The practicum grade is based on:

- 1) Written Work: Lesson Plans, SOAP notes, therapy progress reports judged on content, grammar, organization, professionalism and neatness.
- 2) Therapeutic Skill: Clinicians are judged on their ability to spontaneously adapt to the need for change, use of a variety of therapeutic techniques, management of the client, relationship to the client and appropriateness of techniques.
- 3) Professional Behaviors and Attitudes: Conscientiousness, ethics, punctuality, ability to relate to the client and the client's family members, and appropriate attire.
- 4) Responsibility in monitoring of equipment and supplies, and following clinic policies and procedures.
- 5) Attendance and participation in supervisory meetings.
- 6) Adhering to standards listed in the Essential Functions document

Grading will occur via CALIPSO. The specific format will be reviewed in practicum class each term. Be aware that clinical educator expectations change as a clinician moves through the program.

Greater independence and initiative is expected each term and prior to placement in external sites. In addition, clinicians will also be graded on professional behaviors and attitudes (related to KASA standards). Students should also review the Essential Functions (**Appendix H**).

Individual therapy sessions will be evaluated throughout the term by your clinical educator. The Supervisor Feedback Form (**Form L**) may be used by your clinical educator and you will also be given verbal feedback about individual therapy sessions.

### **Remediation within Clinical Courses in CSD**

If a student earns a clinical practicum midterm grade below the established 80% competency per the policy stated in the course syllabus, the instructor will meet with the student and complete the Clinical Remediation Form. The student will be required to complete the remediation plan, as written by the clinical educator, within 6 weeks from the time the instructor documents the plan. Remediation may involve, but is not limited to, activities such as additional meetings with the clinical instructor and supplemental reading and writing assignments. The deficient competency must be demonstrated with a level of 80% (B-) or higher before any external placement. A second grade of C+ or lower will result in the student's dismissal from the graduate program.

### **Meeting Requirements of the Essential Functions**

Meeting the requirements of the essential functions is expected during all interactions related to both academic and clinical performance. Essential Functions, as distinguished from academic standards, refer to those cognitive, physical and behavioral abilities that are necessary for satisfactory completion of all aspects of the curriculum, and the development of professional attributes required by the faculty of all students at graduation. Please refer to the Graduate Program Handbook for additional information regarding policies and procedures if the Essential Functions are not met.

### **Record of Clinical Hours**

It is the responsibility of the student to know the Illinois State Certification and ASHA Certification requirements. The student must keep a record of supervised therapy in order to know what requirements have been fulfilled. Students will enter their own hours into CALIPSO each week. Failure to do so will be reflected in your practicum grade related to Essential Functions.

### **Student Evaluation of Clinical Educator**

At the end of each term of practicum, graduate clinicians will have the opportunity to evaluate clinical educators using **Form O**. You must complete the evaluation of your clinical educators and submit the form to the clinic administrative assistant in order to receive your final clinic practicum grade.

### **Student Copy and Printing Policy**

The copier/printer located in the clinic waiting area. (Xerox WorkCentre 7845) may be used by clinicians ONLY for instructional therapy-related materials for EC SLHC clients. You may NOT use the clinic copier or printer for personal use, for class use or any use other than specifically related to your therapy session. You may not print/copy class assignments, power points, lesson plans, or SOAP notes. The printer located in the Audiometric suite is NOT for student use.

The technology fee that you pay each semester allows students to use the EC library for free printing.

### **Use of the Clinic Telephone and Cell Phones in the Clinic Area**

Students are allowed to use the telephone in Circle Hall room #237 (if the office is not being used; ask a clinical educator or the administrative assistant first) or in your clinical educator's office, if needed, to make and receive **client-related** phone calls. These phones may not be used for personal phone calls (either incoming or outgoing), except in emergency situations. The front desk is **NOT** to be used for socializing. It is a work station only. Do not use your cell phone for personal calls in the reception area.

### **Removing Furniture from Therapy Rooms**

Therapy room furniture cannot be left in the hallway. This is a violation of Fire and Safety Codes. If you need to remove furniture from a therapy room, you will need to move it into another therapy room and return it to the original therapy room at the end of each session.

### **Unlocking and Locking Therapy Rooms and Observation Rooms**

Check to make sure that the observation room is open prior to beginning your session. If the room is locked, ask the clinic administrative assistant to open the door.

When the session is finished, please sanitize the tables and make sure the room is neat. Be sure all lights are turned off and materials are removed from the room before leaving. Close the door when you leave.

### **Audio/Video Recording**

Each student is expected to purchase and have their own recording device. Audio record each treatment session. Do not use your personal cell phone to do any recording of the treatment session. Any video and/or audio recordings should be reviewed in the clinic, using earbuds. Confidentiality must be respected and maintained in viewing and/or listening to any recording. Do not leave audio or video recordings unattended in or out of the therapy room. Failure to adhere to this policy will result in the lowering of your practicum grade and possible dismissal from the program.

### **Reporting Accidents and Injuries**

If you or your client experiences an accident or injury, take the following actions:

- If the person is injured, make him/her comfortable. Notify a clinical educator. Your clinical educator will call for assistance as needed (Campus Security at ext. 3000, or if the injury appears serious, 911 for emergency agencies).
- Inform the injured person that your clinical educator has been notified and that assistance has been requested.
- Offer the person comfort, but please refrain from discussing the immediate circumstances of the accident. Specifically, avoid making comments which tend to admit fault or negligence on the College's part or assurance of payment for medical or other costs.
- If the client is injured but insists on leaving the clinic, immediately notify your clinical educator of the incident.

Performing these steps will allow the Elmhurst College Speech-Language-Hearing Clinic and Elmhurst College to take corrective action in a responsible and efficient manner.

You can help prevent accidents from occurring. If you have a "near miss" yourself or encounter a condition that you consider unsafe, please notify your clinical educator or the Clinic Director. We will attempt to remedy any condition which appears to represent an "accident waiting to happen."

Finally, if a client, student, or other individual is injured in any way during a therapy session, the student must provide the clinical educator with a written description detailing the nature of the incident, including the date, time, and place of its occurrence (**Form T**). This description must be written within 24 hours of the incident. After the clinical educator approves the description of the incident, the incident report should be signed by the clinical educator and the student clinician, and placed in the client's file with a copy given to the Clinic Director and Campus Security.

### **Inclement Weather Policy ----EC ALERT**

The Elmhurst College Speech-Language-Hearing Clinic will be closed at all times when the college is officially closed by the Dean. You can call the campus emergency phone number (630-617-3777) to find out if the college has been closed due to inclement weather. Every graduate clinician should sign up for the EC Alert system. This will be discussed in practicum class. Graduate students must always have client contact information with them. This information should be kept in secure location with no identifying information included. It is the responsibility of the student clinician to contact clients if therapy is canceled if designated by the Clinic Director to make this call. Additional procedural details will be discussed in class.

Every attempt will be made to make up sessions canceled by the college due to inclement weather.

On occasion, an incident may occur that results in the clinic closing although the college remains open (e.g., a power outage isolated in Circle Hall). If this occurs, clients will be cancelled as directed by the Clinic Director.

### **Blood and Bodily Fluid Accidents**

Because of the risk of exposure to HIV and the Hepatitis B Virus when in contact with blood and bodily fluids, we **MUST** carefully follow certain precautionary procedures. See Appendix E for specific guidelines proposed by ASHA.

### **Latex Gloves**

Some clients and clinicians may be allergic to latex. Vinyl gloves are available for individuals with latex sensitivities. All clinicians **MUST** wear gloves when doing oral-motor procedures that require direct contact with the client. You should thoroughly wash your hands with soap and water before **AND** after working with the client.

### **Supervision Requirements**

ASHA requires a minimum amount of direct supervision to be provided to any student clinician. Supervision must be provided by individuals who hold the Certificate of Clinical Competence in the appropriate profession. ASHA recommends that 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, and must take place periodically throughout the practicum. Supervision must be sufficient to ensure the welfare of the client.

### **Sequencing of Course Content and Clinical Experiences**

Students will experience a sequence of clinical experiences that will prepare them for clinical practice. Each student will provide the clinic director with a copy of their coursework (completed or in progress) and clinical experiences that they have had at the end of each term. This will be used to plan clinic assignments for the next semester and help clinical educators provide the requisite level of supervision.

### **Student Evaluations/Practicum Grades**

Clinical educators (supervisors) will provide written and/or verbal feedback each week. A formal evaluation will occur via Calipso at midterm and the end of the term. Please reference the rating scale below. A score below 3.03 on your evaluation warrants formal remediation.

### **Performance Rating Scale**

1. **Not evident:** Skill not evident most of the time. Student requires direct instruction to modify behavior and is unaware of need to change. Supervisor must model behavior and implement the skill required for client to receive optimal care, Supervisor provides numerous instructions and frequent modeling (skill is present <25% of the time).
2. **Emerging:** Skill is emerging, but is inconsistent or inadequate. Student shows awareness of need to change behavior with supervisor input. Supervisor frequently provides instructions and support for all aspects of case management and services (skill is present 26 - 50% of the time).

- 3. Present:** Skills is present and needs further development, refinement or consistency. Student is aware of need to modify behavior, but does not do this independently. Supervisor provides on-going monitoring and feedback; focuses on increasing student's critical thinking on how/when to improve skill (skill is present 51-71% of the time).  
*THIS IS THE CRITERIA FOR BASE LEVEL OF COMPETENCY FOR GRADUATE STUDENTS.*
- 4. Adequate:** Skill is developed/implemented most of the time and needs continued refinement or consistency. Student is aware and can modify behavior in-session, and can self-evaluate. Problem solving is independent. Supervisor acts as a collaborator to plan and suggest possible alternatives (skill is present 76-90% of the time).
- 5. Consistent:** Skill is consistent and well developed. Student can modify own behavior as needed and is an independent problem-solver. Student can maintain skills with other clients, and in other settings, when appropriate. Supervisor serves as consultant in areas where student has less experience; Provides guidance on ideas initiated by student (skill is present >90% of the time).